



Network Notification

Date: October 2, 2013

Number: OH-P-2013-19

To: Ohio Providers

From: CareSource

Subject: Synagis[®] Prior Authorization Procedure

Respiratory Syncytial Virus (RSV) season is November 1, 2013 through March 31, 2014. Providers must obtain a Prior Authorization to administer Synagis[®] to prevent RSV.

Who needs to Submit Prior Authorization for Synagis[®]?

All Providers who are administering Synagis[®] in:

- The Provider's office
- A home setting
- An outpatient clinical setting

How should I bill for Synagis[®]?

- Submit as a Medical benefit when a J code is used to bill the claims on a HCFA 1500 form
- Submit as a Pharmacy benefit when using online claims adjudication with the drug NDC number

How should I submit a Prior Authorization form for Synagis[®]?

- Online: For faster processing of Prior Authorization, submit using our secure [Provider Portal](#)
- Fax: Complete the [Synagis[®] Prior Authorization Form](#) and fax it to 1-888-399-0271
- Phone: Call Provider Services at 1-800-488-0134
- Mail: CareSource, Attn: Specialty Pharmacy, P.O. Box 1307, Dayton, OH 45401-1307

Important Notice

Please include clinical documentation with Prior Authorization requests for Synagis[®].

Questions?

Please call our Provider Services Department at 1-800-488-0134 and follow the prompts to reach a Pharmacy representative.