



Network Notification

Date: 11-22-2013

Number: KY-P-2013-13a

To: Office Manager/Participating Health Care Provider

From: Humana – CareSource™

Subject: Synagis® Prior Authorization Submission

Effective Date: immediately

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 administer Synagis in the following settings:

- Provider's office
- Home setting
- 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 CMS-1500 form.
- Submit as a pharmacy benefit when using online claims adjudication with the National Drug Code (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 1-855-852-7005
- 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 1-855-852-7005 and follow the prompts to reach a pharmacy representative.