

Pharmacy prior authorization requirements

Starting Oct. 1, 2021

Starting Oct. 1, 2021, prior authorization will be required for some drugs used for the short-term treatment of the signs and symptoms of dry eye disease when prescribed to UnitedHealthcare Community Plan members. The drugs requiring prior authorization are listed in the following chart:

Drug	Clinical criteria name	Clinical criteria
EYSUVIS 0.25% Ophthalmic Suspension	Ophthalmic Immunomodulators	txvendordrug.com > Formulary > Prior Authorization > Managed Care Clinical Prior Authorization

How to submit a prior authorization request

You can submit your prior authorization requests in several ways:

- **Online:** UHCprovider.com/TXcommunityplan > [Pharmacy Resources and Physician-Administered Drugs](#) > Pharmacy Prior Authorization > PreCheck MyScript®
- **Phone:** Call **800-310-6826**
- **Fax:** 866-940-7328

Please send a completed prior authorization form with your request. You can access the form at UHCprovider.com/TXcommunityplan > Pharmacy Resources and Physician-Administered Drugs > Medical Necessity Supporting Documentation > [Texas Standard Prior Authorization Request Form for Prescription Drug Benefits](#).

We're here to help

If you have questions, contact your Physician Advocate or call Member Services at **888-887-9003**, 8 a.m.–6 p.m., Monday–Friday. Thank you.