

## MHCP Enrolled Providers

For drugs requiring prior authorization contact the new MHCP Prescription Drug PA Agent – 866-205-2818 (Phone) or 866-648-4574 (Fax)

### Prescription Drug Information

- [Preferred Drug List \(PDF\)](#)
- [MHCP OTC Formulary \(PDF\)](#) and [MHCP OTC Formulary \(XLS\)](#)
- [PA Criteria and Regimen Review Sheets](#)
- [All drugs requiring prior authorization](#)
- [Drugs requiring a diagnosis code](#)
- [Fee for Service Medicaid Excluded Drugs](#)
- [Medical Supply Related Lists](#)

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[July 2008 NCPDP Letter to Medicaid](#) with information about Tamper-Resistant Prescription Blanks

### Prior Authorization Forms and Instructions

- [MHCP Drug Prior Authorization Form DHS-4424 \(PDF\)](#)
- [MHCP Prescription Drug Reconsideration Request Form DHS-4667 \(PDF\)](#)
- [Hepatitis C Drug Prior Authorization DHS-7085 \(PDF\)](#)
- [Immunomodulator Drug Authorization Form DHS-5212 \(PDF\)](#)
- [MHCP Clinic Tool for the Assessment and Management of Persistent Pain DHS-6109 \(PDF\)](#)
- [Opioids: High Dose Opioid Drug Authorization Form DHS-7072 \(PDF\)](#)
- [MHCP Psychiatric Consultation Request Form DHS-6176 \(PDF\)](#)
- [MHCP Synagis Authorization Form DHS-6428 \(PDF\)](#)
- [Advance Recipient Notice of Non-covered Service/Item DHS-3640 \(PDF\)](#)
- [Advance Recipient Notice of Non-covered Prescription DHS-3641 \(PDF\)](#)

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### Physician Administered Drugs

- [HCPCS Codes Requiring NDC](#)

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### Additional Resources

- MHCP Provider Manual - [Authorization](#) section
- [SMAC Research Request Form DHS-6406 \(PDF\)](#)
- [Minnesota Medicaid Version D.0 NCPDP Payer Sheet \(PDF\)](#)