



17 Alpha-Hydroxprogesterone Caproate (17P)

Louisiana Medicaid would like to provide clarification regarding policy and current reimbursement of 17 Alpha-Hydroxyprogesterone Caproate (17P). Providers are encouraged to obtain 17P on a proactive basis to have readily available to facilitate usage in the treatment of members at risk for preterm delivery. There is no prior authorization required for Fee-for-Service Medicaid. For complete information related to billing and reimbursement please, refer to the 2010 Policy Update under the Professional Services Program link on the Louisiana Medicaid website (www.lamedicaid.com). For those recipients in Bayou Health, providers should contact the member's respective Health Plan for information regarding prior authorization requirements.

For questions related to this information, please contact Molina Provider Services at (800) 473-2783 or (225) 924-5040.