



Pharmacy Utilization Management Policy
Discharge Medication

Line of Business: All lines of business

P & T Approval Date: February 27, 2026

Effective Date: March 1, 2026

This policy has been developed through review of medical literature, consideration of medical necessity, generally accepted medical practice standards, and approved by the IEHP Pharmacy and Therapeutics Subcommittee.

COVERAGE POLICY

This policy's scope includes prior authorization (pharmacy or medical benefit) and appeals (pharmacy or medical benefit) as applicable.

- A. IEHP considers it medically necessary for Members recently discharge from an acute care hospital, when all of the following are met:
 - 1. The requested drug(s) or drug product(s) are ordered as part of discharge planning, AND,
 - 2. One of the following:
 - a. The requested drug(s) or drug product(s) dose and indication are clinically appropriate as listed in drug compendia or accepted as part of standard practice, OR,
 - b. Rationale provided for treatment not listed in drug compendia or beyond the standards of practice that demonstrate medical necessity of treatment.
- B. The request is approvable for a maximum of ten (10) days following discharge date from the acute care hospital.
- C. Any continuation request to extend treatment beyond the above ten (10) days post-discharge would be subjected to a regular clinical review process.

COVERAGE LIMITATION AND EXCLUSIONS

- A. Drug(s) or drug product(s) used for maintenance treatment can be approved for ten (10) days post-discharge. Continuation of coverage would require a Referral Request and will be subject to clinical review.
- B. This policy does not apply to drug(s) or drug product(s) scheduled to be initiated 1 or more days after the day of discharge.

ADDITIONAL INFORMATION

None

CLINICAL/REGULATORY RESOURCE

None

DEFINITION OF TERMS

Discharge medications are defined as either (1) treatment started inpatient, prior to discharge, and the same treatment (drug/dose/route) to be continued post discharge to finish the course of medications (i.e., IV antibiotics); or (2) new treatment to be initiated after discharge.

REFERENCES

1. Medi-Cal Provider Manual. Intravenous or Intra-arterial Solutions: Special Billing (iv-sol spec). https://mcweb.apps.prd.cammis.medi-cal.ca.gov/assets/57EA5165-4BD0-4004-8627-D6ABA9F4DFBF/ivsolspec.pdf?access_token=6UyVkRRfByXTZEWIh8j8QaYyIPyP5ULO. Revision date November 2023. Accessed January 08, 2026.

DISCLAIMER

IEHP Clinical Authorization Guidelines (CAG) are developed to assist in administering plan benefits, they do not constitute a description of plan benefits. The Clinical Authorization Guidelines (CAG) express IEHP's determination of whether certain services or supplies are medically necessary, experimental, and investigational, or cosmetic. IEHP has reached these conclusions based upon a review of currently available clinical information (including clinical outcome studies in the peer-reviewed published medical literature, regulatory status of the technology, evidence-based guidelines of public health and health research agencies, evidence-based guidelines and positions of leading national health professional organizations, view of physicians practicing in relevant clinical areas, and other relevant factors). IEHP makes no representations and accepts no liability with respect to the content of any external information cited or relied upon in the Clinical Authorization Guidelines (CAG). IEHP expressly and solely reserves the right to revise the Clinical Authorization Guidelines (CAG), as clinical information changes.

Change Control		
Date	Change	Author
01/08/2026	<ul style="list-style-type: none">• Renew with no changes	SV
01/06/2025	<ul style="list-style-type: none">• Clarified the scope of the policy (prior authorization and appeals under medical/pharmacy benefits)	SV
01/12/2024	<ul style="list-style-type: none">• Update line of business to reflect all lines of business• Updated hyperlink in the references	SV
07/05/2023	<ul style="list-style-type: none">• Renew with minor format updates	SV
07/21/2022	<ul style="list-style-type: none">• Renewed with no changes	TL
06/28/2021	<ul style="list-style-type: none">• Line of Business updated to include Medicare	SV
04/15/2021	<ul style="list-style-type: none">• Document Created, reviewed	JM/SV