CY 2020 PAST Criteria Change Request Record Layout

Required File Format = ASCII File - Tab Delimited

Do not include a header record

Filename extension should be ".TXT"

Plan Users upload PAST Criteria Change Request during PAST Criteria Change Request Submission Period.

Field Name	Field Type	Max.Field Length	Field Description	Sample Field Value(s)
Formulary ID	CHAR Always Required	8	Formulary ID (with or without leading zeros) for which to request PA/ST edits.	00019005 Or 19005
Reason for UM Change	CHAR Always Required	1	Reason for the UM Criteria Change Request submitted. Reason Codes 1 to 6 and their descriptions: • 1 - Removal of a restriction • 2 - Addition of drug(s) to existing criteria • 3 - Addition of a new indication • 4 - Restriction based on a new Boxed Warning/FDA Safety Communication • 5 - Other extraordinary circumstance • 6 - Revision of existing criteria to include a Part B drug (MAPDs only)	1
Current UM Type	CHAR Always Required	9	Type of prior authorization or step therapy that needs to be changed. PA and ST Type descriptions: • PA Type 1= Prior Authorization Applies • PA Type 2 = Prior Authorization Applies to New Starts Only • PA Type 3 = Part D vs. Part B Prior Authorization Only • ST Type 1 = Step Therapy Applies • ST Type 2 = Step Therapy Applies to New Starts Only	PA Type 1
Current UM Group Description	CHAR Always Required	100	Description of the prior authorization group as it appears on the submitted formulary file. This field must exactly match the value entered in the Prior_Authorization_Group_Desc field on the Formulary File. Or Description of the step therapy group as it appears on the submitted formulary file. This field must exactly match the value entered in the Step_Therapy_Group_Desc field on the Formulary File.	Antiemetics

UM Criteria Element	CHAR Always Required	50	Description of the criteria of the prior authorization or step therapy drug.	Required Medical Information
Justification for UM Change	CHAR If applicable	4000	Comments or clinical justification for the criteria change requests.	

Please Note: Certain characters are restricted from HPMS. The submitted file will be rejected if any of the following characters are included in any field: 1) greater than sign (>), 2) less than sign (<), and 3) semi-colon (;).