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A Thought for the Season:

One kind word can warm three winter months.

~Japanese Proverb



Difficult clients? RaeDell, Tim, and Jennifer are here to help!

From time to time, you may encounter clients who are abusive to pharmacy staff, appear to be abusing Medicaid benefits, or appear to be breaking the law. Examples of this type of activity are doctor or pharmacy "shopping", demanding that you give them medication without a paid claim, or asking you to do something that appears to be inconsistent with Medicaid policy.

If you feel that a client is asking you to do something inappropriate or fraudulent, or if you have concerns about a client's utilization, please call us and we will be happy to investigate your concern. We do not expect our providers to tolerate abusive behavior or excessive disruptions in the work-flow.

Now Available on a Computer Near You!

Medicaid Pharmacy Services has a new website. There you can find information about prior authorization, the DUR Board, archived Amber Sheets, Medicaid pharmacy policy manuals, and the latest news about Medicaid pharmacy.



For more information, log on to:
<http://health.utah.gov/medicaid/pharmacy>

Chantix Coverage:

Medicaid will cover Chantix under the Smoking Cessation Policy. The maximum Chantix benefit is 24 weeks per lifetime. In order to enforce the lifetime limit for Chantix, a prior authorization will be required.



Patches - NONCOVERED Under PCN:

Due to federal restrictions on the PCN program, Medicaid cannot pay for any patches for PCN clients. This includes Duragesic and generic Fentanyl patches.

Adderall XR Age Restriction:

Adderall XR has an FDA age minimum of 6 years, while Adderall has a minimum of 3 years. We will provide "grandfather" age overrides to any child under age 6 who has been stabilized on Adderall XR; however we will not approve Adderall XR for any new patients under age 6.

Generic Oxycontin Supply Limited:

The manufacturer of Oxycontin has, over the past several months, been in litigation with generic manufacturers over the enforcement of the patent on Oxycontin. At the present time, generic formulations of long-acting oxycodone may not be available. Once generic supplies are exhausted, we will remove all PA restrictions from Oxycontin. The quantity limits of 90 dosage units per month for long-acting narcotic analgesics will remain in effect.

Proventil HFA:

Medicaid is aware that Proventil plain and generic albuterol inhalers are not always available as they are being phased out by 2008. Proventil HFA and Ventolin HFA will be available to all clients needing albuterol inhalers without a prior authorization until there is a stable supply of generic albuterol HFA inhalers available to pharmacies.

Patients switching from albuterol inhalers to Proventil HFA will need a new prescription. Pharmacists will be required to instruct patients on how to use these new inhalers. Coverage will be limited to 2 inhalers per month.

Cough & Cold

Effective July 1, 2006, Medicaid restricted coverage of medications for cough & cold symptomatic relief. Due to overwhelming feedback from the pediatric community, Medicaid has decided to include generic formulations of Rondec products and Histussin HC effective February 15, 2007. The revised list of covered cough & cold products is now:

- ✓ Guaifenesin 600mg Tablets
- ✓ Guaifenesin DM 600/30 Tablets
- ✓ Guaifenesin with Hydrocodone Liquid
- ✓ Promethazine with Codeine
- ✓ Robitussin Generics
- ✓ Robitussin DM Generics
- ✓ Triaminic oral liquid preparations
- ✓ Rondec/Rondec DM - generics
- ✓ Histussin HC - generic formulations

Non-Traditional Medicaid Pharmacy Copays to Increase:

Effective April 1, 2007, the pharmacy copay for clients enrolled in the Non-Traditional Medicaid Program will increase to \$3.00 per prescription. There will still be no monthly maximum copay for pharmacy.

Dual-eligible Client Deductibles:

The New Year = New Medicare deductibles for our dual-eligible clients. The Part B deductible is \$131.00 and may be billed as a cross-over claim to Medicaid for full dual-eligible clients.

Medicaid clients who are enrolled in Part D drug plans will continue to be responsible for all Part D copays. Dual-eligible clients should not have deductibles on Part D plans. Clients who encounter problems with their Part D plan will need to contact their Part D provider to resolve any issues.

Important Billing Info for Pharmacies:

From time to time, you may find that some generic products are not reimbursable for no obvious reason. These are drugs that have been discontinued by the manufacturer and are no longer paying a rebate. Without a rebate, Medicaid cannot continue to reimburse for these products, since federal matching funds are not available.

Pharmacy Claims Accuracy:

Pharmacies are expected to provide correct prescriber identification information. Failure to do so constitutes fraud and will result in claims payments being taken back by Medicaid. From time to time, Medicaid may request copies of prescriptions to ensure claims accuracy. Failure to furnish the requested information to Medicaid will also result in claims payment being taken back by Medicaid.



RSV Vaccination Information:

As a reminder, Medicaid will cover Synagis - the RSV Vaccine - if the following criteria are met:

- ▶ Infants of 28 week gestation may receive Synagis prophylactically during the first year of life.
- ▶ Infants of 29-35 weeks gestation may receive Synagis prophylactically during the 1st to 6th month of life.
- ▶ Any children under 24 months may receive Synagis if they have either
 1. Clinical diagnosis of Broncho Pulmonary Dysplasia (BPD) or Chronic Lung Disease (CLD) requiring ongoing medical treatment
 - OR**
 2. Hemodynamically significant Congenital Heart Disease (CHD) requiring ongoing treatment.
- ▶ Synagis is not available to any child with active RSV.
- ▶ The Utah Medicaid Synagis season is for a 6 month period beginning with Primary Children's Medical Center (PCMC) announced onset of RSV season.
- ▶ A total of 5 immunizations during this 6 month period will be approved, except when the patient begins the immunizations late in the season.
- ▶ A child who has started the series and then turns 2 may continue to a total of 5 immunizations or to the end of the season, whichever comes first.
- ▶ No approval will be given to a child 24 months of age or older.
- ▶ Physicians who provide the vaccine in the office should use code 90378 and the appropriate administration code for reimbursement.

If a client is enrolled with Healthy U or Molina, please call the health plan to obtain prior authorization for Synagis. Call Healthy U at 888-271-5870. Call Molina at 888-483-0760.

To obtain a prior authorization for either a Select Access or fee-for-service client, please call our Medicaid prior authorization team at (801)538-6155 or (800)662-9651.



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