



## Preferred Drug List Update:

During the 2007 legislative session, the Utah State Legislature passed Senate Bill 42 allowing Medicaid to adopt a preferred drug list (PDL). Medicaid's goal is to begin to phase in a preferred drug list beginning August 1, 2007. Medicaid initially plans to implement a PDL for proton pump inhibitors and statins. In order to meet this goal, Medicaid is taking the following steps:

- A Pharmacy and Therapeutics (P&T) Committee will be empaneled and begin meeting at the end of April.
- The P&T Committee will consist of an academic pharmacist, a hospital pharmacist, a chain store pharmacist, and independent pharmacist, a pediatrician, family practice physician, psychiatrist, and an internist.
- The P&T Committee may invite two specialists to each meeting to advise on the drug class under consideration.
- The P&T Committee will advise the DUR Board and Medicaid in choosing preferred agent(s) for each selected class of drugs based on clinical efficacy and cost.
- Letters will be mailed to notify clients and providers of the changes in the Medicaid benefits.
- Continual public updates about the PDL implementation process will be provided through the Amber Sheet, MIB, and Pharmacy Services Website:

<http://health.utah.gov/medicaid/pharmacy>.

**Please be sure to watch for updates from Medicaid as the August 1 implementation date approaches.**

## NPI Update:

Medicaid is continuing to work towards the May 23, 2007 NPI compliance date. We urge all providers who have not already done so to get, share, and use their NPI NOW to avoid disruptions to clients, staff, and cash flow after May 22<sup>nd</sup>.

If you have not yet provided Medicaid with your NPI, please fax it to 801-536-0471 with your provider name and Medicaid Provider Number. This information can also be mailed to Medicaid Provider Enrollment PO BOX 143106 Salt Lake City, UT 84114-3106.

## Sidekick Diabetes Testing System Covered:

The Sidekick Diabetes Testing System, which contains 50 test strips with a disposable meter, is covered by Medicaid. Claims can be billed through the Point-of-Sale System using NDC 56151-0880-50 or using HCPCS Code A4253 on a 1500 claim form.

## Byetta - New Indication:

The FDA has approved Byetta to be used in combination with "glitazones" or with a "glitazone"/metformin combination. Prior authorization criteria for Byetta have been updated to reflect this new indication.

## New Prior Authorizations:

Effective May 2, 2007, the following drugs will be on Prior Authorization:

- Avastin
- Vectibix
- Invega

Please note, Avastin and Vectibix will only be payable to a physician's office or clinic by the appropriate J-code.

Prior Authorization criteria can be obtained through the pharmacy program website at <http://www.health.utah.gov/pharmacy> or by calling Medicaid Prior Authorizations at (801)538-6155 or (800) 662-9651.

## Reminder About Overrides:

**Sedative/hypnotic** medications are limited to 30 doses in any 30 day period. Whenever changes are made in dosage or medication, all previous medication must be used before Medicaid will pay. Overrides will not be given before previous prescriptions are used up.

**When a pharmacy is closed on Sunday**, overrides will not be given to obtain early refills on **any** medications that have 30-day quantity limits.

## Medicare vs. Medicaid Billing:

There still seems to be some confusion about billing claims for dually-eligible clients. Please remember the following when processing claims for these clients:

- Medicaid will not pay for any drugs that are covered under Part D. Copays are the client's responsibility.
- Medicaid will pay for Part B crossover claims.
- Medicare Part D does not pay for benzodiazepines, barbiturates, OTC, or cough and cold products. Medicaid pays for select drugs in these classes, and may be billed for these drugs for dual eligible clients.

**Please review the table on the reverse of this Amber Sheet for more information about Part D vs. Part B billing.**

Utah Department of Health  
 Health Care Financing  
 Amber Sheet  
 Box 143102  
 Salt Lake City UT 84114-3102

BULK RATE  
 U.S. POSTAGE

**PAID**

Salt Lake City,  
 Utah

<b>Product/Drug/Drug Category</b> <i>(Listing is NOT all-inclusive)</i>	<b>Part D</b>	<b>Part B</b>
Anti-emetics, oral	Yes - Except for use within 48 hours of chemotherapy	Yes - When used within 48 hours of chemotherapy
Barbiturates	No	No
Benzodiazepines	No	No
Blood glucose testing strips	No	Yes - DME benefit
Chemotherapy drugs, oral	Yes - Except for cancer treatment	Yes - When used for cancer treatment
Cough and cold products	No	No
Erythropoietin	Yes - Except for treatment of anemia for dialysis patients or 'incident to' Physician Services utilization for other indications	Yes - When used for anemia for dialysis patients or 'incident to' Physician Services for other indications
Fioricet®	No	No
Fioricet® with Codeine	Yes	No
Fiorinal®	No	No
Fiorinal® with Codeine	Yes	No
Immunosuppressants	Yes - Except following a Medicare-covered transplant	Yes - Following a Medicare-covered transplant
Insulin	Yes	
Insulin syringes	Yes	
Lancets	No	Yes - DME benefit
Over-The-Counter (OTC) drugs	No	No
Parenteral nutrition	Yes - Except in }permanent~ dysfunction of digestive tract	Yes - When used in }permanent~ dysfunction of digestive tract
Smoking cessation drugs (legend)	No	No
Smoking cessation drugs (OTC)	No	No
Vaccines, prophylactic	Yes - Except for influenza, pneumococcal, and hepatitis B (for intermediate to high risk)	Yes - For influenza, pneumococcal, and hepatitis B (for intermediate - high risk)
Vitamins / Minerals	No	No