



UTAH STATE MEDICAID DUR COMMITTEE
THE AMBER SHEET



Volume 16
 August 2008

Number 3

Editors: RaeDell Ashley, R.Ph., Tim Morley, R.Ph., Lisa Hulbert, R.Ph.
 Jennifer Zeleny, CphT., MPH., Duane Parke, R.Ph.

Dr. Colin VanOrman, DUR Board Chairman

An "unofficial" publication of the State Medicaid DUR Board

"Working 4 Utah" Update:

As of August 4, 2008, Medicaid began to implement the new four day work week under Governor Huntsman's "Working 4 Utah" program. Medicaid's new customer service hours will be 7:00 A.M. to 12:00 P.M. and 1:00 P.M. to 6:00 P.M. Monday through Wednesday, and 11:00 A.M. to 12:00 P.M. and 1:00 P.M. to 6:00 P.M. on Thursdays. Customer service will be closed on Fridays.

Pharmacy Prior Authorizations will continue to be available Monday through Wednesday and on Fridays from 8:00 A.M. to 12:00 P.M. and 1:00 P.M. to 5:00 P.M., and on Thursdays from 1:00 P.M. to 5:00 P.M. (The Non-Pharmacy Prior Authorization Unit will observe the four day work week).

Medicaid will continue to be closed on all State holidays.

Access Now systems will continue to be available Monday through Saturday 6:00 A.M. to midnight, and on Sundays from noon to midnight.

Preferred Drug List Update:

The Medicaid Preferred Drug List continues to expand on a monthly basis. The P&T Committee has recently considered short acting beta agonists, long acting beta agonists, and long acting beta agonists / corticosteroid combination inhalers, and leukotriene receptor antagonists for asthma. Please refer to <http://health.utah.gov/medicaid/pharmacy> for more detailed information.

All preferred drugs and diabetic supplies are NDC specific. Please refer to the Medicaid Pharmacy Website for a list of NDCs.

Reminder: When overriding the PDL, prescribers must *hand write* "Dispense As Written - Medically Necessary" on the prescription and document medical necessity in the patient's chart.

P&T Committee Schedule Changes:

Due to the Cannon Health Building closure on Fridays, the P&T Committee will need to change meeting dates and times. The new meeting dates and times are the third Thursday of every month at 7:00 A.M. The P&T Committee will resume meeting at the new time beginning in September 2008. The schedule for upcoming drug class reviews has been updated as follows:

- Sep 2008: Insulins - Rapid Acting
- Sep 2008: Non-Benzodiazepine Sedative Hypnotics
- Oct 2008: Insulins - Mixtures and Long-Acting
- Nov 2008: Multiple Sclerosis Agents
- Nov 2008: Niacin/Statin Combos.
- Dec 2008: Urinary Antispasmodics
- Jan 2009: Migraine Agents & Combos
- Feb 2009: Skeletal Muscle Relaxants & Combos
- Mar 2009: Alzheimer's Cholinomimetics

Continue to watch the P&T Committee website at <http://health.utah.gov/medicaid/pharmacy/ptcommittee/directory.php> for important updates regarding the P&T Committee schedule.

You may also contact Duane Parke, R. Ph., MPA, directly at dparke@utah.gov with any questions regarding the P&T Committee schedule.

Prior Authorization Changes:

- Invega: Now available without a PA for clients age 18 and older with a valid ICD.9 code.
- Daytrana: Now available without a PA for clients age 6-18.
- Vyvanse: Now available without a PA for clients age 6-18.

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.

TRPP Update:

On April 1, 2008, Utah Medicaid began to phase in TRPPs (Tamper Resistant Prescription Pads) by requiring that all prescriptions comply with one of the three TRPP provisions. **Beginning October 1, 2008, all three of the TRPP provisions will be required on prescriptions filled for Medicaid clients.**

NCPDP in conjunction with CMS has recently issued updated guidance on what tamper resistant characteristics are acceptable to meet TRPP provisions. Medicaid will be sending letters to providers with detailed information in the near future. The full text of the NCPDP letter to prescribers is available on the Utah Medicaid Pharmacy Services website at <http://health.utah.gov/medicaid/pharmacy>.

Exceptions to TRPP requirements will be made when a prescription is presented on weekends, holidays, etc. The pharmacy will have 72 hours to contact the physician and indicate on the noncompliant prescription the date, time, and physician's representative to whom the pharmacist or pharmacy technician spoke.

Remember - the prescriptions that are electronic (those that are faxed, taken over the phone, or transmitted through other electronic means) are not required to be on tamper resistant prescription pads. TRPP requirements apply to all prescriptions **hand carried** into the pharmacy by the Medicaid client.

Prescriptions paid by Medicaid must continue to comply with all state and federal regulations governing the practice of pharmacy.

Partnership for Prescription Assistance:

The Partnership for Prescription Assistance (PPA) "Help is Here Express" has recently stopped in Utah to educate patients and healthcare providers about help that may be available to patients who are unable to pay for prescription medication. In some cases, this may include medications that are not a covered benefit under Medicaid programs or PCN clients who cannot afford copays, need more than four prescriptions per month, or need medications that are not covered by their program. Clients who are insured by commercial insurance plans, other government insurance plans, or self-pay may also benefit from the PPA programs.

In order to access the PPA programs, have patients call 1-888-4PPA-NOW (1-888-477-2669) with a list of their current medications. A specialist will be available to answer questions and help the patient apply for the right programs.

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

Restriction Program Authorized Prescriber Policy

As of July 1, 2008, pharmacy claims for restricted recipients have begun denying if the prescriber is not an authorized prescriber. The Medicaid Care Coordination and Restriction Program Policy states that prescriptions written by prescribers other than the recipient's primary care physician (PCP) are not a benefit. Family planning products are not subject to this policy and may be dispensed and billed when written by any prescriber.

A recipient may routinely see a physician assistant or may get medications from a mental health provider. As a convenience, the PCP may choose to preauthorize up to two additional prescribers by sending Medicaid written notice or by calling the number below. Prescribers must be an authorized Medicaid prescriber to be preauthorized.

To report preauthorized prescribers, please contact:

Department of Health
Division of Health Care Financing
Attn: Restriction Program
P.O. Box 143108
Salt Lake City, UT 84114-3108
(801) 538-9045 or toll free 1-800-662-9651 ext. #900

Medicaid notifies pharmacies in writing when a recipient is restricted to their pharmacy. This notice includes the name of the PCP and the names of any additional authorized prescribers. Pharmacies are also notified when there is a change of PCP or authorized prescriber.

The National Provider Identifier (NPI) of the prescriber will be edited against the Restriction Program file. If the NPI does not match the PCP of record, or a preauthorized prescriber for the date of service, the claim will deny with the message, "Not an Authorized Prescriber for Restricted Recipient."

PCP Authorized Override: The PCP can authorize prescriptions from other prescribers by countersigning the prescription. The authority for the PCP to do this is not limited. The pharmacist is instructed to return the prescription to the recipient explaining that Medicaid will not pay for the medication. Or the pharmacist may choose to call the PCP printed on the recipient's Medicaid card to request authorization to fill, and then submit an override code which will allow the claim to pay. The pharmacist must document this authorization in the patient's record.

For PCP Authorizations: Enter "1" in the Intermediary Authorization Type field, and
Enter the PCP's NPI in the Intermediary Authorization ID field.

Emergency Override: If the PCP is not available, the pharmacist may choose to contact the prescribing physician to determine if it is safe to wait for an authorization from the PCP, or if the need for the medicine is emergent. The pharmacy must inform the PCP on the next working day that a three-day supply was dispensed. If the need is emergent, the pharmacy may bill Medicaid for a maximum three-day supply following the emergency override procedures outlined below. Products that are pre-packaged as more than a three day supply are allowed up to package limitations. Example: inhalers, ointments, creams, etc. are packaged as more than a three-day supply. If the supply is greater than three days, the claim will deny.

For Emergency Overrides: Enter "99" in the Intermediary Authorization Type field, and
Intermediary Authorization ID should be left blank.

PCP authorizations and emergency overrides DO NOT override any other pharmacy benefit policy.