



UTAH STATE MEDICAID DUR COMMITTEE  
**THE AMBER SHEET**



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### Preferred Drug List Update:

During the 2009 legislative session, the State Legislature approved SB 87, which authorizes Utah Medicaid to require a Prior Authorization for non-preferred drugs. The PA requirement will be effective May 15, 2009. Criteria for a Non-Preferred Authorization (NPA) will be published on the Medicaid Pharmacy Services website shortly.

The Medicaid Preferred Drug List continues to expand on a monthly basis. Medicaid is currently in the process of renegotiating PDL contracts for the 2009 calendar year, and negotiating new drug classes, including insulins, multiple sclerosis agents, urinary antispasmodics, fibric acid derivatives, niacin/statin combinations, skeletal muscle relaxants, alzheimer's cholinomimetics, and migraine medications. Watch the Medicaid Pharmacy website at <http://health.utah.gov/medicaid/pharmacy> for the most up-to-date information.

Effective immediately, Kadian, Vytorin, Proventil HFA, ProAir HFA and the Accucheck family of products are no longer a preferred agents.

Effective April 1, 2009, the Bayer family of diabetic testing supplies is now on the PDL. Medicaid clients may call 1-877-229-3777 for a Bayer blood glucose meter.

Ventolin HFA is now the only preferred albuterol inhaler.

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 "Medically Necessary - Dispense As Written" on the prescription and document medical necessity in the patient's chart.

**Please Note:** Occasionally, rebate offers from pharmaceutical companies may make coverage of a brand-name drug more cost effective than the generic. Medicaid may, in these instances, require that pharmacies dispense the brand-name drug as the preferred agent.

### P&T Committee Schedule:

The P&T Committee meets on the third Thursday of the month in the Cannon Health Building at 7:00 A.M. The schedule of upcoming drug classes for review is as follows:

- Apr 2009: Nasal Corticosteroids
- May 2009: Osteoporosis Agents & Combinations
- Jun 2009: Anti-Parkinson Agents

Continue to watch the P&T Committee website for important updates regarding the P&T Committee schedule, or email Duane Parke, at [dparke@utah.gov](mailto:dparke@utah.gov) for further information.

### Utah MAC Expansion:

Historically, Utah has used a state MAC (state maximum allowable cost) price as well as a Federal MAC price to help manage prescription drug costs. Due to recent budget cuts, Medicaid has aggressively expanded the state MAC list. New MAC prices will be posted to the point of sale program as they are determined.

To dispute a Utah MAC price, please fax the most recent invoice of the product being billed to (801) 538-6099. Pharmacies will need to re-submit claims once pricing adjustments are made.

### Pharmacy Coverage Highlights:

#### Prior Authorization Changes:

Effective April 1, 2009, the following drugs require a PA:

- Relistor
- Hydroxyprogesterone Caproate Powder

Effective in December 2008 Chantix no longer requires a PA.

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.

#### ICD.9 Code Reminders:

Bupropion products and Cymbalta require an ICD.9 code classification to be entered when billed through the Pharmacy POS System.

Bupropion prescriptions must be classified as smoking cessation (305.1) or depressive disorders (311).

Cymbalta prescriptions must be classified as neuralgias (729.2) or depressive disorders (311).

Pharmacy staff may ask a patient which condition is being treated and categorize the prescription accordingly. For these two drug products only, the diagnosis does not need to be written on the prescription by the prescriber.

### Tamper Resistant Prescription Pad Issues:

There is some confusion among pharmacies regarding prescriptions that are not written on TRPP compliant prescription blanks.

If a prescription is written on a noncompliant blank, pharmacies may call the prescriber's office to verify the prescription. Pharmacy staff must document the date, time, and the name of the person verifying the prescription.

It is not necessary to destroy the noncompliant prescription and re-write it as a telephone order. It is only necessary to document that the noncompliant prescription was **verified** electronically. This will satisfy the requirements of the TRPP regulations **even for prescriptions for CII controlled substances!**

## Primary Care Billing of Mental Health Diagnosis Codes:

Primary Care Physicians can Include Mental Health Diagnosis Codes on Claims! It is important that diagnostic information be included on claims. We have heard that there is confusion on billing policies for mental health services. Most Medicaid patients enrolled in the Traditional or Non-Traditional Medicaid plans are assigned to a Prepaid Mental Health Plan at the time of enrollment. However, they may also receive mental health care from a primary care or family health physician enrolled as a Medicaid provider. (Clients enrolled in Healthy U or Molina must receive medical services from the health plans' participating providers.)

Only one Evaluation and Management (E&M) service is paid on a date of service. Physicians are advised to combine services if seeing a patient more than once on a date of service and bill the higher paying code. **To ensure quality patient care, please include accurate and up-to-date diagnoses on all claims submitted.**

Primary Care Physician (PCP) providers use procedure codes 99201-99215 for mental health services. Counseling services above E&M should be added to the time of the E&M service and a higher level code chosen to encompass those services. When the time spent in E&M service is greater than thirty minutes for the highest level of the appropriate code, you can add the prolonged service code 99354 or 99355 to the service. However, be sure to document total time spent with the patient in face to face service and the issues involved. These codes are not considered additional E&M services, they are considered add on codes and are payable.

PCP providers can use procedure codes 99281-99285 when seeing the patient in the Emergency Room and use Observation codes 99217-99220 if they detect a medically necessary reason for patient observation.

So remember to include diagnoses codes on all of your claims.

## Cough & Cold:

As a reminder, Medicaid restricts coverage of medications for cough & cold symptomatic relief. The following is the list of covered cough & cold medications:

- ✓ 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

## Lock-In Referrals:

If there are concerns that a patient may be doctor shopping, pharmacy shopping, paying for excessive amounts of controlled substances in cash, committing fraud, or otherwise inappropriately utilizing Medicaid resources, these concerns may be reported to Medicaid in a confidential manner.

Please call 1-800-662-9651, ext. #900 or (801)538-9045 to report any concerns to the Lock-In Program. Individuals reporting potential abuse do not need to identify themselves, and do not need to participate in any follow-up investigation.

Any misuse of Public Assistance should also be reported to the Payment Error Prevention Unit at 1-800-955-2210 or [wsinv@utah.gov](mailto:wsinv@utah.gov).

## Medicaid Communication eSources:

### Website:

The Medicaid Pharmacy Services website is available 24/7 for policy information. It contains information about prior authorization criteria, the DUR Board, 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>

### ePocrates:

Medicaid will be providing information on the Preferred Drug List, Prior Authorizations, and other pharmacy benefit information through ePocrates. The information for the Traditional Medicaid Program is now available through the ePocrates website. Non-Traditional Medicaid and PCN Benefit information will soon be available.