Bobby Jindal GOVERNOR



## State of Louisiana

Department of Health and Hospitals Bureau of Health Services Financing

September 12, 2010

Dear Prescribing Practitioner:

RE: PDL # 09-02 Suboxone® (Buprenorphine) and Subutex® (Buprenorphine/Naloxone) Policy Synagis® (Palivizumab) Update: 2010-2011 Season

## PDL:

Attached is the complete, most current listing of drugs on the Medicaid Prior Authorization (PA) Process' Preferred Drug List (PDL) **"09-02."** The listing includes preferred drugs and those drugs requiring prior authorization. This list will be effective October 1, 2010.

The PA process, in accordance with the program's "Continuity of Care" policy, does not impact original prescriptions (or refills) issued by a prescribing practitioner prior to effective PA dates of drugs as they are added to the PA process *as long as they are within the 5 refills and 6-month program limits*. An educational alert will notify the pharmacist that prescriptions (and their refills) will require a new prescription and prior authorization, if the prescription life exceeds six months or the refill exceeds the 5 refill limit. The educational alert will state, "NEW RX WILL REQUIRE PA AFTER (DATE)."

Prescriptions indicating emergency situations shall be dispensed in a MINIMUM quantity of a three (3) day supply. Refills for the dispensing of the non-preferred products in these emergency situations are not permitted. The recipient's practitioner must contact the Prior Authorization Unit to request authorization to continue the medication past the emergency supply, and a new prescription must be issued.

This process may be used when the Prior Authorization Unit is closed (Sundays; Monday - Saturday before 8am and after 6 pm) or when the PA system is unavailable. The pharmacist may also use professional judgment in situations that would necessitate an emergency supply.

The prescribing practitioner must indicate that the prescription is an emergency Rx on the face of the prescription if hard copy or if the prescription is called in to the pharmacy, the emergency status of the prescription must be communicated to the pharmacist who must indicate "Emergency Rx" on the hard copy prescription. When the pharmacist determines the prescription is an emergency, the pharmacist must indicate "Emergency by Pharmacist" on the hard copy prescription.

Note: Refer to Appendix D Point of Sale User Guide for detailed claim submission information.

Recipients are exempt from paying co-payments for emergency situations.

DHH will monitor emergency prescriptions/recipients on an ongoing basis through management reports, pharmacy provider audits, and other monitoring programs to review the number of these prescriptions and the reasons for them.

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Information on the Prior Authorization process, including the PDL and Prior Authorization Request Form (copy is attached, Form RXPA01), is also available on the Louisiana Medicaid website (<u>www.lamedicaid.com</u>). This website will be updated when changes (additions or deletions) are made to the PDL. The program may also utilize the provider remittance advices to notify providers of PDL changes that must be implemented in short time frames

The Department has received inquiries that drug products requiring PA are not reimbursable by Medicaid. Medicaid does reimburse for drug products requiring prior authorization when the prior authorization process is followed.

## Suboxone® (Buprenorphine) and Subutex® (Buprenorphine/Naloxone) Policy

Please refer to the Louisiana Medicaid website (<u>www.lamedicaid.com</u>) under Pharmacy & Prescribing Providers link to review the Physician Letter: Suboxone®/Subutex® Criteria for Reimbursement.

## Synagis® (Palivizumab) Update

Please refer to the Louisiana Medicaid website (<u>www.lamedicaid.com</u>) under Pharmacy & Prescribing Providers link to review updates to the criteria for reimbursement for Synagis® (palivizumbab) for the 2010- 2011 Respiratory Syncytial Virus (RSV) Season.

Thank you for your continued cooperation. We appreciate your participation in the Medicaid Program.

Sincerely,

Don Gregory Interim Medicaid Director

DG/MJT/gbm

Attachments (2)