

OKLAHOMA HEALTH CARE AUTHORITY



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DUR

NEWSLETTER

DRUG UTILIZATION REVIEW FOR OKLAHOMA MEDICAID

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UPDATES

- The OHCA website has been updated to make it easier to use. All pharmacy-related information can now be accessed from a single web page. Online resources include prior authorization forms, physician prescriber numbers, drug coverage information, provider updates, and more. To access the OHCA pharmacy web page, direct your internet browser to:
www.ohca.state.ok.us

Click on the *Provider* tab at the top of the page, then click on *Pharmacy*, and you will be directed to a complete list of pharmacy related online resources.

- Free ePocrates drug reference software for handheld PDAs displays drug coverage information for Oklahoma Medicaid and other insurance plans. For more information, or to download, visit:
www.epocrates.com

PARTIAL AUTOMATION OF PRIOR AUTHORIZATION PROCESS

In some cases, prescriptions for Tier-2 medications can be filled without the need for prior authorization.

When a pharmacy submits a claim for certain categories Tier-2 medications, the Medicaid computer system automatically reviews the client's claims history. If the required Tier-1 drug trial(s) are found, the system allows the Tier-2 drug claim to pay, eliminating the

need to submit a prior authorization. Prior authorization may be required for these categories for overrides for brand name, early refill, or quantity limits.

The following medication categories currently utilize this feature:

- NSAIDs (*Non-Steroidal Anti Inflammatory Drugs—requires two tier-1 trials*)
- PPIs (*Proton Pump Inhibitors*)
- SSRIs (*Selective Sero-*

tonin Reuptake Inhibitors)

- CCBs (*Calcium Channel Blockers*)
- ARBs (*Angiotensin Receptor Blockers*)
- ACE Inhibitors (*Angiotensin Converting Enzyme Inhibitors*)
- ACE/CCB & ACE/HCTZ combinations
- ADHD/Narcolepsy Medications

In mid-December 2004, the ADHD / Narcolepsy medications became the newest drug category to employ this feature.

RECORDS RETENTION REQUIREMENTS

In order to ensure compliance with Oklahoma Medicaid administrative rules, contracted pharmacies are required to retain all records for products which have been provided to Medicaid clients. The Oklahoma Health Care Authority (OHCA) & the Oklahoma Medicaid Fraud Control Unit may re-

quest copies of all documents for a time period of 6 years from the date of service.

OHCA selects pharmacies at random for audits. In the event of an audit, a contracted pharmacy must be able to provide original written prescriptions, signature logs, purchase invoices, and

other records necessary for auditing purposes.

Failure to provide the requested information to the OHCA reviewer may result in recommendations ranging from recoupment of payment for services to termination of the provider's contract.

PRIOR AUTHORIZATION UPDATE

For continuously updated Oklahoma Medicaid formulary information:

- Access the OHCA website: www.ohca.state.ok.us
- Download free ePocrates drug reference software for handheld PDAs at: www.epocrates.com

ANTI-HYPERTENSIVE MEDICATIONS

Calcium Channel Blockers (CCBs)

- Tier-1 products are covered with no authorization necessary.
- Tier-2 authorization requires one Tier-1 trial.

Tier-1 (no PA required)	Tier-2 (requires PA)
diltiazem (Cardizem)	amlodipine (Norvasc)
diltiazem (Tiazac, Taztia XT)	bepidil (Vascor)
diltiazem CD (Cardizem CD)	diltiazem (Cardizem LA)
diltiazem ER (Cartia XT, Diltia XT)	felodipine (Plendil)
diltiazem SR (Cardizem SR)	isradipine (Dynacirc)
diltiazem XR (Dilacor XR)	nicardipine (Cardene SR)
isradipine (Dynacirc CR)	nimodipine (Nimotop)
nicardipine (Cardene)	nisoldipine (Sular)
nifedipine (Adalat, Procardia)	verapamil (Covera HS)
nifedipine CC (Adalat CC)	verapamil (Verelan PM)
nifedipine ER	
nifedipine XL (Nifedical XL, Procardia XL)	
verapamil (Calan, Isoptin, Verelan)	
verapamil SR (Calan SR, Isoptin SR)	

ACE Inhibitor / Calcium Channel Blocker Combinations

- Tier-1 products are covered with no authorization necessary.
- Tier-2 authorization requires one Tier-1 trial.

Tier-1 (no PA required)	Tier-2 (requires PA)
benazepril / amlodipine (Lotrel)	enalapril / felodipine (Lexxel)
trandolapril / verapamil (Tarka)	

ACE Inhibitor / HCTZ Combinations

- Tier-1 products are covered with no authorization necessary.
- Tier-2 authorization requires one Tier-1 trial.

Tier-1 (no PA required)	Tier-2 (requires PA)
benazepril/HCTZ (Lotensin HCT)	fosinopril/HCTZ (Monopril HCT)
captopril/HCTZ (Capozide)	quinapril/HCTZ (Accuretic)
enalapril/HCTZ (Vasoretic)	moexipril/HCTZ (Uniretic)
lisinopril/HCTZ (Prinzide, Zestoretic)	

PRIOR AUTHORIZATION UPDATE

ANTI-HYPERTENSIVE MEDICATIONS

Angiotensin Converting Enzyme Inhibitors (ACE Inhibitors)

- Tier-1 products are covered with no authorization necessary.
- Tier-2 authorization requires one Tier-1 trial.

Tier-1 (no PA required)	Tier-2 (requires PA)
benazepril (Lotensin)	moexipril (Univasc)
captopril (Capoten)	perindopril erbumine (Aceon)
enalapril (Vasotec)	quinapril (Accupril)
enalaprilat (Vasotec IV)	ramipril (Altace)
fosinopril (Monopril)	trandolapril (Mavik)
lisinopril (Prinivil, Zestril)	

Angiotensin Receptor Blockers (ARBs)

- Tier-1 products are covered with no authorization necessary.
- Tier-2 authorization requires one trial with a Tier-1 ACE Inhibitor.

Tier-1 ACE Inhibitors	Tier-2 ARBs (requires PA)
benazepril (Lotensin)	candesartan (Atacand)
captopril (Capoten)	candesartan / HCTZ (Atacand HCT)
enalapril (Vasotec)	
enalaprilat (Vasotec IV)	
fosinopril (Monopril)	
lisinopril (Prinivil, Zestril)	

The ARBs listed below are covered with no PA required

iresartan (Avapro)
irbesartan / HCTZ (Avalide)
olmesartan (Benicar)
losartan (Cozaar)
valsartan (Diovan)
valsartan / HCTZ (Diovan HCT)
losartan / HCTZ (Hyzaar)
telmisartan (Micardis)
telmisartan / HCTZ (Micardis HCT)
eprosartan (Teveten)
eprosartan / HCTZ (Teveten HCT)

NEWSLETTER SURVEY

In the near future, the *OHCA DUR Newsletter* will be combined with the *OHCA Provider Update* newsletter. We are interested in hearing from you about how you would like to receive the combined newsletter, as well as other types of provider updates from OHCA. Please take a moment to complete this survey and share your preferences.

Provider Name: _____ Phone Number: _____

I would like to receive the *OHCA Provider Update* newsletter and other provider updates in the following format(s):

- Print copy by mail
- View online version at OHCA website
(*this option is already available, at: <http://www.ohca.state.ok.us>)*
- View online version at OHCA website with an e-mail reminder when the latest online version is available
(*my e-mail address is: _____*)
- Receive the newsletter as an e-mail enclosure
(*my e-mail address is: _____*)

Please indicate your preferences and return survey via one of the following options:

<u>Fax</u>	<u>Mail</u>	<u>Email</u>
OKC Metro: (405) 271-2615 Toll-Free: (866) 802-4384	Pharmacy Management Consultants PO Box 26901; ORI W-4403 Oklahoma City, OK 73190	mcau@ouhsc.edu (Please include provider name, phone number, and preferences)




Visit the OHCA
secure provider
website:
<https://www.OHCAprovider.com>

Oklahoma Medicaid Pharmacy Help Desk

Pharmacies Call: Physicians Call:

OKC Metro: (405) 271-6349 (405) 271-9048

Statewide Toll-Free: (800) 831-8921 (877) 269-2768



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