

# PROVIDER BULLETIN

No. 09-30

September 30, 2009

TO: All physicians, pharmacists, and pharmacies participating in the  
Nebraska Medicaid Program

FROM: Vivianne M. Chaumont, Director   
Division of Medicaid and Long-Term Care

RE: Preferred Drug List

In 2008 the Nebraska Legislature passed LB 830, the Medicaid Prescription Drug Act. The purpose of the act is to provide clinically effective and safe medications to Medicaid clients in a cost effective manner. The bill mandated the formation of a Preferred Drug List (PDL) and the joining of a multistate purchasing pool.

A Preferred Drug List is a list of medications which are “preferred” and are considered first line choices. Drugs designated as non-preferred will still be available, but may require authorization of coverage prior to dispensing. Therapeutic classes of drugs will be reviewed. Within each class, medications will be designated as preferred or non-preferred.

A Pharmaceutical and Therapeutics Committee has been formed to advise the DHHS on selection of products for the PDL. The committee is comprised of physicians, pharmacists and members of the public. The Committee will review and compare medications within categories based on their effectiveness and safety. If two products are considered very similar clinically, then the net cost, including all rebates, will also be considered in the decision.

The PDL is expected to provide clinically effective and safe medications to Medicaid clients in a more cost effective manner by: 1) encouraging the use of less costly products and 2) the collection of supplemental rebates from the manufactures for their products included on the PDL. Supplemental rebates will lower the net cost to the State for providing medications to Medicaid patients.

Physicians are encouraged to choose preferred drug products whenever possible. Doing so will help ensure the viability and continuation of the Medicaid Program. If a patient has had a treatment failure, adverse reaction, or contraindication to a preferred agent, a non-preferred product may be requested through the Request For Use of a Non-preferred Medication process. A **PDL Exception Request** form will be available on the web site. <https://nebraska.fhsc.com>

The PDL will be implemented in four phases; following each meeting of the P & T Committee during the first year. The Pharmaceutical and Therapeutics Committee met for the first time on August 26, 2009. The decisions from that meeting will be implemented on **October 14, 2009**. The second meeting was held September 24, 2009 with an implementation date of **November 12, 2009** for those products. More classes will be reviewed in winter 2010. After the PDL has been implemented over the course of the first year, classes of drugs included on the PDL will be reviewed at least once every 12 months.

The first classes to be reviewed and their schedules are as follows:

P & T Meeting Date: 8/26/09	P & T Meeting Date: 9/24/09
<b>IMPLEMENTATION: 10/14/09</b>	<b>IMPLEMENTATION: 11/12/09</b>
Antibiotics, Vaginal	Alzheimers Agents
Antifungals, Oral	Analgesics/Anesthetics, Topical
Antifungals, Topical	Androgenic Agents
Antihyperuricemics, Oral	Antiemetics
Antiparasitics, Topical	Antiparkinson's Agents
Antivirals, Oral	Atopic Dermatitis
Antivirals, Topical	Bone Resorption Suppression and related agents
Bronchodilators, Anticholinergic	Cytokine and CAM Antagonists
Bronchodilators, Beta Agonist	Hypoglycemics, Incretin mimetics/enhancers
Cephalosporins and related antibiotics	Hypoglycemics, Insulin
Fluoroquinolones, Oral	NSAID
Glucocorticoids, Inhaled	Ophthalmic Antiinflammatories
Intranasal Rhinitis Agents	Ophthalmics for allergic conjunctivitis
Leukotriene Modifiers	Ophthalmics, glaucoma
Macrolides/Ketolides	Pancreatic Enzymes
Ophthalmic Antibiotics	Platelet Aggregation Inhibitors
Tetracyclines, Oral	Steroids, Topical
	Stimulants and Related Agents

Rules and Regulations changes have been made and can be found in Nebraska Administrative Code, Title 471, sections 1, 10, 16, 18 and are posted on the DHHS website: <http://www.dhhs.ne.gov/reg/t471.htm>

Common questions and answers:

Q. Where can I get a complete list of the PDL?

A. The complete Preferred Drug List is posted on the Pharmacy Program First Health web site. <https://nebraska.fhsc.com/> You may want to bookmark this site to be able to keep the most current list readily available.

Q. What should a pharmacy do if it receives a prescription for a non-preferred product?

A. The first choice is to see if the physician would change the prescription to a preferred drug. If that is not possible, then a **PDL Exception Request** form should be submitted.

- Q. Can I make a phone call to request coverage of a non-preferred drug?
- A. No, please fax the request form to: 1-866-759-4115. Faxing the form with all the information necessary will allow the help desk to process the applications in a more time efficient manner.
- Q. Where do I find the **PDL Exception Request** form?
- A. The fax form is on the Pharmacy First Health web site under the PDL tab: <https://nebraska.fhsc.com/>
- Q. What information is needed to complete the request for non-preferred medications?
- A. Patient identification information, physician and pharmacy contact information. Also required will be:
- Diagnosis,
  - Explanation of treatment failure with preferred product(s),
  - Listing of condition that prevents the use of a preferred product,
  - Possible drug interaction between another medication and preferred product,
  - Side effects experienced to preferred product.
- Q. My patient has been on and is stable on a non-preferred drug. Will they be “grandfathered”?
- A. For most classes of drugs, there will NOT be an automatic “grandfathering”. If there is a client specific clinical reason that a patient can not switch to a preferred agent, it must be documented on the **PDL Exception Request** form.
- Q. Will all classes of medications be on the PDL?
- A. No, LB 830 exempted the antidepressants, antipsychotics and anticonvulsant prescription drugs.
- Q. Are generic drugs preferred over brand name products?
- A. Usually a generic drug will be preferred over the brand name version of the drug. There may be *some instances* where the brand name product is preferred, because it has a lower net cost to the state than the generic form.
- Q. When will the PDL begin?
- A. Claims submitted for non-preferred drugs will begin to deny on **October 14, 2009**.

For further information and to see the complete list, please look on the Pharmacy First Health website under the Preferred Drug List tab: <https://nebraska.fhsc.com/> or contact Jenny Minchow R.P., Pharm.D. at (402) 471-9109 [medicaid.pharmacy@dhhs.ne.gov](mailto:medicaid.pharmacy@dhhs.ne.gov)