

PARTNERSHIP



**PARTNERSHIP HEALTHPLAN OF CALIFORNIA (PHC)
PHARMACY UPDATE**

NUMBER 03 - 08

August/September 2008

Introduction

Please keep these updates on file in your Pharmacy Procedure Manual as they will contain important information regarding formulary changes and additions, plan parameter changes, billing procedures, the Treatment Authorization Request (TAR) process and other necessary information. Please refer to your Pharmacy Procedure Manual as most of the topics contained in this update are explained in detail in the Manual. If you have not received your updated copy of the Pharmacy Procedure Manual, you may download it from the PHC website at www.partnershiphp.org or contact the Pharmacy Department at (707) 863-4414 to request a copy.

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 - **Addition/Changes (Effective 1/1/2009)**

Pharmacy Focus Group

PHC wants to thank all those pharmacy representatives who attended the August 19, 2008 Pharmacy Focus Group Meeting at the Garden Hilton Hotel in Fairfield. Discussions centered around the Pharmacy provider satisfaction survey results. PHC appreciates the comments from various pharmacy providers regarding TAR processing, billing and formulary issues. You can find the questions discussed/addressed in the attached minutes. The results of the 2008 survey are included with the minutes.

Advising Patients to Quit Smoking

PHC physicians have been advised that if they have patients who smoke, they should advise them to quit, assess their readiness to quit, and have a discussion about what types of aids are available to help them quit smoking when they are ready. PHC covers nicotine replacement therapy (gum, patches, and inhaler) and medications such as bupropion and varenicline (Chantix®) for 3 months. After 3 months, prior authorization is required for continued treatment. Counseling and supportive assistance are also available through the California Smoker's helpline (800-662-8887), Kick the Butts helpline (800-287-7357), and the Quit Now Helpline (800-784-8669 TTY 800-332-8615). There are also many Internet resources available including www.smokefree.gov.

INFLUENZA VACCINE 2008-2009

FDA announced earlier this month that it has approved this year's seasonal influenza vaccine that includes all new strains of the virus likely to cause flu in the United States during the 2008-2009 season. CDC recommends that yearly flu vaccination should begin in September or as soon as vaccine is available and continue throughout the influenza season, into December, January and beyond. This is because the timing and duration of influenza seasons vary.

Updated information about influenza vaccine is available at the following websites:

-Centers for Disease Control and Prevention
Influenza Flu Homepage: www.cdc.gov/flu

- US Food and Drug Administration Flu
Information Homepage:

www.fda.gov/oc/opacom/hottopics/flu.html;

- Influenza virus Vaccine 2008-2009 Season
(approval information, lot release status and
manufacturer vaccine information):

www.fda.gov/cber/flu/flu2008.htm

Treatment Authorization Request (TAR)/ Coverage Determination Form (CDF) processing.

As a reminder, please include the correct prescribing physician's name, telephone and FAX number when submitting the TAR/CDF. If PHC defers the TAR/CDF for more information, we can direct those requests to the appropriate prescribing physician.

We continue to discourage the use of Social Security ID Number as the patient identification number for TAR/CDF requests.

TAR/CDF processing by pharmacy will continue to need the diagnosis, medical justification, appropriate NDC and quantity requested. Physicians are encouraged to write and supply the necessary clinical information anywhere on the prescription including the back side.

Partnership Advantage (PA): transition prescription fills

New PA enrollees

Newly enrolled PA members are entitled to transition fills of their medications without CDF process submission during the first 90 days of enrollment. During this time period, PHC pharmacy department will review and determine if transition letter member notification are needed. Members who receive transition letters will be instructed that if their physician determines that the drug is to be continued beyond their initial 90 day enrollment period, a Coverage Determination Form (CDF) will need to be submitted for PHC pharmacy review.

Medication Therapy Management (MTM) for Partnership Advantage (PA) members: Outcomes Targeted Intervention Program (TIP™)

Through the Outcomes Targeted Intervention Program (TIP), Outcomes (PHC contracted MTM provider) works to assist pharmacists with the identification of potential MTM services that can be delivered to eligible PA members. These interventions may focus on use of potentially inappropriate medications in the elderly or therapeutic duplication. In addition, interventions targeting chronic diseases such as diabetes, COPD, and cardiovascular disease are focused on guideline-recommended therapy and quality metrics defined by HEDIS and NCQA initiatives.

On at least a quarterly basis, Outcomes distributes TIPs to the dispensing pharmacy network via mail and/or fax. Targeted interventions if successfully completed will be reimbursed the stated fees on the TIPs. No contract is required to participate in the TIP program. In addition, pharmacists are also not required to complete the training program to participate in TIPs.

If your pharmacy has received a TIP via fax or mail, please review the intervention which outlines one or more patient-specific potential drug therapy problems. Follow the stepwise instructions for completing the form and fax or mail the completed form(s) back to Outcomes at:

BY MAIL:

OUTCOMES PHARMACEUTICAL HEALTH CARE
601 E LOCUST, SUITE 200
DES MOINES, IA 50309-1946

BY FAX: 515-237-0002

Outcomes has been contacting local pharmacies to provide training opportunities through which qualified pharmacies may also bill for a number of additional MTM services such as patient education & monitoring, comprehensive medication reviews and OTC consultations.

If you are interested in participating in the full MTM program, please visit the Outcomes website at www.getoutcomes.com and go to Pharmacist section and select "Pharmacy Contracting or Pharmacist Training" sections or contact an Outcomes representative at 515.237.0001.

**Prior Authorization Criteria
Addition/Changes (effective
September 1, 2008)**

Lamotrigine and Topiramate: (Non- formulary)

The changes in attachment A update lamotrigine and topiramate criteria used by PHC when reviewing requests from providers. Criteria for neuropathic pain and trigeminal neuralgia have been added for both lamotrigine and topiramate. Criteria for topiramate use in migraine prophylaxis have been added.

The complete Prior authorization criteria guideline is available on the website: [Prior Authorization Criteria Guidelines](#).

FORMULARY ADDITIONS/CHANGES:

As a result of the July 24, 2008 Pharmacy & Therapeutics (P&T) Committee meeting the attached formulary additions and changes were accepted. Effective date for these additions and changes will be September 1, 2008

Partnership HealthPlan of California
PHARMACY FOCUS GROUP
Meeting Minutes
09/13/2008

Attachment A

Attendees:

Mariah Bayabo; Baehmai Lee, Pharm. D.; Herman Wood; Simon Chen, R.Ph.; Christine Tobeu; Anna Neualasch; Anna Leon Guerrero; Mark Smith, R. Ph.; Yenn Mach, R. Ph.; Helen Dangtran, R.Ph.; Dawn Jurewitz, R. Ph.; Shana Grantar; Selena Gashel; Kathleen Fitch; Patty Guijosa; Pam Roy.

PHC Employees – Chris Cammisa, M.D.; Debbie Shafer; Jack Horn, Gary Louie, Pharm D.; Peggy Hoover; Terrie Stanley; Jena Sales; Diane Wong, Pharm D.; Jessica Hernandez, Mary Enos, Shauncey Jenkins, Maria Alvord, Amrit Singh

I. Introduction and Objectives

The meeting started at 7:00 pm with Dr. Chris Cammisa, the Medical Director for Partnership HealthPlan of California (PHC) and Gary Louie, the Pharmacy Director for PHC, welcoming every one and having them introduce themselves. The group consisted of 6 Pharmacists, 8 Pharmacy Technicians and 2 Pharmacy Clerks representing 9 different pharmacies and 17 PHC employees. Dr. Chris Cammisa, the Medical Director for PHC reviewed the Objectives of the meeting and gave a brief update of “whats new at PHC”.

Dr. Cammisa informed the group that a lot is happening at PHC. PHC has not had a rate increase in the past 5-6 years. PHC had a visit with the governor’s office to discuss rate increase and the budget situation. There are no rate changes for pharmacy providers at this time but a rate decreased was done for the Primary Care Providers and hospitals. PHC is working on controlling cost via formulary management. PHC currently has about 3000 members out of 10,000 eligible members enrolled in the Partnership *Advantage* Program. Geographical expansion into Sonoma, Lake, Marin and Mendicino counties is currently on hold due to the budget.

II. Review the PHC Pharmacy Benefit

Dr. Cammisa gave a brief overview of the pharmacy benefits. The main focus is to ensure that PHC members receive clinically appropriate cost effective medications. PHC offers a very rich pharmacy benefit and cost increase in 2007 was 9%.

III. Review Pharmacy Benefit/formulary Management

The Pharmacy and Therapeutic committee meets quarterly to discuss Formulary additions and changes and criteria for non-formulary drugs. PHC has a mandatory generic substitution when there is a brand and generic drug available. PHC is always looking for volunteer pharmacists to provide expert advice on managing the formulary. Work in progress is on the Point of Sale (POS) messaging. Greg Umeda, Account Executive, from MedImpact was unable to attend the meeting. His contact is (916) 428-5321.

IV. Discuss the results of the Pharmacy Provider Survey

In 2008 PHC had a 49% response rate compared to 52% in 2007. 77 pharmacies were surveyed in June/July of 2008. The questions attached in the pharmacy survey were discussed. PHC received many excellent comments and suggestions. Next survey is due in June 2009.

V. Suggestions/Improvement Opportunities

PHC continues to communicate with prescribers via calls and notes for TAR clarifications. The Medical Director and Pharmacy Director continually do academic detailing with prescribers for cost effective prescribing.

PHC is forming a workgroup to streamline the TAR process. We have a few pharmacists, pharmacy technicians, PHC pharmacy staff, PHC member services staff, PHC I.T. staff, QI manager and PHC Medical Director as part of the workgroup. The initial meeting is targeted for the 2nd week of October 2008 with maybe a few conference calls or later meetings if needed.

MedImpact is pilot testing eCOB with Longs and Raleys on eCOB. No target date for implementation has been set yet.

PHC has reviewed ePrescribing at this time is not on the priority list.

PHC is reviewing to limit brand prescriptions to a 30 day fill to decrease wastage.

The following questions were addressed/discussed by the group and were resolved with an answer in italics:

1. Are new generics auto covered on formulary?
*On the Medi-Cal line of business – Yes
On the Partnership Advantage – No – has to be approved by CMS first.*
2. If a member has Medicare Part D will PHC cover their drugs?
PHC will cover what is called the “excluded drug” if an “Included drug” is rejected by the D plan, prior authorization requests should be obtained from the Part D plan.
3. B Vs D drugs.
If a drug (e.g nebulizer medications), is not covered by Medicare D or Part B, pharmacy may submit TAR to PHC for consideration.
4. Experience with Outcomes MTM program?
Vacaville Raleys Pharmacy manager expressed his thanks for the program and he stated that he is extremely happy with the program. He wanted to know if there was a savings to the HealthPlan. The Pharmacy Director stated that it was too early to note any savings .

Meeting Adjourned at 8:30 p.m.

Minutes by: Amrit Singh

PHC FORMULARY: ADDITIONS / CHANGES
Effective 9-01-08

Attachment B

DRUG	CLASS	FORMULARY STATUS	RESTRICTIONS / LIMITS
ADDITIONS:			
Suprax/ (cefixime) 400 mg tablet	Antibiotic	F (Code 1)	Code 1. uncomplicated gonorrhea (cervical/urethral/rectal) Quantity limit #2/ month