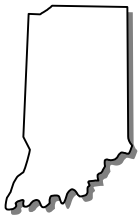
Indiana Health Coverage Programs



PROVIDER BULLETIN

BT200350 JULY 22, 2003

To: All Pharmacy and Prescribing Practitioners

Subject: Implementation of Prior Authorization for Therapeutic Duplication ProDUR Alerts

Note: The information referenced below is not directed to those providers rendering services in the risk-based managed care (RBMC) delivery system.

Overview

This bulletin announces the continuation of the implementation of prior authorization (PA) for Therapeutic Duplication Prospective Drug Utilization Review (ProDUR) alerts effective September 9, 2003. The following is the description of the therapeutic duplication ProDUR alert as published in provider bulletin *BT200221*, dated May 15, 2002: "Therapeutic duplication is defined as the use or prescribing of two or more drug products of the same therapeutic class, based on criteria published by First DataBank." Therapeutic duplication PA will be implemented gradually by therapeutic class as defined by First DataBank.

The first two therapeutic classes implemented July 21, 2003, requiring PA for therapeutic duplication were Angiotensin Converting Enzyme Inhibitors (ACES) and Angiotensin Receptor Blockers (ARBS) as published in provider bulletin *BT200337*, dated June 6, 2003. In addition to the ACES and the ARBS, the classes in Table 1 will require PA for therapeutic duplication as of September 9, 2003.

Prior Authorization Process

Claims submitted to ACS posting the therapeutic duplication alert explanation of benefits (EOB) codes *0572 – Therapeutic Duplication* and *3002 – Prior Authorization Required From HCE* will deny at the point-of-sale (POS). Pharmacists will not be permitted to override the alert at POS.

- Pharmacists can obtain PA from Health Care Excel (HCE) when one of the drugs has been discontinued.
- Prescribers must obtain PA from HCE when multiple products of the same therapeutic class are being dispensed. Supporting clinical rationale for the therapeutic duplication is required to support the PA. The prior authorization form for therapeutic duplication can be found at: http://www.indianamedicaid.com/ihcp/Forms/RDP_Auth.pdf

Table 1 – Listing of Therapeutic Classes

Therapeutic Classes Requiring Prior Authorization for Therapeutic Duplication	
Calcium Channel Blocking Agents	Streptogramins
Anti-Hyperlipidemics	Aminocyclitols
Osmotic Diuretics	Vancomycin and Derivatives
Inorganic Salt Diuretics	Lincosamides
Mercurial Diuretics	Polymyxin and Derivatives
Carbonic Anhydrase Inhibitors	Oxazolidinones
Thiazide and Related Diuretics	Betalactams
Potassium Sparing Diuretics	Quinolones
Aminouracil Diuretics	Beta-Lactamase Inhibitors
Potassium Sparing Diuretics in Combination	Carbapenems (Thienamycins)
Loop Diuretics	Cephalosporins – 1st Generation
Penicillins	Cephalosporins – 2nd Generation
Tetracyclines	Cephalosporins – 3rd Generation
Macrolides	Cephalosporins – 4th Generation
Chloramphenicol and Derivatives	Absorbable Sulfonamides
Aminoglycosides	Non-Absorbable Sulfonamides
Antitubercular Antibiotics	

Emergency Situations

When PA cannot be immediately obtained, *42 U.S.C. § 1396r-8* provides for dispensing of a 72-hour supply of a covered prescription drug in an emergency situation. Pharmacists who dispense a 72-hour supply of a covered prescription drug will be reimbursed by the Indiana Health Coverage Programs (IHCP) if, subsequent to dispensing in an emergency, indication is made on the claim that the supply was a necessary emergency.

Additional Information

Refer questions about this policy to the HCE Pharmacy Benefit Management Call Center at (317) 347-4511 in the Indianapolis local area or 1-800-457-4518.