

**Vermont Health Access
Pharmacy Benefit Management Program**

April, May and June 2010

**Quarterly Report to
Health Access Oversight
Committee**

Q4 SFY 2010

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Pharmacy Benefit Management Program Quarterly Report

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The Agency of Human Services, Department of Vermont Health Access (DVHA), is pleased to provide the quarterly report to the Health Access Oversight Committee as required by Act 127 approved in 2002 and found in 33 V.S.A. Chapter 19 § 2001. This report covers the activities of the Pharmacy Benefits Manager (PBM) for the third quarter of State Fiscal Year 2010.

The three requirements are set out in bold italics. The DVHA’s response follows each requirement.

§2001 (c) (1) “The director of the office of Vermont health access shall report quarterly to the health access oversight committee concerning the following aspects of the pharmacy best practices and cost control program:

(1) the efforts undertaken to educate health care providers about the preferred drug list and the program’s utilization review procedures;”

During this quarter, there was one mailing sent to pharmacy providers:

- June 2010 DVHA Pharmacy Bulletin. Topics included DVHA Pharmacy Best Practices and Cost Control Report for 2010; DVHA’s generic substitution policy; the most common billing errors and how to avoid them; and the exclusion of short-acting beta-agonists and insulin from DVHA’s 90-day fill requirement for maintenance drugs. It also provided a listing of DVHA’s website resources and an Other Coverage Code (OCC) list to assist pharmacy providers in the appropriate billing of secondary claims.

In an attempt to make all documents available to interested parties, the department maintains a web page with information related to the Pharmacy Benefits Management Program at: <http://dvha.vermont.gov/for-providers>.

“(2) the number of prior authorization requests made;”

Clinical Prior Authorization Requests					
	Requests	Approved	Changes	Denied	Fair Hearing Status
					1 Dismissed
April	1,660	1,281	22	357	1 Pending
May	1,614	1,244	33	337	0
					1 Affirmed
June	1,636	1,242	27	367	1 Withdrawn
Total	4,910	3,767	82	1061	

Quantity Limit Prior Authorization Requests					
	Requests	Approved	Changes	Denied	Fair Hearing Status
April	258	217	6	35	
May	177	135	14	28	
June	177	152	7	18	
Total	612	504	27	81	

Combined Clinical and Quantity Limit Prior Authorization Requests					
	Requests	Approved	Changes	Denied	Fair Hearing Status
April	1,918	1,498	28	392	1 Dismissed 1 Pending
May	1,791	1,379	47	365	0
March	1,813	1,394	34	385	1 Affirmed 1 Withdrawn
Total	5,522	4,271	109	1,142	

Data in the table above show that the DVHA received a total of 4,910 requests for **clinical prior authorizations (PA)** during the fourth quarter of State Fiscal Year 2010 (April, May and June 2010). This represents a 3.59% decrease from the total number of clinical prior authorization received during the previous quarter (5,093), and a 6.67% increase from one year ago, Q4 SFY 2009, when total clinical PA requests were 4,603.

DVHA received a total of 612 requests for **quantity limit prior authorizations** during the fourth quarter of State Fiscal Year 2010 (April, May and June 2010), a 0.65% decrease from the total number of quantity limit prior authorization requests received during the previous quarter (616), and a 36.30% increase from one year ago, Q4 SFY 2009, when total quantity limit PA requests were 449.

Quantity limits are established to promote dose consolidation (that is prescribing of lesser quantities of larger strength dosage forms rather than multiples of lower strength dosage forms which is especially important when all dosage strengths for a particular drug are level priced) and also to promote rational maximum daily doses where increased doses have either not been shown to offer additional clinical benefit or may be harmful.

“(3) the number of utilization review events (other than prior authorization requests).”

DUR Description	Apr	May	June	Grand Total	% of Total
Drug-Age Precaution	12	15	21	48	0.02%
Drug-Disease Precaution	4,181	4,189	4,608	12,978	4.18%
Drug-Drug Interaction	17,253	22,409	24,053	63,715	20.53%
Ingredient Duplication	10,525	10,477	11,103	32,105	10.34%
Refill Too Soon	4,065	4,020	4,290	12,375	3.99%
Therapeutic Duplication	62,493	61,542	65,116	189,151	60.94%
Total	98,529	102,652	109,191	310,372	

During the fourth quarter of SFY 2010, a total of 310,372 utilization events occurred. This was a 0.12% increase from the previous quarter, in which a total of 309,998 utilization review events occurred. Below is a comparison of the utilization review events for the fourth and third quarters of SFY 2010.

	Q4 SFY '10	Q3 SFY '10	Percent Change:
Drug-Age Precaution	48	62	-22.58%
Drug-Disease Precaution	12,978	12,153	6.79%
Drug-Drug Interaction	63,715	62,893	1.31%
Ingredient Duplication	32,105	32,407	-0.93%
Refill Too Soon	12,375	10,972	12.79%
Therapeutic Duplication	189,151	191,511	-1.23%
Total	310,372	309,998	0.12%