



**Kentucky Department for Medicaid Services
Drug Management Review Advisory Board (DMRAB)
Recommendations for Consideration**

The following chart lists recommendations for new/updated edits for consideration by the Drug Management Review Advisory Board (DMRAB) at the November 10, 2011 meeting.

Potential New/Updated Edits

| Potential New/Updated Edit | Magellan Medicaid Administration Recommendation |
|-----------------------------------|--|
| Narcotic Combination Edit | Products that contain a combination of a narcotic analgesic plus APAP, ASA or another NSAID should require PA after the initial 30 days per 366 days. PA will be granted in the following instances: <ul style="list-style-type: none">• Patient has a diagnosis for which short-term pain management is expected; approval for 3 months; OR• Patient has a diagnosis for which long-term pain management is expected OR patient is currently taking a long-acting narcotic concomitantly; approval for 6 months This prior approval should be obtained by the prescriber ONLY. |