



**PHARMACY SUPPORT CENTER**  
**1-800-432-7005**

24 hours per day / 7 days per week  
For claim assistance, early refill overrides, and lock-in overrides

**CLINICAL SUPPORT CENTER**  
**1-800-477-3071**

24 hours per day / 7 days per week  
Please Note: Kentucky Medicaid began allowing telephonic prior authorization requests on July 1, 2010. Drug specific prior authorization requests and brand prior authorization requests must still be submitted via fax.

**DIABETIC SUPPLY QUESTIONS**  
**Prior Authorization**  
**1-800-477-3071**  
**Claim Inquiry**  
**1-800-432-7005**

**Please Note:** Questions regarding claims prior to October 5, 2010 should be directed to 1-800-807-1232.

**PROVIDER SERVICES**  
**1-877-838-5085**

*M-F, 10:30 a.m. – 4:30 p.m. ET*  
Providers should contact Provider Services for inquiries regarding enrollment and changes.

**MEMBER SERVICES**  
**1-800-635-2570**

*M-F, 8:00 a.m. – 5:00 p.m. ET*  
Recipients should contact Member Services for medication replacement requests and benefit information.

**WEB SITES**

Kentucky Department for Medicaid Services  
<http://chfs.ky.gov/dms/Pharmacy.htm>

Magellan Medicaid Administration  
<https://kentucky.fhsc.com/>

**ONSITE PROVIDER EDUCATION**

For onsite education presentations, please contact Kasie Purvis at 314-387-4792, M-F 8:30 a.m. – 5:00 p.m. This education is free of charge.

**GETTING TO KNOW KENTUCKY MEDICAID PROVIDERS**



Danhauer Drugs & Health Equipment has been family owned and operated since 1904. The pharmacy is located in Owensboro, Kentucky. The pharmacy is open 365 days a year and they offer free delivery to the Owensboro Kentucky and Southern Indiana area. Danhauer Drugs' has 30 employees. They also offer a variety of other services including medical health equipment, diabetic shoes and supplies, home oxygen, and respiratory equipment.

Danhauer Drugs utilizes a microcomputer that dispenses the medication in hermetically sealed packages that include the drug information. For example, if you take a medication three times a day, the machine dispenses your medication into three separate packages for each day. This has proven very effective at reducing confusion around correct dosages. For additional information on Danhauer Drugs please refer to <http://danhauerpharmacy.com/>.

If you would like to see your pharmacy highlighted, please contact Kasie Purvis at [KLPurvis@magellanhealth.com](mailto:KLPurvis@magellanhealth.com).

# Did You Know...?

## *The top ten (10) drugs dispensed for Kentucky Medicaid during 3Q2011 were...*

- 1 - hydrocodone/APAP
- 2 – clonazepam (5<sup>th</sup> in 2Q2011)
- 3 - Prilosec® OTC (4<sup>th</sup> in 2Q2011)
- 4 - gabapentin (9<sup>th</sup> in 2Q2011)
- 5 – loratadine (2<sup>nd</sup> in 2Q2011)
- 6 – lisinopril (10<sup>th</sup> in 2Q2011)
- 7 – alprazolam
- 8 – aspirin EC
- 9 – Nexium®
- 10 – diazepam

## RECENT PDL CHANGES

### **EFFECTIVE OCTOBER 26, 2011**

- New Drugs to Market:
  - vandetanib
  - Viibryd®
  - Zytiga™
  - Daliresp™
  - Horizant®
  - Victrelis™
  - Incivek™
  - Sylatron™
  - Tradjenta™
  - Natroba™



### **EFFECTIVE NOVEMBER 2, 2011**

- 5-ASA Derivatives, Rectal Preparations
- 5-ASA Derivatives, Oral Preparations
- 5-HT1 receptor Agonists
- Multiple Sclerosis Agents
- Hematopoietic Agents

### **EFFECTIVE NOVEMBER 9, 2011**

- Oral Antiemetics: Anticholinergics

- Oral Antiemetics: 5-HT<sub>3</sub> Antagonists
- NK-1 Antagonists
- Oral Antiemetics: Δ-9-THC Derivatives
- H<sub>2</sub> Receptor Antagonists
- Anti-Ulcer Protectants
- Combination Products for H. pylori
- Antispasmodics/Anticholinergics
- Antidiarrheals
- Laxatives and Cathartics

### THIRD QUARTER PHARMACY PROVIDER NOTICES

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#133 - June Updates and Upcoming Changes

#134 - May 19, 2011 PTAC PDL Changes – effective beginning 08/24/2011

#135 - July Updates and Upcoming Changes

#136 - Average Whole Price (AWP) to Wholesale Acquisition Cost (WAC)

#137 - August Updates

#138 - July 21, 2011 PTAC PDL Changes

### HELPFUL REMINDER

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#### **WEBSITE ADDRESS CHANGE**

The web address for Kentucky Medicaid ( <https://kentucky.fhsc.com> ) has now been changed to <https://kentucky.magellanmedicaid.com>. The old web address can still be utilized as you will automatically be rerouted to the new web address.

Information on <https://kentucky.magellanmedicaid.com> now pertains to Kentucky Medicaid's fee-for-service members only.

### GUIDELINE CHANGE<sup>i</sup>

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#### **ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) GUIDELINES**

The American Academy of Pediatrics (AAP) has released new clinical practice guidelines for the diagnosis and treatment of ADHD in children and adolescents. The guidelines now address diagnosis and treatment of ADHD in children 4 through 18 years of age. A large emphasis is placed on behavioral interventions. The AAP states that stimulants are highly effective and continue to be the first choice of medication treatment for most children with ADHD. The guidelines do not show preference toward any one stimulant over another.

### DRUG INFORMATION<sup>i</sup>

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#### **PRADAXA®**

Dabigatran's (Pradaxa®) label has been updated to include dosage adjustments based on creatinine clearance (CrCl)

and effects of P-gp inducers and inhibitors on dabigatran exposure. Dabigatran must still be kept in its original bottle; once opened, it expires within four months.

**Avastin®**

The FDA has revoked approval of Roche Genentech’s bevacizumab (Avastin®) for breast cancer due to lack of evidence that the benefits outweigh the risks. The National Comprehensive Cancer Network (NCCN) guidelines still recommend it for breast cancer (Category 2A). Per Centers for Medicare & Medicaid Services (CMS), Medicare will continue to cover bevacizumab for breast cancer. CMS plans to monitor and evaluate coverage options as a result of the FDA’s decision. However, CMS does not have immediate plans to change coverage policies. Bevacizumab, which received FDA approval for metastatic breast cancer in February 2008 under the agency’s accelerated approval program, will remain on the market for treatment of other approved cancers including colon, lung, kidney, and glioblastoma multiforme

**DRUG AVAILABILITY ISSUES<sup>ii</sup>**

\* Please note that the Estimated Time of Availability (ETA) dates are subject to change.

Medication	NDC	* Availability (as of 08/05/2011)
CONCERTA ER 18 MG TABLET	50458058501	On “allocation”; in stock & shipping as it becomes available. No ETA for reaching full production.
CONCERTA ER 27 MG TABLET	50458058801	On “allocation”; in stock & shipping as it becomes available. No ETA for reaching full production.
CONCERTA ER 36 MG TABLET	50458058601	On “allocation”; in stock & shipping as it becomes available. No ETA for reaching full production.
CONCERTA ER 54 MG TABLET	50458058701	On “allocation”; in stock & shipping as it becomes available. No ETA for reaching full production.
METHYLPHENIDATE ER 18 MG TAB	00591271501	On “allocation”; in stock & shipping as it becomes available. No ETA for reaching full production.
METHYLPHENIDATE ER 27 MG TAB	00591271601	On “allocation”; in stock & shipping as it becomes available. No ETA for reaching full production.
METHYLPHENIDATE ER 36 MG TAB	00591271701	On “allocation”; in stock & shipping as it becomes available. No ETA for reaching full production.
METHYLPHENIDATE ER 54 MG TAB	00591271801	On “allocation”; in stock & shipping as it becomes available. No ETA for reaching full production.

<sup>i</sup> Magellan Medicaid Administration, Inc. Clinical Alert. December 2011. Available at [www.MagellanMedicaid.com/news/ClinicalAlerts.asp](http://www.MagellanMedicaid.com/news/ClinicalAlerts.asp).

<sup>ii</sup> Magellan Medicaid Administration, Inc. Concerta. *Drug Availability Surveillance*. August 5, 2011. Data on file.