MAGELLAN PHARMACY SOLUTIONS | MAGELLAN MEDICAID ADMINISTRATION

Kentucky UNBRIDLED SPIRIT

Pharmacy Quarterly

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The Numbers Listed Below Are For Fee-For Service Support

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

Prior Authorizations

1-800-477-3071

24 hours per day/7 days per week

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.magellanmedicaid.com/

Onsite Provider Education

For onsite education presentations, please contact Tina Hawkins at KMHawkins@magellanhealth.com, M–F 8:30 a.m.–5:00 p.m. This education is free of charge.

Expanded Maximum Duration Edit for Benzodiazepines

Given the potential for abuse and lack of evidence to support long-term use of benzodiazepines for most indications, the Pharmacy and Therapeutics Advisory Committee (PTAC) has extended the maximum duration edit to include most benzodiazepines. In order to get accurate and extensive medical information, the prescriber (or an agent from his office) should request any prior authorization for exceptions to this maximum duration edit. Therefore, as of August 15, 2013, the following edit was enacted:

Benzodiazepines, with the exception of clonazepam, will be available without requiring a prior authorization for the initial 60 days per a 365 day period. For therapy beyond 60 days, prior authorization will be required and approved if requested by the prescriber as follows:

- Approve for 6 months for the following diagnoses:
  - Anxiety
  - Anxiety disorder
  - Panic attacks/disorder
  - Agoraphobia
  - Social phobia
  - Depression
  - Chemotherapy-induced nausea & vomiting
  - Status epilepticus
- Approve for 1 month for a diagnosis of acute alcohol withdrawal
- Approve for 1 year for a diagnosis of seizures.

Diabetic Supplies Preferred Product List Changes

On **October 16, 2013**, Kentucky Medicaid will make changes to the Diabetic Supplies Preferred Product List. The following National Drug Codes (NDCs) for diabetic supply products will become **preferred**:
57599074501-Precision Xtra Beta Ketone Test Strip

The following National Drug Codes (NDCs) for diabetic supply products will become **non-preferred**:
50924001901-ACCU-CHEK COMPACT PLUS
50924047701-ACCU-CHEK ACTIVE
50924086001-ACCU-CHEK ADVANTAGE
65702010110-ACCU-CHEK AVIVA
65702048310-ACCU-CHEK NANO SMARTVIEW
53885042101-ONE TOUCH ULTRA MINI
50924037350-ACCU-CHEK CMFRT CURVE STRIP
50924038110-ACCU-CHEK CMFRT CURVE STRIP

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50924047550-ACCU-CHEK ACTIVE TEST STRIP
50924088401-ACCU-CHEK COMPACT DRUM STRIP
50924098850-ACCU-CHEK COMPACT DRUM STRIPS
65702010310-ACCU-CHEK AVIVA TEST STRIPS
65702010410-ACCU-CHEK AVIVA TEST STRIPS
65702040710-ACCU-CHEK AVIVA PLUS
65702040810-ACCU-CHEK AVIVA PLUS
65702049210-ACCU-CHEK NANO SMARTVIEW
65702049310-ACCU-CHEK SMARTVIEW NANO TEST STRIPS

Current copays (3% - Maximum $15.00) and quantity limits (QL) are still in effect. Please review the diabetic supply preferred product list at https://kentucky.magellanmedicaid.com/Downloads/providers/KY-DiabeticSupply_PreferredList-20130307.pdf.

Ketoconazole Safety

A new FDA safety communication notes that ketoconazole tablets can cause severe liver injuries, adrenal gland problems, and lead to harmful drug interactions with other medications. A contraindication has been added against use in patients with active or chronic liver disease. A boxed warning provides new recommendations for assessing and monitoring patients for liver toxicity. As a result, ketoconazole oral tablets should not be a first-line treatment for any fungal infection. Oral ketoconazole for *Candida* and dermatophyte infections is no longer indicated. Ketoconazole should be used for the treatment of endemic mycoses, only when alternative antifungal therapies are not available or tolerated. Topical formulations of ketoconazole (Nizoral®) have not been associated with these serious adverse effects.

New Warning for Products Containing Acetaminophen

On August 1, 2013, FDA issued a Drug Safety Communication alerting healthcare providers about the potential for rare but serious skin reactions associated with the use of acetaminophen. FDA will be requiring that a warning be added to the labels of prescription drug products containing acetaminophen to address this risk of serious skin reactions. FDA will also request that manufacturers add a warning about serious skin reactions to the product labels of OTC acetaminophen products.

These rare but serious skin reactions, such as Stevens - Johnson syndrome (SJS), toxic epidermal necrolysis (TEN), and acute generalized exanthematous pustulosis (AGEP), can be fatal. With the use of acetaminophen products, reddening of the skin, rash, blisters, and detachment of the upper surface of the skin can occur. These reactions may occur at any time while taking acetaminophen. Anyone who has experienced a serious skin reaction while taking acetaminophen in the past should not be given the medication again. Please be aware of this risk and consider acetaminophen, along with other drugs already known to have such an association, when assessing patients with potential drug-induced skin reactions.

Fluoroquinolone Safety

The Food and Drug Administration (FDA) is requiring the drug labels and medication guides for all fluoroquinolone antibiotics be updated to better describe the potential risk of peripheral neuropathy, which can occur at any time during treatment and can last for months to years after the drug is stopped or even be permanent. Symptoms include pain, burning, tingling, numbness, or weakness, a change in sensation to light touch, pain, or temperature, or in the sense of body position. If a patient develops symptoms of peripheral neuropathy, the fluoroquinolone should be stopped and an alternative non-fluoroquinolone antibiotic should be used, unless the benefit of continued treatment with a fluoroquinolone outweighs the risk. The risk of peripheral neuropathy occurs only with fluoroquinolones that are taken by mouth or by injection. Approved fluoroquinolone drugs include levofloxacin (Levaquin®), ciprofloxacin (Cipro™), moxifloxacin (Avelox®), norfloxacin (Noroxin®), gemifloxacin (Factive®), and ofloxacin. Topical fluoroquinolones (e.g., otic or ophthalmic formulations) are not known to be associated with this risk. In addition, a recent large cohort study published in *Clinical Infectious Diseases* reported hyper- and hypo- glycemia with fluoroquinolone use in patients with diabetes. Although the risks are low, clinicians should be cautious when treating diabetic patients with fluoroquinolones.

[1] Magellan Medicaid Administration, Inc. Clinical Alert. 2013. Available at: www.MagellanMedicaid.com/news/ClinicalAlerts.asp.