

# SmartPA Criteria Proposal

<b>Drug/Drug Class:</b>	Extended Supply Fiscal Edit
<b>First Implementation Date:</b>	October 21, 2021
<b>Proposed Date:</b>	December 16, 2021
<b>Prepared for:</b>	MO HealthNet
<b>Prepared by:</b>	MO HealthNet/Conduent
<b>Criteria Status:</b>	<input type="checkbox"/> Existing Criteria <input checked="" type="checkbox"/> Revision of Existing Criteria <input type="checkbox"/> New Criteria

## Executive Summary

**Purpose:** To control expenditures on select therapies by requiring an extended supply after participants are established on therapy

**Why Issue Selected:** MO HealthNet pays a dispensing fee to the pharmacy for every prescription dispensed. For certain agents that are low cost and rarely require a change in therapy once established, it is fiscally advisable for MO HealthNet to pay fewer dispensing fees by mandating a larger supply dispensed per prescription once a participant is established on therapy. At this time, MO HealthNet will only mandate extended supplies on select agents.

**Type of Criteria:**
 Increased risk of ADE
  Preferred Drug List  
 Appropriate Indications
  Fiscal Edit

**Data Sources:**
 Only Administrative Databases
  Databases + Prescriber-Supplied

## Setting & Population

- Drug class for review: select edited agents (see Appendix A)
- Age range: All appropriate MO HealthNet participants

## Approval Criteria

- Participant currently resides in a nursing facility **OR**
- Claim is for  $\geq 84$  day supply **OR**
- Claim history demonstrates  $< 84$  days of therapy with prescribed agent in the past 6 months

## Denial Criteria

- Therapy will be denied if all approval criteria are not met

## Required Documentation

Laboratory Results:   
MedWatch Form:

Progress Notes:   
Other:

## Disposition of Edit

Denial: Exception code "1018" (90 Day Supply Required)  
Rule Type: CE

## Default Approval Period

1 year

## Appendix A – Select edited agents

GENERIC NAME	COMMON TRADE NAME
<b>ANALGESICS</b>	
ACETAMINOPHEN 325 MG TABLET	TYLENOL
ACETAMINOPHEN 500 MG TABLET	TYLENOL
ASPIRIN 81 MG TAB CHEW	BAYER ASPIRIN
ASPIRIN 81 MG TABLET DR	ECOTRIN
ASPIRIN 325 MG TABLET DR	ECOTRIN
ASPIRIN 325 MG TABLET	BAYER ASPIRIN
<b>ANTIHISTAMINES</b>	
CETIRIZINE HCL 1 MG/ML SOLUTION	ZYRTEC
CETIRIZINE HCL 5 MG/5 ML SOLUTION	ZYRTEC
CETIRIZINE HCL 5 MG TAB CHEW	ZYRTEC
CETIRIZINE HCL 5 MG TABLET	ZYRTEC
CETIRIZINE HCL 10 MG CAPSULE	ZYRTEC
CETIRIZINE HCL 10 MG TAB RAPDIS	ZYRTEC
CETIRIZINE HCL 10 MG TAB CHEW	ZYRTEC
CETIRIZINE HCL 10 MG TABLET	ZYRTEC
FEXOFENADINE HCL 30 MG TAB RAPDIS	ALLEGRA
FEXOFENADINE HCL 30 MG/5 ML SUSP	ALLEGRA
FEXOFENADINE HCL 60 MG TABLET	ALLEGRA
FEXOFENADINE HCL 180 MG TABLET	ALLEGRA
LORATADINE 5 MG TAB RAPDIS	CLARITIN
LORATADINE 5 MG TAB CHEW	CLARITIN
LORATADINE 5 MG/5 ML SYRUP	CLARITIN
LORATADINE 10 MG CAPSULE	CLARITIN
LORATADINE 10 MG TAB RAPDIS	CLARITIN
LORATADINE 10 MG TABLET	CLARITIN
<b>EYE &amp; EAR PREPARATIONS</b>	
POLYVINYL ALCOHOL 1.4% DROPS OPHTHALMIC	AKWA TEARS
POLYVINYL ALCOHOL/POVIDONE 0.5%-0.6% DROPS OPHTH	ARTIFICIAL TEARS
<b>IRON REPLACEMENTS</b>	
FERROUS SULFATE 15 MG/ML DROPS	FER-IN-SOL
FERROUS SULFATE 220 (44)/5 ELIXIR	FERROUS SULFATE
FERROUS SULFATE 220 (44)/5 SOLUTION	FERROUS SULFATE
FERROUS SULFATE 325(65) MG TABLET DR	FERROUS SULFATE
FERROUS SULFATE 325(65) MG TABLET	FERROUS SULFATE
IRON POLYSACCHARIDES COMPLEX 150 MG CAPSULE	NIFEREX-150

SmartPA Fiscal Proposal Form

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<b>LAXATIVES, CATHARTICS, BULK PRODUCERS, STOOL SOFTENERS</b>	
BISACODYL 5 MG TABLET DR	DULCOLAX
DOCUSATE CALCIUM 240 MG CAPSULE	SURFAK
DOCUSATE SODIUM 100 MG CAPSULE	COLACE
DOCUSATE SODIUM 150 MG/15 ML LIQUID	DIOCTO
POLYETHYLENE GLYCOL 3350 POWDER	MIRALAX
<b>OSTEOPOROSIS AGENTS</b>	
CALCIUM CARBONATE 1.25 G TABLET	OS-CAL 500
CALCIUM CARBONATE 500 MG/5 ML SUSP	CALCIUM CARBONATE
CALCIUM CARBONATE/VITAMIN D3 250 MG-125 TABLET	OS-CAL 250 + D
CALCIUM CARBONATE/VITAMIN D3 500 MG-200 TABLET	OS-CAL 500 + D
CALCIUM CARBONATE/VITAMIN D3 600 MG-400 TABLET	CALTRATE
CALCIUM CITRATE 200 MG TABLET	CITRACAL
CALCIUM CITRATE/VITAMIN D3 315 MG-250 TABLET	CITRACAL + D
<b>VITAMIN/MINERAL</b>	
<b>A/D3/E/TOCOPHERSOLAN/VIT K1 2000-1000 CAPSULE</b>	<b>DEKAS ESSENTIAL</b>
<b>CHOLECALCIFEROL 400/DROP DROPS</b>	<b>BABY D DROPS</b>
CHOLECALCIFEROL 400/ML DROPS	D-VI-SOL
<b>MAGNESIUM OXIDE 400 MG TABLET</b>	<b>MAG-OX</b>
<b>MELATONIN 1 MG TABLET</b>	<b>MELATONIN</b>
<b>MELATONIN 3 MG TABLET</b>	<b>MELATONIN</b>
<b>MELATONIN 5 MG TABLET</b>	<b>MELATONIN</b>
<b>MULTIVIT WITH MIN #53/FA/K/Q10 200-1000 CAPSULE</b>	<b>DEKAS PLUS</b>
<b>MULTIVIT WITH MN #56/FA/K/Q10 200-1000 TAB CHEW</b>	<b>DEKAS PLUS</b>
MULTIVITAMINS TAB CHEW	POLY-VI-SOL
MULTIVITAMINS W-IRON TAB CHEW	CENTRUM KIDS
MULTIVITS & MINS/COENZYME Q10 2MG/ML DROPS SUSP	AQUADEKS
MULTIVITS W-FE, OTHER MIN TAB CHEW	CENTRUM JR
<b>MULTIVITS&amp;MINS/FA/COENZYME Q10 100MCG-5MG TAB CHEW</b>	<b>AQUADEKS</b>
PED MULTIVIT #22/VIT D3/VIT K 1500-1000 TAB CHEW	MVW COMPLETE FORMULATION
PED MULTIVIT #22/VIT D3/VIT K 3000-1000 TAB CHEW	MVW COMPLETE FORMULATION
PED MULTIVIT #61/D3/K 1500-800 CAPSULE	MVW COMPLETE FORMULATION
PED MULTIVIT #61/D3/VITK 5000-800 CAPSULE	MVW COMPLETE FORMULATION
PED MULTIVIT #61/VIT D3/VIT K 3000-800 CAPSULE	MVW COMPLETE FORMULATION
PED MULTIVIT #62/VIT D3/VIT K 1000-700 CAPSULE	CHOICEFUL VITAMINS
PED MULTIVIT #64/D3/K 800-600 TAB CHEW	CHOICEFUL VITAMINS
PED MULTIVIT #128/VIT K 500 MCG/ML LIQUID	DEKAS PLUS
PED MULTIVIT #189/FERROUS SULFATE 11MG/ML DROPS	POLY-VI-SOL WITH IRON
PED MULTIVIT #192 250-50/ML DROPS	POLY-VI-SOL
<b>VIT A/D3/TOCOPHERSOLAN/VIT K 2000-2000 LIQUID</b>	<b>DEKAS ESSENTIAL</b>