## **Proposed Changes - Medicaid Pharmacy Preferred Drug List**

# Comment Period Public Question Responses for questions received through 03/22/2018

PROPOSED REGULATION CITATION		QUESTIONS	RESPONSES
1.	Preferred Drug List 7 AAC 160.900(d)	Where can I find a copy of the current Preferred Drug List (PDL)?	The current PDL may be found on the following website: <a href="http://dhss.alaska.gov/dhcs/Pages/pdl/default.aspx">http://dhss.alaska.gov/dhcs/Pages/pdl/default.aspx</a> Information about the Preferred Drug List program may be found at the following website: <a href="http://dhss.alaska.gov/dhcs/Pages/pdl/about_pdl.aspx">http://dhss.alaska.gov/dhcs/Pages/pdl/about_pdl.aspx</a>
2.	Preferred Drug List 7 AAC 160.900(d)	How can I tell whether the status of a drug changed from the current PDL to the proposed PDL?	The proposed PDL document contains a column titled "STATUS CHANGE FROM PREVIOUS PDL".  If the contents of this field for a specific drug lists "Change", then the status on the proposed PDL is different than the current PDL.  If the contents of this field for a specific drug lists "NoChange", then the status on the proposed PDL is the same as the current PDL.
3.	Preferred Drug List 7 AAC 160.900(d)	If a medication will not be included as a preferred drug on the updated preferred drug list (PDL), based on the current proposed changes, what is the clinical criteria and procedure for a physician to prescribe it for a Medicaid patient?	In accordance with 7 AAC 120.112 and 7 AAC 120.140, Alaska Medicaid may pay for a brand-name covered outpatient drug that is listed as non-preferred on the PDL if the prescriber writes on the prescription "brand-name medically necessary". Documentation of medical necessity must be retained in the medical record and made available upon request.  Other prior authorization may be applied under 7 AAC 120.130.

Public Review Draft Date: 01/17/2018 Posted: 03/23/2018 Page 1

## **Proposed Changes - Medicaid Pharmacy Preferred Drug List**

# Comment Period Public Question Responses for questions received through 03/22/2018

PROPOSED REGULATION CITATION		QUESTIONS	RESPONSES
4.	Preferred Drug List 7 AAC 160.900(d)	If a medication is not listed on the PDL, is the drug not on the Alaska Medicaid formulary?	The preferred drug list (PDL) represents just a small subset of all of the available drug classes that qualify as covered outpatient drugs. The Alaska Medicaid Pharmacy & Therapeutics Committee reviews this subset of drug classes and makes recommendations to the Department for the development of the PDL to guide appropriate utilization of FDA-approved pharmaceutical drug products based on safety, clinical efficacy, and cost.  All drugs on the PDL must qualify as Covered Outpatient Drugs as defined in 7 AAC 120.110(b). Alaska Medicaid does not maintain a separate formulary (i.e., list of all approved drugs) but uses the definition in 7 AAC 120.110(b) to identify whether a drug product qualifies for coverage within Alaska Medicaid.
5.	Partial fill claims 7 AAC 145.410(7)	What is an NCPDP compliant partial fill claim? NCPDP – National Council for Prescription Drug Programs	Pharmacy claims are required to be submitted in an NCPDP D.0 compliant format. In an NCPDP compliant transaction, partial fills are identified by the pharmacy provider in the 343-HD "Dispensing Status" field of the claim segment of the transaction.  Specifications related to submitting a partial fill may be found in the Alaska Medicaid D.0 Payer Specification reference which may be found at the following link under the <i>Documents</i> section: <a href="http://manuals.medicaidalaska.com/docs/pharmacy.htm">http://manuals.medicaidalaska.com/docs/pharmacy.htm</a>

## **Proposed Changes - Medicaid Pharmacy Preferred Drug List**

# Comment Period Public Question Responses for questions received through 03/22/2018

PROPOSED REGULATION CITATION		QUESTIONS	RESPONSES
6.	Partial fill claims 7 AAC 145.410(7)	Will the definition of partial fills, 7 AAC 145.410(7), apply to prescriptions, if the prescription order from the provider was to "place in medset"?	Alaska Medicaid supports submittal of NCPDP compliant partial fill claims. Providers are not required to submit partial fill claim transactions when the pharmacy dispenses a quantity less than the full quantity authorized, provided the submitted quantity dispensed does not exceed the actual quantity dispensed.  The frequency of mediset or other dispense fee reimbursement defined under 7 AAC 145.410(a)(1)-(5) is not modified with this proposed regulation.