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Newsletter

Volume 9 No. 11 **August 1999**

TO: Providers of Pharmaceutical Services

SUBJECT: **PDUR Monitoring of Pharmaceutical Inhalers**

EFFECTIVE: Claims with service dates on or after November 15, 1998

PURPOSE: The purpose of this Newsletter is to notify providers of pharmaceutical services of enhancements to the State's Prospective Drug Utilization Review (PDUR) program to monitor patient utilization of orally and nasally administered pharmaceutical inhalant solutions.

BACKGROUND: The Division of Medical Assistance and Health Services (DMAHS) and the Department of Health and Senior Services (DHSS) through the State's Point-of-Sale (POS) claims processing system implemented a PDUR program designed to ensure the cost-effective delivery of quality pharmaceutical services. Currently, the program monitors duplicate and early refill claim payments, utilization of certain drugs based on State policy, sex and age categories, as well as provides information to assist pharmacists with their patient consultation responsibilities.

The State is enhancing its PDUR program to monitor patient utilization of orally and nasally-administered inhalant solutions. These enhancements shall apply to fee-for-service (FFS) pharmacy benefit programs administered by DMAHS, including Medicaid, General Assistance (GA), and NJ KidCare programs.

These same enhancements apply to programs administered by DHSS, including the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program, as well as the Cystic Fibrosis (CF) and AIDS Drug Distribution Programs (ADDP), where applicable.

ACTION: For claims with service dates on or after November 15, 1998, Edit 536, "Daily Quantity Possibly Exceeded" is activated to apply to orally and

nasally-administered inhalant solutions. For your use, please find attached a listing of those drug products affected, including established Maximum Days Supply standards. Such standards may be found in the far right-hand column of the table reported on the attachment. These standards shall apply to beneficiaries twelve (12) years of age or older and are based on current product literature. These standards shall apply to both brand and generic formulations for each product listed on the attachment. Also, these claims were subject to the 75 percent "early refill rule" which currently applies to claim payments.

For claims with service dates on or after November 15, 1998, **Error Code 536** posts to POS claims as an Explanation of Benefits (EOB) message or **"soft edit"** notifying pharmacists of "**Possible Over-utilization Based on Days Supply."** Pharmacists will initially receive payments for these claims. In the future, the disposition of Error Code 536, as well as the PDUR standards reported on the attachment to this Newsletter, may change and could result in denied payments for these claims. Pharmacists will be notified of potential changes by DMAHS/DHSS Newsletter.

It is important to note that the Error Code "536" is returned to pharmacists, when applicable, through the State's POS system. The POS message which corresponds with this Error Code will be reported on the pharmacy's Remittance Advice (RA) statement. Pharmacies may choose to consult with their software vendor to translate this Error Code into an Error Code message for their convenience.

If you have any questions regarding this Newsletter, please contact the Chief, Pharmaceutical Consultant, DMAHS, at (609) 588-2724, or the Unisys Pharmacy Consultant at (609) 588-6039.

If you have any questions concerning PAAD, CF or ADDP, please contact the PAAD Pharmacy Consultant at (609) 588-7034.

Attachments

RETAIN THIS NEWSLETTER NUMERICALLY BEHIND THE NEWSLETTER TAB (BLUE TAB MARKED "5")