

MARYLAND MEDICAID PHARMACY PROGRAM

No.65 Tuesday April 7, 2009



In an effort to give timely notice to the pharmacy community concerning important pharmacy topics, the Department of Health and Mental Hygiene's (DHMH) **Maryland Pharmacy Program** (MPP) has developed the **Maryland Pharmacy Program Advisory**. To expedite information timely to the pharmacy and prescriber communities, an email network has been established which incorporates the email lists of the Maryland Pharmacists Association, EPIC, CARE, Long Term Care Consultants, headquarters of all chain drugstores and prescriber associations and organizations. It is our hope that the information is disseminated to all interested parties. If you have not received this email through any of the previously noted parties or via DHMH, please contact the MPP representative at 410-767-1455.

-Reminder-

Maryland Medicaid May Cover up to a 30-day Emergency Supply of Atypical Antipsychotics

When the prescriber is not available to obtain Prior Authorization (PA) for an atypical antipsychotic medication, including those subject to Step Therapy (currently Zyprexa[®] requires Step Therapy), a one-time only authorization can be obtained to dispense up to a 30-day emergency supply. This policy was previously communicated to you in Advisory #58 on September 26, 2008 and it is still in place. The pharmacist should use his or her professional judgment in determining whether the prescription is needed on an emergency basis, taking into account the patient's diagnostic and drug history, information about what medications the patient has on hand, and possible recent hospitalization, as well as any mobility, transportation or communication issues that make returning to the pharmacy difficult or expensive.

In order to get a paid claim for an emergency supply of any atypical antipsychotic requiring a PA, the pharmacy must call 800-932-3918 for authorization. During the 30-day window, the pharmacist must notify the prescriber of the need to obtain a PA before the prescription can be filled a second time and make a note for his or her records of the date, time and person they contacted at the prescriber's office. This information should be made available upon request by the Maryland Medicaid Pharmacy Program staff.