



Medical Assistance
HEALTH AND HUMAN SERVICES

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**North Carolina
Medicaid Pharmacy
Newsletter**

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Change to Early Refill Threshold for Opioids and Benzodiazepines

The N.C. Division of Medical Assistance (DMA) is increasing the Early Refill Threshold from 75% to 85% for Opioids and Benzodiazepines on May 1, 2017. The system will be changed to alert pharmacies when a patient’s medication history indicates greater than 15% of the previously dispensed days’ supply remains.

Pharmacists are reminded that only the “05 – Therapy dosage change” is an approved reason to override an early fill alert for any controlled substances. This override reason should only be used when a therapy change has occurred. Neither the vacation supply override nor lost prescription override will override an early refill for a controlled substance.

This change is being implemented as part of an ongoing effort to help the State of North Carolina combat the current opioid epidemic.

New to Market Drug Additions to the NC Medicaid Preferred Drug List

Effective April 1, 2017, new to market drugs in the N.C. Medicaid Preferred Drug List (PDL) classes will be updated quarterly on the [posted PDL](#) and listed as “NR” (not reviewed). This is to clarify PDL placement for new to market drugs. Per policy, new to market drugs default to non-preferred status until they can be reviewed by the PDL Review Panel during their annual meeting in the fall.

NC Medicaid and NC Health Choice PDL Update: Addition of New PDL Drug Class

Effective May 1, 2017, the N.C. Medicaid and N.C. Health Choice PDL will be updated to include a new PDL drug class (Neuropathic Pain). This new PDL drug class will also include drugs that were previously listed in Topical Anesthetics. There are no changes in the preferred and non-preferred status for the drugs in this new PDL drug class. This update is intended to better identify the preferred and non-preferred drug options for the treatment of neuropathic pain.

NEUROPATHIC PAIN	
Preferred	Non-Preferred
duloxetine capsule (generic for Cymbalta®) gabapentin capsule / solution (generic for Neurontin®)	Clinical criteria apply to Lidoderm® Cymbalta® Capsule Gralise® Starter Pack / Tablet Horizant® Irenka® Lyrica® Capsule / Solution Neurontin® Capsule / Solution / Tablet Savella® Tablet / Titration Pack

	Dermacin RX® PHN PAK lidocaine patch (generic for Lidoderm®) Lidoderm® Patch Qutenza® Kit
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Behavioral Health Medication Edits

Effective May 1, 2017, new pharmacy point of sale (POS) clinical edits for behavioral health medications will go into effect. These edits are specifically related to dosage and quantity prescribed which exceeds the Food and Drug Administration (FDA) approved maximum dosage and dosage schedule and in class therapeutic duplication. There will be a 60-90 day grace period to allow pharmacists and providers a window of opportunity to identify and address any therapeutic issues that may be impacted by these new POS behavioral health clinical edits. Pharmacists are encouraged to contact prescribers if they identify any recipients that may be affected. The edit list can be found at the links below.

[Clinical Utilization Behavioral Health Edits \(Adult\)-Pending Implementation](#)

[Clinical Utilization Behavioral Health Edits \(Pediatric\)-Pending Implementation](#)

Generic Dispensing Rate Adjustments

Generic dispensing rate adjustments go into effect on May 1, 2017. These rates are based on the Generic Dispensing Rate Percentage Report for first quarter 2017. The report can be found at:

https://ncdma.s3.amazonaws.com/s3fs-public/Pharmacy_Generic_Dispensing_Rate.pdf.

72-hour Emergency Supply Available for Pharmacy Prior Authorization Drugs

Pharmacy providers are encouraged to use the 72-hour emergency supply allowed for drugs requiring prior authorization. ***Federal law requires that this emergency supply be available to Medicaid recipients for drugs requiring prior authorization*** (Social Security Act, Section 1927, 42 U.S.C. 1396r-8(d)(5)(B)). Use of this emergency supply will ensure access to medically necessary medications.

The system will bypass the prior authorization requirement if an emergency supply is indicated. Use a "3" in the Level of Service field (418-DI) to indicate that the transaction is an emergency fill.

Note: Copayments will apply and only the drug cost will be reimbursed. There is no limit to the number of times the emergency supply can be used.

Electronic Cutoff Schedule

April 28, 2017
May 5, 2017
May 12, 2017
May 19, 2017
May 26, 2017

Checkwrite Schedule

May 2, 2017
May 9, 2017
May 16, 2017
May 23, 2017
May 31, 2017

POS claims must be transmitted and completed by 11:59 p.m. on the day of the electronic cutoff date to be included in the next checkwrite.

The 2017 DMA checkwrite schedule is posted under **Quick Links** on the [NCTracks Provider Portal home page](#).

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