



An Information Service of the Division of Health Benefits

**North Carolina
Medicaid Pharmacy
Newsletter**

Number 289

September 2018

In This Issue...

[Hurricane Florence Response and Recovery Website for Providers and Beneficiaries](#)

[DMA is Now DHB](#)

[New Check for Opioid Drug Interaction](#)

[Opioid Dependence Dose Edit](#)

[Potential Market Shortages of Quillivant XR and QuilliChew ER](#)

[Preferred Drug List Review Panel RESCHEDULED due to Hurricane Florence](#)

[2017-2018 NC Medicaid and Health Choice Preferred Drug List](#)

[72-hour Emergency Supply Available for Pharmacy Prior Authorization Drugs](#)

[Checkwrite Schedule for October 2018](#)

Published by GDIT, fiscal agent for the North Carolina Medicaid Program

800-688-6696

Hurricane Florence Response and Recovery Website for Providers and Beneficiaries

The North Carolina Division of Health and Human Services (DHHS) has created the website listed below with specific information related to the NC Medicaid disaster response/recovery efforts to assist our beneficiaries and providers.

<https://medicaid.ncdhhs.gov/nc-medicaid-hurricane-florence-response-recovery>

DMA is Now DHB

Effective Aug. 1, 2018, the Division of Medical Assistance (DMA) and Division of Health Benefits (DHB) combined into one division, DHB. NC Medicaid and NC Health Choice, remain the same, and are collectively referred to as “NC Medicaid.”

The NCTracks and the NC Medicaid websites will be updating content, templates and other information during the next few months. Until then, please use both terms when using the search function on the NC Medicaid or on the NCTracks websites.

New Check for Opioid Drug Interaction

On Oct. 1, 2018, NC Medicaid will introduce a new edit into NCTracks pharmacy claim processing to provide a further check for opioid and benzodiazepine interactions. The new edit will identify a drug interaction for an opioid analgesic or benzodiazepine when it is determined that there is overlapping use of a different opioid or benzodiazepine within the previous 68 days.

Pharmacy claims failing the new check will post edit 59290 - SUPPLEMENTAL DRUG-2-DRUG INTERACTION. Claims failing the edit will deny. In the case of extenuating circumstances, the edit can be overridden with a submission clarification code of ‘10’.

For additional information on the NC Medicaid commitment to curtail opioid abuse, refer to the “Opioid Criteria Educational Materials” on the [Pharmacy Services webpage](#) of the NCTracks provider portal.

Opioid Dependence Dose Edit

On Oct. 1, 2018, a maximum daily dose edit for opioid dependence treatment medications will be implemented. A pharmacist may override the edit at point-of-sale after consulting the prescriber to determine the clinical need for the higher dose. Documentation is to be made in the NCPDP pharmacy system or on the original prescription. Bypassing the edit requires an **override (submission clarification code 10)** that should be used by the pharmacist when the prescriber provides **clinical rationale for the therapy issue** alerted by the edit. A prescriber may proactively document the clinical rationale with issuance of

the prescription. The concise documentation may provide information about the patient's situation, history, therapy goals and outcome. Documentation solely of a diagnosis code is not legitimate justification. The adequacy of proactive documentation is the professional judgement of the pharmacist. Questions can be directed to the GDIT Call Center at 866-246-8505.

Medication	Maximum Dose Edit	Override available
Suboxone and buprenorphine/naloxone	16mg/day	up to 24mg/day
Zubsolv	11.4mg/day	up to 17.1mg/day
Bunavail	8.4mg/day	up to 12.6mg/day
Buprenorphine single ingredient product	16mg/day	up to 24mg/day

Potential Market Shortages of Quillivant XR and QuilliChew ER

NC Medicaid is aware of and is closely monitoring another reported market shortage of Quillivant XR and QuilliChew. Per the [American Society of Health System Pharmacists \(ASHP\) drug shortages website](#), Pfizer reports that the shortage is due to manufacturing delays.

Currently, Quillivant XR and QuilliChew ER are preferred options in the ADHD drug class on the NC Medicaid and NC Health Choice Preferred Drug List (PDL). Providers with beneficiaries affected by this shortage can contact the GDIT Call Center at 1-866-246-8505 to request coverage of a non-preferred medication if no other preferred medications are indicated for the beneficiary.

Preferred Drug List Review Panel RESCHEDULED due to Hurricane Florence

The NC Medicaid and Health Choice Preferred Drug List (PDL) Review Panel meeting has been rescheduled due to Hurricane Florence for **Thursday, Oct. 11, 2018, from 12:30 – 4:30 p.m.** at The State Library Building located at 109 E. Jones St. Raleigh, N.C. 27601.

2017-2018 NC Medicaid and Health Choice Preferred Drug List

Preferred Brands with Non-Preferred Generic Alternatives Current as of October 1, 2018

Preferred Brand	Non-Preferred Generic
Actiq Lozenge	fentanyl citrate lozenge
Adcirca	tadalafil
Adderall XR	amphetamine Salt Combo ER
Aggrenox	aspirin-dipyridamole ER

Preferred Brand	Non-Preferred Generic
Alphagan P	brimonidine P
Androgel	testosterone
Astepro nasal spray	azelastine nasal spray
Benzaclin Pump	clindamycin/benzoyl peroxide with pump
Butrans	buprenorphine
Catapres-TTS	clonidine patches
Cipro Suspension	ciprofloxacin suspension
Clobex Shampoo	clobetasol shampoo
Copaxone	glatiramer
Diastat Accudial/Pedi System	diazepam rectal/system
Differin	adapalene
Diovan	valsartan
Dovonex cream	calcipotriene cream
Emend	aprepitant
Epiduo gel	adapalene/benzoyl peroxide gel
Epivir HBV	lamivudine
Evista	raloxifene
Exelon Patch	rivastigmine patch
Exforge	amlodipine / valsartan
Exforge-HCT	amlodipine / valsartan / HCT
Fazaclo ODT	clozapine ODT
Focalin / Focalin XR	dexmethylphenidate
Gabitril 2mg, 4mg, 12mg, and 16mg	tiagabine
Glyset	miglitol
Hepsera 10 mg	adefovir
Istalol drops	timolol drops
Kadian ER	morphine sulfate er
Kapvay	clonidine ER
Kitabis Pak	tobramycin
Lialda	mesalamine
Lovenox vial	enoxaparin vial
Makena Vial	hydroxyprogesterone vial
Methylin Solution	methylphenidate solution
MetroCream	metronidazole cream
MetroLotion	metronidazole lotion
Metrogel Topical gel/pump	metronidazole gel topical
Natroba	spinosad
Nuvigil	armodafinil
Orapred ODT	prednisolone ODT
Oxycontin	oxycodone ER
Pataday	olopatadine
Patanase	olopatadine

Preferred Brand	Non-Preferred Generic
Provigil	modafinil
Pulmicort Respules	budesonide respules
Renvela powder pkt	sevelamer powder pkt
Retin-A Cream/Gel	tretinoin cream/gel
Rythmol SR	propafenone SR
Sabril Powder Pack	vigabatin powder pack
Suboxone Film	buprenorphine/naloxone film
Suprax Susp	cefixime Susp
Symbyax	olanzepine / fluoxetine
Tamiflu	oseltamivir
Tegretol Tab/ Susp /XR	carbamazepine Tab/ Susp / XR
TobraDex Drops	tobramycin / dexamethasone drops
Transderm-Scop	scopolamine
Vagifem	estradiol
Vigamox	moxifloxacin
Voltaren Gel	diclofenac gel
Zetia	ezetimibe
Zovirax ointment	acyclovir ointment

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 approval. **Federal law requires that this emergency supply be available to Medicaid beneficiaries for drugs requiring prior approval** (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 approval 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

September 28, 2018
 October 5, 2018
 October 12, 2018
 October 19, 2018
 October 26, 2018

Checkwrite Schedule

October 2, 2018
 October 10, 2018
 October 16, 2018
 October 23, 2018
 October 30, 2018

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 2018 and 2019 checkwrite schedules for both NC Medicaid and DMH/DPH/ORH can be found under the Quick Links on the right side of the [NCTracks Provider Portal](#) home page.

John C. Stancil, Jr., R.Ph.
Director, Pharmacy and DMEPOS Programs
Division of Health Benefits
N.C. Department of Health and Human Services

Rick Paderick, R.Ph.
Pharmacy Director
NCTracks
GDIT

Sandra Terrell, MS, RN
Director of Clinical
Division of Health Benefits
N.C. Department of Health and Human Services

Lori Landman
Deputy Executive Account Director
NCTracks
GDIT

Dave Richard
Deputy Secretary for NC Medicaid
Division of Health Benefits
N.C. Department of Health and Human Services

Paul Guthery
Executive Account Director
NCTracks
GDIT

Nancy Henley, MD
Chief Medical Officer
Division of Health Benefits
N.C. Department of Health and Human Services