

FAQ Regarding the Fifteen Day Initial Fill Requirement

- a. Why is the State implementing the fifteen (15) day limit on initial fills of certain medications?**
- b. Will additional medications be added to the list in the future?**
- c. Will the list of effected drugs be available to providers?**
- d. What should pharmacies do with remaining partial stock?**
- e. Will pharmacies be reimbursed for partial remaining stock that expires?**
- f. Will this result in multiple prescriptions and/or medical visits to obtain prescriptions for schedule II medications?**
- g. Is a fifteen (15) day supply sufficient for certain medications whose therapeutic affect take longer to reach?**
- h. Why are certain brand name medications preferred?**
- i. Does the limit apply to members residing in a nursing home?**
- j. Why are drugs that require prior authorization (PA) included on the list?**
- k. Will the list be reviewed for removal of drugs?**
- l. Are two prior authorization (PA) requests required for the initial fifteen (15) day supply and subsequent thirty (30) day supply if the member remains on the same medication and dose?**

- a. Why is the State implementing the fifteen (15) day limit on initial fills of certain medications?** DHS is required to implement cost containment strategies regarding the Iowa Medicaid outpatient prescription drug program. Medications selected for the initial fifteen (15) day limit are those with high side effect profiles, frequent dose adjustments, and high discontinuation rates or lack of adherence that lead to unused or discarded medications.
- b. Will additional medications be added to the list in the future?** Yes. The list may expand to include other drug categories that have high discontinuation rates or lack of adherence that lead to unused or discarded medications.
- c. Will the list of effected drugs be available to providers?** Yes. The list will be posted on the website www.iowamedicaidpdl.com under the Preferred Drugs List tab. Providers will be notified of updates to the list via an Informational Letter.
- d. What should pharmacies do with remaining partial stock?** Pharmacies will not be penalized for billing remaining supplies of medications on the subsequent refill.
- e. Will pharmacies be reimbursed for partial remaining stock that expires?** Pharmacies will not be reimbursed for medication not dispensed to an Iowa Medicaid member. The remaining partial product may be used on other Iowa Medicaid members.

- f. Will this result in multiple prescriptions and/or medical visits to obtain prescriptions for schedule II medications?** The prescriber must write out an initial fifteen (15) day prescription. If the medication is continued, subsequent prescriptions for up to a thirty-one (31) day supply may be, based on the prescriber's discretion, issued on the same visit containing written instructions indicating the earliest date on which a pharmacist may fill each prescription. This eliminates the necessity of multiple office visits.
- g. Is a fifteen (15) day supply sufficient for certain medications whose therapeutic affect take longer to reach?** The list of medications consists of those with high side effect profiles, frequent dose adjustments, and high discontinuation rates or lack of adherence. While therapeutic levels may not have been reached, often the medications are discontinued before the fifteen (15) day supply is completely utilized for one of the above reasons.
- h. Why are certain brand-name medications included in the initial fifteen (15) day supply limit and listed as preferred on the Preferred Drug List (PDL)?** State Medicaid programs participate in a federal and state supplemental rebate program with participating drug manufacturers. The overall cost determination of brand and generic drugs are based on a review of the net cost to the program, subtracting out all federal and state supplemental rebates. Because of varying rebates for brand names drugs, it is not uncommon for the net cost of a brand name drug to be less than that of its generic counterparts thus making it preferred for Medicaid programs. These medications are included because they have high discontinuation rates.
- i. Does the limit apply to members residing in a nursing home?** Yes. While Board of Pharmacy regulations provide for the process under which drugs can be returned, pursuant to the Deficit Reduction Act (DRA) of 2005 state Medicaid agencies must also require unused prescriptions paid by Medicaid be properly returned and payment credited. Although returns are required for these members, the Board of Pharmacy regulations exempt the return of controlled substances, and there are several controlled substances on the fifteen (15) day initial supply list.
- j. Why are drugs that require prior authorization (PA) included on the list?** If prior authorization criteria are met, prior authorization will be granted for an initial fifteen (15) day supply if the medication is included on the fifteen (15) day initial fill limit list. Although PA requirements may have been met, the patient's response to the medication has not been previously established which may result in drug discontinuation or dose changes.
- k. Will the list be reviewed for the removal of drugs?** The list will continue to be reviewed and amended as necessary for additions and removals to the list. The most current list will be posted to the website www.iowamedicaidpdl.com under the Preferred Drug Lists link.

- 1. Are two prior authorization (PA) requests required for the initial fifteen (15) day supply and subsequent thirty (30) day supply if the member remains on the same medication and dose?** No. PA requests may be submitted once with notation of an initial 15 day supply followed by a 30 day supply on the same PA form (at the same daily dose) for consideration. If the member meets the PA criteria, two PAs will be approved, one for the initial 15 day supply and one for a subsequent 30 day supply.