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PRESCRIPTION DRUG AMENDMENTS

2011 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Paul Ray

Senate Sponsor: _____

LONG TITLE

General Description:

This bill amends provisions related to drug utilization requirements for the state Medicaid program.

Highlighted Provisions:

This bill:

- ▶ prohibits the state Medicaid program from requiring step therapy for a drug prescribed for the treatment of pain; and
- ▶ permits a requirement for the use of a generic equivalent for a drug prescribed for the treatment of pain.

Money Appropriated in this Bill:

None

Other Special Clauses:

None

Utah Code Sections Affected:

AMENDS:

26-18-2.4, as last amended by Laws of Utah 2009, Chapter 324

Be it enacted by the Legislature of the state of Utah:

Section 1. Section **26-18-2.4** is amended to read:

26-18-2.4. Medicaid drug program -- Preferred drug list.

H.B. 381



28 (1) A Medicaid drug program developed by the department under Subsection 26-18-2.3
29 (2)(f):

30 (a) shall, notwithstanding Subsection 26-18-2.3(1)(b), be based on clinical and
31 cost-related factors which include medical necessity as determined by a provider in accordance
32 with administrative rules established by the Drug Utilization Review Board;

33 (b) may include therapeutic categories of drugs that may be exempted from the drug
34 program;

35 (c) may include placing some drugs, except the drugs described in Subsection (2), on a
36 preferred drug list to the extent determined appropriate by the department;

37 (d) notwithstanding the requirements of Part 2, Drug Utilization Review Board, shall
38 immediately implement the prior authorization requirements for a non-preferred drug that is in
39 the same therapeutic class as a drug that is:

40 (i) on the preferred drug list on the date that this act takes effect; or

41 (ii) added to the preferred drug list after this act takes effect; and

42 (e) except as prohibited by Subsections 58-17b-606(4) and (5), the prior authorization
43 requirements established under Subsections (1)(c) and (d) shall permit a health care provider or
44 the health care provider's agent to obtain a prior authorization override of the preferred drug list
45 through the department's pharmacy prior authorization review process, which shall:

46 (i) provide either telephone or fax approval or denial of the request within 24 hours of
47 the receipt of a request that is submitted during normal business hours of Monday through
48 Friday from 8 a.m. to 5 p.m.;

49 (ii) provide for the dispensing of a limited supply of a requested drug as determined
50 appropriate by the department in an emergency situation, if the request for an override is
51 received outside of the department's normal business hours; and

52 (iii) require the health care provider to provide the department with documentation of
53 the medical need for the preferred drug list override in accordance with criteria established by
54 the department in consultation with the Pharmacy and Therapeutics Committee.

55 (2) (a) For purposes of this Subsection (2), "immunosuppressive drug":

56 (i) means a drug that is used in immunosuppressive therapy to inhibit or prevent
57 activity of the immune system to aid the body in preventing the rejection of transplanted organs
58 and tissue; and

59 (ii) does not include drugs used for the treatment of autoimmune disease or diseases
60 that are most likely of autoimmune origin.

61 (b) A preferred drug list developed under the provisions of this section may not
62 include:

63 (i) a psychotropic or anti-psychotic drug; or

64 (ii) an immunosuppressive drug.

65 (c) The state Medicaid program shall reimburse for a prescription for an
66 immunosuppressive drug as written by the health care provider for a patient who has undergone
67 an organ transplant. For purposes of Subsection 58-17b-606(4), and with respect to patients
68 who have undergone an organ transplant, the prescription for a particular immunosuppressive
69 drug as written by a health care provider meets the criteria of demonstrating to the Department
70 of Health a medical necessity for dispensing the prescribed immunosuppressive drug.

71 (d) (i) Notwithstanding the requirements of Part 2, Drug Utilization Review Board, the
72 state Medicaid drug program may not require the use of step therapy for immunosuppressive
73 drugs, or drugs prescribed for the treatment of pain, without the written or oral consent of the
74 health care provider and the patient.

75 (ii) The prohibition of the use of step therapy for drugs prescribed for the treatment of
76 pain does not prohibit the program from requiring a patient to first use a generically equivalent
77 drug.

78 (3) The department shall report to the Health and Human Services Interim Committee
79 and to the Health and Human Services Appropriations Subcommittee prior to November 1,
80 [~~2010~~] 2011, regarding the savings to the Medicaid program resulting from the use of the
81 preferred drug list permitted by Subsection (1).

Legislative Review Note
as of 2-10-11 9:52 AM

Office of Legislative Research and General Counsel