# Attachment 4 Cost Savings Initiatives Update

#### **Quantity Limits**

Effective for dates of service on and after July 10, 2006, Wisconsin Medicaid and SeniorCare established quantity limits on triptans. Specific information regarding the policy can be found in update 2006-53

(http://dhfs.wisconsin.gov/medicaid/updates/2006/2006-53.htm).

Recipients are limited to the following quantities:

- Eighteen tablets every month, regardless of the drug dispensed.
- Eight syringes (four boxes) every month, regardless of the drug dispensed.
- Six nasal sprays (one box) every month, regardless of the drug dispensed.

### Policy impact (Medicaid):

	Average units per person per month		Average cost per person per month	
	Before*	After**	Before*	After**
Injections	3.22	2.41	\$398.78	\$317.82
Sprays	7.60	6.23	\$189.01	\$159.99
Pills	12.14	10.92	\$217.15	\$199.26

<sup>\*</sup>Claims from January 1- June 30, 2006

## **Dose Consolidation and Tablet Splitting**

Effective for dates of service on and after August 28, 2006, Wisconsin Medicaid and SeniorCare established a voluntary Dose Consolidation and Tablet Splitting policy. Specific information regarding the policy can be found in update 2006-72 (http://dhfs.wisconsin.gov/medicaid/updates/2006/2006-72.htm).

Dose consolidation encourages pharmacy providers to dispense one larger strength of a drug rather than two smaller strengths. Tablet splitting allows providers to halve a single higher-strength tablet to create two doses of medication. Provider participation in these strategies is voluntary, but reimbursement is available through Pharmaceutical Care (PC) if these services are provided.

## **100-Day Supply**

Effective for dates of service on and after October 23, 2006, Wisconsin Medicaid and SeniorCare will alert providers of opportunities to dispense drugs in quantities up to a 100-day supply. Providers will receive a Drug Utilization Review (DUR) alert with this information.

The Division of Health Care Financing is working to expand the list with an April 5, 2007 effective date. The new list will alert on drugs in phases so as not to create "noise" in the Prospective DUR system. A new update outlining the changes is routing and can be shared with the Board when it has been approved. Providers should routinely check the Wisconsin Medicaid website for the most current list of drugs included in the policy.

<sup>\*\*</sup>Claims from July 1 – December 31, 2006