PDL PA Query

1 Initial Claims	2 Auto PAs	3 Claims after Auto PA	4 Paid Claim w/ PA	5 Denied PAs	6 Therapy Change	7 PDL Change	8 Patient ineligible	9 Patient deceased	10 Other
26610	27237	5142	1359	4	2642	146	352	5	1350

Description of Data Elements

1) Initial Claims- The number of claims identified between 7/1/08 – 4/28/09 for HUSKY A and HUSKY B recipients that rejected with the following message returned "Non-Preferred Drug Requires PA; For one time authorized fill enter all 9's in PA Submitted Field." **Note: this allows the pharmacy to enter all '9's' and provide the client with a 'one-time free fill'.**

2) Auto PAs- The number of Prior Authorizations (PAs) generated automatically by a pharmacy submitting with all 9's in the Prior Authorization Field for HUSKY A and HUSKY B recipients between 7/1/08 – 4/28/09. **Note: this column shows the number of claims where the pharmacy did in fact enter all 9's to allow for the 'one-time free fill' and the client was able to get their medication.**

3) Claims after Auto PA- The number of claims identified between 7/1/08 – 4/28/09 for HUSKY A and HUSKY B recipients that rejected with the following message returned "One Time Bypass Fill has been Used. Contact MD to Obtain PA if Non-Preferred Drug is Required or Consult MD on switch to Preferred Alternative." **Note: this column shows the number of claims where the pharmacist tried to enter all 9's again for a free-fill, but the free-fill had already been provided to the client. The message they receive back, tells them that and that they should contact the prescriber who needs to obtain a prior authorization or change to an alternative product.**

4) Paid Claim with PA- The number of claims for HUSKY A and HUSKY B recipients that paid with a PA within 120 days after rejecting with the following message returned "One Time Bypass Fill has been Used….."

5) Denied PAs- The number of PAs for HUSKY A and HUSKY B recipients that were denied within 120 days after rejecting with the following message returned "One Time Bypass Fill has been Used….."

6) Therapy Change- The number of claims for HUSKY A and HUSKY B recipients that had a change of therapy within the same therapeutic class submitted on the original claim within 120 days after rejecting with the following message returned "One Time Bypass Fill has been Used….."

7) PDL Change- The number of claims for HUSKY A and HUSKY B recipients that had a change in PDL status to "Preferred" within 120 days after rejecting with the following message returned "One Time Bypass Fill has been Used….."

8) Patient Ineligible- The number of HUSKY A and HUSKY B recipients that became ineligible after the initial Auto PA was generated.

9) Patient Deceased- The number of HUSKY A and HUSKY B recipients that died after the initial Auto PA was generated.

10) Other- The number of claims for HUSKY A and HUSKY B recipients identified between 7/1/08 – 4/28/09 that rejected with the following message returned "One Time Bypass Fill has been Used……" that could not be classified in data elements 4 – 9.

Further Analysis of Claims Listed Under "Other"

Number of Claims Reviewed from 'Other' above (1 claim selected from each therapeutic class with claims listed)	**Number of Claims that Received Subsequent Paid Claim:** 8 --Therapy Change to different Therapeutic Class 4 --PDL Change after 120 days 2 --PA approved but paid claim either reversed or filled after 120 days 1 --No further claim received until after 120 days and billed as copay-only	**Number of Claims that Did Not Receive Subsequent Paid Claim:** 3 – No further claim submitted
18	**15**	**3**

* education factor related to follow up can reduce issues + costs

30 days

another class of meds

– do a pre + post comparison
mh should be reviewed separately as well – but not as good pre-process data b/c not on PDL

** Proprietary and/or Confidential. Do not disseminate or copy without approval from CT Department of Social Services.**