

Quality Assurance: Drug Management Programs

Utilization Management

For certain prescription drugs, AvMed has additional requirements for coverage or limits on coverage. These requirements and limits ensure that our members get the most medically appropriate, safe and cost-effective medications. A team of clinical pharmacists developed these requirements and limits for AvMed to help us provide members with clinically appropriate medications and provide protection from harmful drug interactions. Examples of utilization management tools are described below.

- **Prior Authorization:** AvMed requires you to get prior authorization for certain medications. (You may need prior authorization for medications that are on the formulary [Preferred Medication List] or drugs that are not on the formulary **and** were approved for coverage through our exceptions process.) This means that you will need to get approval from AvMed before you fill your prescriptions. If you do not get approval, AvMed may not cover the drug.
- **Quantity Limits:** For certain drugs, AvMed limits the amount of the drug that will be covered. For example, AvMed provides 9 Imitrex tablets for a 30-day supply.
- **Step Therapy:** In some cases, AvMed requires you to first try one drug to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may require your doctor to prescribe Drug A first. If Drug A does not work for you, then we will cover Drug B.

You can find out if your drug is subject to these additional requirements or limits by looking at the formulary. If your drug does have these additional restrictions or limits, you can ask AvMed to make an exception to our coverage rules. See coverage determination below.

Drug Utilization Review

AvMed conducts drug utilization reviews for all of our members to make sure that they are getting safe and appropriate care. These reviews are especially important for members who have more than one doctor who prescribe their medications. We conduct drug utilization reviews each time you fill a prescription and on a regular basis by reviewing our records. During these reviews, we look for medication problems such as:

- Possible medication errors.
- Duplicate drugs that are unnecessary because you are taking another drug to treat the same medical condition.
- Drugs that are inappropriate because of your age or gender.
- Possible harmful interactions between drugs you are taking.
- Drug allergies.
- Drug dosage errors.

If we identify a medication problem during our drug utilization review, we will work with your doctor to correct the problem.

Medication Therapy Management

AvMed offers a Medication Therapy Management (MTM) program at no additional cost for members who have multiple medical conditions, who are taking many prescription drugs, or who have high drug costs. The goal of MTM is to address your individual medication needs and aid in providing you with quality, cost-effective medication therapy outcomes. Participation in this program is completely voluntary. By choosing to participate, you will have the opportunity to receive individualized care from a personal pharmacist.

The Medication Therapy Management program begins with a Comprehensive Medication Evaluation to discuss your current medical conditions, all medications (including non-prescription medications and vitamins and minerals) you are taking, as well as any concerns you may have regarding your current medication therapy regimen. Other services may include but are not limited to:

- Counseling and education on current and new medications
- Transitioning you to more cost-effective medications
- Monitoring and evaluating your response to medications
- Identifying current and preventing potential drug interactions
- Answering your medication questions in detail
- Coordinating with your doctor and/or other healthcare professional on your behalf

You have the option of not participating in this program by either telling your pharmacist or AvMed that you would like to disenroll from this program.

Coverage Determination

When you ask for a Part D prescription medication benefit, the first step is called requesting a coverage determination. When AvMed Health Plans makes a coverage determination, we are making a decision whether or not to pay for a Part D drug and what your share of the cost is for the drug. Coverage determinations include exceptions requests. You have the right to ask us for an “exception” if you believe you need a medication that is not on our formulary or you should get a drug at a lower cost-sharing amount or co-payment. If you request an exception, your AvMed participating physician must provide a statement to support your request. You or your appointed representative must contact us if you would like to request a coverage determination (including an exception).