

Upper Peninsula Health Plan
Policy & Procedure

Index #: 300-008


Effective: 10/1/98

Title: Pharmacy Management (NCQA Procedures or Pharmaceutical management)

Scope: Pharmacy

Revised: 3/1/01, 12/14/04, 2/17/07, 2/9/08, 11/29/12, 3/11/14, 12/9/14, 1/1/16, 8/3/18,
10/30/20, 11/7/21, 10/18/22, 10/18/23

Reviewed:

Authorized By:  Date: 10/19/2023 Title: CEO

Product Type(s): All Products Medicaid Healthy Michigan Plan
 Medicare MICHild MI Health Link

Purpose

To promote the clinically appropriate use of pharmaceuticals.

Policy

To promote and facilitate the safe and effective use of medications for the Medicaid, Healthy Michigan Plan and Children's Special Health Care Services (CSHCS) population. The Upper Peninsula Health Plan (UPHP) formulary is aligned with the Michigan Department of Health and Human Services (MDHHS) Managed Care Organization (MCO) Common Formulary. A searchable formulary is available online at www.uphp.com.

Procedure

Formulary Review

- 1) The UPHP formulary is aligned with the MDHHS MCO Common Formulary and the MDHHS single preferred drug list (PDL). For PDL drug categories coverage is determined by Fee-for-Service with recommendations by the Common Formulary Workgroup which includes Medical and Pharmacy Directors of Michigan MCOs. For non PDL drug classes the Common Workgroup determines coverage. They use up-to-date resources including clinical literature, expert opinions, clinical practice guidelines, medical associations, national commissions, peer-reviewed journals, and other relevant sources. This information is obtained in several ways: directly by UPHP, through a contracted unbiased agency, through the Pharmacy Benefit Manager (PBM) or contracted vendor(s). The Common Formulary Workgroup will evaluate new drugs and different therapeutic drug classifications in a timely manner.

- 2) The decisions of the Common Formulary Workgroup for the MCO Common Formulary will be brought to UPHP's Clinical Advisory Committee (CAC), serving the Pharmacy and Therapeutics functions for UPHP. The CAC may choose to include additional drugs or be less restrictive regarding utilization management policies for the non PDL drug categories included on the MCO Common Formulary.
- 3) The CAC membership will be defined by UPHP Policy 105-002 but will include at least one licensed registered pharmacist, and at least one licensed registered physician
- 4) Formulary review is ongoing.
 - a) Any nonformulary/noncovered drug that is being requested frequently via the prior authorization process can be requested for review at the Common Formulary Workgroup and/or UPHP's CAC.
 - b) The Common Formulary Workgroup and UPHP will review the formulary on an annual basis and as new pharmaceutical information becomes available.
- 5) The CAC will review requests for any formulary addition or change. The following information will be taken into consideration:
 - a) Effectiveness
 - b) Safety
 - c) Efficacy
 - d) Utilization
 - e) Cost
 - f) National, or international, approved treatment guidelines
 - g) Peer reviewed publications
 - h) Other sources as appropriate, such as: government agencies, medical associations, national commissions, authoritative compendia

Dissemination of Information

1. UPHP maintains pharmaceutical management information including its formulary on its website (www.uphp.com). A provider not having access to the website may request that the information be mailed or faxed to them by calling Customer Service.

Updates of the formulary and other applicable pharmacy information *are* provided to practitioners via the Provider Manual, Provider Newsletter, and targeted mailings.

Pharmaceutical Restrictions/Preferences

The health plan has the controls to define a logical sequence of therapeutic alternatives. They may be based on previous therapy or concurrent therapy. UPHP may also specify the limits of therapy allowed over time.

1. Step-therapy Protocols: Requires the use of a drug or class of drugs in relationship to present therapy
2. Therapy/Quantity/Dose limits: Limits the therapy over time, quantity over time or dose over time.

3. Drug of Preference: Drugs of preference are specified on the PDL and MCO MasterFile
4. Interchange program: UPHP does not have an interchange program.

References:

UPHP Policy 105-002: Committees

Exception to this policy may be made with the approval of the Chief Executive Officer or an authorized designee.

END OF POLICY & PROCEDURE