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Dear Prescriber,

This is a follow-up to our letters of April and May 2012 regarding changes to the MassHealth prior authorization (PA) requirements for certain second-generation antipsychotics (SGAs) that had been scheduled to take effect in June 2012.

In our May 2012 letter, we advised that, in response to questions and suggestions that were received, MassHealth was delaying the implementation of the changes announced in our April 2012 letter. Since that time, the MassHealth Pharmacy Program has continued to work in collaboration with the Massachusetts Department of Mental Health (DMH) and the DMH Psychopharmacology Experts Workgroup to advance high-quality and cost-effective care for MassHealth members. In part, this effort is stimulated by the availability of many lower-cost generic SGAs. In September 2012, the average monthly cost of a branded SGA prescription was \$564.42, compared to \$56.09 for a generic SGA.

Through this collaborative effort and based on your feedback, the MassHealth Pharmacy Program will be implementing changes to the PA requirements for certain SGAs, as described below, which reflect modifications to the changes previously announced in April 2012. These changes will be reflected in an upcoming MassHealth Drug List and will be effective for dates of service beginning **May 13, 2013**.

Policies that are not changing

- Generic SGAs including clozapine, olanzapine, quetiapine, risperidone, and ziprasidone will continue to be available without PA.
- The existing quantity limits and polypharmacy rules will continue to apply to all antipsychotics.
- Long-acting injectable medications will also continue to be available without PA (existing quantity limits apply).

Children and adolescents

At this time, there will be no changes affecting children and adolescents under the age of 18.

Adults

Effective for dates of service beginning May 13, 2013, the following PA requirements will apply to the branded SGA agents Abilify[®] (aripiprazole), Fanapt[®] (iloperidone), Invega[®] (paliperidone), Latuda[®] (lurasidone), Saphris[®] (asenapine) and Seroquel XR[®] (quetiapine extended-release).

Individual trials with **ANY two** second-generation antipsychotics (generic or brand name) will be required, with the following *exceptions*.

- For members with a diagnosis of autism spectrum disorder for whom Abilify[®] (aripiprazole) is requested, a trial with risperidone alone is sufficient.
- For members with a diagnosis of major-depressive disorder or treatment-resistant depression for whom either Abilify[®] (aripiprazole) or Seroquel XR[®] (quetiapine extended-release) is requested, a trial with two antidepressants, either alone or in combination, is sufficient. (Please note: as stated above, generic quetiapine immediate-release is available without PA).

As described in the MassHealth Drug List, MassHealth uses technical software called SmartPA[®], which is automatically invoked when the pharmacy processes a prescription for certain drugs (including SGAs) through the Pharmacy Online Processing System (POPS). This system uses historical data on prior diagnostic, clinical services, and the last two years of MassHealth-paid pharmacy claims to determine whether prior-authorization criteria are met.¹ If, through the claim-submission process, the system identifies that the above criteria for the branded SGA agents are met, then submission of a PA form will not be required. For those members for whom a branded SGA is requested, but that have not fulfilled the prerequisite trial of two previous SGAs, submission of a PA form will be required. All PA requests are reviewed by pharmacists at the MassHealth Drug Utilization Review Pharmacy Program for medical necessity. Please provide adequate information that may assist the pharmacist in making an appropriate and timely decision. All submitted PAs are reviewed and PA determinations communicated to the member and requesting prescriber within 24 hours of receipt.

We also want to reiterate that MassHealth pharmacy claims for members currently stable on any SGA will be processed automatically for the life of the member without the submission of a PA form, provided the member remains stable on that medication as determined by consistent refills. Stability for purposes of an SGA means having a MassHealth-paid claims history for 90 days of the medication in the most recent 120-day window. Any lapse in MassHealth pharmacy claims information will require submission of a PA form.

Further information on SGAs can be found in the MassHealth Drug List (see [Table 24](#) and the related Evaluation Criteria). The MassHealth Drug List and other information on SGAs (including cost and utilization data) can be found on the MassHealth Pharmacy website at www.mass.gov/masshealth/pharmacy. In addition, we want to reassure you that MassHealth Pharmacy Program will continually evaluate this class of medications and make adjustments to the criteria as needed per current evidence-based medicine.

Once again, thank you for continuing to work with us to promote high-quality care while reducing unnecessary costs.

Sincerely,

Paul L. Jeffrey, PharmD
Deputy Director
Office of Clinical Affairs
Director of Pharmacy
MassHealth

Kathy Sanders, MD
Deputy Commissioner
Clinical and Professional Services
Massachusetts Department of Mental Health

¹ Under SmartPA[®], whether the criteria are met is based on information available in the MassHealth medical-claim and pharmacy-claim databases. The MassHealth database contains member information exclusive to MassHealth and no other health plans. In cases where the patient is already a MassHealth member, prescriptions for previously filled medication(s) that were covered by MassHealth should appear in the member's claims history. In cases where a member is new to MassHealth, or has been prescribed medications in an inpatient setting, a PA form must be submitted as the medication(s) may not appear in their MassHealth claims history.