



DRUGS THAT LOST PATENT PROTECTION

September 2008		
BRAND NAME	GENERIC NAME	INDICATION
VEXOL	imexolone	corticosteroid

COMMENT: Please check your formulary and benefits to ensure that patients have the choice to pay generic copay for the drug above

HOUSE OVERRIDES H.R. 6331 VETO

The Senate and House of Representatives voted to override President Bush's veto of the H.R. 6331. The bill contains several important pharmacy provisions; namely :

- Delays implementation of the average manufacturer price (AMP) reimbursement formula in Medicaid
- Requires prompt payment of Medicare Part D claims
- Requires weekly updates of prescription drug pricing
- Delays implementation of the first round of Medicare's durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) competitive bidding program

COMMENT: Network pharmacies have

MEDICARE MOVES TO LIMIT COSTS IN DRUG PLANS

Medicare Part D introduced in 2006 to extend drug coverage to beneficiaries, Many insurers contract with Pharmacy Benefit Managers (PBMs) to administer their plans. PBMs negotiate lower drug prices with pharmacies. But some companies, under a practice allowed by Medicare, then charge a higher price to health insurers.

This approach is called "lock-in pricing" because the insurers pay the PBMs a set amount for drugs, even if that differs from what the drugs really cost at the pharmacy. Lock-in pricing can boost costs for Medicare beneficiaries because they pay a percentage of their drug costs.

This practice can quickly drive consumers into the doughnut hole where consumers must begin paying the full cost of their medicines. The doughnut hole occurs when total drug expenditures by the beneficiary and the plan reach \$2,510. Medicare drug plans start paying again once total expenditures reach \$5,726.

CUTTING COSTS Ideas from Medicare:

- Compare drug costs in different plans using the Prescription Drug Plan Finder at medicare.gov/mpdpf.
- Track your drug expenses and progress toward the 'doughnut hole'

complained that PBM payments are delayed and that pricing is not updated fast enough. Review your PBM policies to see if they require updating.

PRESCRIBER EDUCATION MOVES AHEAD

A recent report by Prescription Policy Choices offers creative and cost-effective guidance for those looking to build prescriber education programs with limited resources.

For more information click the following link to preview: [Prescriber Education Moves Ahead](#)

COMMENT: Pro Pharma has extensive experience over the last fifteen years in provider education. Our Quality Management Program™ has resulted in low single digit inflation year-after-year, and has not regressed to the mean. Contact Carol at Pro Pharma if you would like further ideas about low cost physician education to support your benefit programs.

using your explanation of benefits

COMMENT: Medicare has supplied the website above to assist members in avoiding the donut hole. Consider providing this information to your members. Pharmacists are an excellent information source to give members further ideas for savings.

JCODE x NDC BRIDGE

Every entry on the JCode Calculator™ has a field that allows for Medical Claims Payment Teams to click once to access all JCodes that pertain to that drug...

The Pro Pharma quarterly update for the JCode Calculator™ product removes the "hassle factor" from pricing and paying claims. The list now contains ASP, Part B HCPCS codes and updated AWP, WAC and complete search capability on all fields. You can also get NDC's grouped by category to project costs for treating various diseases. Pro Pharma clients report savings of over 40% over claims paid on a billed basis, and have decreased adjuster and/or examiner time and hassle. Pick your format from paper, Excel, text for legacy systems, or web based.

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to order your copy with monthly/quarterly updates.

Pro Pharma Pharmaceutical Consultants, Inc. has assisted Payers and Providers for over 22 years to Maintain Quality while Controlling Costs.

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