Ellen M. Buettner | Chief Executive Officer

J. Kevin Stitt | Governor

OHCA 2024-19

September 23, 2024

RE: SoonerSelect Cumulative Refill Too Soon Threshold for Aetna Better Health of Oklahoma

Dear Provider,

The SoonerSelect contracted entities (CEs) are required to administer medically necessary, covered services in a manner that is no more restrictive than what is required by OHCA in the SoonerCare fee-for-service program (see O.A.C. 317:55-3-10). CEs may request to implement alternative processes for administration of medically necessary, covered services under the SoonerSelect program. Requested alternatives are subject to OHCA review and approval.

Aetna Better Health of Oklahoma recently requested permission to implement changes related to pharmacy refill thresholds. This request is to *add* a 100-day duration of claims history look-back with 90% *cumulative* refill too soon threshold logic to OHCA's standing 80% refill threshold. The additional 90% threshold impacts all drug classes except transplant medications.

OHCA subject matter experts (SMEs) reviewed the proposed revisions and assessed appropriateness of the proposed practices. Complete details of the proposed changes including OHCA decisions can be found as an attachment to this letter. OHCA decisions were included in the OHCA's Medical Advisory Committee (MAC) agenda packet for the Sept. 12, 2024, meeting.

The approved changes are effective for Aetna Better Health of Oklahoma members for dates of service on or after **Oct. 1, 2024**.

If you have any questions or comments about the implementation of this request to change service provisions, please contact Aetna Better Health of Oklahoma at 844-365-4385 or online at <u>AetnaBetterHealth.com/Oklahoma</u>.

Thank you for your continued service to Oklahoma's SoonerCare and SoonerSelect members.

Sincerely,









Ellen M. Buettner | Chief Executive Officer

J. Kevin Stitt | Governor

Traylor Rains

State Medicaid Director







SoonerSelect Medical Contracted Entity (CE) Requests to Change Service Provisions

The SoonerSelect Medical Contract at Section 1.7: Covered Benefits and Section 1.8: Medical Management states that contracted entities (CEs) may not impose prior authorization guidelines/criteria or utilization management practices that are more restrictive than OHCA without OHCA prior approval.

On 1/31/2024, ABH submitted a formal request to OHCA for review and approval to change service provisions.

OHCA subject matter experts (SMEs) reviewed the requests, evaluating them in comparison to OHCA historical processes and practices, standard business practice in other markets, and available data to determine whether to approve the requests.

OHCA decisions are noted in the in the table below:

SoonerSelect Medical Requests to Change Service Provisions						
OHCA'S CURRENT PROCESSING PROTOCOL	PROPOSED MODIFICATION TO CLAIMS PROCESSING PROTCOL	REASON FOR PROPOSED MODIFICATION	ANTICIPATED IMAPACT	OHCA DECISION		
Cumulative Refill-To						
No Cumulative Refill-too-soon logic: only refill- too-soon logic (80% threshold for non-controlled substance)	This request is to add cumulative refill too soon logic (i.e., over a 100-day duration of claims history look-back with a 90% threshold) to control for potential FWA, specifically enrollee drug stockpiling effective 10/1/2024. Impacted drugs: This would apply to all drug classes except transplant meds	Reduced Potential for Stockpiling: Using only the 80% refill threshold, enrollees could fill a 30-day supply of a medication every 24 days. If the enrollee fills every 24 days for the entire year, then they will have received a 450-day supply of medication (15 fills) within a 365-day period. The purpose of the cumulative refill too soon logic is to target and prevent excessive stockpiling over the course of the year.	Active proposed Cumulative Refill- too-soon logic: 80% refill-too-soon logic PLUS 90% cumulative threshold over 100 days Medication of interest: Non- controlled substance for 30 day supply 30DS*90% = 27 day supply (how soon an enrollee may get a refill) 365 days/27 DS = 13.5 fills → 13 fills; enrollee can get a max of 13 fills over a year when this proposed Cumulative Refill- too-soon logic is active. Compare with: No Cumulative Refill-too-soon logic: only has state's refill-too- soon logic (80% threshold for non- controlled substance) Medication of interest: Non- controlled substance for 30 day supply 30DS*80% = 24 day supply (how soon an enrollee may get a refill) 365 days/24 DS = 15.2 fills → 15 fills;	Approved for dates of service on or after 10/01/2024		

SoonerSelect Medical Requests to Change Service Provisions						
OHCA'S CURRENT PROCESSING PROTOCOL	PROPOSED MODIFICATION TO CLAIMS PROCESSING PROTCOL	REASON FOR PROPOSED MODIFICATION	ANTICIPATED IMAPACT	OHCA DECISION		
			enrollee can get a max of 15 fills over a year when only state's refill-too- soon logic is active.			
			Interpretation: An enrollee can potentially receive 2 less medication fills in a 365-day period with the proposed addedon cumulative refill-too-soon logic. This is estimated to be approximately 13% (i.e., 2/15 fills) drug cost savings for the plan over the year for an enrollee filling a 30-day supply of specific non-controlled			
			substance. Additionally, the enrollee may potentially save \$8 (i.e., \$4*2 fills) per medication in drug copay over the year.			