PLAN POLICY AND PROCEDURE	
SHARP HEALTH PLAN make life better. **Title: SHP Pharmacy Management Procedure for Quantity Limits on Prescription Drugs**	**Product Line** (check all that apply)**:** ☒ All ☐ Group HMO ☐ Individual HMO ☐ PPO ☐ POS ☐ N/A
Division(s): Health Services	
Department(s): Pharmacy	
Owner (Title): Pharmacy Manager	
Relevant Regulatory/Accrediting Agencies/Citations (specify): ☐ CMS: _____ ☒ DMHC: RX-005 ☒ NCQA-HP: UM 13.B.2, UM 13.G ☐ NCQA-WHP: _____ ☐ OTHER: _____	
Approved by: (Signature of VP, Compliance Officer, or CEO)	**Approval date:** 3/9/2016

I. PURPOSE:

This Policy and Procedure establishes Sharp Health Plan's (Plan) policy and procedure for limits and quotas on prescription drugs.

II. POLICY:

It is the policy of Sharp Health Plan to maintain effective drug utilization management procedures. Such procedures include quantity limits on prescription drugs. The Plan ensures appropriate review when determining whether or not to authorize a quantity of medication that exceeds the quantity limit. It is the policy of the Plan to use and accept only prior authorization requests submitted on the Prescription Drug Prior Authorization Request Form, numbered No 61-211.

III. DEFINITIONS:

A. Quantity Limit: Drugs limited to a determined number of doses (e.g., quantity limit) based on criteria including, but not limited to, safety, potential overdose hazard, abuse potential, or approximation of usual doses per month, not to exceed the FDA

maximally approved dose.

B. MedAccess: Sharp Health Plan portal into the Pharmacy Benefits Management (PBM – MedImpact) claims adjudication system. Authorized SHP personnel access this system to view pharmacy claims status and to input approved Prior Authorizations so that qualified claims will approve at the point of sale.

C. MedResponse : Paperless electronic document retrieval system used to intake, house and process incoming documents (such as PA requests and chart notes). For example, incoming PA requests are faxed into MedResponse, where a copy of the document can be viewed during the review process.

IV. PROCEDURE:

A. Quantity Limit Guideline Development

1. The P&T Committee recommends and approves medications for formulary addition and deletion, as well as appropriate prescribing guidelines and quantity limits.

2. Quantity limit recommendations are based on the objective evaluation of the products' relative therapeutic efficacy, safety, patient outcome and cost-effectiveness. Committee approval to limit medications to a determined number of doses (e.g., quantity limit) is based on criteria including but not limited to safety, potential overdose hazard, abuse potential, or approximation of usual doses per month not to exceed the FDA maximally approved dose.

B. Requests for Quantity Limit Overrides for Prescription Drugs

1. All pharmaceuticals with limits must be reviewed for medical necessity before Quantity Limit Override is approved or denied in compliance with the Plan Formulary Management policies.

2. Requests for authorization to dispense a quantity of medication that is greater than the formulary approved quantity limit are reviewed against medical necessity criteria and other pertinent clinical and safety information as needed.

3. The Plan reviews the member's medical records and supporting documentation from the prescribing physician based on criteria including but not limited to safety, potential overdose hazard, abuse potential, or approximation of usual doses per month and/or peer reviewed journals or clinical studies of safety.

4. The Plan's Quantity Limit Override request process is conducted under the direct supervision of Health Plan licensed personnel (Pharm D, or MD) to ensure timely and appropriate clinical review.

5. Any request for a Quantity Limit Override request is reviewed following the SHP Pharmacy Management Procedure for Pharmacy Exceptions for Prescription Drugs (HS-RX-103).

V. POLICY COMPLIANCE:

A. Written documentation, MedResponse referral entries, and MedImpact pharmacy database will be audited quarterly to evaluate consistency and compliance to policy.

B. Audit results will be reported on activities reports.

VI. REFERENCES:

A. SHP Pharmacy Management Procedure for Pharmacy Exceptions for Prescription Drugs (HS-RX-103)

VII. REVISION HISTORY:

Date	Modification (Reviewed and/or Revised)
06/08/2011	Original Document
03/14/2012	Approved by P&T Committee
03/13/2013	Approved by P&T Committee
03/19/2014	Approved by P&T Committee
03/18/2015	Approved by P&T Committee
03/9/2016	Approved by P&T Committee