

**Beneficiary Advisory Panel Handout
Uniform Formulary Decisions
25 Apr 2013**

PURPOSE: The purpose of this handout is to provide BAP Committee members with a reference document for the relative clinical effectiveness presentations for each Uniform Formulary (UF) Class review.

Pain Medication: Topical

Formulary Agents:

Lidoderm (lidocaine patch) Voltaren (diclofenac gel)
 Voltaren (diclofenac gel)

Nonformulary:

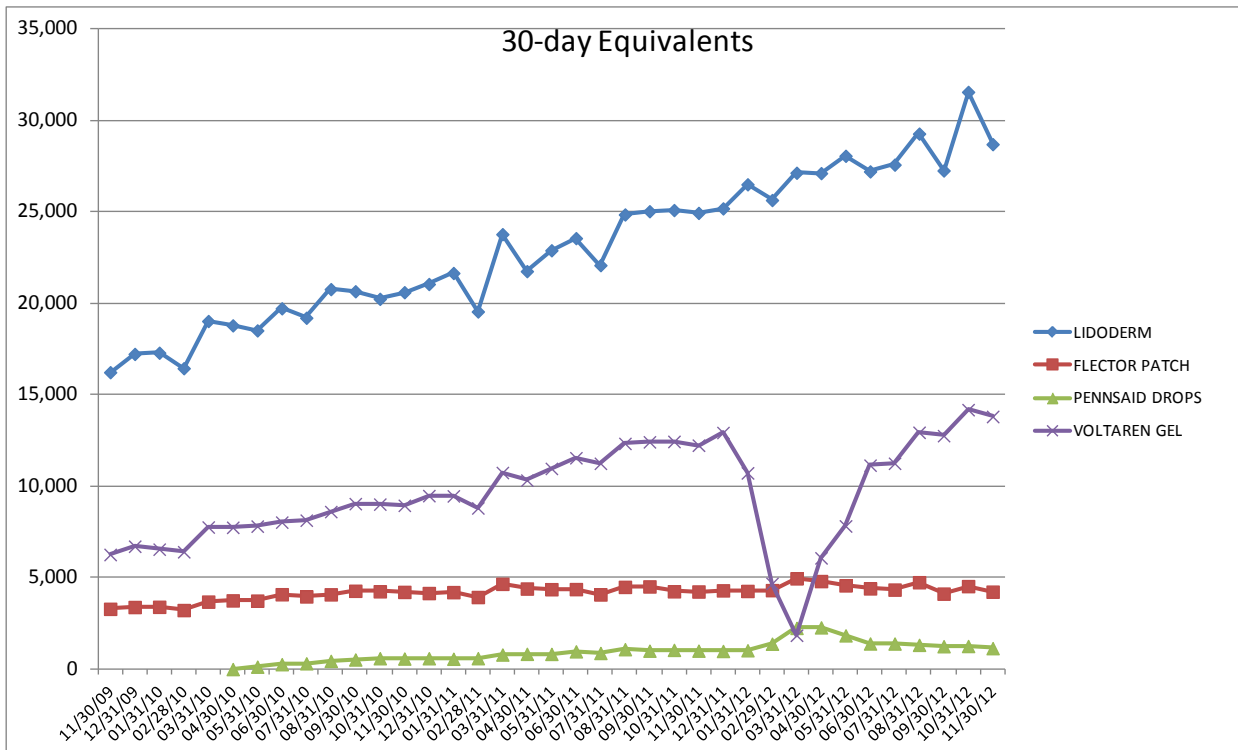
Pennsaid (diclofenac drops)
 Flector (diclofenac patch)

Prior authorization for recommended for all new and current patients

- Postherpetic Neuralgia
- Peripheral Neuropathic Pain
- Non-neuropathic pain where an occupational or clinical reason exists and other analgesics are contraindicated

Recommended implementation period: 90 days

Figure 1: Pain Medication – Topical Utilization
30-Day Equivalents in All Points of Service



New Sedative Hypnotic

Formulary/step preferred: Zolpidem IR (generic), Zaleplon (generic),

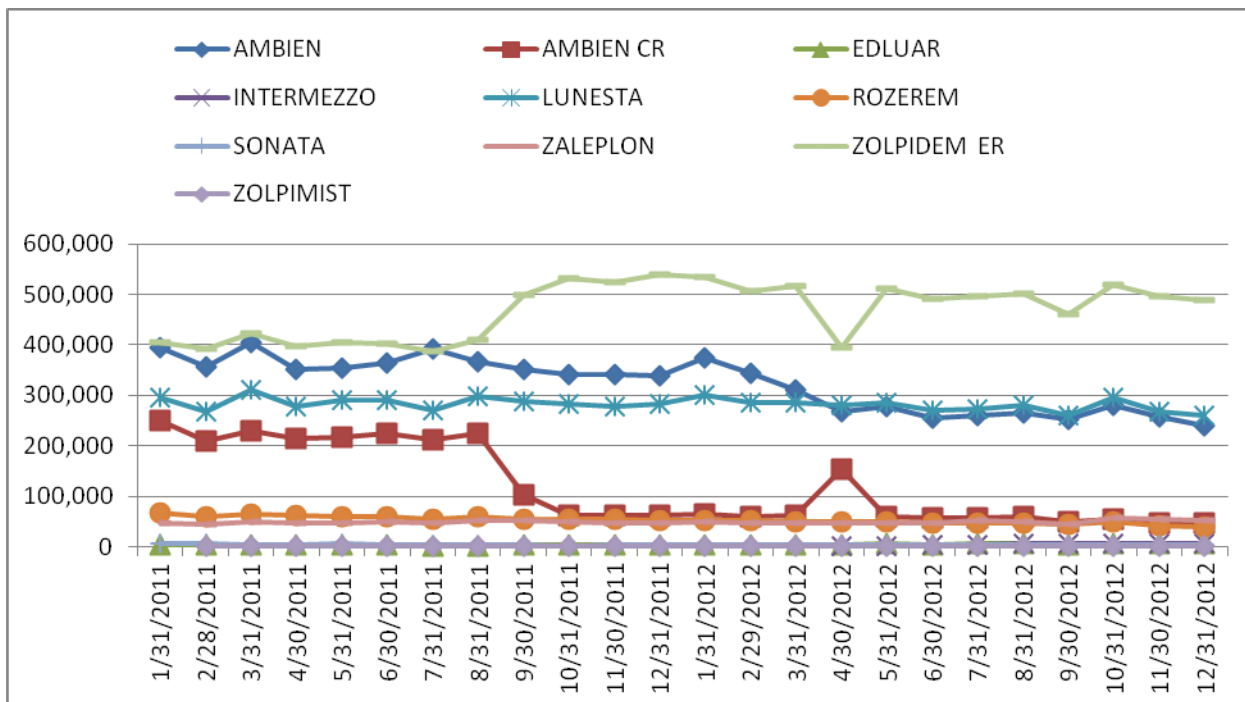
Formulary/non step preferred: Zolpidem ER (generic), Doxepin (Silenor), Eszopiclone (Lunesta)

Nonformulary: Ramelteon (Rozerem), Zolpidem (Edluar, **Intermezzo**),

Not Covered: Zolpidem spray (Zolpimist)

Implementation Plan: 60 Days

Figure 3: New Sedative Hypnotic Quantity Dispensed in All Points of Service



Anticoagulant Agents

Formulary: Warfarin (generic)
 Dabigatran (Pradaxa)
 Rivaroxaban (Xarelto)
 Apixaban (Eliquis)

Figure 4: Anticoagulant Utilization: 30-Day Equivalents in All Points of Service

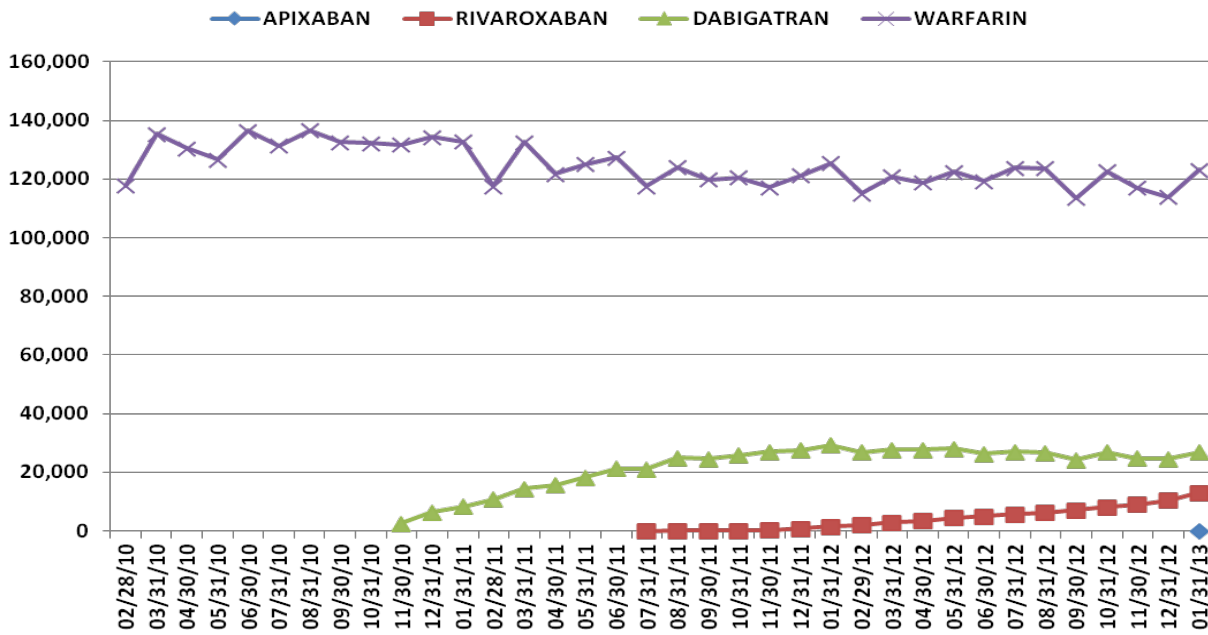


Table 1: Table of Implementation Status of UF Recommendations/Decisions Summary Table

Meeting	Drug Class	Nonformulary Medications	Total Beneficiaries Affected (# of patients affected)	Beneficiaries Affected by POS			Implementation Plan First Wednesday X days after the decision date	Step Therapy
				MTF	Retail	Mail Order		
Nov 2012	Newer Sedative Hypnotics	Zolpidem SL (Intermezzo)	418	2	367	49	60 days	Step therapy: must try zolpidem IR or zaleplon first; 180 day look-back
	Pain Medication-Topical	Pennsaid	2,707	18	2,262	247	90 days	Prior Authorization: - Post-herpetic Neuralgia - Peripheral Neuropathic Pain - Non-neuropathic pain where an occupational or clinical reason exists and other analgesics are contraindicated
		Flector	8,992	1,281	6,498	1,213		
		Lidoderm (effected by prior authorization only)	55,359	26,646	22,334	6,379		
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