

Drug Policy:

Drug Therapy, Continuation Of Requirement RX-002 (Plan's Obligations Relating to Drugs Previously Approved for Enrollee Medical Condition)

Effective 2/15/00 Revised: April 06, April 07, April 08, Aug 09, April 2011, January 2012

Reviewed/No Updates: 1/28/13

CONTINUATION OF DRUG THERAPY

Policy

The Plan will continue to cover a drug for an enrollee if the drug previously had been approved for coverage by the Plan for the enrollee's medical condition and the Plan's prescribing provider continues to prescribe the drug for the medical condition, provided that it is appropriately prescribed, and is considered safe and effective for treatment.

Procedure:

• After the Plan authorizes a claim for an eligible member for a particular drug to be processed at the point of service, the Plan will continue to cover the particular drug until it is medically appropriate for the member to discontinue the drug.

Exceptions/Limitations:

- Claims processed in error related to member's eligibility are excluded from this policy.
- Drugs prescribed for a use that is different from the use for which that drug has been approved for marketing by the FDA are excluded from this policy.
- Generic drug substitution is required, unless the prescriber indicates "dispense as written" and the brand name drug is authorized by the Plan.
- Coverage is subject to the copayments and maximums of the member's pharmacy benefit.
- Coverage for a Healthy Families Program member may be discontinued after a CCS (California Children's Service) authorization is received by the Plan covering the particular drug and the family is informed of this new coverage.
- When the Competitive Pricing Class closes and the drug is no longer available through our Pharmacy Benefit Manager, written notification is made to those members with recent claims for the deleted drug and to their prescribing providers. The letter will provide the names of alternate drugs of similar efficacy covered by the Plan and a reasonable grace period to transition to the new drug.
- A. Attachments: none
- **B. References:** Health & Safety Code 1367.22 (a)
- C. Reviewers: Pharmacy & Therapeutics Committee, Medical Director, QA Manager

Reviewed/revised by: Cynthian Wilhelmy, MD Date: April 2006

Committee Review: P&T on 04-24-06

Reviewed/revised by: Lita Catapang RN & Sheldon Haas, MD Date: April 2007

Committee Review: P&T on 04-30-07; QA 05-22-07

Reviewed/ No Changes: Sheldon Haas MD 04-15-08 Date: April 2008

Committee Review: P&T on 04-28-08 & QA 05-19-08

Reviewed/No Changes: Lita Catapang RN & Sheldon Haas MD Date: Aug 2009



Reviewed/No Changes: Faustine Dela Cruz RN & Dr. Albert Reeves MD Date: April 2011

Committee Review: P&T on 4/26/11 & QAC on 5/24/11

Reviewed/No Changes: Faustine Dela Cruz RN, Cecilia Cabrera-Urango RN & Dr. Albert

Reeves MD Date: January 2012

Committee Review: P&T on 1/31/12 & QAC on 2/28/12

Reviewed/No Changes: Albert Reeves, MD Date: 1/28/13

Committee Review: P&T on 1/29/13; QAC on 2/26/13