FOR COMPARISON (TRADITIONAL MEDICAID)
Medicaid Expansion

IHS pharmacy spend

First Quarter 2020

$2 Million

100% Federal Funds
OBSERVATIONS FOR MEDICATIONS THAT ARE CURRENT AREAS OF FOCUS FOR TRADITIONAL MEDICAID

- Gabapentin prescription volume decreased by 22%
- Narcotics, stimulants, beta-agonists dropped in volume
  - System edits are different for ND Medicaid
  - Most common differences are therapeutic duplication edits limiting to one strength at a time and duration expectations for albuterol inhalers
- Chronic medications remained steady
  - insulins
  - anti-depressants
  - cholesterol
NARCOTICS
BETA-AGONISTS (E.G. ALBUTEROL)
INSULINS
ANTIDEPRESSANTS
CHOLESTEROL
As rebates are confidential, can’t share actual dollar amounts or drug class.
TIGHTER CONTROL OF NON-PDL DRUGS

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There was a decrease in antibiotic prescriptions in April and May, but no other obvious drops, so overall claims volume remained steady.
<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
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<tbody>
<tr>
<td>July – Expansion Pharmacy Claims</td>
<td>67,912</td>
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<tr>
<td>July – All Other Pharmacy Claims</td>
<td>89,917</td>
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</tbody>
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IHS savings alone will be equivalent to $8 million per year being matched at 100% FMAP as opposed to previous expansion match rate.

Stronger edits and controls appear to show expected savings, especially since:

- Not all edits were turned on January 1\textsuperscript{st}.
- Full TPL cost-avoidance (inclusion in LexisNexis interface) didn’t start until March.
- Final existing claim edit wasn’t turned on until June 4\textsuperscript{th}.
- Future edits will be implemented for all of traditional and expansion as the edits are developed.
- Immediate changes will now be possible for PDL management.

EARLY SUGGESTIONS
IF FFS EDITS WERE IN PLACE IN 2019

- 35,415 plan limits exceeded; 22,524 therapeutic duplication
  - Often results in dose consolidation / optimization
  - Prevents adverse events
- 18,444 refill too soon; 8,781 accumulation
  - No change in therapy – just limits fills to 12.4 per year
- 12,319 other insurance; 1,301 Medicare
  - Helps ensure all other payers are used first
- 3,624 no CMS rebate
  - Limits payments to rebatable drugs; net price lower