

DEPARTMENT: Pharmacy Operations	DOCUMENT NAME: Oncology Split Fill Program
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APPROVED DATE: 07/17	RETIRED:
EFFECTIVE DATE: 01/18	REVIEWED/REVISED: 12/2018
PRODUCT TYPE: Medicaid	REFERENCE NUMBER: PA.LTSS.Pharm.10

SCOPE:

Pennsylvania Health and Wellness Health Plan Pharmacy Department

PURPOSE:

To define Pennsylvania Health and Wellness Health Plan's process for ensuring that participants new to specific oral oncology therapy treatments are able to tolerate therapy prior to a full 30-day supply being dispensed.

POLICY:

Pennsylvania Health and Wellness will limit participants new to therapy to a maximum of a 15-day supply per prescription for the first 90 days of therapy. After 90 days, the participant can receive a standard retail day supply as ordered by the prescriber.

PROCEDURE:

1. The adjudication system will look back 180 days at the GPI 10 level. If there is no prescription for that medication in the last 180 days, the participant will be considered new to therapy.
2. The prescription quantity will be limited to a maximum of 15 days at each dispensing for the first 90 days of therapy.
3. Prescriptions filled after the first 90 days of therapy can be dispensed up to the maximum retail day supply limit.
4. For participants with eligibility less than 180 days on the plan, the plan will override the 15 day restriction if the provider validates the patient has been started and stable on the therapy previous to starting with the plan.
5. At 75% of split fill exhaust, or around 11 days post last split fill shipment, the specialty pharmacy will contact the participant to schedule the next split fill and assess medication tolerance, including side effects/adverse events. Participant contact is required for refill shipment. If the participant reports intolerable side effects or adverse reactions, the specialty pharmacy will escalate the patient case to a clinician to facilitate care coordination with the participant's provider as needed.
6. Upon provider outreach, if clinical concerns are present, and authorization to facilitate a refill is not obtained, the next scheduled refill will not be

performed. In cases where care coordination outreach supports therapy continuation, the specialty pharmacy will ship the next split fill.

7. The pharmacy will be reimbursed a dispensing fee (if applicable) on each fill.
8. The list of medications in the split fill program will be posted on the Pennsylvania Health and Wellness website and any modifications to the list will be approved by the DHS 60 days prior to implementation.

Split Fill Drug List			
Bosulif	Gleevec	Inlyta	Sprycel
Sutent	Tafinlar	Tarceva	Tykerb
Votrient	Xtandi	Zolanza	Zytiga
Erleada			

REFERENCES:

ATTACHMENTS:

DEFINITIONS:

REVISION LOG

REVISION	DATE
Added Erleada to list of Oncology Split Fill drugs	12/2018

POLICY AND PROCEDURE APPROVAL

Director of Pharmacy:

Approval on file

Medical Director:

Approval on file

The electronic approval retained in Compliance 360, Centene's Policy and Procedure management software, is considered equivalent to a physical signature.