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June 17, 2011

**VIA HAND DELIVERY**

Ms. Janie Miller, Secretary  
Cabinet for Health and Family Services  
275 East Main Street, 5<sup>th</sup> Floor-West  
Frankfort, Kentucky 40621

RE: Consumer and Patient Protections for  
Medicaid Managed Care Enrollees

Dear Secretary Miller:

This letter is being written on behalf of my client, The Pharmaceutical Research and Manufacturers of America (PhRMA). PhRMA represents the country's leading pharmaceutical research and biotechnology companies, which are devoted to inventing medicines that allow patients to live longer, healthier and more productive lives. PhRMA's mission is to conduct effective advocacy for public policies that encourage discovery of important new medicines for patients by biopharmaceutical research companies.

Please include the following consumer and patient protections for Medicaid Managed Care enrollees in your discussions with Managed Care Organizations (MCOs):

1. Maintenance drugs prescribed within the last six months should be continued for as long as the patient's physician continues to prescribe the medication even if the drug would otherwise be non-preferred or subject to a prior authorization requirement;
2. MCOs should cover all, or substantially all, drugs in the immunosuppressant, antidepressant, antipsychotic, anticonvulsant, antiretroviral and antineoplastic classes, or at least those classes that are included or carved out of Kentucky's Medicaid Preferred Drug List;
3. Require review by Kentucky's Pharmacy and Therapeutics Committee of the MCO formularies;
4. Medicaid enrollees should be allowed to select the MCO formulary that best suits their medical needs. All plans and their formularies should be made publicly available to



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patients, including posting on the plan website so that patients can make appropriate health care decisions;

5. Medicaid MCO formularies should be no more restrictive than the coverage provided under the Medicaid fee-for-service program;
6. The use of medical or formulary management tools should be based on industry standards, as well as the appropriate guidelines from expert patient and provider organizations. A plan should provide response within 24 hours of a request for prior authorization or override of other medical management tools; and
7. Kentucky should prepare a report assessing beneficiary access no later than January 1, 2012. The study should assess the impact of managed care on patient access to care, new barriers to the use of services, including prescription drugs, created by the use of medical management or cost containment tools. The report should analyze the impact on utilization of services, quality of care and patient outcomes. The report should also examine the use of prior authorization and other plan management tools and assess whether these tools pose an undue administrative burden for physicians, the MCO or create barriers to needed care. This report should be submitted to the Kentucky legislature, be posted on the Medicaid website and be subject to public comment.

Thank you for the opportunity to express PhRMA's position on this important transition. If you have any questions, feel free to contact me.

Sincerely,



Marie Alagia Cull

MAC/tgl

cc: Thomas C. Hardaway  
061711 Miller LTR/PhRMA/DOCS