

## Antinauseants Quantity Limit Policy Impact Analysis

Effective April 1, 2003 OMAP implemented a mandatory prior authorization (PA) requirement for several drugs within the antinauseant drug class. First, dronabinol (Marinol) was restricted to those patients having a diagnosis of AIDS-related anorexia, diagnosis of chemotherapy-induced nausea and vomiting, or in patients refractory or intolerant of first line agents (metoclopramide, prochlorperazine, promethazine, or 5HT receptor antagonist). In addition, quantities of dronabinol over 3 units of the 2.5mg and 5mg and 2 units of the 10mg strength were restricted. Finally, 5-HT receptor antagonists were restricted to quantities of less than 9 dosage units in 7 days for patients with chemotherapy or radiation induced nausea or in patient refractory or intolerant of 2 first-line agents).

Figure 1: Rx Volume (No. Dispensed/1000 members)

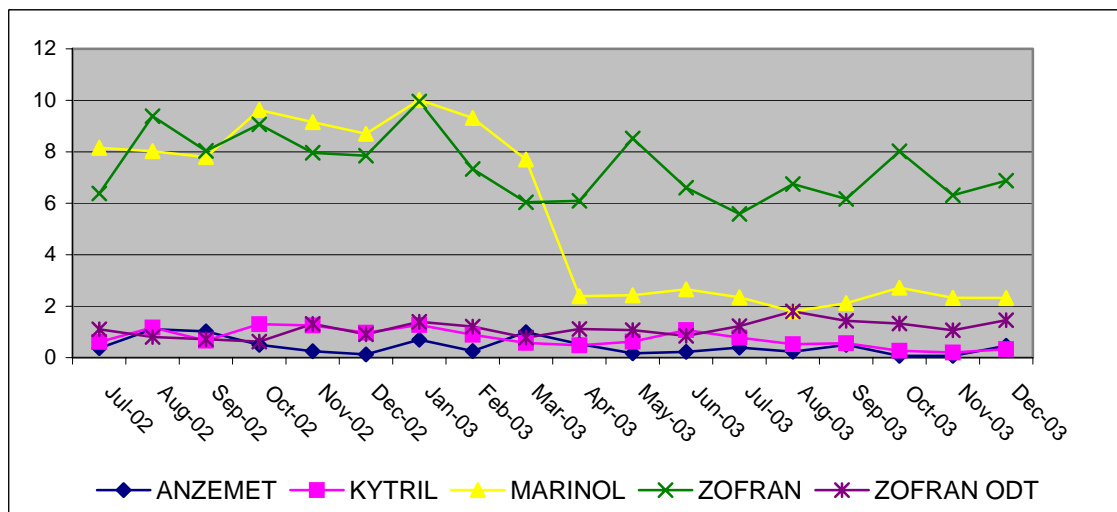


Figure 2: Average Quantity Dispensed

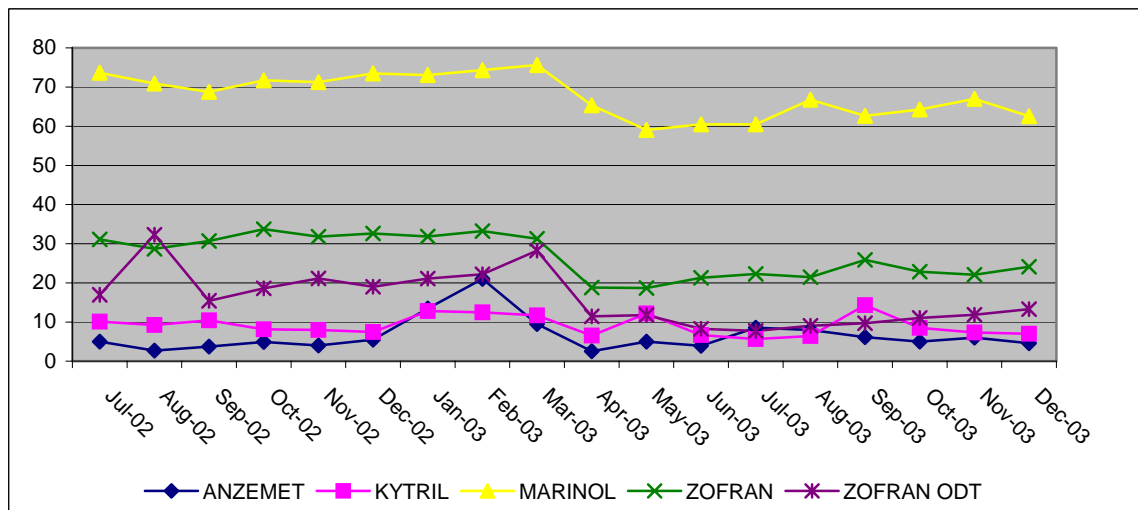


Figure 3: Quantity Dispensed/1000 Members

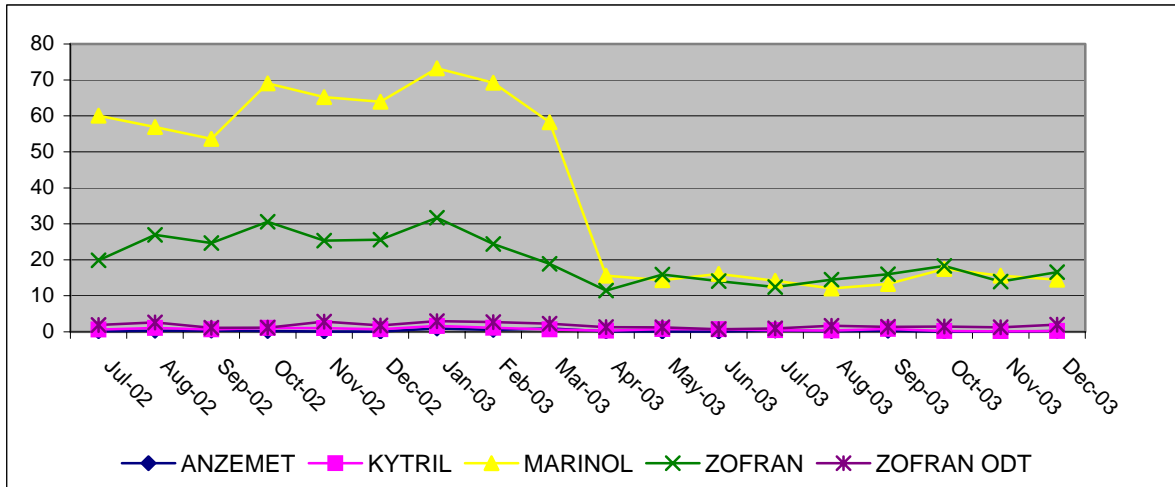


Figure 4: Cost Per Member

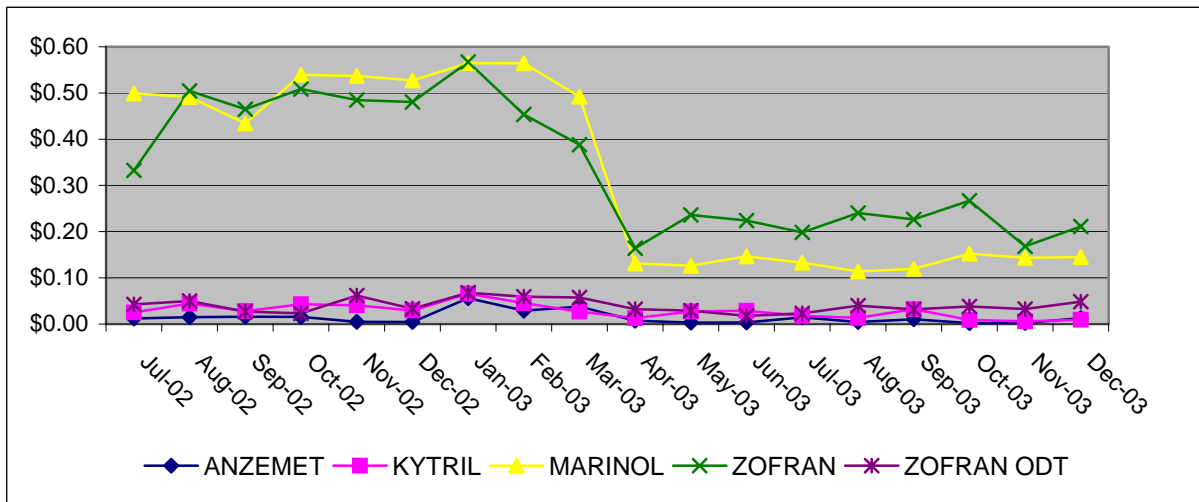


Figure 5: Actual and Projected Costs Per Member

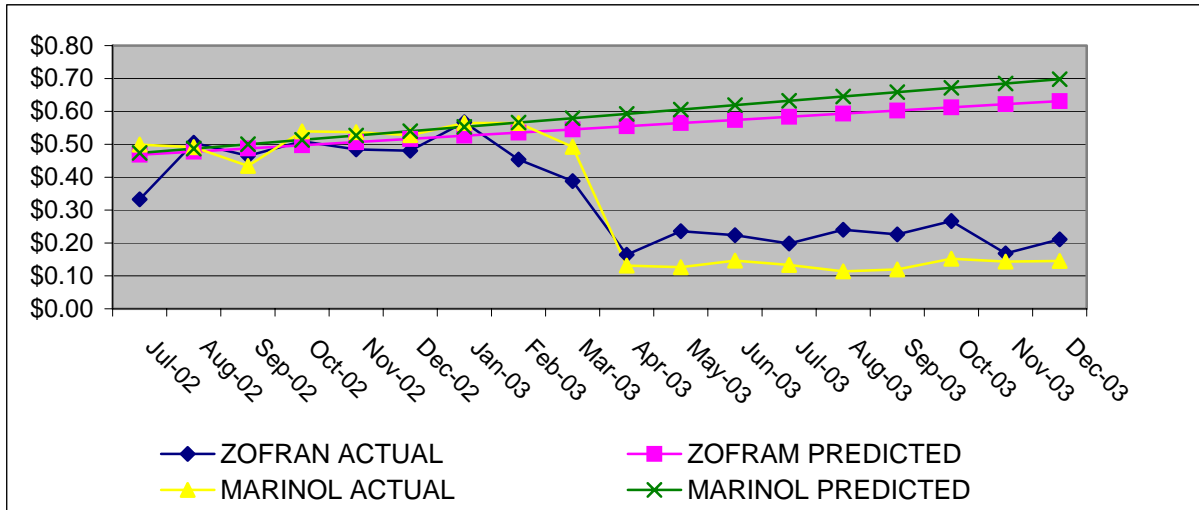
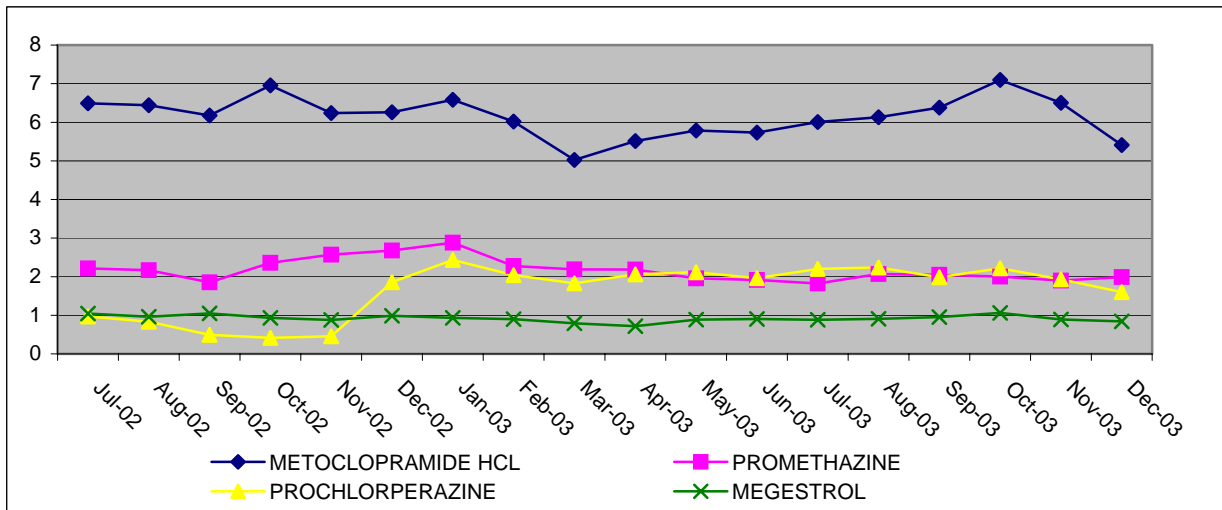


Figure 6: Rx Volume (No. Dispensed/1000 Members) Alternative Antinauseants



**Table 1: Zofran Cost Savings**

	Apr-03	May-03	Jun-03	Jul-03	Aug-03	Sep-03	Oct-03	Nov-03	Dec-03
<b>Predicted</b>	\$0.55	\$0.56	\$0.57	\$0.58	\$0.59	\$0.60	\$0.61	\$0.62	\$0.63
<b>Observed</b>	\$0.16	\$0.24	\$0.22	\$0.20	\$0.24	\$0.23	\$0.27	\$0.17	\$0.21
<b>Difference</b>	\$0.39	\$0.33	\$0.35	\$0.39	\$0.35	\$0.38	\$0.35	\$0.45	\$0.42
<b>Utilization Savings</b>	\$73,671	\$58,199	\$61,989	\$68,973	\$60,692	\$60,403	\$52,136	\$68,315	\$63,585
<b>PA Costs</b>	\$655	\$535	\$169	\$333	\$216	\$155	\$269	\$133	\$308*
<b>Total (TF) Savings</b>	\$73,016	\$57,664	\$61,820	\$68,640	\$60,476	\$60,248	\$51,867	\$68,182	\$63,277

**Table 2: Marinol Cost Savings**

	Apr-03	May-03	Jun-03	Jul-03	Aug-03	Sep-03	Oct-03	Nov-03	Dec-03
<b>Predicted</b>	\$0.59	\$0.61	\$0.62	\$0.63	\$0.65	\$0.66	\$0.67	\$0.68	\$0.70
<b>Observed</b>	\$0.13	\$0.13	\$0.15	\$0.13	\$0.11	\$0.12	\$0.15	\$0.14	\$0.15
<b>Difference</b>	\$0.46	\$0.48	\$0.47	\$0.50	\$0.53	\$0.54	\$0.52	\$0.54	\$0.55
<b>Utilization Savings</b>	\$87,051	\$85,002	\$83,659	\$89,409	\$91,412	\$86,571	\$78,388	\$81,546	\$83,611
<b>PA Costs</b>	\$1,285	\$638	\$341	\$297	\$191	\$261	\$369	\$258	\$455*
<b>Total (TF) Savings</b>	\$85,766	\$84,364	\$83,318	\$89,112	\$91,221	\$86,310	\$78,019	\$81,288	\$83,156

*\*PA costs unavailable at analysis time, based on previous months average*

**Table 3: Total Savings Projections**

	<b>Zofran</b>	<b>Marinol</b>	<b>Total</b>
<b>% Average Monthly Cost Reduction</b>	63.7%	79.1%	
<b>Projected Average Monthly Savings (TF)</b>	\$62,799	\$84,728	\$147,527
<b>Projected Annual Savings (TF)</b>	\$753,586	\$1,016,741	\$1,770,327

## Summary

Restrictions on both quantity limits and indications appear to have had a marked impact on utilization and cost for the affected agents. Because ondansetron (Zofran) was the predominately prescribed 5HT antagonist, a majority of the utilization shift and projected cost savings were attributed to this agent. Overall, utilization, as defined as the volume of prescriptions dispensed/1000 members (figure 1), for dronabinol and ondansetron was reduced by 73% and 15% respectively after the PA was implemented. When measured by the quantity of units dispensed (figure 3), utilization of dronabinol was reduced by 77% and ondansetron was reduced by 42%. The average quantity dispensed per prescription was reduced by 30-40% for both agents (figure 2).

The amount spent, as measured by ingredient cost, was reduced dramatically for both ondansetron and dronabinol. Figure 5 and tables 1 and 2 show the observed and projected expenditures for these two agents, the projected savings, and total fund savings taking into account PA administrative costs. In general, we project \$1,770,000 in total fund savings attributable to these two policies.

Trends in the utilization of alternative antiemetics and megestrol, shown in figure 6, appear to be insensitive to the policy changes for dronabinol and the 5-HT receptor antagonists. Medical claims were not explored due to the time lag of collection.

In summary, the policy restricting the use and quantities allowed to be dispensed for 5HT receptor antagonists and dronabinol had a profound impact on utilization and overall expenditures. We estimate an annual total fund savings of 1.7 million dollars. Dramatic shifts in the use of other antiemetics or appetite stimulants were not observed.

Data: SYBASE Drug2002, 2003

Cost ingredient cost: [amtpaidclm]+[amtcopay]+[othrinspay]-[proffee]

Rebates not included

Service dates reported

Eligibility/Enrollment from OMAP "first of month report" – accessed 1/15/04

Medically Needy Excluded: PERC = NG, NH, NI, NJ, NK