



Ohio Department of Mental Health

30 East Broad Street
Columbus, Ohio 43215-3430

DATE: NUMBER: ORIGINATOR & TITLE:
March 31, 2008 C-03-08-03 Lynne Lyon, Policy Manager

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SUBJECT:
 Allocations Certification Critical Information Licensure
 MACSIS Medicaid MSPA Policy
 Procedure Other (specify):

TITLE OF CORRESPONDENCE: Changes to Ohio Medicaid Pharmacy Program/Tamper Resistant Prescription Pads

CONTENT: Attached is Ohio Department of Job & Family Services (ODJFS) Medical Assistance Letter (MAL) No. 546. This MAL communicates changes to the Ohio Medicaid Pharmacy Program that will be effective April 1, 2008. In particular, this MAL includes information related to the federal requirement for the use of tamper-resistant prescription forms. **Please be aware of the applicability and exclusions to this requirement which are described in the MAL.** Please note that this requirement does not apply to prescriptions for which payment will be made by a Medicaid managed care entity (i.e., this requirement applies only to prescriptions written for patients who receive a monthly paper Ohio Medicaid card, not prescriptions written for patients enrolled in a Medicaid managed health care organization). Therefore, it is important that prescribers are aware when a consumer is eligible for Medicaid, but not enrolled in a Medicaid managed care plan. In addition, this requirement does not apply to orders for medications administered in a provider setting and billed by the administering provider. Please refer the MAL for more detail and additional exclusions.

ODJFS has indicated that it will not be providing the tamper-resistant prescription pads; however, there are numerous vendors who supply materials that meet the new federal requirements. Many of these vendors have websites. In addition, community mental health centers may want to check with current vendors who are supplying prescription pads on the availability of pads which meet these federal requirements.

Additional sites that provide guidance on this requirement:

APHA Issue Brief:

http://www.pharmacist.com/AM/Template.cfm?Section=Government_Affairs&CONTENTID=15541&TEMPLATE=/CM/ContentDisplay.cfm

OSMA Site:

<http://osma.org/i4a/pages/headlinedetails.cfm?id=693&archive=1>

CMS Site:

<http://www.cms.hhs.gov/center/intergovernmental.asp>

REQUIRED ACTION: Please share this information with all those in your community mental health center who have prescribing authority as well as any pharmacy staff that you may have.

DATES FOR REQUIRED ACTION: April 1, 2008.

NAME, TELEPHONE NO., AND EMAIL OF CONTACT PERSON(S): Questions related to the contents of this memo may be referred to Lynne Lyon, Office of Medicaid, Ohio Department of Mental Health at (614) 466-9972 or lyonl@mh.state.oh.us.

Questions pertaining to ODJFS MAL No. 546 should be referred to the Office of Ohio Health Plans at the address and phone numbers listed on the last page of the MAL.