

Medicaid Matters

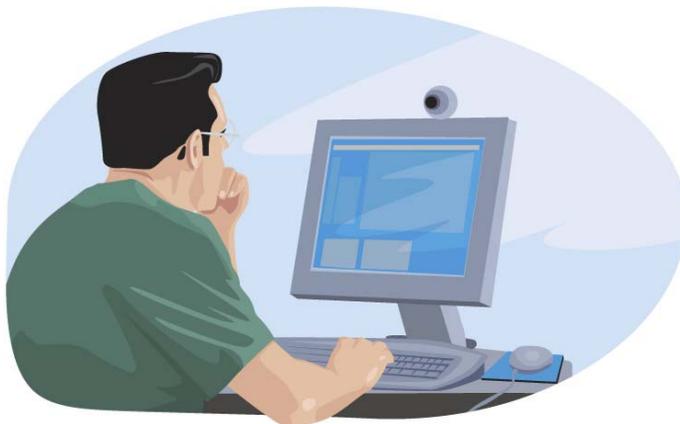
Pharmacy brand limit to increase beginning January 1, 2008

Effective January 1, 2008 Alabama Medicaid will increase the current four (4) brand limit policy to five (5) brand name prescriptions per month per recipient. There is no limit on the number of covered generic or over-the-counter prescriptions a recipient may receive. Children under the age of 21 and recipients living in nursing facilities are exempt from the requirement.

In certain drug classes, allowances are allowed in the event of an adverse or allergic reaction, or failure to respond to treatment. Additionally, Medicaid will also continue to allow for prescriptions to exceed the five (5) brand limit for anti-psychotic and anti-retroviral medications as long as the limit of ten (10) brand name drugs per month per recipient is not exceeded.

Providers with questions concerning the prescription limitation should contact the Alabama Medicaid Agency's Pharmacy Services Division. [Click here for more information about pharmacy services.](#)

Electronic clinical support tool focus of initial TFQ efforts



Initial efforts between Alabama Medicaid Agency staff, *Together for Quality* project stakeholders and the vendor selected to assist with the project are helping the Agency move closer to its goal of creating an electronic clinical support tool (ECST) for Alabama physicians and other health care providers.

Project planning sessions during October focused on development of the appearance and functionality for the electronic clinical support tool as a first step toward building a statewide electronic health information system. Next steps call for coordination with

electronic medical record vendors in the state to standardize formatting for alerts sent to physicians, work on quality indicator measures and development of external evaluation components. The proposed tool is scheduled to be presented to TFQ project stakeholders in December and will be incorporated into an 11-county pilot project scheduled for spring 2008.

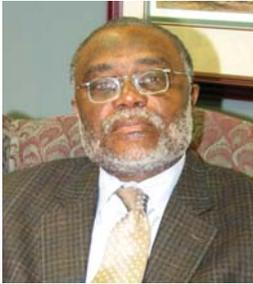
The proposed tool will respond to clinicians' need for timely, accessible patient health information, according to Kim Davis-Allen, project director. She noted that the proposed tool will combine patient insurance information with family history, immunization records, drug prior authorizations, lab results, medical claims data and referral information.

The ECST is a major component of the state's *Together for Quality* Medicaid transformation initiative which is designed to ultimately reduce service duplication, create a system for state health and human service agencies to share information electronically and enable the state Medicaid agency to prevent serious problems in patients with chronic illnesses. [Click here to learn more about TFQ.](#)



- ◆ Nancy Headley named Agency's "Extra Mile" employee
- ◆ Montgomery Pediatrician A.Z. Holloway Honored

Pediatrician A.Z. Holloway honored for his service to children



Montgomery pediatrician A.Z. Holloway was recognized recently by Governor Bob Riley for more than 25 years of service to Alabama children and for his recent installation as president of the Alabama Chapter of the American Academy of Pediatrics. A certificate of commendation was presented to Dr. Holloway by Medicaid Commissioner Carol Steckel during the October 24 meeting of the Agency's Physician Task Force.

Throughout his career as a pediatrician in private practice, Dr. Holloway has been actively involved with the Alabama Medicaid Agency where his efforts have benefitted thousands of children in the state. He has served on the Pharmacy and Therapeutics Committee as a member, vice-chair and chair, on the Patient 1st Advisory Council and on numerous state task forces and committees. He began a two-year term as president of the Alabama Chapter of the AAP October 1.

Nancy Headley is first 'Mike Lewis Extra Mile Award' winner

When the Alabama Medicaid Agency decided to outsource the Agency's prior authorization activities, associated medical criteria development, and long-term care admissions last year, it was also decided that Nancy Headley would be the lead person on the team to finalize and oversee the contract. Almost immediately, her workload doubled as she assumed responsibility for the newly created Medical and Quality Review Services unit that included the merged Long Term Care Admissions and Records units.

"Nancy accepted this challenge willingly and has done an exceptional job with the new responsibilities," said Marilyn Chappelle, Director of Medicaid's Long-Term Division.

In recognition of her ability to develop and promote an effective team during this challenging transition and for her commitment to the success of the new initiative, Mrs. Headley has been named the "Mike Lewis Extra Mile Award" winner for the fourth quarter of 2007.

The award recognizes the extraordinary dedication and accomplishments of Agency employees. Nominated by a supervisor or co-workers, the recipient is chosen by a selection committee of fellow employees. The award was renamed to honor the integrity and dedication of former Commissioner Mike Lewis who passed away in September.

While her assignment to oversee the new unit and the outsourcing project was new, Mrs. Headley is quick to note that change in the health care field is not. "In working with Medicaid you must be ready to change because we are in a field that is always changing," she said.

After 16 years of state service, Mrs. Headley is certain that the door remains open to new opportunities for growth and development. "I enjoy the opportunity of being able to learn something new," she said. "Truly not a day goes by that I do not have an opportunity to learn." During the phasing-in of contract workers she continues to monitor the contract while ensuring that in-house prior authorizations for undocumented aliens continue, disability determinations are made and policy and procedures are up-to-date. The reward of this particular challenge according to Headley is, "just knowing that the end results in Medicaid being able to assist recipients in receiving the care that they need and ensuring providers are paid for their services."



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