

DMAP reduces OHP prescription copays



The following changes only apply to drugs reimbursed on a fee-for-service basis.

DMAP increases quantity limits and reduces prescription copayments

Effective March 1, 2008, a policy change (OAR 410-121-146 Dispensing Limitations) will increase the maximum quantity limit from a one-month to a three-month supply for drugs that have \$0 copayments, excluding specified psychotropic drugs.

Effective March 1, 2008, DMAP will reduce OHP Plus copayments to use the scale listed at right (see OAR 410-120-1230). Clients with OHP Standard benefits still do not pay any copayments.

Current copay	New copay	Type of medication
\$2 \$2 \$3	\$0	Preferred PDL generics Generics in non-PDL classes ≤ \$10 Preferred PDL brands
\$2	\$1	Non-preferred PDL generics Generics in non-PDL classes > \$10
\$3	\$3	Non-preferred PDL brands All other brands

These changes coordinate drug

benefit policies to provide consistent incentives to prescribe, dispense and use preferred drugs as determined by the established evidence review process for the Practitioner-Managed Prescription Drug Plan at www.dhs.state.or.us/policy/healthplan/guides/pharmacy/rulebooks/121rb0108.pdf.

Questions?

If you have questions about the information in this announcement, contact DMAP Provider Services at 800-336-6016 or e-mail dmap.providerservices@state.or.us.

Free, point-of-care access to current OHP Plan Drug List (PDL) information

Download Epocrates Rx to your PDA or register for Web-based Epocrates Online, then add the PDL to your list of formularies. The PDL is listed as "Oregon Medicaid (open-card)."

To learn more, go to www.epocrates.com.