

STATE OF ALASKA

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

DIVISION OF HEALTH CARE SERVICES

September 26, 2011

Sean Parnell, Governor

*4501 Business Park Blvd
Suite 24 Bldg L
Anchorage, AK 99503-7167
Telephone: (907) 334-2400
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Re: New quantity limits and prior authorization

Dear Prescribers and Pharmacists:

Effective **11/1/2011** the following prior authorization edit and quantity limits will be incorporated into the pharmacy point of sale claims processing system. Prior authorization criteria and forms can be found online at <http://hss.state.ak.us/dhcs/pharmacy/medpriorauthoriz.htm>.

Quantity Limit: The maximum daily quantity limit for the following products will be one (1) unit per day.

- Zolpidem (Ambien® – all strengths)
- Zolpidem ER (Ambien CR® – all strengths)
- Zolpidem sublingual (Edluar™ – all strengths)
- Temazepam (Restoril® – all strengths)
- Eszopiclone (Lunesta® – all strengths)
- Zaleplon (Sonata® – all strengths)
- Ramelteon (Rozerem®)

Prior Authorization: Lovaza® will require prior authorization with approval granted for recipients being treated for severe hypertriglyceridemia (≥ 500 mg/dL). Prior authorization requests must be submitted by the prescriber to the Magellan Clinical Call Center with a copy of at least one laboratory test within the last 24 months.

Recipients currently treated with Lovaza will be granted authorization when the either the prescriber or pharmacy contacts the Magellan Clinical Call Center; no laboratory tests are required to be submitted for the continuation of current therapy.

Please contact me at (907) 334-2654 or chad.hope@alaska.gov with any questions about this notice.

Sincerely,



Chad Hope, Pharm.D.
Pharmacy Program Manager