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*The Bulletin of  
Medicaid Drug  
Utilization Review  
in Iowa*

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### **Ivermectin Misuse**

The Centers for Disease Control and Prevention (CDC) issued a [CDC Health Advisory on Ivermectin Use to Prevent or Treat COVID-19](#), noting an increase in ivermectin dispensing by retail pharmacies in addition to use of veterinary formulations available over the counter but not intended for human use. A study examining trends in ivermectin prescriptions dispensed from outpatient retail pharmacies in the United States (U.S.) found an increase from an average of 3,600 prescriptions per week pre-pandemic (March 16, 2019-March 13, 2020) to a peak of 39,000 prescriptions in the week ending January 8, 2021. Since July 2021, outpatient ivermectin dispensing was on the rise again, reaching more than 88,000 prescriptions in the week ending August 13, 2021.

Poison control centers across the U.S. have also noted a large increase in the number of calls for human exposure to ivermectin. Caller's report having ingested ivermectin-containing products purchased without a prescription, including topical formulations and veterinary products. These products can be highly concentrated and result in overdoses when used by humans. Clinical effects of ivermectin overdose include gastrointestinal symptoms such as nausea, vomiting, and diarrhea. Overdoses are associated with hypotension and neurological effects such as decreased consciousness, confusion, hallucinations, seizures, coma, and death. Ivermectin can potentiate the effects of drugs that cause central nervous system depression such as benzodiazepines and barbiturates.

[Ivermectin is not authorized or approved by the U.S. Food and Drug Administration \(FDA\)](#) for prevention and treatment of COVID-19. The [National Institutes of Health's \(NIH\) COVID Treatment Guidelines](#) Panel also determined, based on clinical trials and observational studies, that there are currently insufficient data to recommend ivermectin for prevention and treatment of COVID-19 in humans.

Iowa Medicaid practitioners are urged to educate their patients about the risk of using ivermectin off-label or without a prescription and the potential risks of use for the prevention or treatment of COVID-19. Pharmacists are encouraged to reference the [Iowa Board of Pharmacy COVID-19 Information and Updates](#) page for up-to-date information and check back frequently for updated information. Board issued FAQs are updated as warranted. The most

current FAQ update ([September 16, 2021](#)) addresses how a pharmacy should handle prescriptions being issued for ivermectin anecdotally being used for treatment or prophylaxis of COVID-19.

### Total Ivermectin Utilization Across MCOs and FFS, July through September 2021

Month (2021)	# Members	# Claims	Total # Tabs	Avg # Tab/Rx	# Claims > 31 Days
July	121	130	743	5.7	4
August	153	160	1,207	7.5	10
September	95	99	978	9.9	13

Following review of ivermectin utilization in the Iowa Medicaid population, the DUR Commission determined no action is needed at this time. Claims data will continue to be monitored and brought back for discussion if a spike in utilization is identified.

## Helpful IME Information for Pharmacies and Pharmacists

### [Pharmacies Billing for COVID-19 Testing](#)

Iowa Medicaid Enterprise (IME) is expanding reimbursement for COVID-19 testing and the Healthcare Common Procedure Coding System (HCPCS)/Current Procedural Terminology (CPT) codes for payment for laboratory tests for the detection of SARS-COV-2, or the diagnosis of the virus that causes COVID-19, to include pharmacies. Pharmacies that wish to participate must possess or obtain a [Clinical Laboratory Improvement Amendments \(CLIA\) waiver certificate](#).

Pharmacies will need to enroll as a provider type 10, independent clinical lab by submitting Section B of the enrollment application to IME along with a copy of their CLIA certification. Additionally, CLIA information will need to be provided on each claim per guidance in [IL 1777-MC-FFS](#), but pharmacies will not need to enroll or credential separately with the Managed Care Organizations (MCO). However, pharmacies who plan to bill for COVID-19 testing should contact their MCO provider representatives in advance of billing to ensure proper payment.

Please refer to [IL-2271-MC-FFS-CVD](#) for additional information on testing codes and billing.

### [Pharmacist Enrollment](#)

Pharmacists are now able to enroll as a Medicaid provider. The IME has added a new provider type for pharmacists, specifically an authorized pharmacist as defined in Iowa Administrative Code (IAC) 657 – [Chapter 39](#). The addition of provider type 82 allows pharmacists to enroll as a Medicaid provider. Enrollment will permit a pharmacist, pursuant to [Statewide Protocols](#), to order and dispense naloxone and nicotine replacement therapy tobacco cessation products, as well as to order and administer vaccines to Medicaid members. The pharmacist must meet all required training, continuing education and certification requirements pursuant to these protocols as defined in IAC 657 – [Chapter 39](#).

Enrollment is through a paper application only. There is no fee to enroll as a Medicaid provider with the IME. To enroll under this new provider type, a pharmacist must complete the [Iowa Medicaid Universal Provider Enrollment Application Form 470-0254](#) (Section B). Additional information on how to complete this form can be found in [IL-2153-MC-FFS](#).

**Medicaid Statistics for Prescription Claims  
September through November 2021**

	<b>FFS</b>	<b>Amerigroup</b>	<b>Iowa Total Care</b>
<b># Paid Claims</b>	21,014	1,090,212	784,608
<b>Total \$ Paid</b>	\$2,257,627	\$110,533,942	\$80,551,574
<b>Unique Users</b>	3,807	172,691	127,018
<b>Avg Cost/Rx</b>	\$107.43	\$101.39	\$102.66
<b>Top 5 Therapeutic Class by Prescription Count</b> Therapeutic class taxonomy differs among each plan	Antidepressants – Selected SSRIs	Antidepressants	SSRIs
	Anticonvulsants	Antiasthmatic & Bronchodilator Agents	Sympathomimetics
	Antipsychotics – Atypicals	Anticonvulsants	Anticonvulsants – Misc.
	Antihypertensives-Central	ADHD/Anti-Narcolepsy	PPIs
	Antiasthmatic – Beta Adrenergics	Antihypertensives	NSAIDs
<b>Top 5 Therapeutic Class by Paid Amount</b> (pre-rebate) Therapeutic class taxonomy differs among each plan	Anticonvulsants	Antidiabetics	Anti-TNF-alpha Monoclonal Antibodies
	Antipsychotics – Atypicals	Antipsychotics/Antimanic Agents	Insulin
	Anti-Inflammatories, Non-NSAID	Analgesics – Anti-Inflammatory	Sympathomimetics
	Antiretroviral Combinations	Antiasthmatic & Bronchodilator Agents	Incretin Mimetic Agents (GLP-1 Receptor Agonists)
	Diabetic – Insulin Penfills	Dermatologicals	Antipsychotics – Misc.
<b>Top 5 Drugs by Prescription Count</b>	Escitalopram	Omeprazole	Albuterol
	Trazodone	Sertraline	Sertraline
	Clonidine	Trazodone	Omeprazole
	Sertraline	Albuterol HFA	Atorvastatin
	Omeprazole	Amoxicillin	Amoxicillin
<b>Top 5 Drugs by Paid Amount</b> (pre-rebate)	Humira Pen	Humira (CF) Pen	Humira Pen
	Vyvanse	Vyvanse	Vyvanse
	Evrysdi	Vraylar	Vraylar
	Trikafta	Latuda	Trikafta
	Invega Sustenna	Trikafta	Trulicity