



STATE OF TENNESSEE
BUREAU OF TENNCARE
DEPARTMENT OF FINANCE AND ADMINISTRATION
729 CHURCH STREET
NASHVILLE, TENNESSEE 37247-6501

Dear Pharmacists:

The *Grier Revised Consent Decree* provisions which relate to pharmacy issues is effective as of November 1, 2000. The provisions which apply change the process which has been in place under the TennCare Regulations as follows:

1. When a provider with prescribing authority prescribes a medication for an enrollee, and the prescription is presented at a pharmacy that participates in the enrollee's MCO, the enrollee is entitled to either:
 - a. The drug as prescribed, if the drug is on the MCO's formulary and does not require prior authorization; or
 - b. The drug as prescribed, if the prescribing provider has obtained prior authorization or established the medical necessity for the medication; or
 - c. An alternative medication, if the pharmacist consults the prescribing provider when the enrollee presents the prescription to be filled, and the provider prescribes the substituted drug; or
 - d. **A two week (14 day) supply** of the prescribed drug, if the pharmacist is unable, when the enrollee presents the prescription to be filled, to obtain either MCO authorization to fill the prescription as written or the prescribing provider's authorization to substitute an alternative medication. If the enrollee does not receive the medication of the type and amount prescribed, the pharmacist shall immediately provide written notice of the right to appeal (the explanation of the rights to appeal and the appeal form are combined into one form and it is enclosed), including the right to request continuation of services pending appeal, as required by *Grier*. **The enrollee's entitlement to receive a two-week supply of the prescribed drug is subject to the provisions as set out below.**
2. The enrollee is entitled to a two-week (14 day) supply of the prescribed drug provided that:
 - a. The medication is not classified by the FDA as less than effective (DESI, LTE or IRS drug); or
 - b. The medication is not a drug in a non-covered TennCare therapeutic category (e.g., appetite suppressants, drugs to treat

(over)

- infertility, excluded cough/cold products, cosmetic drugs, smoking cessation agents, etc.); or
- c. Use of the medication has not been determined to be medically contraindicated because of the enrollee's medical condition or possible adverse drug interaction; or
 - d. The prescriber did not prescribe a total quantity less than a two week supply, in which case the pharmacist must provide a supply up to the amount prescribed.
3. There are some cases in which it is not feasible for the pharmacist to dispense a two week supply because the drug is packaged by the manufacturer to be sold as the original unit or because the usual and customary pharmacy practice would be to dispense the drug in the original packaging (inhalers, eye drops, topicals, etc.) When a coverage of a two week supply of a prescription would otherwise be required and when, as described above, it is not feasible for the pharmacist to dispense a two week supply, it shall be the responsibility of the MCO to provide coverage for either the two week supply or the usual dispensing amount, whichever is greater.
4. If the enrollee does not receive the medication of the type and amount prescribed, the pharmacist shall provide written notice of the right to appeal, including the right to request continuation of services pending appeal, as required by *Grier*.

Enclosed is the pharmacy appeal form to be completed as appropriate and given to the enrollee when either a 14-day supply of medication is dispensed or when an enrollee presents a prescription for a non-covered therapeutic class as described above. This responsibility of the pharmacy is required by the TennCare contract.

You will also be sent a new TennCare poster in the next few days that must be displayed in a conspicuous manner at every TennCare participating pharmacy. Feel free to copy the appeal form and the poster. If you need additional copies of the appeal form, please call 1-888-816-1680 to re-order more copies.

If you have any questions please feel free to call TennCare toll-free at 1-888-816-1680. The pharmacy appeal form and poster are also available at the TennCare website www.state.tn.us/tenncare .

Note: Enclosed for your information is a copy of the *Grier* notice sent to all physician providers.