

Program Outcomes

Evaluating, Measuring, and Identifying
Patient Care Benefits and Cost Reduction

Alabama Medicaid Agency Mid-season Analysis of Palivizumab Utilization October 1, 2013 – December 31, 2013

Prepared by Health Information Designs

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Introduction

This *Mid-season Analysis of Palivizumab Utilization* provides an overview of the most recent RSV season in terms of palivizumab utilization and cost to the Alabama Medicaid Agency. The analysis includes trending information, including data from past RSV seasons.

Program Background

Synagis® (palivizumab) is FDA approved for the prevention of respiratory syncytial virus (RSV) in selected infants and children. Palivizumab requires prior authorization (PA) for reimbursement through the Alabama Medicaid Agency. Prior authorization criteria are based on manufacturer labeling and current American Academy of Pediatrics (AAP) recommendations. Criteria are reviewed and evaluated annually.

The Centers for Disease Control and Prevention (CDC) has a laboratory-based system, called the National Respiratory and Enteric Virus Surveillance System (NREVSS), which monitors patterns associated with different viruses, including respiratory syncytial virus. According to the NREVSS website, RSV activity in Alabama became significant in the week ending (WE) 12/07/2013.

Results of Mid-season Analysis

Overall Utilization and Cost

The following chart details palivizumab claims billed from **October 1, 2013 through December 31, 2013**.

Drug Name	NDC	Total Number of Claims	Total Reimbursement Amount	Total Number of Patients*
Synagis 50mg/0.5mL vial	60574411401	833	\$1,116,192	--
Synagis 100mg/1mL vial	60574411301	1697	\$4,594,893	--
Total	--	2530	\$5,711,085	777

*Recipients are counted only once in a season.

As a comparison, the chart below details palivizumab claims billed from **October 1, 2012 through December 31, 2012**.

Drug Name	NDC	Total Number of Claims	Total Reimbursement Amount	Total Number of Patients*
Synagis 50mg/0.5mL vial	60574411401	735	\$1,016,506	--
Synagis 100mg/1mL vial	60574411301	1542	\$4,290,621	--
Total	--	2277	\$5,307,127	746

*Recipients are counted only once in a season.

The chart below details palivizumab usage and other information pertinent for trending purposes.

Category	2010	2011	2012	2013
# of Recipients	747	725	746	777
# of Claims	2000	1964	2277	2530
Average Cost Per Claim	\$2000	\$2204	\$2330	\$2257
Avg Claims per Recip	2.68	2.71	3.05	3.26
Total Cost	\$3,999,006	\$4,328,739	\$5,307,127	\$5,711,085
Avg Cost per Recip	\$5353	\$5971	\$7114	\$7350

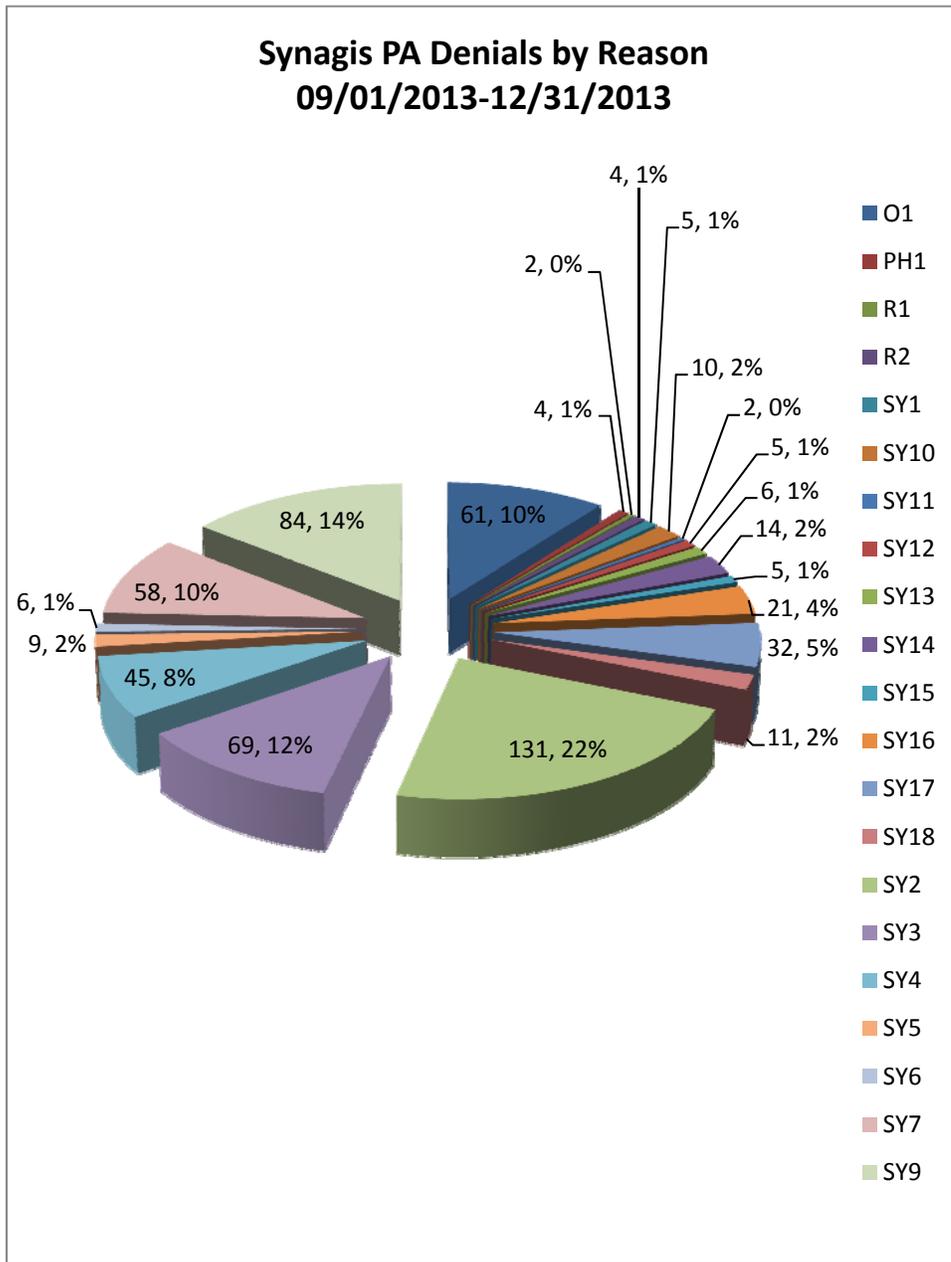
Denials

During the review of palivizumab prior authorization requests, several reasons for PA denial were identified, as detailed in the following tables and figures.

Synagis Denials 09/01/13-12/31/13		
Reason Code	Reason Description	Count
O1	Other Failed Criteria	61
PH1	Please resubmit with pharmacy NPI	4
R1	Requires recipient's Medicaid number	2
R2	Recipient is not Medicaid eligible	4
SY1	Must indicate outpatient status and/or discharge date must be documented on the request form	5
SY10	Synagis cannot be approved for recipients that have had a cardiac defect repaired.	10
SY11	Must indicate age of sibling on PA form	2
SY12	Please document recipient's gestational age.	5
SY13	Please document recipient's congenital abnormalities of the airways.	6
SY14	Please document if the recipient received a Synagis dose while inpatient.	14
SY15	Synagis is not covered for ICD-9 code indicated on form 351	5
SY16	Please provide the appropriate ICD-9 code for CLD.	21
SY17	Please provide the appropriate ICD-9 code for CHD.	32
SY18	Physician must sign AL Medicaid Synagis request form 351. Use of stamped/copied physician's signature is not allowed.	11
SY2	Does not meet chronological/gestational age requirement	131
SY3	Recipient must be born < (less than) 3 months before or during the RSV season	69
SY4	Requires documentation of appropriate medication; please include start and stop dates of therapy if applicable	45
SY5	Must indicate current weight	9
SY6	Please resubmit on Synagis Prior Authorization request form (Form 351) revised on 8/22/13.	6

SY7	Requires documentation of (1) AL Medicaid approved risk factor	58
SY9	Hospital discharge summary from birth must be resubmitted with AL Medicaid Synagis request form (form 351).	84

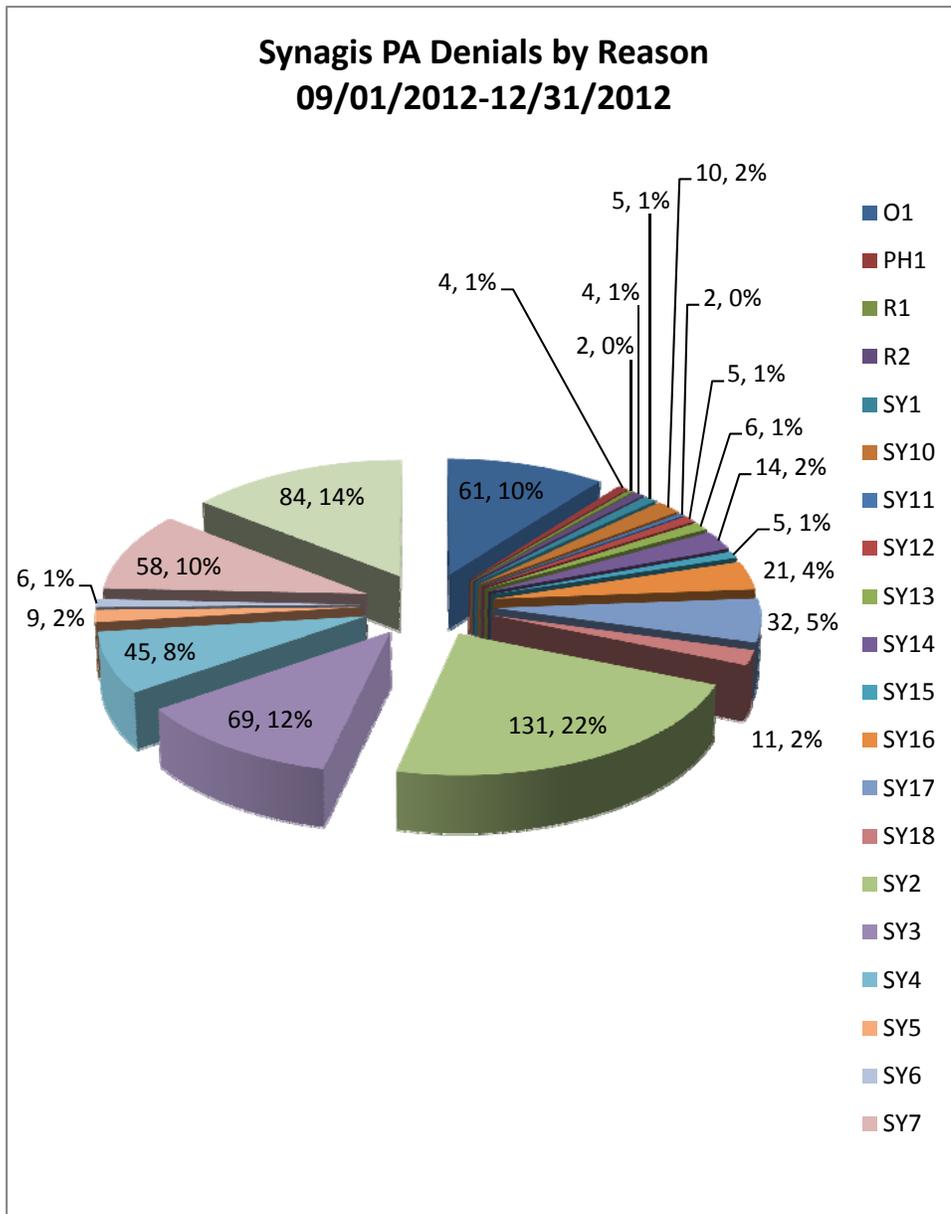
* There were 570 palivizumab denials from September 1, 2013 to December 31, 2013.



* There were 570 total palivizumab denials from September 1, 2013 to December 31, 2013.

Synagis Denials 09/01/12-12/31/12		
Reason Code	Reason Description	Count
O1	Other Failed Criteria	86
P2	Prescribing physician is not on Medicaid's provider file; OR State license has EXPIRED	1
R1	Requires recipient's Medicaid number	5
R2	Recipient is not Medicaid eligible	4
SY1	Must indicate outpatient status and/or discharge date must be documented on the request form	1
SY10	Synagis cannot be approved for recipients that have had a cardiac defect repaired.	8
SY12	Please document recipient's gestational age.	1
SY15	Synagis is not covered for ICD-9 code indicated on form 351.	20
SY16	Please provide the appropriate ICD-9 code for CLD.	16
SY17	Please provide the appropriate ICD-9 code for CHD.	18
SY18	Physician must sign AL Medicaid Synagis request form 351. Use of stamped/copied physician's signature is not allowed.	14
SY19	Sibling must be less than 5 years of age.	2
SY2	Does not meet chronological/gestational age requirement	146
SY3	Recipient must be born < (less than) 3 months before or during the RSV season.	45
SY4	Requires documentation of appropriate medication; please include start and stop dates of therapy if applicable	28
SY5	Must indicate current weight	16
SY6	Request must be submitted on Synagis Prior Authorization Request Form (Form 351) revised on 8/22/13.	3
SY7	Requires documentation of (1) AL Medicaid approved risk factor	72
SY9	Hospital discharge summary from birth must be resubmitted with AL Medicaid Synagis request form (form 351).	120

* There were 606 palivizumab denials from September 1, 2012 to December 31, 2012.



* There were 606 palivizumab denials from September 1, 2012 to December 31, 2012.

Claims Overview

The table below details palivizumab usage and other information pertinent for trending purposes.

Category	2012	2013
Unique Recipients with a Palivizumab Request	1105	1168
Unique Recipients with a PA Approval	833	883
Unique Recipients with a PA Denial	445	412
*Unique Recipients with ONLY a Denial	*272	*285
*Unique Recipients with a Denial and Subsequent Approval	*173	*127
Total Palivizumab PA Approvals	1275	1395
Total Palivizumab PA Denials	606	570

Conclusion

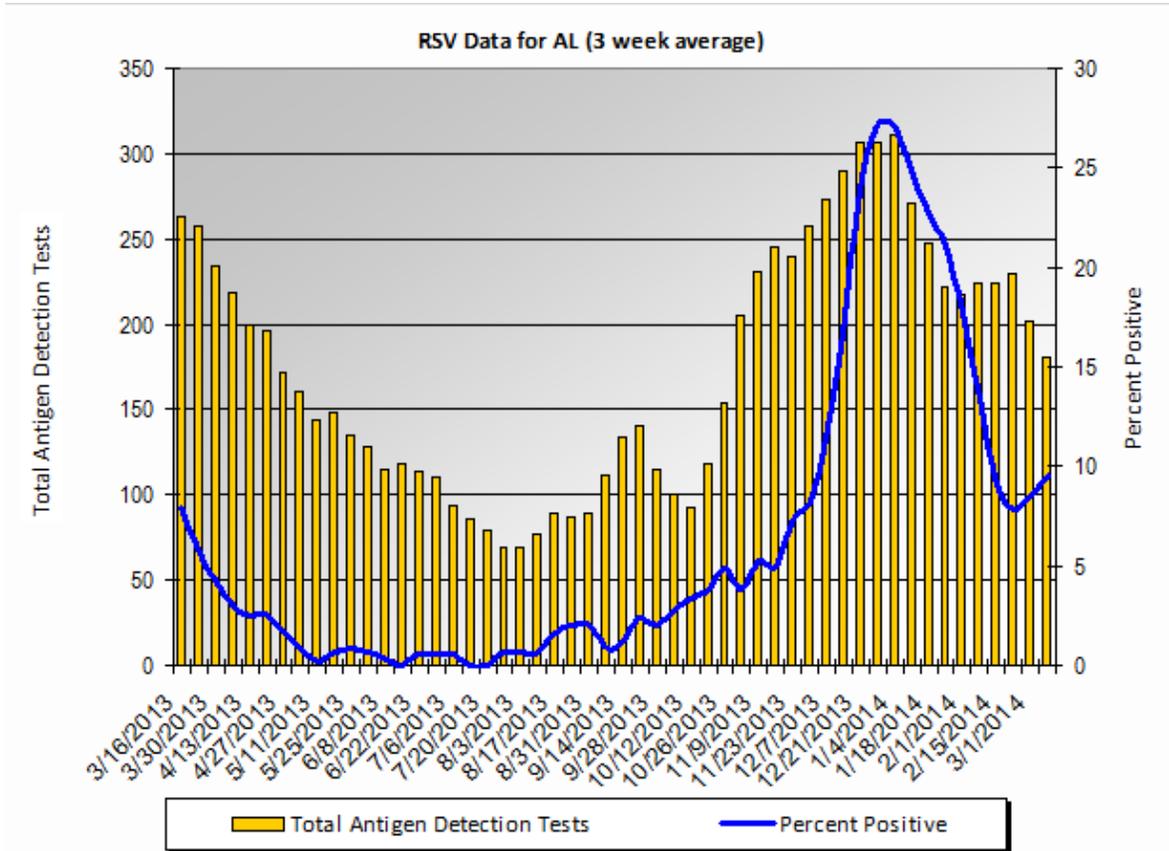
Each season, the Alabama Medicaid Agency, as well as HID, makes every effort to work with and be available to palivizumab providers. HID also strives to review palivizumab PAs in an impartial, consistent, and effective manner. Our goals are to ensure appropriate utilization of this medication, to encourage consistent compliance with the administration regimen, and to minimize waste.

Appendix A

Introduction

This appendix provides supplemental comparison data for this utilization analysis.

RSV Data (Alabama)



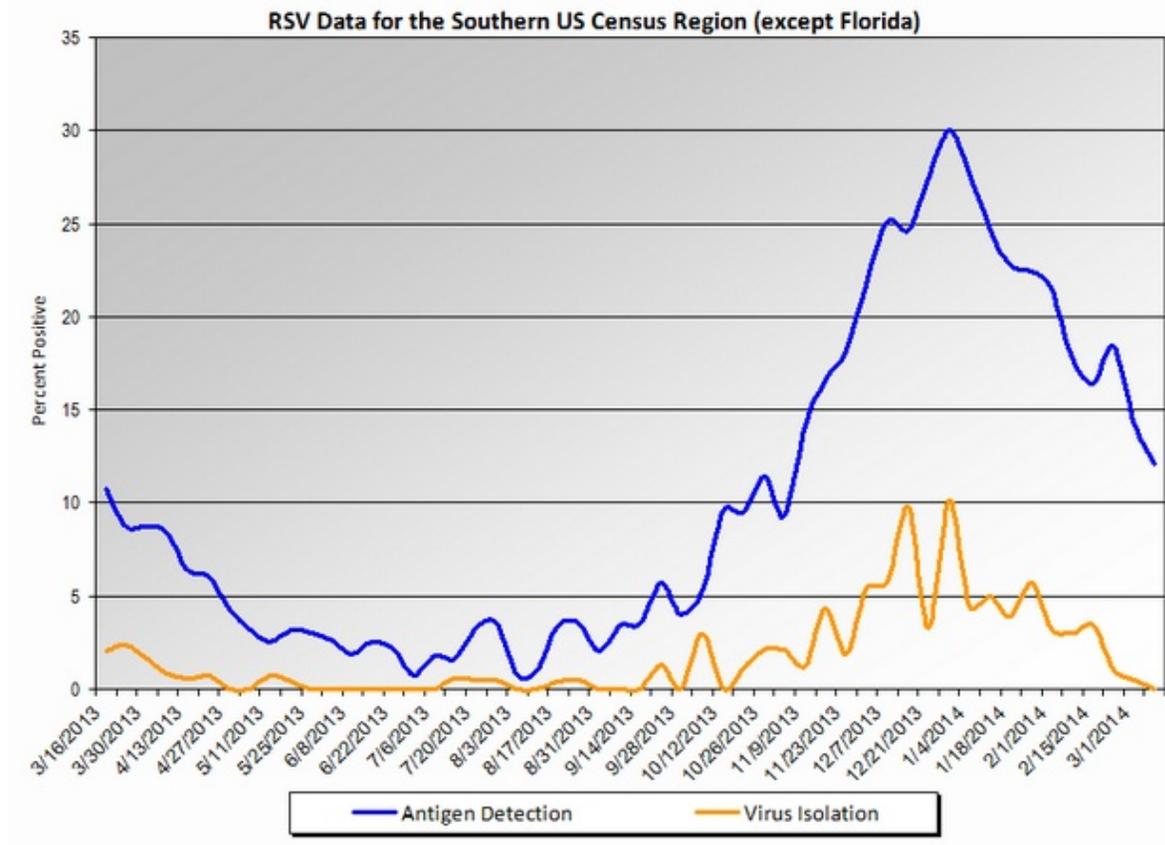
The following list shows the NREVSS participating labs in the Alabama area:

- Atmore Hospital Lab - Atmore, AL
- Baptist South - Montgomery, AL
- Crestwood Medical Center - Clinical Laboratory - Huntsville, AL
- Elmore Community Hospital Laboratory - Wetumpka, AL
- Marshall Medical Center South - Boaz, AL
- NE Alabama Regional Med Center - Anniston, AL
- UAHSF Diagnostic Virology Laboratory - Birmingham, AL
- University of South Alabama Medical Center - Mobile, AL

Source: <http://www.cdc.gov/surveillance/nrevss/rsv/state.html#AL>. Accessed on 03/14/2014.

RSV Data (Southern Region)

Southern United States Census Region



Source: <http://www.cdc.gov/surveillance/nrevss/rsv/region.html#south>. Accessed on 03/14/2014.