



Rx TWO PHARMACY SERVICES, INC.

MEDICATION NEWSLETTER

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Medicare News

Health and Human Services Secretary Michael Leavitt would have the authority to extend the May 15 deadline for beneficiaries to sign up for the Medicare Part D prescription-drug benefit under a budget amendment approved by the U.S. Senate. Offered by Senate Finance Committee Chairman Charles Grassley, the amendment was approved by a 76-22 tally ahead of the Senate's March 16 vote to approve its 2007 Fiscal Year Budget Resolution. Under the amendment, penalties for late enrollment would be waived. However, while Grassley's bill would grant authority to push back the deadline, it wouldn't require Leavitt to do so. The Senate deadlocked 49-49 on a separate amendment from Sen. Bill Nelson, that would have mandated the deadline be extended until Dec. 31. A report from the Congressional Budget Office pegged the cost of the mandatory extension to the Medicare program at \$2 billion. The White House has held firm in its contention that the current May 15 deadline should be maintained.

Medicare announced on 3/23/06 that 1.9 million additional beneficiaries have signed up for prescription drug coverage since mid-February. This represents a 25 percent increase over last month in the number of people who have selected a plan and brings the total of those who have signed up individually over the past four months to approximately 7.2 million. More than 27 million Medicare beneficiaries are enrolled in prescription drug coverage and are signing up at a rate of 380,000 per week.

A new analysis shows that many of California's one million dual-eligible beneficiaries receive inferior drug access to key drugs under

Medicare Part D compared to their previous state-sponsored Medicaid coverage. The study, prepared by Avalere Health, was released by the California HealthCare Foundation and presented to the California State Assembly. Using its proprietary DataFrame(TM) tool, Avalere Health analyzed CMS' publicly available data from October 2005 to assess if drug coverage for California's dual-eligible beneficiaries is better or worse after the transition to Part D drug plans. Their evaluation of the ten prescription drug plans (PDPs) that accepted California's auto-assigned dual-eligible beneficiaries revealed many instances of inferior coverage when compared to previous coverage offered by Medi-Cal. There are a total of 164 drug plans in California. Among these 164 plans, cost-sharing tiers range from two to eight tiers. Standard commercial drug plans average three tiers. Among these 164 plans, the number of drugs on formulary ranges from 530 to 3,360 (out of an approximate 8,000 FDA approved drugs). Monthly premiums range from \$0.00 - \$66.08, with deductibles ranging from \$0 - \$250. One in four Californian Medicare beneficiaries is a dual-eligible, and one million of the 6.2 million national dual-eligibles live in California. Dual-eligibles are the only Medicare beneficiaries that were auto-enrolled into the Part D program.

New FDA Approved Medications, Warnings, Indications, Formulations and News:

New Medication Guide Required by FDA for NSAIDs

The Food and Drug Administration (FDA) is now requiring a medication guide be provided with every initial dispensing and refill of a prescription non-steroidal anti-inflammatory drug (NSAID). The medication guide focuses on the potential increased risk of serious adverse cardiovascular events and the risks of

serious gastrointestinal bleeding. It also informs patients of the need to discuss the risks and benefits of NSAIDs with their doctor, and the importance of using the lowest effective dose for the shortest possible duration. In April 2006, each pharmacy will be provided with an initial supply of 3 pads of 50 medication guides. Nursing facility residents are generally considered exempt from the FDA's medication guide requirement. For more information, visit <http://www.fda.gov/cder/drug/infopage/COX2/NSAIDmedguide.htm>

The FDA has approved the use of Relenza (zanamivir for inhalation) for prevention of influenza in adults and children 5 years of age and older. Relenza, an antiviral medication, was previously approved for the treatment of influenza A and B virus infections in adults and children. Tamiflu (oseltamivir phosphate) previously was approved for both prevention and treatment of flu; this approval of Relenza for prevention provides Americans with another option for the prevention of influenza A and B infections. Relenza has not been proven effective for treatment of influenza in people with underlying airways disease, or for prevention of influenza in nursing homes. The drug is also not a substitute for the flu vaccine, which is the primary means for preventing influenza. Consumers should continue receiving an annual flu vaccination according to current immunization guidelines.

The FDA has approved the first-ever inhaled powder formulation of recombinant human insulin (Exubera - manufactured by Pfizer). In clinical studies, inhaled insulin reached peak serum concentrations more quickly than some injected insulins, according to a FDA press release. For patients with type I diabetes, inhaled insulin can be used as a replacement for short-acting insulin taken with meals and in conjunction with longer-acting insulins. In patients with type II diabetes, inhaled insulin can be used alone, in conjunction with oral blood glucose-lowering medications, or with longer-acting insulins. Exubera is expected to be available in pharmacies mid 2006.

A new injectable form of sumatriptan succinate (Imitrex injection) enables patients to self-administer a 4mg dose under the skin with the push of a button. This product is indicated for the acute treatment of migraines with or without aura in adults. The injectable form bypasses the digestive system and enters the bloodstream quickly. It may be more appropriate for morning migraine, migraine accompanied by nausea and vomiting, or rapidly escalating migraine. Imitrex injection should not be given IV or to patients with history, symptoms, or signs of ischemic cardiac, cerebrovascular, or peripheral vascular syndromes.

Roche and GSK have introduced Boniva injection (ibandronate sodium), the first quarterly IV treatment for postmenopausal osteoporosis. Administered by a health care professional as a 15 to 30 second IV injection every three months, the bisphosphonate offers a new option for patients who have problems with oral bisphosphonate dosing requirements, such as not being able to swallow a pill or sit upright for 30 to 60 minutes. Boniva is also available in a once-a-month tablet formulation.

Abilify (aripiprazole) is now available in a 2mg tablet and as a 1mg/ml non-refrigerated oral solution.

Generic Drug Approvals:

Flonase nasal spray (Fluticasone Propionate)

Coreg (Carvedilol) tablets, 3.125mg, 6.25mg, 12.5mg and 25mg

Rx Two Pharmacy Services, Inc. was formed by a group of dedicated and seasoned LTC pharmacy professionals with the goal of providing comprehensive pharmacy services for our contracted nursing centers and their residents by utilizing state of the art computer technology and good old fashioned hard work.

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