

## **Quality Assurance and Drug Utilization Management Information**

RiverSpring Health Plans has established a Quality Assurance program that is designed to ensure our members receive high quality, medically appropriate and cost effective health care. The program monitors and evaluates the quality and appropriateness of services provided. In addition, the program provides the framework to pursue opportunities for improvement and problem resolution. In addition to our Quality Assurance Program, RiverSpring Health Plans has also developed Drug Utilization Review (DUR) systems to identify drug-drug interactions, unusual dosage of a particular drug, concerns with the age and/or gender of the consumer and various other factors. The RiverSpring Health Plans DUR system evaluates the appropriateness of the prescription at the point-of-sale by utilizing the following safety edits:

**Drug-Drug:** This edit will alert the pharmacy if there is another medication that interacts with the medication being filled.

**Therapeutic Duplication:** This edit will alert the pharmacy if there is another medication that is considered a therapeutic duplication.

**Dose Optimization:** This edit will alert the pharmacy if the dose requested is outside of the normal dosing and duration/range of therapy guidelines.

**Drug-Age:** This edit will alert the pharmacy if the drug should not be used for consumers in a specific age range, based on FDA regulatory guidelines.

**Drug-Gender:** This edit will alert the pharmacy if the drug should not be used for consumers of a specific gender.

**Drug-Pregnancy:** This edit will alert the pharmacy if the drug should not be used for female consumers of reproductive age.

**Drug-Opioid 90 MME:** This soft edit will alert the pharmacy when a member's paid claims drug history indicates that the member is currently taking over 90 MME.

**Drug-Opioid 200 MME:** This hard edit will alert the pharmacy when a member's paid claims drug history indicates that the member is currently taking over 200 MME.

**Drug-Opioid Naïve:** This edit will alert the pharmacy when attempting to fill more than a 7 day supply for an opioid naïve member. If member has been identified as an opioid naïve and the prescription is over a 7 day supply, a Prior Authorization will be required for any amount over the 7 day limit.

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