

Quality Assurance and Drug Utilization Management Information

ElderServe Health 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; as well as provides the framework to pursue opportunities for improvement and problem resolution.

In addition to our Quality Assurance Program, ElderServe Health has developed a Drug Utilization Review (DUR) system to identify drug interactions, unusual dosing of a particular drug, concerns with the age and/or gender of the member and various other factors. The ElderServe Health 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.

Prescriber Count for 90MME: This edit will alert the pharmacy if claims originated from four or more prescribers and exceeds the configured dosage limit of a 180 day lookback.

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.

Prescriber Count for 90MME: This edit will alert the pharmacy if claims originated from four or more prescribers and exceeds the configured dosage limit of a 180-day lookback.

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.