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SoonerCare pharmacy lock-in program promotes appropriate use of medications

OKLAHOMA CITY – A recent study of members enrolled in SoonerCare’s pharmacy lock-in program shows positive change in members’ behavior, including reduced narcotic use.

The Oklahoma Health Care Authority created the lock-in program to encourage appropriate use of health care resources among members who have been associated with potential misuse of resources or potentially fraudulent behavior. The program provides a way to detect potential misuse of narcotic and other medications and a procedure to “lock in” the member to one pharmacy, thereby limiting the opportunity for inappropriate behavior within the SoonerCare (Oklahoma Medicaid) system.

Before they are locked in, members’ activities and history are reviewed around several criteria that may include:

- Increased number of ER visits.
- Increased number of unique pharmacies.
- Increased number of prescribers/physicians.
- Increased number of days supply of narcotics, anti-anxiety drugs, antidepressants, etc.
- Diagnosis of drug dependency or related diagnosis.
- Increased number of hospital discharges.

Recently, information about members enrolled in the program was studied to see how enrollment in the lock-in program affected members’ use of narcotics and maintenance medications, emergency room visits, number of pharmacies and physicians used each month, and expenditures for pharmacy and emergency departments.

The analysis showed a positive change in members' behavior, including a decrease in use of narcotic medications, multiple pharmacies and physicians, and emergency department visits. It did not show any change in the use of maintenance medications for these members, suggesting that the lock-in program did not affect therapies for chronic conditions.

The results suggest that the program successfully promotes appropriate use of health care resources and reduces potentially inappropriate narcotic use and SoonerCare costs. Cumulative estimated narcotic cost savings for the first 12 months post lock-in for the 52 members studied was more than \$31,500 – an average of about \$600 per member.

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