September Pharmacy Newsletter

CHANGES TO POST NOTICE OF ADVERSE BENEFIT DETERMINATION (NABD) PEER-TO-PEER (P2P) DISCUSSIONS EFFECTIVE 9/1/2026

Mercy Care is required to comply with AHCCCS requirements (ACOM 414) and federal managed care regulations, including 42 CFR § 438.210(b). To meet these requirements, Mercy Care is updating its process for post-NABD peer-to-peer (P2P) discussions.

What is changing?
Effective Sept. 1, 2026, if a Notice of Adverse Benefit Determination (NABD) has already been issued, any subsequent peer-to-peer discussion will be educational and informational only.

During the peer-to-peer discussion, the reviewer:

- May discuss the clinical rationale for the decision.
- May answer questions regarding the applicable criteria or guidelines used to make the decision.
- May provide education regarding future authorization requests.
- Will not overturn, reverse, or modify the original denial decision during or after the peer-to-peer discussion.

If you disagree with a denial
After an NABD has been issued, any request for reconsideration must be submitted through the formal member appeal process.

BEYOND DEA SCHEDULING: A COLLABORATIVE APPROACH TO MEDICATION STEWARDSHIP

When discussing misuse of medication, controlled substances are often top of mind. However, emerging trends highlight the importance of looking beyond DEA scheduling to identify opportunities for safer medication use and improved patient outcomes. Certain non-controlled medications may also be misused, diverted, or used in combination with other central nervous system depressants, creating potential safety concerns.

A proactive approach to medication stewardship can help providers recognize patterns that may warrant further evaluation, including early refill requests, escalating utilization, therapeutic duplication, and use of multiple sedating medications. Reviewing medication histories, leveraging Prescription Drug Monitoring Program (PDMP) data when appropriate, and engaging patients in open, nonjudgmental conversations can support informed clinical decision-making.

Medication stewardship is most effective when providers, pharmacists, behavioral health professionals, and care managers work together. Combining clinical expertise with medication utilization insights can help identify potential risks earlier, optimize therapy, and support safe, appropriate access to care.

KEY POINTS FOR PROVIDERS

- Medication misuse risks may extend beyond controlled substances.
- Focus on patterns of medication use rather than isolated prescriptions.
- Prescription Drug Monitoring Program (PDMP) data and pharmacy claims data can complement clinical judgment.
- Early intervention and patient-centered discussions can improve medication safety.
- Collaboration among providers, pharmacists, behavioral health professionals, and care management teams supports safer prescribing and improved patient outcomes.

Medication stewardship is a shared patient-safety effort. By combining clinical expertise with medication utilization insights, healthcare teams can support earlier interventions, reduce medication-related risks, and promote appropriate access to care.

References:

1. Institute for Safe Medication Practices. Drug diversion prevention beyond controlled substance medications. ISMP Medication Safety Alert! Acute Care. Mar 7, 2024.
2. CDC. Prescription Drug Monitoring Programs (PDMPs). Updated May 6, 2024.
3. Combs KG et al. Jurisdiction-specific gabapentin laws and Schedule V classification/PDMP reporting, 2025.
4. SAMHSA. 2024 National Survey on Drug Use and Health, 2025 release.

PREFERRED DRUG LIST UPDATES CAN BE FOUND HERE:

ACC-RBHA, DD, ALTCS and DCS CHP	Behavioral Health (Non-Title 19/21)

** Drugs that are not on the formulary will require a PA (prior authorization) request to be submitted**

Reminder for quicker determinations of a Prior Authorization use the ePA link for Our Providers: Please click here to initiate an electronic prior authorization (ePA) request.

This newsletter is brought to you by the Mercy Care Pharmacy Team. For questions, please email Fanny A Musto (MustoF@mercycareaz.org), Jasmine Phillips (PhillipsJ6@aetna.com)