NON-DISCRIMINATION FORMULARY CLINICAL APPROPRIATENESS TOOL

Using this Guide

The following characteristics are intended to focus the user to where actions are warranted:

- Items that appear in *italics* are features. (e.g., See the *Instructions tab* in the Master Review Tool.)
- Items that are in **bold** type are functions. (e.g., **Click "Save." Click "Import Data from Master Review Tool.")**
- For space considerations, screenshots of Excel worksheets may not include the full data picture.

Loading the Data

Before you can begin the Non-Discrimination Formulary Clinical Appropriateness Tool steps, **download** the tool from SERVIS (https://servis.cms.gov/resources/document_detail?doc_detail_id=c2de042d-bf0e-4e2a-46da-53691d3dc025) (states) or CMSzONE (https://zone.cms.gov/document/2015-qhp-application-review-tools) (issuers).

If you are using this stand-alone tool, we recommend that you review the validation steps in the Master Review Tool *Benefit Cost Sharing tab* to understand the logic of the tool and where justifications may overcome the tool's automated results.

1. **Place** all of the prescription drug Excel templates to be reviewed into a folder that you can easily access. Issuers may submit separate sets of templates for individual and Small Business Health Options Program (SHOP) plans. In this case, an issuer can submit two drug lists with the same ID – one for the individual Marketplace and one for the SHOP Marketplace. For this tool to distinguish between these two drug lists, the tool will need to be run once for both sets of templates.

For consideration: The default and recommended threshold values are shown; a higher value will result in a more stringent review, while a lower value will result in a more lenient review. You may input the test threshold values for the review calculations for each review test. To reset the thresholds to the suggested values, **click** the **"Reset Thresholds"** button. Note: Threshold values are restricted to values between zero and the highest number possible for a particular test.

2. After thresholds are confirmed**, save** the workbook before you run the tool.
3. Click "Run Review Tool" in row 23.
4. **Save** the workbook again.
5. To clear the data from all the worksheets to facilitate analysis of another set of data such as SHOP, **click "Clear Data"** in row 30.

Note: If there is an error tab displayed, this tab lists any errors that were found while running the review. This tab will not be displayed if no data errors were detected.

Note: If you wish to change the thresholds, you will have to rerun this review. Please follow the instruction steps again. You do not need to clear the data to rerun the review, but know the previous results will be overwritten if the tool is run again.

Warning! Depending on the number of templates and drug lists that are run, this process could take several minutes. After pressing the button, do not do anything with Excel until the process has finished. If you interrupt the process, you will need to restart the process.

Data Analysis

1. The *Summary tab* displays the overall results of the non-discrimination formulary clinical appropriateness tests. The results for each individual test will be shown, as well as the results for the overall clinical appropriateness review for each drug list.
2. The *Diabetes Tests*, *Rheumatoid Arthritis Test*s, and *Bipolar and Schizophrenia Tests tabs* display the results for the specific tests that are being reviewed for the diabetes, rheumatoid arthritis, and bipolar and schizophrenia conditions, respectively, for each drug list. If the "Drug" column has a value of "All" for a particular condition and class, then the test is based on all the drugs in a particular condition and class. Otherwise, the test is based on the individual drug that is listed. The test can be for:
    - Covered Count: The number of RxCUIs the drug list contains for the specific test.
    - Unrestricted Count: The number of RxCUIs the drug list contains for the specific test without prior authorization or step therapy requirements.

Note: The *RxCUI counts* in these three tabs are different from the covered and unrestricted drug counts in the *Detailed Drug Counts tab*. These counts do not match across tabs.

3. In the *Detailed Drug Count tab*, the total number of chemically distinct drugs that are covered and the total that are unrestricted are counted and displayed. This tab displays the results of the review for each drug in the conditions and classes being reviewed. For each drug list, each drug is either:
    - Uncovered: The drug list does not contain any RxCUIs associated with the drug.
    - Unrestricted: The drug list contains at least one RxCUI associated with the drug without prior authorization or step therapy.
    - Restricted with Prior Authorization (PA): All of the RxCUIs on the drug list associated with the drug have only a prior authorization requirement.
    - Restricted with Step Therapy (ST): All of the RxCUIs on the drug list associated with the drug have only a step therapy requirement.
    - Restricted with Both Prior Authorization and Step Therapy (PA, ST): All of the RxCUIs on the drug list associated with the drug have either prior authorization or step therapy requirements. Some RxCUIs may have both requirements.
4. Using the data in Non-Discrimination Clinical Appropriateness Tool tabs, **go to** the Master Review Tool *Clinical Appropriateness tab* and indicate if an issuer's drug lists have met the formulary requirement. For each issuer's drug list, **populate "Met"** or **"Not Met"** from the drop-down menus at the top of each column in the row.
5. Once completed, **open** the Master Review Tool *Review Summary tab* to see the auto-populated results in row 17.
6. **Save** the Master Review Tool after you have completed the clinical appropriateness review.