
North Dakota Medicaid Pharmacy Program Quarterly News

Published Quarterly by Health Information Designs, LLC

Welcome to the “North Dakota Medicaid Pharmacy Program Quarterly News,” a pharmacy newsletter presented by the North Dakota Department of Human Services and published by Health Information Designs, LLC. This newsletter is published as part of a continuing effort to keep the Medicaid provider community informed of important changes in the North Dakota Medicaid Pharmacy Program.

The North Dakota Department of Human Services has contracted with Health Information Designs, LLC (HID) to review and process prior authorizations (PAs) for medications. For a current list of medications requiring a PA, as well as the necessary forms and criteria, visit www.hidndmedicaid.com, or call HID at (866) 773-0695 to have this information faxed. An important feature on this website is the NDC Drug Lookup. This allows you to determine if a specific NDC is covered (effective date), reimbursement amount, MAC pricing, copay information, and any limitations (prior authorization or quantity limits).

This newsletter provides information regarding allergic rhinitis.

The North Dakota Medicaid Pharmacy Program team appreciates your comments and suggestions regarding this newsletter. To suggest topics for inclusion, or to make comments, please contact Health Information Designs, LLC at (334) 502-3262, call toll free at 1-800-225-6998, or e-mail us at info@hidinc.com.



Helpful Numbers

PA Help Desk	866-773-0695
To fax PAs	866-254-0761
To report adverse reactions	800-FDA-1088

Inside this issue:	Page
Welcome	1
Helpful Numbers	1
Understanding Allergic Rhinitis	2
AAFP Guidelines for Treatment	3
Health Information Designs, LLC	4

Visit HID's North Dakota Department of Human Services Prior Authorization Webpage, www.hidndmedicaid.com.

Understanding Allergic Rhinitis

Allergic rhinitis is the sixth most prevalent chronic illness in the United States with the possibility of association or predisposal to other chronic medical conditions, including asthma, nasal polyps, respiratory infections, otitis media, sinusitis, and orthodontic malocclusions. The annual costs of allergic rhinitis are close to five billion dollars and are increasing as newer, more expensive treatment options become available.

Allergic rhinitis is characterized by the inflammation of nasal mucosal membranes in response to exposure and sensitization to specific allergenic material via inhalation. There are two different types of allergic rhinitis (seasonal rhinitis or perennial rhinitis), with a third type identified as those patients who have mixed allergic rhinitis (patient suffers from both seasonal and perennial). Seasonal rhinitis occurs in response to specific antigens present only during specific times of the year and results in acute symptoms. Perennial rhinitis occurs year-round in response to non-seasonal allergens and produces chronic, more subtle symptoms.

Allergic rhinitis begins when a patient is exposed to an allergen (via inhalation) and the allergen is processed by lymphocytes. Patients who are genetically predisposed will produce IgE antibodies against the allergen. Upon re-exposure, IgE on the surface of histamine producing mast cells bind the antigen leading to degranulation of the mast cell and an immediate release of inflammatory mediators (histamines, leukotrienes, prostaglandins, kinins, and tryptans). These mediators act to vasodilate the capillary bed of the nasal capillary, increase vascular permeability, as well as increase the production of nasal secretions. This acute reaction will produce some or all of the following symptoms: itching, sneezing, rhinorrhea, and obstruction. A late phase reaction, releasing lymphocytes and cytokines, can produce nasal congestion.

Seasonal allergies include the pollens produced by grasses, trees, and weeds. Perennial allergens include mold spores, dust mites, cockroaches, and pets. Understanding which allergen causes a patient's symptoms is very important. Tree allergens are produced during the spring; grasses tend to pollinate from late spring through summer, while weeds produce the most pollen from late summer to early fall. Patients with seasonal allergies do not require continuous treatment throughout the year, but should begin therapy several weeks prior to the peak season for their allergen, and continue throughout the entire season of allergen production.

Patients with allergic rhinitis often present with generalized symptoms of clear rhinorrhea, sneezing, nasal congestion, and postnasal drip. Patients may also complain of itchy eyes and ears. Those suffering from allergies may breathe through their mouths instead of their nose; they may also have swollen eyes and complain of lost taste/smell, loss of concentration, poor sleep, and experience symptoms of chronic fatigue.

Understanding Allergic Rhinitis (cont'd)

Not all causes of rhinitis are allergy related. Diagnosis of allergic rhinitis requires a thorough medical history and physical exam. Important questions include frequency and severity of symptoms, times of the year when symptoms occur, environmental exposure, and previous medication therapy. Additionally, family history is very important due to the genetic predisposing factors associated with allergic rhinitis.

Diagnostic tests helpful in diagnosing allergic rhinitis include nasal scraping and allergy testing. Nasal scraping involves scraping cells from the patient's nostrils and evaluating them to determine which cells are infiltrating the nasal mucosa. Patients with allergic rhinitis usually have an increasing number of eosinophils, which are heavily involved in the mechanisms associated with allergy and asthma. Allergy testing is also helpful in determining which allergens are causing patient's symptoms. Allergy testing may be accomplished via skin scratches or blood draws.

Among therapies, non-pharmacological interventions may provide alleviation of the symptoms associated with allergic rhinitis. Allergen avoidance is the most effective therapy identified in treating allergic rhinitis. Patients suffering from seasonal allergies should limit their time outdoors during the trigger season and wear masks when outdoors. Additional measures include keeping windows and doors closed, avoiding inward draws of outdoor air, and showering promptly after outdoor activities. Patients are best treated by a combination of non-pharmacological and pharmacological therapies.

American Academy of Family Physicians Guidelines include:

1. Intranasal corticosteroids should be considered as first-line therapy in patients with moderate to severe disease.
2. Patients with moderate to severe disease not adequately controlled with intranasal corticosteroids monotherapy should receive treatment with an appropriate second-line agent including antihistamines, decongestants, cromolyn, and leukotriene receptor modulators.
3. Patients who do not respond to first or second-line agents should be referred to an immunologist or other specialist trained in the administration of immunotherapy.



Health Information Designs, LLC is the most experienced and qualified provider of drug utilization review and pharmacy support services in the country. We specialize in helping our clients promote clinically appropriate and cost-effective prescribing, dispensing, and utilization of prescription drugs.

Health Information Designs, LLC was founded in 1976 with a mission to improve patient care and contain costs for state Medicaid agencies by providing drug utilization review (DUR) services. In 1997, HID was acquired by HDI Solutions and subsequently has experienced strong and steady growth as a premium healthcare analytics and pharmacy support services provider. HID is the industry leader in providing comprehensive prescription drug monitoring programs. Currently, HID works with clients in 30 states, including 16 Medicaid agencies, 22 Boards of Pharmacy and state health agencies, and several private healthcare benefit management organizations. The work performed by HID has a daily impact on the healthcare of more than 115 million Americans.

**HEALTH
INFORMATION DESIGNS**

391 Industry Drive
Auburn, AL 36832
Tel: 800-748-0130
Fax: 800-748-0116

PRST STD
U.S. Postage