



REPORT FOR MARCH 1, 2022

Top Ten List of Outpatient Prescription Drugs pursuant to [Conn. Gen. Stat. §19a-754b\(d\)](#)

Statutory Reference: Conn. Gen. Stat. §19a-754b

The Office of Health Strategy (OHS) is charged by statute to develop a list of not more than ten outpatient prescription drugs that OHS determines are provided at substantial cost to the state or critical to public health. The list must be based on the specifications outlined in Conn. Gen. Stat. § 19a-754b(b)(1):

- The list must include at least one generic drug;
- The list must include drugs from different therapeutic classes;
- *The list cannot include any drugs that did not have at least a 20% increase in cost during the past year or 50% during the past three years; and
- *The list cannot include any drugs that were less than \$60 for either a 30-day supply or a course of treatment lasting less than 30 days.

**The statute requires that these two criteria be based upon the wholesale acquisition cost (WAC) of the drug, less all rebates paid to the state for the drug. The rebate data is unavailable at this time.*

Methodology: OHS utilized the statutory criteria of \$60 for a 30-day supply or course of treatment for less than thirty days to identify the top 50 outpatient prescription drug by National Drug Code (NDC). Cost for an NDC is the allowed amount for a pharmacy claim which is the sum of the state paid amount and member out of pocket cost (i.e. deductible, co-insurance and co-pay). OHS then identified NDCs with the highest state of CT expenditures and applied the wholesale acquisition cost (WAC).

Finding: OHS reviewed the increases over the last year and during the past three years and determined that none of the drugs by NDC met the statutory criteria of 20% increase from SFY 2020 -2021, or 50% increase from SFY 2018 - 2021.

Source of Data: OHS reviewed the 2021 drug list using its All-Payer Claims Database (APCD). APCD data is submitted by the insurance carriers, Medicare, Medicaid, and the state employee plan. OHS receives the data on a quarterly basis.

OHS may release separate information or data that provides useful information to enhance transparency. The additional lists will also be based on the state plan dataset.

This listing and any additional list or data releases which OHS posts or makes available, will not trigger the information and data filings required by Conn. Gen. Stat. § 19a-754b (c)(2)

from drug manufacturers, until the next list is released in March 2023.