

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

TO <i>Myers</i>	DATE <i>5-13-08</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000587</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Claud S/23/08, letter attached</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>5-22-08</i>
	<input type="checkbox"/> FOIA DATE DUE _____
	<input type="checkbox"/> Necessary Action

APPROVALS <small>(Only when prepared for director's signature)</small>	APPROVE	* DISAPPROVE <small>(Note reason for disapproval and return to preparer.)</small>	COMMENT
1.			
2.			
3.			
4.			



IMPROVING THE HEALTHCARE AND LIFE EXPECTANCY OF ETHNIC POPULATIONS AROUND THE WORLD

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MAY 07 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR

May 6, 2008
Emma Forkner
Director of Health and Human Services
PO Box 8206
Columbia, SC 29206

Dear Ms. Forkner,

I was quite concerned to learn that the State of South Carolina was considering restricting patients access to clinically proven statins. As an organization that is dedicated to reducing ethnic health disparities focused on cardiovascular disease we believe this action will have a negative impact on the cardiovascular health of the State's population.

Medicaid patients on statins have coronary artery disease, renal disease, congestive heart failure and are at a high risk of stroke. In fact, South Carolina is one of the States in what is called the stroke belt which has a higher incidence of stroke than the country in general. Your proposed action will only compound this problem.

Restricting access to these medications will cause disruption in patient care. This action will mean that Medicaid patients will have to go to multiple office visits which will increase the cost burden on the State. Medication compliance is a significant problem with chronic cardiovascular disease. Mandatory switching of medications will reduce patient compliance further. The ramifications of this will increase cost as patients who are not compliant in their medication will suffer more heart attacks, strokes, renal failure. These major medical complications will cost the State much more than the cost of current medications to keep their cardiovascular disease under control.

I urge you to reconsider this issue and do what is right for patient care and improved health. Thank you for your consideration of the letter.

Sincerely,

Jack Hannings
Executive Director



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

May 23, 2008

Jack Hannings, Executive Director
International Society on Hypertension in Blacks
157 Summit View Drive
McDonough, Georgia 30253

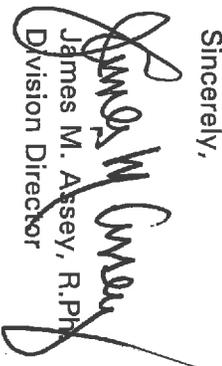
Dear Mr. Hannings:

Thank you for your letter faxed May 6, 2008, to our agency director, Ms. Emma Forkner. The position you have articulated regarding unrestricted access to clinically proven statins is appreciated. Your letter regarding this matter was shared with our Pharmacy and Therapeutics (P&T) Committee members prior to the May 7, 2008 meeting.

South Carolina Medicaid's Preferred Drug List (PDL) utilizes a clinically based review process in its development. A committee of eleven physicians and four pharmacists who are Medicaid providers recommends placing drugs on a preferred list when evidence demonstrates that they are the most clinically effective choice for treating a particular condition. Additional input from Medicaid provider physicians and the pharmaceutical industry is received and considered. When no documented benefit exists between one drug and another for treating the same condition, the most cost-effective drug generally is selected. In any event, all FDA approved drugs will continue to be available to Medicaid beneficiaries but some may require prior authorization. The P&T Committee's recommendations regarding the range of covered statins are now under consideration. Once a final decision is made, a Medicaid Bulletin will be issued to all affected Medicaid providers.

Thank you for your interest in the citizens we serve.

Sincerely,


James M. Assey, R.Ph.
Division Director

JMA/as

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