

Fiscal Year 2010 Annual Review of Qualaquin®

Oklahoma HealthCare Authority

April 2011

Current Prior Authorization Criteria

- Approval based on an FDA approved diagnosis of malaria.
- Off label use for the prevention/treatment of leg cramps and other related conditions will not be covered.

Utilization of Qualaquin®

Comparison of Fiscal Years

Fiscal Year	Members	Claims	Cost	Cost/Claim	Per diem	Units	Days
2009	0	0	0	0	0	0	0
2010	0	0	0	0	0	0	0
% Change	0	0	0	0	0	0	0
Change	0	0	0	0	0	0	0

Prior Authorization of Qualaquin®

There were a total of 18 petitions submitted for Qualaquin® during fiscal year 2010. The following table shows the status of the submitted petitions.

Status of Petitions for Qualaquin®: FY 2010

Status	Total PA Count
Approved	0
Denied	14
Incomplete	4

Conclusion and Recommendations

The College of pharmacy recommends continuing the current criteria for Qualaquin.