



## Kyle

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### **CIDNY recommends that the State:**

Ensure that strong consumer protections accompany implementation of a preferred drug list for Medicaid beneficiaries

## **Hurdles to Prescription Drugs = High Risk for Patients**

Kyle, now 49 years old, was a commercial and residential furniture mover until May, 2000 when he suffered a severe back injury on the job. Kyle needs ten prescriptions per month to treat the symptoms caused by his disability and to treat his diabetes. It took several months for his doctors to find the right combination of medications for Kyle. His prescriptions for severe chronic pain and muscle spasms include Celebrex, Flexoral, Vicodin, Oxycontin and Elavil. His diabetes treatment requires Glucophage, Glyburide, Monopril and renididine.

This year, Kyle's Medicaid was interrupted due to administrative errors. Without Medicaid, Kyle could not access his prescription drugs. He quickly realized just how dangerous this was for his health.

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Kyle worries that if he has to change medications he will upset the delicate balance of his health. In addition, he worries that requiring prior authorization for ten prescriptions each month will likely put him at risk for further interruptions in his access to his medications because his clinic-based doctors are often too overwhelmed to obtain ten authorization codes each month.