#### MEDICAID POLICY INFORMATION SHEET

Policy Analyst: Vicki Goethals Phone Number: 517-335-6611 Public Comment | X Final Initial Brief description of policy: The purpose of this policy is to streamline prescription drug coverage policies and enhance medical management of complex drug therapies. This bulletin outlines the transition plan for drugs that will be carved back into Medicaid Health Plan (MHP) coverage. Reason for policy (problem being addressed): This hybrid carve-in/carve-out system is complex for all who participate in the program and confusing for providers who do not know which payer to bill. Beneficiaries often do not know who to contact for questions on their drug coverage. As a result, MHPs are prevented from managing their members' full drug therapy regimen as part of their treatment, and it creates administrative challenges for the Michigan Department of Health and Human Services (MDHHS). **Budget implication:** budget neutral , and (select one) budgeted in current appropriation will cost MDHHS will save MDHHS Is this policy change mandated per federal requirements? No Does policy have operational implications on other parts of MDHHS? Nο Does policy have operational implications on other departments? No **Summary of input:** controversial acceptable to most/all groups limited public interest/comment **Supporting Documentation:** Public Notice Required: State Plan Amendment Required: Yes  $\bowtie$  No Yes  $\bowtie$  No If Yes, please provide status: Approved Pending Denied If yes, Submission Date: Date: Approval Date:

1/18 Policy Info Sheet

DRAFT FOR PUBLIC COMMENT		
Michigan Department of		
Health and Human Services	Project Number: 1918-Pharmacy	<b>Date:</b> July 18, 2019
Commonto Duo. Aug	uot 22, 2010	

Comments Due: August 22, 2019
Proposed Effective Date: October 1, 2019
Direct Comments To: Vicki Goethals

Address: Pharmacy Management Division/MDHHS/MSA/CCC 4<sup>th</sup> Flr

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Policy Subject: Transition Fills for Carved-In Drugs		
<b>Affected Programs:</b> Medicaid, Healthy Michigan Plan, Children's Special Health Care Services (CSHCS), Maternity Outpatient Medical Services (MOMS)		
Distribution: All Providers		
<b>Summary:</b> This bulletin outlines the transition plan for drugs that will be carved back into Medicaid Health Plan (MHP) coverage.		
<b>Purpose:</b> To streamline prescription drug coverage polimanagement of complex drug therapies.	cies and enhance medical	
Cost Implications: None		
Potential Hearings & Appeal Issues: None		
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Comment001 Revised 6/16

# Proposed Policy Draft

#### Michigan Department of Health and Human Services Medical Services Administration

**Distribution:** All Providers

**Issued:** September 1, 2019 (Proposed)

**Subject:** Transition Fills for Carved-In Drugs

**Effective:** October 1, 2019 (Proposed)

**Programs Affected:** Medicaid, Healthy Michigan Plan, Children's Special Health Care

Services (CSHCS), Maternity Outpatient Medical Services (MOMS)

Effective October 1, 2019, certain drugs that are currently carved out and covered exclusively through Medicaid Fee-for-Service will be carved in and covered by Medicaid Health Plans (MHPs). The purpose of this change is to streamline prescription drug coverage policies and enhance medical management of complex drug therapies. This bulletin outlines the transition plan for drugs that will be carved back into MHP coverage. Refer to the Pharmacy chapter of the Medicaid Provider Manual, Medicaid Health Plans subsection for an overview of the original MHP Pharmacy Carve-out process. The Medicaid Provider Manual can be accessed on the Michigan Department of Health and Human Services (MDHHS) website at <a href="https://www.michigan.gov/medicaidproviders">www.michigan.gov/medicaidproviders</a> >> Policy, Letters & Forms

The MDHHS Health Plan Pharmacy Programs Carve-out list will be updated to reflect the changes described above. Drugs identified on the MDHHS Medicaid Health Plan Injectable Drugs and Biologicals Carve-out list will continue to be carved out. MHP Carve-out lists can be accessed at <a href="https://www.michigan.gov/medicaidproviders">www.michigan.gov/medicaidproviders</a> >> Billing & Reimbursement >> Provider Specific Information >> Medicaid Health Plan Carve-out.

#### **Transitional Drug Coverage**

The attached Appendix lists the drug classes that will be carved back into MHP pharmacy coverage. If an MHP enrollee is taking a drug in a class listed on the Appendix and the drug is not on the Medicaid Health Plan Common Formulary or requires prior authorization (PA), the MHP must extend continued coverage of drug products through December 31, 2019. This will allow the enrollee adequate time to obtain PA without interruption to drug therapy.

### **Prior Authorization Requirements**

PAs for enrollees (including CSHCS beneficiaries) currently in effect for carved-out drugs that are being transitioned back into MHP coverage will remain in effect through the PA's respective end dates. MHPs must send advance notice providing PA requirements and options for MHP enrollees currently taking a drug that will be carved back into MHP coverage. Notices must be sent to both the MHP enrollee and the prescriber of that medication no later than October 1, 2019.



## MDHHS Health Plan Pharmacy Programs Carve-In

Code	Description
B0B	Cystic Fibrosis-Transmembrane Conductance Regulator (CFTR) Potentiator
B0F	Cystic Fibrosis-CFTR Potentiator-Corrector Combination
C7D	Metabolic Deficiency Agents
C7H	PKU Tx Agent-Cofactor of Phenylalanine Hydroxylase
C7I	Cytochrome P450 Inhibitors
D4G	Gastric Enzymes
D7D	Drugs to Treat Hereditary Tyrosinemia
D9A	Ammonia Inhibitors
H0F	Agts TX Neuromusc Transmission Dis, Pot-Chan Blkr
M0B	Plasma Proteins
M0C	Blood Factors, Miscellaneous
M0E	Antihemophilic Factors
M0F	Factor IX Preparations
M0I	Factor IX Complex (PCC) Preparations
M0L	Human Monoclonal Antibody Complement (C5) Inhibitor
MOM	Protein C Preparations
M0N	C1 Esterase Inhibitors
M0O	Factor XIII Preparations
M0P	Hemophilia Treatment Agents, Non-Factor Replacement
M9D	Antifibrinolytic Agents
P1E	Adrenocorticotrophic Hormones
P8A	Leptin Hormone Analogs
S2M	Anti-Inflammatory Interleukin-1 Receptor Antagonist
S2V	Anti-Inflammatory, Interleukin-1 Beta Blockers
V1Q	Antineoplastic Systemic Enzyme Inhibitors
V3U	Antineoplastic – MEK1 and MEK2 Kinase Inhibitors
Z1G	Drugs to Treat Tx Gaucher Dx-Type 1, Substrate Reducing
Z1H	Metabolic Disease Enzyme Replacement, Fabry's Dx
Z1I	Metabolic Disease Enzyme Replacement, Gaucher's Dx
Z1J	Metabolic Dx Enzyme Replacement, Mucopolysaccharidosis
Z1K	Metabolic Dx Enzyme Replacement, Sev. Comb. Immune Deficiency
Z1L	Metabolic Disease Enzyme Replacement, Pompe Disease