

Name of Meeting: Pharmacy Liaison Committee

Date of Meeting: July 18, 2017

Length of Meeting: 10:00 AM – 12:00 PM

Location of Meeting: DMAS Mack Brankley Room

**Committee Members Present:**

Johnny Moore, Virginia Pharmacists Association (VPhA)

Anne Leigh Kerr, PhRMA

Hunter Jamerson, EPIC Pharmacies (representing Alexander M. Macaulay)

**Committee Members Not Present:**

Bill Hancock, Long Term Care Pharmacy Coalition

Rusty Maney, Virginia Association of Chain Drug Stores

**DMAS Attendees:**

Kate Neuhausen, MD, MPH, Chief Medical Officer

Donna Proffitt, Pharmacy Manager

Keith Hayashi, Pharmacist

Rachel Cain, Pharmacist

Danielle Adeeb, PBM Contract Monitor

Dean Beuglass, DMAS Contractor

**Other Attendees:**

Kim Marsh, Biogen Regional Account Manger

Paul Scharf, Novartis, Associate Director Regional Accounts

Nicole Pugar, Williams Mullen

Mickey Minnick, Otsuka Pharmaceuticals

Don Moore, Magellan Medicaid Administration

Debra Moody, Magellan Medicaid Administration

Rick Shin, Virginia Community Healthcare Association

David Christian, Central Virginia Health Services

Richard Grossman, PhRMA

Cal Whitehead, Commonwealth Strategy Group

**Introductions**

Donna Proffitt welcomed everyone to the meeting and asked everyone in attendance to introduce themselves.

**Approval of Meeting Minutes from June 2016**

Ms. Proffitt asked if there were any corrections, additions or deletions to the draft meeting minutes from June 2016. With none noted, the minutes were approved by the Committee.

### **DMAS Chief Medical Officer (CMO) Comments**

Dr. Kate Neuhausen, DMAS's CMO, addressed the Committee and thanked them for their continued participation on the Pharmacy Liaison Committee (PLC). Dr. Neuhausen shared with the members the recent work DMAS has done with particular emphasis on the opioid epidemic, the implementation of the CDC Guideline for Prescribing Opioids, the new pharmacy reimbursement methodology and the upcoming implementation of the pharmacy benefit manager (PBM).

### **Addiction and Recovery Treatment Services (ARTS)**

Ms. Proffitt provided a brief overview of DMAS's ARTS program that was launched on April 1, 2017. DMAS's ARTS program is already generating great interest as a national model of a comprehensive, evidence-based delivery system transformation by Medicaid to respond to the addiction crisis in the United States. Based on the industry standards American Society of Addiction Medicine (ASAM) levels of care, the ARTS benefit will provide the full continuum of evidence-based addiction treatment to any of the 1.1 million Medicaid and FAMIS members who need treatment. In addition, the new program "carves in" the community-based addiction treatment services into Managed Care Organizations (MCOs) to promote full integration of physical health, traditional mental health, and addiction treatment services. Virginia pharmacists play a key role in the addressing the opioid crisis by identifying patients that may benefit from the substance use disorder services offered under ARTS. DMAS will reimburse pharmacists for ASAM level 0.5 services known as Screening, Brief Intervention and Referral to Treatment (SBIRT). Johnny Moore, interim executive director for Virginia Pharmacists Association (VPhA), shared that VPhA is sponsoring SBIRT training across Virginia in an effort to get more pharmacists involved in efforts to address the opioid crisis.

David Christian, pharmacist at Central Virginia Health Services shared that he was seeing a reduction in opioid prescribing in his practice and an increase in the number of patient referrals to pain specialists. Mr. Christian stated that prior authorizations for short and long acting opioids are presenting a challenge. Ms. Proffitt responded that DMAS FFS and the MCO health plans have adopted a single, uniform prior authorization form that is aligned with the Virginia Board of Medicine's Regulations for Prescribing Opioids and Buprenorphine.

### **Commonwealth Coordinated Care (CCC) Plus Program (formerly MLTSS)**

Ms. Proffitt shared information regarding the CCC Plus program which is a new statewide Medicaid managed care program that will serve approximately 212,000 individuals with complex care needs, through an integrated delivery model, across the full continuum of care. The CCC Plus includes all aged, blind and disabled (ABD) populations, dual eligible members and LTSS populations. Care management is at the heart of the CCC Plus program - high-touch, person-centered program design. CCC Plus focuses on improving quality, access and efficiency. CCC Plus will go live on August 1, 2017. A phased implementation across the state is scheduled, with a completion date of January 2018.

### **Common Core Formulary**

Ms. Proffitt explained new contract requirements for health plans in the CCC Plus program to adopt the "Common Core Formulary. The Common Core Formulary includes all the "preferred" drugs on DMAS' Preferred Drug List (PDL). CCC Plus health plans are required at a minimum to cover all "preferred" drugs on Virginia Medicaid's PDL. The health plans can add drugs to the Common Core

Formulary but cannot remove drugs or place additional restrictions (such as prior authorizations, step therapies, and quantity limits) for drugs included on the Common Core Formulary. For drugs not included on the DMAS PDL (e.g., oral oncology drugs, HIV drugs, etc.), each health plan will publish a formulary with the plan's covered drugs.

The Common Core Formulary will ensure continuity of care for members since the health plans must cover all the drugs on the DMAS PDL. Members will not have to switch drugs when transitioning from FFS to a CCC Plus health plan when the drug is in a class on the DMAS PDL. The Common Core Formulary will reduce administrative burden for prescribers and pharmacy providers allowing them to spend more time with their patients.

Ms. Proffitt informed the Committee that a Common Core Formulary WebEx is available on the DMAS/CCC Plus website.

#### **Medallion 4.0 Procurement**

Ms. Proffitt shared the following information regarding the new Medallion 4.0 Program. The Medallion 4.0 program will provide services approximately 737,000 Medicaid and FAMIS eligible members including infants, children and adults in the low income families with children (LIFC) group, pregnant women, FAMIS MOMS, foster care and adoption assistance, children with special health care needs, and teens. The request for proposals (RFP) for Medallion 4.0 was posted on July 17, 2017 and DMAS plans to announce awards in late Fall 2017.

#### **Pharmacy Benefit Manager Solution (PBMS)**

Ms. Proffitt announced that the DMAS awarded the PBMS contract to Magellan Medicaid Administration (MMA). Effective October 1, 2017, MMA will be provide all FFS pharmacy services including claims adjudication, drug rebate invoicing, service authorization and Preferred Drug List (PDL) management. The following summary of major pharmacy changes effective 10/1/17 was provided by Ms. Proffitt:

- New Processor Control Number (PCN) for Medicaid FFS members. BIN will remain the same.
- **Early refill threshold for controlled drugs will be set at 90%.** Pharmacists can contact the MMA Help Desk at 800-932-6648 for override requests. The refill threshold for non-controlled drugs will remain at 75%.
- Pharmacy claims > \$9999.99 will no longer “pend” for review by DMAS.
- Pharmacy claims > \$4999.99 will deny with NCPDP error code 75 – PA required.  
**Pharmacists can call the Help Desk to request the service authorization (SA). The prescriber does not need to submit the SA request.**
- Co-pays and dispensing fees for partial fills will be prorated.
- Elimination of paper claims. DMAS will no longer accept paper claims for drugs and services covered under the pharmacy benefit.

The Medicaid enrolled pharmacies will receive 90, 60 and 30-day Provider Notices announcing the DMAS's new PBM. These notices will include information regarding payer sheets, pharmacy testing, training sessions and contact information.

**Epocrates**

Ms. Proffitt shared that DMAS' contract with Epocrates will expire in November 30, 2017. DMAS' new PBM vendor, Magellan, will deploy an on-line drug look-up solution that providers can access through the web portal. This new functionality, offered by the PBM, will replace Epocrates.

**Next meeting**

The meeting was adjourned at 12:00 PM.

DRAFT