

Name of Meeting: Pharmacy Liaison Committee
Date of Meeting: November 1, 2018
Length of Meeting: 10:00 AM – 11:18 AM
Location of Meeting: DMAS 7th Floor Conference Room A

Committee Members Present:

William Droppleman, Virginia Association of Chain Drug Stores
Christina Barrille, Virginia Pharmacists Association (VPhA)
Alexander M. Macaulay, EPIC Pharmacies
Anne Leigh Kerr, PhRMA
Bill Hancock, Long Term Care Pharmacy Coalition

DMAS Attendees:

Donna Proffitt, Pharmacy Manager
Rachel Cain, PharmD
Keith Hayashi, Pharmacist
MaryAnn McNeil, Pharmacist
Danielle Adeeb, CPhT, Pharmacy Contract Administrator

Other Attendees:

Mark Hickman, CSG/VSHP
Hunter Jamison, EPIC Pharmacies
Deb Stephens, Anthem
Lindsay B. Winter, Anthem
Rick Shinn, Virginia Community Healthcare Association
Kris Ratliff, VPhA
Terri Powers, VPhA
John Minneci, ViiV Healthcare
Rusty Maney, Walgreens, VACDS
David Christian, Do CVITS
Richard Grossman, PhRMA
Tyler Cox, HDJ
Mike Woods, Troutman Sanders
Doug Gray, VAHP
B. Robinson, VAHP

Introductions

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

Approval of Meeting Minutes from July 2018

Ms. Proffitt asked if there were any corrections, additions, or deletions to the draft meeting minutes from July 2018. With none noted, the minutes were approved by the Committee.

New Business

General Assembly Updates / Legislative Proposals

Ms. Proffitt shared with the Committee that DMAS has not submitted any items to the General Assembly this year. She asked the Committee members if they were aware of any Medicaid or pharmacy related bills or legislation being proposed to the General Assembly by the pharmacy community. Christina Barrille shared that VPhA had submitted a letter to Secretary Carey requesting the pharmacy benefit be carved-out similar to the models in West Virginia and

Tennessee. Several Committee members expressed their support of carving-out the pharmacy benefit back into the FFS program.

Medicaid Expansion

Ms. Proffitt provided a brief Medicaid Expansion overview. Beginning January 1, 2019, more adults living in Virginia will have access to quality, low-cost, health insurance through Virginia Medicaid. The new adult covered group includes individuals ages 19-64 with income at or below 138% of the federal poverty limit. This includes individuals who have not been eligible for Medicaid in the past. Individuals in the new adult group will have comprehensive health care coverage including pharmacy benefits. Services will be provided through the existing Medicaid programs. Most eligible individuals will be enrolled in managed care, in either the Medallion 4.0 or the Commonwealth Coordinated Care Plus (CCC Plus) program. Individuals may be in Medicaid fee-for-service briefly before enrolling in managed care.

Medallion 4.0 Program including Common Core Formulary (CCF)

Ms. Proffitt provided a brief update regarding the new Medallion 4.0 Program. The Medallion 4.0 program replaces the current Medallion 3.0. It provides health care services for approximately 761,000 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. Medallion 4 includes new carved in populations and services: Medicaid member with third party liability (TPL), Community Mental Health and Rehabilitation Services (CMHRS). The same six (6) health plans contracted with the CCC Plus program are also contracted with the Medallion 4.0 program. GAP members, currently enrolled in FFS, will transition to a managed care health plan on January 1, 2019. Plan First members will also transition to managed care on January 1, 2019.

The CCF is a list of “preferred” drugs on DMAS’ Preferred Drug List (PDL). Medallion 4.0 and CCC Plus managed care health plans are contractually required to cover all drugs on the CCF. Medallion 4.0 Health plans were required to comply with CCF effective August 1, 2018. The CCF will also apply to the new Medicaid Expansion population.

Commonwealth Coordinated Care (CCC) Plus Program update

Ms. Proffitt shared an update on Virginia’s CCC Plus program. This is a statewide Medicaid managed care program for over 212,000 individuals designed to improve health outcomes. Participation is required for qualifying populations. The integrated delivery model includes medical services, behavioral health services and long-term services and supports (LTSS). This program will provide care coordination and person-centered care with a interdisciplinary team approach. The CCC Plus population includes those 65 and older, adults and children with disabilities, individuals living in Nursing Facilities (NFs), individuals with Tech Assisted Waiver, individuals in EDCD Waiver, individuals in the 3 waivers serving the DD populations for their acute and primary services, and “medically frail”.

Addiction Recovery and Treatment Services (ARTS) – One year Update

Ms. Proffitt provided a brief update of DMAS’ ARTS program that was launched on April 1, 2017. DMAS contracted with Virginia Commonwealth University (VCU) to conduct an evaluation of the ARTS program. The percent of Medicaid members with a substance use disorder who received any treatment increased from 24 percent before ARTS to 40 percent during the first year of ARTS.

The percent of Medicaid members with an opioid use disorder who received any treatment increased from 46 percent before ARTS to 63 percent during the first year of ARTS. The number of emergency department visits related to opioid use disorders decreased by 25 percent during the first ten months of ARTS. This compares with a 9 percent decrease in emergency department visits for all Medicaid members. The number of prescriptions for opioid pain medications among Medicaid members decreased by 27 percent during the first year of ARTS.

Substantial increases in the number of practitioners and facilities providing addiction treatment services to Medicaid enrolled members, including residential treatment facilities, opioid treatment programs, office-based opioid treatment providers, and buprenorphine waived practitioners. The number of outpatient practitioners billing for ARTS services for Medicaid members with opioid or other substance use disorders more than doubled.

PBM Transparency Report Update

DMAS does not intend to publish this report for 2018 since the 2018 General Assembly did not direct DMAS to produce a report for 2018.

Next meeting

The next PLC Meeting is scheduled for Thursday, July 13, 2019 10AM-12PM.

The meeting was adjourned at 11:40 AM.