



Michigan Department of
Health & Human Services
RICK SNYDER, GOVERNOR
NICK LYON, DIRECTOR

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES
Medical Services Administration
Pharmacy Management Division

Pharmacy Provider Liaison
Minutes from Meeting on June 15th, 2017

Attendees

Richard AlAziz and Jamele Hage, Delta Law Group; Wayne Seiler, SRS Pharmacy; Anthony Codrean, Savor; Athena Antonis, Acuitas; Lindsay Sailor, Michigan Primary Care Association; Joe Leonard and Chad Downing, Walgreens; Jim Mathews, Alex Duthler and Eric Liu, Michigan Pharmacists Association; Ghada Abdallah, Park Pharmacy; Holly VanLente, Meijer; Jim Horton, AspireRx; Ron Melaragni, Sparrow Health Services; Glenn Cornish, Alkermes; Stacey Pearl, Sparrow; Patrice Shook, Pharmacy Solutions; Amy Drumm, Michigan Retailers Association; Tim Mallett, Cardinal Health; Ashley Ligon, Clark Hill representing Rite Aid; Nicole Salava, Bernadette Terranova, Helen Walley, Tina Villarreal, Trish Bouck, Glenda England, David Neff, Linda VanCamp and Rita Subhedar, Michigan Department of Health and Human Services (MDHHS).

Medication Therapy Management (MTM)

Nicole Salava, Provider Relations Specialist with MDHHS, provided instructions on submitting MTM claims. This presentation is available at http://www.michigan.gov/documents/mdhhs/Pharmacist_Medication_Therapy_Management_MTM_55312_7.pdf

As of June 15th there are 89 pharmacists enrolled as MTM providers.

Ghada Abdallah asked whether consultations provided over the phone can be billed as MTM services. Rita Subhedar, Policy Specialist in the Pharmacy Management Division at MDHHS, responded that the definitions of the CPT codes used to bill MTM services require that the consultations be provided face-to-face. Provider Bulletin MSA 17-09 outlines the requirements for MTM services provided through telepractice.

Updates from P&T Committee

Dr. David Neff, Chief Medical Director in the Office of Medical Affairs at MDHHS, provided an overview of items discussed at the Department's P&T Committee meeting held on June 13th. The P&T Committee reviewed opioid bills currently being considered in legislature and drugs that have recently been FDA-approved. In 2016 there were 36 claims for Entresto that were paid with PA approval. The Committee

reviewed CV outcomes for Jardiance and new FDA drug safety communication issued on May 16th regarding Invokana and the risk of lower limb amputation. The Griphon study results for Uptravi were also discussed.

10 new drugs were reviewed, as well as the Antibiotics and Asthma/COPD/Allergy drug class.

Updates from DUR Board

Dr. Neff provided an update on the Department's DUR Board meeting held on June 13th. The DUR Board reviewed the number of Hepatitis C patients who were concurrently receiving Medication-Assisted Treatment. In light of a new indication for Symbicort Inhalation Aerosol 80ug/4.5ug for the treatment of asthma in pediatric patients ages 6-12 not adequately controlled on current regimen, the Board looked at the total number of pediatric patients with a history of asthma taking Symbicort. New FDA guidelines for Pediatric Codeine and Tramadol were reviewed, as well as MAT and concurrent use of stimulants, benzodiazepines and narcotics. An academic detailing project on long-term use of sedative hypnotics was discussed. Finally, the Board reviewed utilization of short-acting and long-acting narcotics.

Ron Melaragni asked about the large number of prescribers who were still not registered in the Michigan Automated Prescription System (MAPS). Dr. Neff said that only one in three prescribers are registered in MAPS and that LARA is continuing to educate the prescriber community on using MAPS.

Ghada asked about adding pharmacists to the list of health care professionals that can perform medication administration through a collaborative practice with a physician, as described in Section 3.16 of the Behavioral Health and Intellectual and Developmental Disability Supports and Services chapter of the Medicaid Provider Manual. She has a collaborative practice agreement with a physician to administer Vivitrol in her pharmacy, but is unable to bill for the administration. Dr. Neff responded that the Department is willing to discuss this. Eric Liu said that the Michigan Pharmacists Association would help facilitate the discussion.

MSA 17-12 – Coverage of Physician-Administered Drugs as Pharmacy Claims for Administration in Residential Treatment Centers

This policy, effective May 1, expands upon Provider Bulletin MSA 15-19 to allow residential treatment centers to obtain injectable drugs from a pharmacy for inpatient administration.

Naloxone Standing Order

Information on the Standing Order issued by Chief Medical Executive Dr. Eden Wells to provide naloxone is available at Michigan.gov/naloxone. Pharmacists dispensing naloxone under the standing order are required to provide quarterly updates to the Pharmacy Naloxone Registration site email MDHHS-Naloxoneorder@michigan.gov.

State Plan Amendment Process

Following up on some questions received at the last Pharmacy Provider Liaison meeting, Rita provided an overview of the Department's State Plan Amendment process. A Medicaid State Plan is an agreement between a state and the Federal government describing how that state administers its Medicaid program. When a state is planning to make a change to its program policies or operational

approach, states send state plan amendments (SPAs) to the Centers for Medicare and Medicaid Services (CMS) for review and approval. MDHHS will be submitting a SPA to CMS for approval on the changes to pharmacy claim reimbursement and the addition of MTM as a covered service.

Resources for Pharmacy Claim Reimbursement Pricing Reviews

- If recent drug price changes are not reflected in posted National Average Drug Acquisition Cost (NADAC) files, pharmacy providers may notify the NADAC Help Desk:

Toll-Free: (855) 457-5264
E-Mail: info@mslcrps.com
Fax: (844) 860-0236

- Magellan Maximum Allowable Cost (MAC) Pricing Inquiries: (888) 868-9219
- MAC Pricing Review Request Form: <https://michigan.fhsc.com/providers/drugpricing.asp>
- Pharmacy Operations Email: MDHHSPharmacyServices@michigan.gov

Ron said that the NADAC pricing is affecting specialty pharmacies in particular, since even a nominal price swing has a significant financial impact on a pharmacy when the drug is high-cost. Wayne Seiler added that the combination of the Department's reimbursement policy changes, along with Medicare Part D Direct and Indirect Remuneration (DIR) fees, is making it difficult for pharmacies to remain viable. Trish Bouck, Pharmacy Management Division Director at MDHHS asked all pharmacy providers to contact the NADAC Help Desk when these issues arise and to send the information to the Department's Pharmacy Operations Email at MDHHSPharmacyServices@michigan.gov.

Non-Enrolled Prescribers

Trish announced that MDHHS has decided to postpone the implementation of enhanced Fee-For-Service pharmacy claim processing denials for prescriptions written by a prescriber NPI that is not Medicaid enrolled. The Department is concerned about the volume of prescribers still not enrolled and the potential medication access issues that could result. It is therefore working to coordinate the implementation with the Managed Care provider enrollment project that is also currently underway.

For additional details regarding this policy please refer to policy bulletin MSA 13-17 available at: http://www.michigan.gov/documents/mdch/MSA_13-17_423003_7.pdf. Enrolled pharmacies can verify whether a prescriber is MDHHS enrolled by logging into CHAMPS, click on the My Inbox menu, scroll down and select Provider Verification from the drop down list, enter the NPI, then click Verify. If the Business Status indicates 'Active' the prescriber is now enrolled.

To enroll with MDHHS, prescribers can be directed to review the information regarding provider enrollment on the MDHHS website at www.michigan.gov/medicaidproviders >> Provider Enrollment, or by contacting Provider Support at (800) 292-2550.

NCPDP Standard Reject Code for Carved-Out Drugs

Trish announced that starting October 15th, Medicaid Health Plans will use NCPDP Reject Code 831 for carved out drugs covered under Fee-for-Service.

Open Discussion

Wayne described new audit procedures being conducted by the MDHHS Office of Inspector General (OIG). Trish responded that OIG's audit procedures are separate from the policy and operational activities performed by the Pharmacy Management Division. She asked Wayne to continue proceeding with OIG's appeal process and to keep her informed of the progress.

The next meeting will be on September 21st, 2017.