

Prescription drug therapy is an integral component of your patient's comprehensive treatment program. The goal of Molina Healthcare is to provide our members high quality, cost effective drug therapy.

At Molina Healthcare, medications can fall into the following categories. Information on procedures to obtain these medications is described in detail within this document and also available on the website.

Formulary Medications

Formulary Medications do not require Prior Authorization (PA). Molina Healthcare covers up to a 30 day supply of medication. In some cases, patients may only be able to receive certain quantities of medication. Information on quotas are included and can be found in the Formulary.

Formulary Medications with Prior Authorization

Formulary medications with PA may require the use of first line medications before they are approved. Information on PA criteria is included in this section.

Non Formulary Medications

Non Formulary medications may be considered for exception when Formulary medications are not appropriate for a particular patient or have proven ineffective. Requests for Formulary exceptions are completed on the Molina Healthcare Prior Authorization form. Clinical evidence must be provided and is taken into account when evaluating the request to determine medical necessity.

Drugs available but not covered by the Health Plans

Drugs available but not covered by the Health Plans are often called "carved out drugs" because they are a covered benefit, but provided outside of the health plan. In Michigan, behavioral health drugs, drugs used to treat Hemophilia, drugs used to treat HIV, and other classes of medication are carved out from health plan coverage. PA requests are made directly to Fee-For-Service through Magellan Medicaid Administration at www.michigan.gov/mdhhs

Medications not covered by Medicaid

Medications not covered by Medicaid are excluded from coverage. For example, drugs used in the treatment of fertility or those used for cosmetic purposes are not part of the benefit. These exclusions are determined by the Michigan Department of Health and Human Services.

Formulary Documents

Information on medication coverage is sent to providers throughout the year both by mail and via fax. Informational documents are also available on the Molina Healthcare website at www.molinahealthcare.com.

Important Contact Numbers:

Rx PA Hotline: (855) 322-4077
Rx PA Fax Line: (888) 373-3059

For a 24-hour pharmacy override, please call Rx PA Hotline and you will be transferred to our after-hours help desk.

For information on carved out drugs, please call Magellan Medicaid Administration Clinical Call Center at (877) 864-9014.

Drug Prior Authorization (PA) Procedures

The following summary is intended to provide a quick reference to the PA procedures for Formulary medications.

Please familiarize yourself with the Molina Healthcare Drug Formulary to learn which drugs require PA. The latest Drug Formulary information is available at www.MolinaHealthcare.com. If you need additional copies of the Molina Healthcare Drug Formulary, please call your Provider Services Representative.

If a drug requires PA, please fax a Molina Healthcare Prior Authorization Drug Request form to (888) 373-3059.

Drug PAs are always processed in the order in which they are received. However, antibiotics and other urgent requests are given expedited attention. If all necessary information is presented, you should expect a response within two hours, but no longer than one business day. If forms are not filled out completely, you may receive a return fax with a request for additional information.

Once received, your PA request is reviewed by the Molina Healthcare Pharmacy Team to determine if it meets the Molina Healthcare PA criteria. The team can either APPROVE or PEND your request. If your request is PENDED, please submit the requested documentation to substantiate your request or choose one of the formulary alternatives indicated on the form.

Pharmacy personnel will send written communication if you have not responded to the formulary suggestions or request additional information. Molina Healthcare follows up on these requests to ensure that the member receives their medication in a timely fashion.

If your request is DENIED by a Clinical Pharmacist, the provider and the member will receive written documentation with the reason the request was denied. Providers and members can appeal this decision. Information regarding the appeal process will be provided in the letter.

Considerations when reviewing a request for Prior Authorization:

First line Formulary prescription or OTC Drugs take precedence over non-formulary drugs.

Prescription requests for medications requiring PA or for medications not included on the Molina Healthcare Drug Formulary may be approved when medically necessary and when Formulary alternatives have proven ineffective. When these exceptions arise, the provider must fax a completed PA form to Molina Healthcare Pharmacy Department at (888) 373-3059.

All non-FDA approved ("off label") drug requests will be DENIED and are subject to the review of the Medical or Pharmacy Director only.

The use of manufacturer's samples of Non-Formulary or "Prior Authorization Required" medications does not override Formulary requirements.

To ensure excellent customer service, authorization requests received before 3:00pm EST will be processed the same day.

Drug Prior Authorization (PA) Helpful Hints

Prevent Rx Delays

Make extra copies of PA forms and keep them readily available. You may also download the PA form from our website: www.MolinaHealthcare.com Providers, Forms.

Save Telephone Calls

Get to know your Provider Services Representative. They can provide extra copies of PA request forms, PA procedures, copies of formularies and other general assistance related to medication questions.

Save Time - Save Calls from Pharmacies

Use alphabetical listing in your Formulary book index to look up which drugs require a PA.

Be Informed - Be Patient Oriented

Familiarize yourself with the Molina Healthcare Drug Formulary. Refer to the Molina Healthcare website for the most up-to-date Drug Formulary information. Drugs which require a PA are noted. Knowledge of this will save you calls from pharmacies and complaints from your patients. For your convenience we have included the Drug Formulary At-A-Glance within this section.

Save Time - Save Calls or Faxes from Molina Healthcare

Fill out drug PA form completely; make sure you note your office phone and fax number (including area code), member name, date of birth, Medicaid ID number, physician name and name of person completing the form. Include the name of the requested

medication, as well as the strength, directions for use, a list of any previous therapy, and the diagnosis the medication is intended to treat.

Important - Please Note

Any questions or concerns may be directed to our Rx PA Hotline. Please do not hesitate to request PA forms, status of requests, etc. Your calls are important to us.

Non Formulary Medication Prior Authorization Criteria

Prescriptions for Non-Formulary medications, whose drug class is represented on the Drug Formulary with other agents, will be reviewed within these guidelines:

1. Documented failure or intolerance to all Formulary agents of same drug class.
2. Medication is being used for a unique treatment/condition that is not indicated for Formulary agents in same drug class.
3. All Formulary agents from same drug class are contraindicated for member per manufacturer recommendations.
4. Medication request is for a new member who is continuing therapy started while in another health plan. Provider will be required to provide documentation of previous use. A transition supply may be approved until the members can be started on a Formulary agent.

Formulary alternatives will be recommended to requesting physician if any of the following apply:

- Above criteria (1-4) are not met
- Pharmaceutical samples were dispensed to member before all Formulary agents within same drug class were tried.

Prior Authorizations will be denied if Formulary alternatives are not accepted by prescriber.

These guidelines for Prior Authorization approval are for reference only. They do not replace the professional judgment of the prescribing physician and do not necessarily apply to all patient specific situations.

IMPORTANT NOTE: *For URGENT medication requests: please complete a PA form before hospital discharge or member takes the prescription to the pharmacy.*

Over The Counter (OTC) Drug List

Some over-the-counter (OTC) medications are a covered benefit with no out-of-pocket expense to members only when a prescription is written by a provider. Please consider these OTC medications as First Line Therapy when treating your patients. Remember that generic medications will be dispensed when available. Please see the Molina Formulary for a complete list of covered OTC medications.

Member After-Hours Pharmacy Services

Policy

After normal business hours, which are defined as after the close of Molina Healthcare Pharmacy Department hours Monday-Friday, 8:00am-5:00pm EST, network pharmacies are directed to the after hour Help Desk when calling Molina at (888) 898-7969. This service may be utilized to obtain an override for an emergency three day (72 hour) supply of medication, which “when not given may cause the member’s condition to worsen”.

Purpose

This policy establishes the infrastructure and procedures for plan members to obtain medications on an emergency basis and on a 24-hour/day/7 day/week basis.

Scope

This policy applies to CVS/Caremark contracted pharmacy providers dispensing medications to Molina Healthcare members after Molina Healthcare’s normal business hours.

Procedure

After normal business hours as defined in the POLICY statement, CVS/Caremark / Molina Healthcare contracted pharmacy providers are required to exercise professional judgment in the dispensing of medications to members requiring after hours pharmacy services.

Members have the ability to obtain prescription drugs on a 24-hour/day/7 day/week basis.

Pharmacists are instructed to contact the CVS/Caremark Help Desk via the Molina Rx PA Hotline to obtain an override. This will assure the timely adjudication of prescription claims.

Members, pharmacists or medical providers requiring medication assistance after normal business hours should call (888) 898-7969.

Member and Provider “Patient Safety Notification”

Molina Healthcare has a process to notify members and providers regarding a variety of safety issues which include voluntary recalls, FDA required recalls and drug withdrawals for patient safety reasons. This is also a requirement as an NCQA accredited organization. Letters are sent to members instructing them to obtain an additional supply of the medication. Included in this document is a State of Michigan approved member notification letter which is sent to Molina Healthcare members. In all cases, providers are notified at the same time. If you have any questions regarding this safety initiative, please contact the Molina Pharmacy Department at (888) 898-7969.

State of Michigan Carve Out

The State of Michigan enacted a carve-out for several classes of medication for Medicaid and MICHild CSHCS beneficiaries. Claims for these medications must be submitted directly to the State Fee-for-Service Pharmacy Program, Magellan. These medications are subject to a \$1.10 or \$3.30 copay. Highlighted medications are included on both the Medicaid and MICHild CSHCS Carve-Out lists. Non-highlighted medications are Medicaid only.

Specialty Pharmacy

Molina Healthcare of Michigan has contractual arrangements with Caremark and Accredo Specialty Pharmacy to be the provider of specialty bio-pharmaceutical medications. This program allows our health plan to obtain the best possible price and at the same time, obtain other services to assist in the overall healthcare management of the member. These specialty medications may be delivered directly to the patient or to your office.

IMPORTANT NOTE: *Caremark and Accredo Specialty Pharmacies require the patient's telephone number to verify availability to receive delivery. Please see the Molina Formulary which designates which formulary drugs will need to be obtained through Specialty Pharmacy.*

If you have any questions, please call Pharmacy Services at (888) 898-7969. The pharmacy fax line is (888) 373-3059.