

Medi-Cal Rx

Transitioning Medi-Cal Pharmacy Services from Managed Care to Fee-For-Service

September 22, 2020, 9:00 – 10:00 a.m. *WebEx Meeting*



Today's Agenda

- Welcome & opening remarks
- General project status, timeline, and implementation updates
- Other state department collaboration efforts
- Medi-Cal Rx policy and related processes
- Upcoming outreach campaign components, and related call center/customer services and supports
- Ongoing stakeholder engagement efforts
- Question & Answer Session



General project status and timeline



*Note: Activities before July 1, 2020 included requirements gathering, systems configuration, stakeholder meetings, stage 1 testing, rate development and external communications development. This information is available in prior versions of the timeline.
*Disclaimer: This Medi-Cal Rx implementation timeline is tentative and subject to change. Activities and/or milestones may be added, modified and/or deleted, as applicable, by DHCS based upon discussions with the Medi-Cal Rx Contractor, Magellan.



Project Status & Implementation Updates

- DHCS/Magellan are just over three months from "go-live".
- The project is currently in a "green" status.
- Requirements and validation phase complete.
- DHCS/Magellan are well into testing those requirements and our policy build through three stages of testing.

Project Status & Implementation Updates (Cont.)

- Planning and strategy sessions for operational readiness and Assumption of Operations (AOO).
- Reminders of recent important events:
 - On August 15th: Medi-Cal Rx's "Provider Portal" launched.
 - In mid-August, providers (prescribers and pharmacies) were able to start signing up for training, which starts in September and runs through December.
 - At the end of August, MCPs received the final 30-day notice templates (for both the member letter and outreach campaign script).
 - At the end of September, DHCS/Magellan will begin efforts relative to the Medi-Cal Rx outreach campaign.



Other state department collaboration efforts





DHCS

Key Focus for CDSS:

- Organizational planning regarding the Fair Hearing process.
- Identifying transitional activities and conducting operational readiness assessments.
- Projected caseload assessments and resource planning/allocation.

Key Focus for DMHC:

 Health plan transitional readiness from an regulatory, compliance, and reporting perspective.

DEPARTMENT OF

Managed

Health Reverse

- Identifying key responsibilities that remain post-transition.
- Articulating areas with crossover and/or other nuanced health plan issues.



Medi-Cal Rx Policy and Related Processes

- Clinical Liaison (CL) policy: Medi-Cal Rx will provide a dedicated CL team to support the Medi-Cal MCPs in their clinical obligations relating to beneficiary care coordination, medication adherence, and other responsibilities related to medication requirements.
- Website and Pharmacy Portal policy: The Medi-Cal Rx website is NOW LIVE! In addition to public-facing content, the Medi-Cal Rx website will soon launch several different secure portals for the beneficiaries, providers, MCP partners, and other entities, to ensure they can access appropriate Medi-Cal Rx tools and resources.
- **Pharmacy Transition policy:** DHCS' multi-faceted pharmacy transition policy includes "grandfathering" previously approved prior authorizations (PAs), as well as a 180-day period with no PA requirements for existing prescriptions.



Medi-Cal Rx Policy and Related Processes (cont.)

- Prior Authorization (PA)/Utilization Management (UM) processes/protocols: Outlines Medi-Cal Rx's PA/UM processes and related protocols, including the multiple levels of clinical review through Magellan and, when a denial is recommended, final adjudication by licensed pharmacists employed by DHCS.
- Complaints and Grievances policy: Outlines DHCS' Medi-Cal Rx complaints and grievances processes/protocols, which align with and build upon existing Medi-Cal FFS processes/protocols for the Medi-Cal program more broadly. DHCS/Magellan are committed to implementing and overseeing an effective Medi-Cal Rx complaint/grievance process to ensure appropriate triaging, referral, and/or disposition.



Medi-Cal Rx Policy and Related Processes (cont.)

- Appeals & Fair Hearing Processes: Outlines Medi-Cal Rx's appeal and Fair Hearing processes, relative to Notices of Action (NOA) for pharmacy benefits provided through Medi-Cal Rx as of January 1, 2021. DHCS is still working on a written policy narrative for public consumption.
- Medi-Cal Rx Scope: Provides additional context and information related to DHCS' implementation of Medi-Cal Rx, effective January 1, 2021, inclusive of an inventory of the bulk of the Medi-Cal pharmacy benefit, characterized as either not subject to the carve out (i.e., those pharmacy benefits that are billed on medical and institutional claims), versus those subject to the carve out (i.e., all pharmacy benefits that are billed on pharmacy claims).



Upcoming Medi-Cal Rx outreach campaign

Outreach/Noticing Strategies:

- DHCS / Magellan are preparing to mail 60- and 90day beneficiary notices to all approximately 13 million Medi-Cal beneficiaries, starting in October 2020.
- DHCS will also send 30-day notices to all FFS beneficiaries.
- Medi-Cal MCPs will mail 30-day notices for their respective members, and conduct an outreach campaign from October through December using a variety of communication methods (including inperson or automated calls, text, website-based messaging, etc.) they determine appropriate to reach their members, and approved by DHCS.



Upcoming Medi-Cal Rx outreach campaign(Cont.)

Call Center and Related Customer Services and Supports:

- DHCS has developed comprehensive scripts for use at various call centers to ensure consistent messaging and information sharing both leading up to, during, and following the transition, as well as help to ensure Medi-Cal beneficiaries and providers(prescribers and pharmacies) are directed to the appropriate location for questions relative to Medi-Cal Rx.
- To facilitate effective customer service and ensure beneficiaries and providers have access to real-time, comprehensive and accurate information, the following will occur:
 - On or before December 31, 2020: Coverage will be through DHCS' existing FFS FI call center staff.
 - On or after January 1, 2021: Coverage will be through DHCS' Medi-Cal Rx Customer Service Center staff.



Ongoing stakeholder engagement efforts

As part of this transition, DHCS remains committed to working with its external partners to ensure a smooth and successful transition. To that end, in additional to these Public Forums, we have many ongoing forums/efforts:

- Medi-Cal MCP Workgroup
- Medi-Cal MCP Technical Sub-Workgroup
- Medi-Cal All Plan Report Out
- Medi-Cal Rx Advisory Workgroup
- Ad hoc, breakout sessions with other key partners at the state and local/county level.
- Leveraging existing meetings and workgroups to provide status updates on implementation efforts and activities related to Medi-Cal Rx.



Helpful Information & Resources

- For more information about Medi-Cal Rx, please visit DHCS' dedicated Medi-Cal Rx Transition website: <u>Medi-Cal Rx: Transition</u>
- The Resources and Reference Materials section contains links to helpful information:
 - Medi-Cal Rx Frequently Asked Questions (FAQs)
 - Medi-Cal Rx Complaints and Grievances
 - Medi-Cal Rx Website and Pharmacy Portal Policy
 - Medi-Cal Rx Clinical Liaison Policy
 - Medi-Cal Rx Scope
- Medi-Cal Rx Website: <u>https://medi-calrx.dhcs.ca.gov/home/</u>
- For questions and/or comments regarding Medi-Cal Rx, DHCS invites stakeholders to submit those via email to <u>RxCarveOut@dhcs.ca.gov</u>





