November 9, 2020

Medi-Cal Pharmacy Carveout

Dear Provider,

Effective January 1, 2021, the State of California, through the Department of Health Care Services (DHCS), will transition all pharmacy benefits for Medi-Cal patients from the Health Plan of San Mateo (HPSM) to Fee-for-Service (FFS) Medi-Cal.

- This new FFS delivery system for Medi-Cal pharmacy services will be identified collectively as “Medi-Cal Rx.”
- This change is a result of an Executive Order signed by Governor Gavin Newsom (EO-N-01-19).
- This means that the pharmacy benefits for HPSM Medi-Cal members will no longer be managed by HPSM but by DHCS in partnership with its contracted pharmacy benefits manager (PBM) Magellan.

Summary of pharmacy benefit changes effective 1/1/2021:

<table>
<thead>
<tr>
<th>HPSM Patient Population</th>
<th>Benefit</th>
<th>Managing Entity Current</th>
<th>Managing Entity New (1/1/2021)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medi-Cal</td>
<td>Pharmacy services: billed as a pharmacy claim</td>
<td>HPSM</td>
<td>DHCS/Magellan</td>
</tr>
<tr>
<td></td>
<td>Pharmacy services: billed as a medical and/or institutional claim</td>
<td>HPSM</td>
<td>No change</td>
</tr>
<tr>
<td>CareAdvantage</td>
<td>All pharmacy services</td>
<td>HPSM</td>
<td>No change</td>
</tr>
<tr>
<td>HealthWorx</td>
<td>All pharmacy services</td>
<td>HPSM</td>
<td>No change</td>
</tr>
</tbody>
</table>

What’s changing

This transition to Medi-Cal Rx will impact roughly 13 million California Medi-Cal beneficiaries and will result in changes for you as a provider.

Instead of a formulary, there is a preferred drug list, called the “Medi-Cal Contract Drug List”

The drugs that are preferred under Medi-Cal Rx may be different. To access the Medi-Cal Contract Drug List, you can click here: [dhcs.ca.gov/services/pages/ff.html](http://dhcs.ca.gov/services/pages/ff.html).

To give you and your patients time to adjust to the new preferred drug list, DHCS will provide the following:

- **180-day transition supply:** DHCS will allow for a 180-day transition supply where DHCS will not require a prior authorization for any drug that normally requires one as long as the patient is currently on the drug with HPSM.
- **Honoring existing HPSM prior authorizations for up to 1 year:** DHCS will honor all existing prior authorizations that have been approved by HPSM through their stated duration, not to exceed 1 year.

Drugs covered under the **pharmacy benefit** are typically drugs that can be self-administered orally, can be self-injected, or can be handled at home by a patient. Drugs covered under the **medical benefit** are typically administered in an inpatient setting or in the office of a healthcare professional, by a healthcare professional.

HPSM currently covers both benefits. Starting January 1, 2021 the outpatient pharmacy benefit will be “carved out”, which means it will be managed by Magellan on behalf of DHCS, rather than by HPSM.
Where and how you submit pharmacy-benefit prior authorization requests will change

You will need to submit a prior authorization (PA) request to allow for payment if:
- The drug you are prescribing is not on the Medi-Cal Contract Drug List; OR
- The drug you are prescribing is on the Medi-Cal Contract Drug list but is flagged as requiring a prior authorization.

You will need to submit PA requests to Magellan, the contracted PBM for DHCS.

You can file a prior authorization in two ways:
- Online: submit your request at medi-calrx.dhcs.ca.gov or via covermymeds.
- Via fax or mail: for more information on how to do this, please refer to medi-calrx.dhcs.ca.gov.

Magellan’s prior authorization requirements, review criteria, and the process for handling authorization denials will differ from what HPSM has required.

For questions regarding prior authorizations, providers can refer to the Medi-Cal Rx website at medi-calrx.dhcs.ca.gov or they can call the Medi-Cal Rx Customer Service Center beginning January 1, 2021 at 1-800-977-2273.

What’s NOT changing

This will NOT affect:
- all other health care benefits which are currently managed by HPSM.
- any pharmacy services billed as a medical and/or institutional claim instead of a pharmacy claim which will continue to be billed through HPSM.
- any pharmacy benefits for HPSM CareAdvantage or Healthworx patients, which will still be managed by HPSM.

How pharmacies bill for prescriptions will change

Pharmacies will need to bill Magellan and not HPSM (or HPSM’s PBM SS&C) on or after January 1, 2021.

Pharmacies are to use the following information to bill Magellan:
- BIN: 022659  PCN: 6334225  ID #: 14-character BIN located on the patient’s BIC card.

For additional details on how to bill Magellan for prescription claims for all Medi-Cal members, please refer to the Medi-Cal Rx website at medi-calrx.dhcs.ca.gov or call the Medi-Cal Rx Customer Service Center beginning January 1, 2021 at 1-800-977-2273.

Next steps

Sign up to receive training

To learn more about Medi-Cal Rx, or receive training on Medi-Cal Rx and the new required web portal, please visit medi-calrx.dhcs.ca.gov/home/education.

Sign up for the Medi-Cal Rx web portal

The new Medi-Cal Rx Web portal and training registration is now available for providers to sign up via the Learning Management System, Saba. Providers will need to utilize the User Administration Console (UAC) application—a registration tool that controls and manages the user’s access to the Medi-Cal Rx Web Portal and associated applications—at medi-calrx.dhcs.ca.gov.

Stay informed

Sign up for Medi-Cal Rx updates here: mcrxsspages.dhcs.ca.gov/Medi-CalRxDHCSagov-Subscription-Sign-Up.

Send questions to the Medi-Cal Rx Education and Outreach team: medicalrxeducationoutreach@magellanhealth.com.

Thank you as always,
The Health Plan of San Mateo