

Texas Managed Care Medicaid

STAR and CHIP Programs

July 24, 2013



### ANTI-TRUST STATEMENT



The association or any committee, section, chapter of activity of the Pharmacy Panel shall not be used for the purpose of bringing about or attempting to bring about any understanding or agreement, written or oral, formal or informal, expressed or implied, among two or more members or other competitors with regard to prices or terms and conditions of contracts for services or products. Therefore, discussions and exchanges of information about such topics will not be permitted during the Pharmacy Panel meeting or other activities.

- There will be no discussions discouraging or withholding support or services from, or encouraging exclusive dealing with any suppliers or purchasers of products or services, any actual or potential competitor or group of actual potential competitors, or any private or governmental entity.
- There will be no discussions about restricting, limiting, prohibiting, or sanctioning advertising or solicitation that is not false, misleading, deceptive or directly competitive with pharmacy products or services.
- There will be no discussions about discouraging entry into or competition in any segment of the marketplace.

### **ABOUT NAVITUS**



Navitus Health Solutions is a 100 percent pass-through pharmacy benefit company committed to lowering drug costs, improving health and providing superior customer service in a manner that instills trust and confidence.

#### **Our Mission**

Navitus Health Solutions LLC is a pharmacy benefit company committed to lowering drug costs, improving health and providing superior customer service in a manner that instills trust and confidence.

#### **Lowering Drug Costs**

Through Navitus' completely transparent business model, all hidden costs associated with the purchase of prescription drugs are eliminated. We negotiate discounts and rebates with drug manufacturers and contract with pharmacies on behalf of plan sponsors--enabling us to pass 100 percent of savings onto our plan sponsors.

#### **Improving Health**

In addition, by ensuring formulary development and quality improvement decisions are reviewed and approved by prescribers and pharmacists, Navitus provides the highest quality pharmaceutical care to our members.

#### **Superior Customer Service**

At Navitus, we offer a wide variety of pharmacy benefit management services, including benefit design and consulting, formulary management, pharmacy network management and clinical programs. All efforts are developed and implemented with our members' best interests in mind.

#### ABOUT NAVITUS



#### We Share A Clear View

- Texas Managed Care Medicaid health plans benefit from a high touch, proactive account management team
- True partnership with aligned incentives
- Full pass-through, transparent model free of conflict of interest, shareholder influence and third-party control



## TEXAS MANAGED MEDICAID



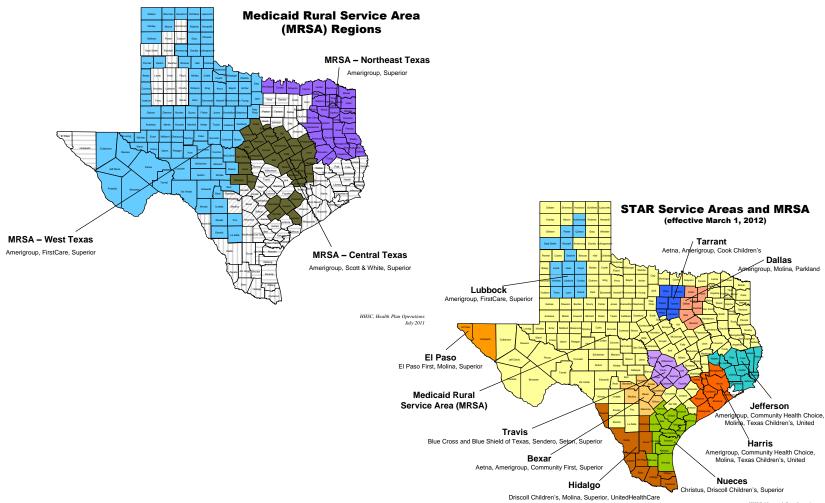
### Authorized Texas MCO Plans Serviced by Navitus

MCO Plan	Service Area	MCO Plan	Service Area
Community First Health Plans	Bexar Service Area	Driscoll Children's Health Plan	Hidalgo Service Area Nueces Service Area
Parkland HEALTHfirst	Dallas Service Area	FirstCare	Lubbock Service Area MRSA West Texas
El Paso First Premier	El Paso Service Area	Cook Children's Health Plan	Tarrant Service Area
Community Health Choice	Harris Service Area Jefferson Service Area	Sendero Health Plan	Travis Service Area
Texas Children's Health Plan	Harris Service Area Jefferson Service Area	Seton Health Plan	Travis Service Area

Navitus MCO clients are authorized to provide STAR and/or CHIP services within respective Texas service areas

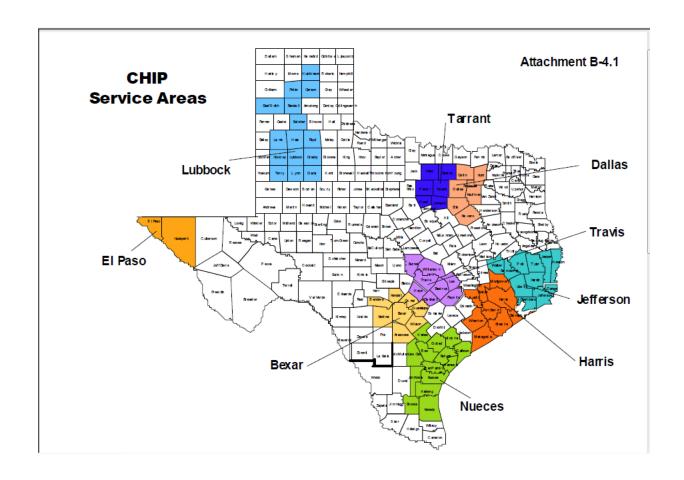
## TEXAS MANAGED MEDICAID





## TEXAS CHIP SERVICE AREAS





#### NAVITUS TEXAS PROVIDER HOTLINE



#### Navitus Texas Provider Hotline (Pharmacy) 877-908-6023

We strive to resolve each call correctly, completely and professionally the first time. Our relentless pursuit of superior customer service is what sets us apart.

#### Our Customer Care Commitment to our Network Pharmacies:

- We will be responsive to our customer's needs.
- We will be respectful of our customers at all times.
- We will be realistic about what we can or cannot do.
- We will resolve our customer's issues in a timely fashion.
- We will take personal responsibility for our customer relationships.

#### NAVITUS TEXAS PROVIDER HOTLINE



Navitus Texas Provider Hotline (Pharmacy) can assist you with the following items and is available 24 hours:

- Member plan, group and benefits information
- Member eligibility
- Formulary inquiries
- Prior authorization processes
- Claims processing questions/issues
- Billing / payment inquiries
- Dispute and appeals process
- Participation status inquiries
- General inquiries

## PHARMACY PROVIDER RELATIONS



#### Navitus Provider Relations can assist you with:

- Network participation
- Contract questions
- Pharmacy credential review
- Reimbursements and remittances
- Maximum Allowable Cost list
- Network system setup
- Pharmacy communications

Pharmacy Provider Relations/Contracts: 608-729-1577

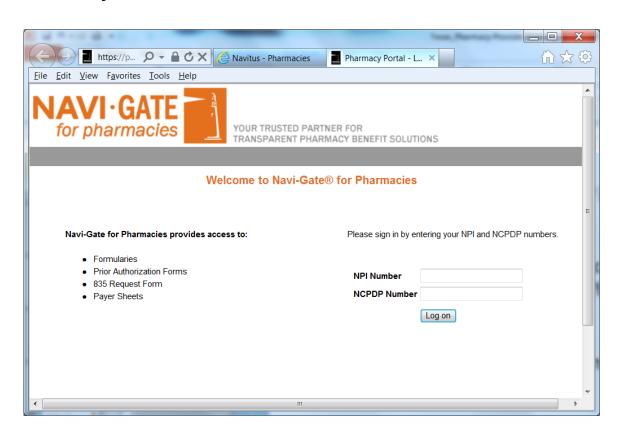
E-mail: providerrelations@navitus.com

Fax: 866-808-4649

## HOW TO ACCESS THE PHARMACY PORTAL



- To access the Provider Portal go to <u>www.navitus.com</u> >Pharmacies>Pharmacies login
- Enter your NPI and NCPDP numbers to access



## WHAT IS LOCATED IN PHARMACY PROVIDER PORTAL?



- Texas Medicaid STAR and CHIP Formularies\*
- Network Bulletins
- Newsletters
- Payer Sheets
- Pharmacy Manual
- Pharmacy Advisory Panel
- Prior Authorization Forms
- P&T Committee\*
- 835 Request Form

\*determined by the HHSC Vendor Drug Program

## ELECTRONIC CLAIMS SUBMISSION



- Version D.0 Payer Sheets are available on the pharmacy provider portal.
- Review Payer Sheet for all mandatory and required when fields.
- Key required fields to enter on a claim:

-	BIN	610602
-	Processor Control Number (PCN)	Per ID Card
-	Member ID (enter what is on ID card)	Per ID Card
-	RxGroup (RXGRP)	Per ID Card
-	Date of Birth	Required
-	Gender	Required
-	U&C	Required

## BILLING MEMBERS/CO-PAYS



- Pharmacies are prohibited from billing or collecting any amount from a Managed Medicaid STAR Member for pharmacy benefits.
- CHIP Members may have copayments. Navitus will provide the copayment amount due, if any, in the NCPDP claim response to the pharmacy.
- Participating pharmacies shall not charge or take other recourse against Members, their family members, or their representatives for any claims denied or reduced because of Participating Pharmacy's failure to comply with any applicable law.

### PAYMENT & REMITTANCE ADVICE



Navitus utilizes a weekly payment cycle for Texas Managed Medicaid pharmacy payments

Navitus offers a variety of methods for receiving a payment and remittance advice.

- Paper check/paper remittance [weekly (note, commercial is bimonthly)]
- Electronic Funds Transfer (EFT)/835 Electronic Remittance Advice (weekly)
- Paper check/835 Electronic Remittance Advice (weekly)
- If you would like to receive payments via EFT or 835 Electronic Remittance Advice visit www.navitus.com>providers>pharmacies login and complete the forms and fax back to the Pharmacy Network Department at (866) 808-4649

NOTE: Claims must be submitted within 95 days of date of service

## PRICING INQUIRIES



- Navitus receives and updates its drug information system files from Medi-Span weekly.
- MAC Pricing Inquires:
  - Please complete and fax a <u>Navitus Pricing Research Request</u>
     <u>Form for our review.</u>
  - Form is located at www.navitus.com>Pharmacies>Pharmacies
     Login (be sure to enter your NPI/NCPDP).
  - The NDC in question must be purchased from your primary wholesaler to be eligible for consideration.
  - All relevant information must be provided, including a copy of your wholesaler invoice that lists the net acquisition cost of the product, including any wholesaler rebates associated with purchasing of the drug.
  - If the drug claim is approved for adjusted pricing, you can reprocess within 10 business days.

## FRAUD, WASTE AND ABUSE



- Federal law requires all providers and other entities that receive or make annual Medicaid payments of \$5 million or more to educate their employees, contractors, and agents about fraud and false claims laws and the whistleblower protections available under those laws.
- The HHSC Office of Inspector General (OIG) investigates waste, abuse, and fraud in all Health and Human Services agencies in the State of Texas.
- To report possible waste, abuse or fraud, of pharmacies or members, contact the Navitus Special Investigations Unit who will work with our MCO's and the OIG.

Call 866-333-2757 extension 7041 to report fraud, waste and abuse activity to Navitus.

Your inquiry is confidential and the report will be investigated.

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### DRUG SEEKER PROCESS



#### Signals/Indications

- Unusual behavior and/or appearance while awaiting filling of prescriptions
- Demonstrates unusual knowledge of specific controlled substances and their mechanisms
- Erratic purchase patterns doctor shopping, pharmacy shopping, etc.
- Physical signs of usage tracks, scars, unusual markings, etc.

#### Pharmacy Shopper/Drug Seeker Defense Strategies:

- Claims processing system edits refill too soon, duplicate therapy, etc.
- Point-of-sale action by pharmacy staff
- Referrals to law enforcement

## PHARMACY PROGRAM COMPLAINTS



If a complaint is received by Navitus involving a specific pharmacy, the following expectations apply:

- Participating Pharmacy is required to cooperate with Navitus, MCO's and/or any state or federal entity to resolve complaints by Members.
- The Participating Pharmacy must make a reasonable effort in a timely manner to rectify the situation that leads to the complaint from a Member.
- The Participating Pharmacy must maintain written records of events and actions surrounding each complaint.

# PHARMACY COMPLAINTS REGARDING NAVITUS PROGRAMS



- All complaints received by Navitus, whether verbal or in written form, will be responded to in written form.
- Resolution of all complaints will be completed within thirty (30) days of initial receipt.
- If after completing this process, you believe you did not receive full due process from the respective MCO and/or Navitus, you may file a complaint or inquiry to the following:

#### **STAR Member Complaints**

HPM\_complaints@hhsc.state.tx.us or mail to:
Texas Health and Human Services Commission
Provider Complaints
Health Plan Operations, H-320
PO Box 85200
Austin, TX 78708

#### **CHIP Member Complaints**

TDI by calling 1-866-554-4926, by fax at 1-512-490-1012 or mail to:

Texas Department of Insurance
P.O. Box 149104

Austin, Texas 78714-9104

#### E-PRESCRIBING



#### Navitus supports e-Prescribing for Managed Medicaid

- Navitus provides point of care information available through Surescripts.
  - Eligibility confirmation
    - Daily updates to eligibility facilitator
  - Medication history
  - Formulary and PDL benefit confirmation
  - Formulary "alternative" drug list
  - Formulary lists will be updated no less frequently than weekly
- Navitus expects pharmacies to have ability to accept e-prescriptions and facilitate refills with prescribers.

#### TEXAS MEDICAID FORMULARY



- The Texas Medicaid Drug Formulary covers more than 32,000 line items of drugs including single source and multi source (generic) products.
- Texas HHSC Vendor Drug Program manages the formulary and Preferred Drug List (PDL).
- Navitus reimburses pharmacy providers for outpatient prescription drugs, including some Limited Home Health Supplies (LHHS).
- STAR and CHIP have separate formularies.
- Formularies can be found in the following resources:
  - HHSC Vendor Drug Website <u>www.txvendordrug.com</u>
  - Epocrates <u>www.epocrates.com</u>
  - Navitus.com <u>www.navitus.com</u>

#### DURABLE MEDICAL EQUIPMENT



- Beginning November 12, 2012, a limited set of basic home health supplies were added to the Vendor Drug Program (VDP)
   Formulary allowing pharmacies to be reimbursed for filling prescriptions for these supplies.
- Pharmacies do not have to be enrolled as Durable Medical Equipment (DME) providers to submit claims for these supplies.
- Navitus has made the following test strips our preferred products that do not require a prior authorization. All other LHHS test strips on the VDP formulary will require a prior authorization.

#### Nipro Diagnostics Line

TRUEresult® TRUEtest™ Test Strips - Compatible with the TRUEresult® glucometer

#### Abbott Diabetes Care Line

Freestyle and Precision Test Strips - Compatible with the FreeStyle (Lite® and Freedom Lite® Systems) and the Precision Xtra® System

## PRIOR AUTHORIZATIONS: PRESCRIBERS



- Prescribers can access prior authorization forms online via <u>www.navitus.com</u> under the "Providers" section or contact the Navitus Customer Care line to have a form faxed to their office.
- Prescribers will need their NPI to access the portal.
- Completed forms can be faxed 24/7 to Navitus at 855-668-8553.
- Prescribers can also call the Navitus Provider Hotline at 877-908-6023 > prescriber option and speak with the Prior Authorization department between 6am-6pm Mon-Fri CT and 8a-12p Sat/Sun CT to submit a PA request over the phone.
- Decisions regarding prior authorizations will be made within one business day from the time Navitus receives the PA request.
- The provider will be notified by fax of the outcome or verbally, if an approval can be established during a phone request.

## PRIOR AUTHORIZATIONS: PHARMACIES



- If a Prior Authorization is required and not on file, the following message will be returned to pharmacies on all electronically submitted claims that rejects because the prior authorization criteria have not been met:
  - "Prescriber should call [insert hotline or call center name and number] or pharmacist should submit 72 hour Emergency Rx if prescriber not available."
- Pharmacies are required to dispense a 72-hour emergency supply of prescription drugs for all drugs not on the preferred drug list if the denial is solely due to lack of prior authorization.
- The requirement that the Member be given at least a 72-hour supply for a **new medication** does not apply when the dispensing pharmacist determines that the taking of the prescribed medication would jeopardize the health or safety of the Member. In such event, the MCO must require that its participating pharmacist make good faith efforts to contact the prescriber.

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## 72 HOUR EMERGENCY OVERRIDE



## For a 72-hr emergency prescription, pharmacies should submit the following information:

- "8" in "Prior Authorization Type Code" (Field 461-EU).
- "8Ø1" in "Prior Authorization Number Submitted" (Field 462-EV).
- "3" in "Days Supply" (Field 4Ø5-D5, in the Claim segment of the billing transaction).
- The quantity submitted in "Quantity Dispensed" (Field 442-E7) should not exceed the quantity necessary for a three-day supply according to the directions for administration given by the prescriber. If the medication is a dosage form that prevents a three-day supply from being dispensed, e.g., an inhaler, it is still permissible to indicate that the emergency prescription is a three-day supply, and enter the full quantity dispensed.

### IMPORTANT PHONE NUMBERS



- Navitus Texas Provider Hotline: 877-908-6023 (toll-free)
- Prior Authorization: 877-908-6023 (toll-free)
- Pharmacy Network (request a contract, 835 setup, remits issues):
   608-729-1577 or email at providerrelations@navitus.com
- Fraud, Waste, and Abuse:
  866-333-2757 extension 7041
- Respective Plans' Member Services Number: refer to Member ID card

## COMMUNICATION MECHANISMS



#### **NETWORK COMMUNICATIONS MECHANISMS**

Navitus makes every effort to keep pharmacies informed and up-to-date on the latest operational information, procedures and requirements for Navitus. Information is communicated on a regular basis through the following formats:

	Fax	Email	Website	Navitus Network Department	Navitus Pharmacy Help Desk
Network Updates (Payer sheets, new clients, etc.)	X	X	X		
Changes in fee schedule	X	X	X		
Changes in contracting provisions	X	X		X	
How to obtain benefit, eligibility, formulary, and appeals information			X	X	X
Assistance regarding network issues				X	
Pharmacy Handbook		х	х		Х



#### Share a Clear View

**High-Touch Service** 

**Lowest Net Drug Costs** 

Improved Member Health



Please send any additional questions regarding this presentation to <u>providerrelations@navitus.com</u>.