



ISSUE DATE September 27, 2010	EFFECTIVE DATE October 4, 2010	NUMBER 99-10-11
SUBJECT Specialty Pharmacy Drug Program – Updated List of Covered Drugs – Pharmacy Services		BY  Izanne Leonard-Haak, Acting Deputy Secretary Office of Medical Assistance Programs

PURPOSE:

The purpose of this bulletin is to inform providers that the Department of Public Welfare (Department) is expanding the scope of drugs covered under the Specialty Pharmacy Drug Program and to provide a copy of the updated list of covered drugs.

SCOPE:

This Bulletin applies to all licensed pharmacies enrolled in the Medical Assistance (MA) Program and all prescribing providers rendering services to MA recipients who receive their services in the fee-for-service (FFS) delivery system, including pharmacy services provided to residents of long term care facilities.

BACKGROUND:

The Department published MA Bulletin Number 99-09-01, Subject: Specialty Pharmacy Drug Program, announcing implementation of the Specialty Pharmacy Drug Program, effective January 12, 2009. Under this Program, MA recipients in the FFS delivery system are required to obtain their specialty drugs from either of the Department’s preferred specialty providers, Accredo Health Group or Walgreens Specialty Pharmacy, LLC. MA Bulletin 99-09-01 also:

- Identified which MA recipients are required to get their specialty drugs from a preferred specialty drug provider and which MA recipients are exempt from participation in the Program;
- Identified the MA Program pharmacy regulations and requirements that continue to apply to specialty pharmacy drugs and any exceptions;
- Provided contact information for Accredo Health Group and Walgreens Specialty Pharmacy, LLC;
- Delineated the procedures to access specialty pharmacy drugs; and
- Described the services covered under the Specialty Pharmacy Drug Program.

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

The appropriate toll free number for your provider type.

Visit the Office of Medical Assistance Programs Web site at www.dpw.state.pa.us/PartnersProviders

Providers can view the MA Bulletin at the following site:

<http://www.dpw.state.pa.us/ServicesPrograms/CashAsstEmployment/003673169.aspx?BulletinDetailId=4403>

The Department's website also includes information about the Specialty Pharmacy Drug Program at:

<http://www.dpw.state.pa.us/PartnersProviders/MedicalAssistance/DoingBusiness/MAPharmProgram/003678273.htm>

DISCUSSION:

The Specialty Pharmacy Drug Program applies to all MA Program recipients who reside in the 42-county area of Pennsylvania shown on the map in Attachment 1 and receive their pharmacy services under the FFS delivery system. MA recipients whose healthcare benefit packages include pharmacy services and are prescribed a specialty medication covered under the Specialty Pharmacy Drug Program, must get that drug from one of the Department's preferred providers.

Exemptions - The Specialty Pharmacy Drug Program does not apply to MA recipients who:

1. Are enrolled in a MA physical health managed care organization; or
2. Have a third party resource that provides primary coverage of their pharmacy services. Examples include but are not limited to private health insurance and Medicare.

If the MA recipient's other public or private third party coverage does not provide coverage of a medically necessary specialty medication and the MA Program is the primary source of payment, the MA recipient will be required to secure that drug from one of the Department's preferred providers.

The scope of drugs covered under the Specialty Pharmacy Drug Program is listed in Attachment 2 to this Bulletin. The drugs highlighted in the list are designated as specialty drugs and will be added to the scope of coverage effective October 4, 2010. The additional drugs fall within classes of drugs already included in the Specialty Pharmacy Drug Program. No new classes of drugs have been added to the Program.

Effective October 4, 2010, the Department will limit payment for the medication listed in the attachment to the Department's preferred providers. The Department will no longer make payment to pharmacies and dispensing providers for these medications. However, the Department will continue to make payment to the dispensing providers for the administration of these specialty medications.

The contact information for the Department's preferred providers of specialty medications is as follows:

Accredo Health Group
Telephone: 1-888-745-7453
FAX: 1-888-686-1046

Walgreen's Specialty Pharmacy, LLC
Telephone: 1-877-220-6194
FAX: 1-877-231-8302

The Department sent client specific notices to all MA recipients with a recent history of a paid claim for one of the new specialty medications. The client specific notice identifies the medication and explains what the MA recipient has to do to continue to get that drug. The notice instructs the MA recipient to contact the prescribing provider of the specialty drug. The prescribing provider should then contact the MA recipient's preferred specialty provider to ensure no interruption in service.

ATTACHMENT:

Attachment 1 – Specialty Pharmacy Drug Program Map

Attachment 2 – Specialty Pharmacy Drug Program List of Covered Drugs