

AlohaCare

Transition of Care

Training for CY 2010

Temporary Coverage Override (TCO)
Formulary Changes
December 2009

Transition of Care Policy

- New or continuing members of AlohaCare Advantage or Advantage Plus who are taking medications that are not listed on the formulary or requires a PA are entitled to a 30 day transition drug supply (unless written for less) during the first 90 days of enrolling into ACA/ACAP.
- AlohaCare Advantage and Advantage Plus exceed this requirement by providing a 60 day supply (2x30 day supply)
 - Continuing member's effective date is January 1st.

Transition of Care Policy

- A transition drug supply is only applicable to Part D non-formulary drugs and Part D formulary drugs that have a utilization management requirement (e.g. prior authorization and step therapy)
- A transition drug supply does not apply to Part D excluded drugs

Transition of Care Policy

- Members who reside in a long term care facility are entitled to a 31 day transition drug supply (unless written for less).
- AlohaCare Advantage and Advantage Plus exceeds this requirement by providing a 60 day supply (2x30 day supply)

Transition of Care Policy

- AlohaCare Advantage or Advantage Plus will cover up to a 60 day supply of a prescription drugs (unless written for less) for current members who experience a level of care change.



Transition of Care Policy

- A level of care change includes the following:
 - If a member enters a long-term care facility from a hospital or other setting;
 - If a member leaves a long-term care facility to return to a community/home setting;
 - If a member is discharged from a hospital to a community/home setting;
 - If a member ends skilled nursing facility stay covered under Medicare Part A and needs to revert to coverage under AlohaCare Advantage;
 - If a member's hospice status reverts to standard Medicare Part A and B benefits; or,
 - If a member is discharged from a psychiatric hospital with a drug regimen that is highly individualized.

Transition of Care Policy

- AlohaCare may make arrangements to continue to provide necessary drugs beyond the 90 day transition period, due to a coverage determination, formulary exception request or appeal that is in-process.



Transition of Care Temporary Coverage Override (TCO) Edit

- When a claim rejects at the pharmacy, the pharmacist will receive the following reject messages:

***“Prior Authorization Required 1-866-973-7418”
Temp Fill of 30 D/S Allow with PA.MC = 01111***

The pharmacist can override the system by populating **“11111”** in the appropriate field and a 30 day supply will be dispensed.

Please note that the POS reject message gives you the code of “01111”. The actual override code which needs to be used is **“11111”.*



Transition of Care Temporary Coverage Override (TCO) Edit

- AlohaCare Pharmacy Auth Techs also have the ability to put in a TCO in Medco's eSD system which will dispense a 30 day transition supply of medications

Transition of Care Temporary Coverage Override (TCO) Edit

- Once a Temporary Coverage Override edit has been utilized, Medco will send the member and prescriber a letter within 3 calendar days.

The letter contains the following information:

- Explanation of the temporary nature of drug supply;
- Instructions to work with AlohaCare and prescriber to identify appropriate therapeutic alternatives that are on the formulary;
- Explanation of enrollee's right to request a formulary exception; and,
- Procedures for requesting a formulary exception.


Transition of Care Temporary Coverage Override (TCO) Edit

- AlohaCare's Pharmacy Department also receives from Medco claims data information for every TCO edit utilized
 - Fax is sent to the prescriber along with AlohaCare's Drug Coverage Request Form
 - AlohaCare's Pharmacy Department works with the prescriber to change to another medication on the formulary or initiates a coverage determination or formulary exception process
 - Once approved the Prior Authorization is entered into the Medco eSD system

Part D Excluded Drug Categories not subject to the TCO

- Benzodiazepines
- Barbiturates
- Drugs when used for:
 - Anorexia
 - Weight Gain
 - Cosmetic Purposes
 - Erectile Dysfunction
 - Weight Loss
 - Fertility
 - Hair Growth
 - Symptomatic Relief of Cough or Colds
- OTC drugs, except if part of AC step edit
- Prescription Vitamins and Mineral Products, except Prenatal Vitamins and Fluoride preparations
- Outpatient drugs where the manufacturer seeks to require that associated tests or monitoring services be purchased exclusively from the manufacturer as a condition of sale.

Formulary Changes for 2010



AlohaCare
Aloha is the difference




AlohaCare Advantage (HMO)
2010 COMPREHENSIVE FORMULARY
(List of Covered Drugs)


PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN.
Note to existing members: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

MedicareRx
Prescription Drug Coverage X

Last Updated: 9/1/09
H5969_ACA500305_1_FINAL 8/28/09



AlohaCare
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AlohaCare Advantage Plus (HMO)
2010 COMPREHENSIVE FORMULARY
(List of Covered Drugs)

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN.
Note to existing members: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

MedicareRx
Prescription Drug Coverage X

Last Updated: 9/1/09
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Formulary Changes for 2010

AlohaCare Advantage (ACA) for 2010 will change to a four tier formulary:

- Tier 1 – Generic \$5 copay
- Tier 2 – Preferred brand \$35 copay
- Tier 3 – Non-preferred brand \$65 copay (eligible for tiering exception)
- Tier 4 – Specialty 33% coinsurance

Formulary Changes for 2010

- AlohaCare Advantage Plus (ACAP) will remain two tier:

- Tier 1 Generic (\$0 to \$2.50 or 15%)*
- Tier 2 Brand (\$0 to \$6.30 or 15%)*

* All cost sharing is based on member's level of Medicaid eligibility. Medicaid pays deductible, copayment, and coinsurance subject to the applicable Medicaid benefit limits.

Formulary Changes for 2010

- With the addition of Tiers 3 and 4 (Preferred and Non-preferred Brand) to ACA (Tiering Exception)
- Only available to Drugs listed in Tier 3 Non-preferred Drugs
- Member can request a tiering exception to pay the Tier 2 Preferred Drugs copay of \$35.00
- Physician's supporting statement must indicate:
 - Preferred drug would not be as effective as the requested drug and/or
 - Preferred drug would have adverse effects

Formulary Changes for 2010

- The following OTC will be covered at no cost to the member and the cost of the drug will not count toward member's drug spend or TrOOP:
 - Prilosec OTC
 - Omeprazole
 - Allergy Relief
 - Claritin
 - Alavert
 - Loratadine
 - Wal-itin
 - Clear-atadine
 - Wal-vert



Formulary Changes for 2010

- Standard Benefit Design Parameters for 2010:
 - Deductible \$310
 - Initial Coverage Limit \$2,830
 - Out of Pocket Threshold \$4,550

SPAP and Co-payments

- When a member has a prescription filled at a pharmacy the Pharmacist first processes the claim using Medicare Part D (AlohaCare Advantage Plus Card) – Medco
- The approved claim will come back to the pharmacist with a co-pay amount of \$1.10, \$2.50 (generics) \$3.30, or \$6.30 (brand)
- The Pharmacy then must process the co-pay as a secondary claim no exceptions (using the Smooth Transition Card) – ACS which will cover the co-pay up to \$6.30

After Hours Emergency Supply

- When our AlohaCare Pharmacy Management staff is not available the Pharmacist:
 - May dispense a 3-day emergency supply* the following drug classes:
 - Antibiotics (up to 10-day supply)
 - Pain medications
 - Muscle relaxants
 - Cardiovascular agents
 - Blood pressure treatment agents
 - Emergency inhalation agents for asthma/COPD (one inhaler)
 - Insulin (one vial)
 - Should request prescribing physician to seek coverage review from AlohaCare for continuation of the non-formulary prescription
 - Should call AlohaCare on the next business day to secure payment for the emergency supply
 - May dispense on a case-by-case basis, using his/her professional judgment, up to a 3-day emergency supply* of:
 - Non-formulary medications
 - Medications listed on the formulary that require a PA

* *The 3-day emergency supply is subject to verifying member eligibility/benefits and does not apply to excluded drugs/categories.*

AlohaCare Primary Contacts

- **AlohaCare Advantage/Advantage Plus Members & Providers**
 - 973-6395 (Oahu)
 - 866-973-6395 (Neighbor Islands and Mainland)

- **Pharmacy Management Numbers for Providers**
 - 973-7418 (Oahu)
 - 866-973-7418 (Neighbor Islands)
 - 973-0676 Fax (Oahu)
 - 888-667-0680 Fax (Neighbor Island)



The End



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