

Act 292 of the 2022 Regular Legislative Session

Council on Medicaid Pharmacy Reimbursement

Wednesday, January 11th, 2023

9:00 a.m.

Bienville Building

Room 118

628 N. 4th Street

Baton Rouge, LA 70802

Name	Committee Attendance	Attendance
M.J. Terrebonne	Pharmacist (Senate Committee on Health & Welfare)	Present
Kim Wixson	Louisiana Pharmacists Association	Present
Nikki Hollier	Louisiana Board of Pharmacy	Absent
Melwyn Wendt	Louisiana Department of Health	Absent
Dana Antoon	Louisiana Board of Pharmacy	Absent
Dr. Stewart Gordon	Physician (Senate Committee on Health & Welfare)	Present
Doug Boudreaux	Pharmacist (House Committee on Health & Welfare)	Absent
Randal Johnson	Louisiana Independent Pharmacies Association	Present
Dr. Wanda Thomas	Physician (House Committee on Health & Welfare)	Absent
Jeff Gaude	National Association of Chain Drug Stores	Present
Pam Reed	LA Alliance of Retail Pharmacies	Present

- **Call to order**
 - The meeting was called to order at 9:00 a.m. by M.J. Terrebonne
- **Introductions and Quorum Determination**
 - The roll was called by M.J. Terrebonne and a quorum was confirmed.
- **Review and approval of November 9th meeting minutes**
 - Dr. Gordon moved to approve the minutes and Pam Reed seconded the motion. The minutes were approved with no objection.
- **Data Requested by the Council**
 - LDH provided the requested data for the council. LDH stated eight pharmacies are not enrolled in the provider portal. 349 pharmacist not enrolled in the provider portal as of today. LDH reported there are approximately 4,100 prescribing providers not enrolled in the provider portal at this time.
 - Randal asked do we know about these providers.

- LDH provided a response and said these are only Louisiana providers .
 - Randal Johnson said we are seeing a lot of movement in the pharmacies; how does LDH process Humana claims and other claims for members who want to switch plans?
- LDH provided a response and said, if members were reassigned to a new plan they have until the end of March to switch plans. Most have been switching back to their prior plan. We have taken these on a case by case basis.
- Randal Johnson asked if enrollment reports have been posted as of yet?
 - LDH provided a response and said, not at this time. We need to speak to the CTO to see when we can post this information.
- Randal Johnson said some of the numbers with prior authorization and number of claims denied look pretty common. Randal asked if LDH could share more information.
 - LDH provided a response and said, this could be eligibility issues.
- Randal Johnson asked if these are complete denials.
 - LDH provided a response and said, these claims could've been processed later.
- Randal Johnson asked if anything could reveal the total number of claims subject to a DUR edit.
 - LDH provided a response and said, the number of claims would be a subset.
- Randal Johnson asked if any of the numbers in one box are in another box.
 - LDH provided a response and said, this could be possible because we are slicing the data in different ways.

- Kim Wixson asked, do we have a percentage of the number of claims denied?
 - LDH provided a response and said, this is not the total number and this information came from the request we received before the previous meeting. We need to make note that we need to look at the correct state fiscal year.
- Randal Johnson said, looking at the DUR edits, these were one of the smaller claims. United Health and LHCC has a chunk of members. Healthy Blue has a smaller number of members. When referencing the number of claims paid with DUR edits, is this related to the disease state the ACLA state had among members?
 - LDH provided a response and said, most of this information is dependent upon the population of the MCO.
- Randal Johnson: asked is there anything we can do with this information to share this with pharmacies? This could free up the time and process.
 - LDH provided a response and said, the MCO's have to follow the DUR edits. All information is shared with the providers at the time.

- MJ Terrebonne asked where does this information come from and how sure are we about the accuracy of the data?

- LDH provided a response and said the MCO's send this information.
- Jeff Gaude asked if LDH has data they can provide down to the provider level? Regarding best practices, this would save time, labor, and expenses. This would be very beneficial for the pharmacy providers.
 - LDH provided a response and said, this is something we would need to bring back to the MCOs. Also, we would need a list of whatever you need.
- Randal Johnson asked if LDH has an idea of how many DUR edits are programmed and what is the purpose.
 - LDH provided a response and said, they are all listed on the PDL and the criteria, and point of sale. This is a living document which is updated constantly. The DUR is to get appropriate medications. There are age limits, quantity limits; anything which would make sure the drug is appropriate for the recipients.
- Randal Johnson asked if there is any correlation between the MCOs and fee for service edits.
 - LDH provided a response and said, at a minimum, the MCOs must align with FFS edits. Long term care recipients are in fee for service.
- MJ Terrebonne stated, at the last meeting it was mentioned there were numerous reports. Do we have a status?
 - LDH provided a response and said, the reports are in the today's meeting packet.
- MJ Terrebonne asked would we have unity with the single PBM.
 - LDH provided a response and said, we will have unity across the MCOs. Remember the only reason Humana is carved into fee for service, is due to the implementation of the single PBM in 2023.
- Randal Johnson asked if the contract for Gainwell renewed for one year at the joint legislative committee.
 - LDH provided a response and said, Gainwell's contract is based on a one-year extension.
- Randal Johnson said there's some data inside the packet about pharmacy vaccines which I would like to ask questions. They are talking about pharmacist providing over 430,000 vaccines if you look at fee for service and MCO's. This does include COVID vaccines which may have been provided by pharmacists. This is a great number and this is beneficial. A little over a year ago there was a letter that went to the state department on vaccine counseling. What's the update on vaccine counseling for pharmacists?
 - LDH provided a response and said, we have to go back to see the status of the vaccine counseling.
- Randal asked what value we place on CMS instruction or direction. CMS instructed there be vaccine counseling. CMS instructed the state move forward with vaccine counseling.

- LDH provided a response and said, the counseling is covered as a medical benefit.
 - Randal Johnson asked, what's the delay on the pharmacy benefit
 - LDH provided a response and said, we would check on the status of the vaccine counseling.
 - LDH Legal provided a response and said, we didn't put fee for service in the PBM contract because of Gainwell's old processing system. The PBM has to talk to Gainwell. This was the issue. The system is outdated and old. Trying to integrate this into the new PBM. We have to break the old Gainwell into different components. CMS is requiring us to break this apart. This is why we didn't integrate this with the PBM.
 - Randal Johnson asked if LDH has a projected timeline.
 - LDH provided a response and said, we are in the process, and as far as the projected timeline I would believe this is a couple of years away. However, we don't have to complete an RFP because we are going to use NASPO.
 - LDH also stated Gainwell provides LDH with a list of pharmacies which have an approved enrollment over the last month. In order to be considered for the local pharmacy list, the provider has to be enrolled in fee for service. LDH takes the list from Gainwell and looks to see if they meet the legislative definition. If the pharmacy is determined to meet these criteria. It's added to a spreadsheet. LDH prepares the list and send this to the MCOS's for the 1099 dispensing fee.
 - Randal Johnson asked if LA Board of Pharmacy communicated with LDH.
 - LDH provided a response and said, they reached out Joe and Sarah. Sarah, recently sent the list.
 - Randal Johnson said, I buy this list and give them an extra month, in case someone forgot. I will share what we have February 7th.
 - LDH provided a response and said, we are going to see if these pharmacies are enrolled in Medicaid. We want to see if the pharmacies are on the list.
 - Randal Johnson said, there will be some questions about 340B. We appreciate the list LDH has shared. Tulane talked about the list they received for the 340B processing. I reflected on LDH's list. I didn't see any of the pharmacies on Medicaid's list.
 - LDH provide a response and said, the pharmacies on the 340 B pharmacy list have to be all or nothing. The NPIs of the pharmacies must be present on the HRSA Medicaid Exclusion File (MEF). We download the list and have a process extracting NPIs.
 - Randal Johnson asked what the difference is.
 - LDH provided a response and said, if this is the case, when they get audited, this will get captured.
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- MJ Terrebonne said, 340 B has always been a nightmare and this has exploded over the past few years. I don't know how you provide any assurances with 340 B. I don't know how you would know if one is double dipping.
 - LDH provided a response and said, if the NPI is listed on the rebate excursion list, we do not seek rebate.
- Randal Johnson said, the 340 B processor came in and reprocessed every prescription pharmacy had filled as a 340 B. How do you know if the pharmacy that filled the prescription is a pharmacy you can get a Medicaid rebate from?
 - LDH provided a response, if their NPI is on the HRSA MEF the state does not seek rebates. If it's a contract pharmacy we do seek rebates. Some are not 340B eligible. It is up to the covered entity. They do this through companies like SunRx. Everything in 340 B is overseen by HRSA. If there is anything going on in the hospital setting and the clinic setting, it's their responsibility to start reversing.
- Randal Johnson asked, what's the percentage of Medicaid claims versus 340B claims? If they're a covered entity and operating their own pharmacy, what's the purpose of having a Medicaid reimbursement?
 - LDH provide a response and said, we cannot provide an answer to this.

- **Letter to Medicaid Director regarding Credentialing**

- Legal sent a letter to all MCO's stating they have to cease and desist all legal fees.

- **Review of draft letter to Secretary Phillips regarding pharmacy reimbursement methodology**

- The committee discussed the draft letter for Dr. Phillips. Discussion was held and the council suggested the letter is circulated among members of the council.
- LDH legal team provided a response and suggested the council vote on the letter now, due to having a quorum.
- Randal Johnson moved to approve the letter for Dr. Phillips with the suggested changes. Kim Wixson seconded the motion

- **Call for Public Testimony**

- N/A

- **Schedule Future Council Meetings**

- The next council meetings will be held Tuesday, February 7th at 9:00 a.m. Tuesday, March 7th at 9:00 a.m., and Wednesday, April 12th at 9:00 a.m.
- The meetings will take place at Louisiana Department of Health in the Bienville Building, Room 118.

- **Other Business**

- N/A

- **Adjournment**

- Randal Johnson made the motion to adjourn the meeting. Pam Reed seconded the motion. The meeting was adjourned at 10:50 a.m.