



MARYLAND MEDICAID PHARMACY PROGRAM

No. 27
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ADVISORY

In an effort to give timely notice to the pharmacy and prescriber communities concerning important pharmacy topics, the Department of Health and Mental Hygiene's (DHMH's) Medicaid Pharmacy Program (MPP) has developed the Medicaid Pharmacy Program Advisory. An email network has been established for dissemination purposes, which incorporates the email lists of pharmacy and prescriber societies, associations and organizations. It is our hope that the information is disseminated to all interested parties.

- **New Primary Adult Care Program (PAC)**

New Primary Adult Care Program (PAC)

Beginning **July 1, 2006**, the Maryland Department of Health and Mental Hygiene (DHMH) will offer a new Medical Assistance program, known as the Primary Adult Care Program (PAC). Under PAC managed care organizations will cover primary care and pharmacy services for low-income Maryland residents. DHMH combined two of its programs – the Maryland Pharmacy Assistance Program and the Maryland Primary Care Program (MPC), to create PAC. The program will be initially administered by three of the HealthChoice managed care organizations (MCOs). Current Maryland Pharmacy Assistance Program recipients will be phased into PAC beginning on July 1, 2006 and continuing through September 1, 2006.

- PAC will cover individuals aged 19 and over near the poverty level who are not eligible for Medicare or full Medicaid benefits. Eligible applicants will also have to meet income and asset requirements. Those applying for PAC cannot have assets more than \$4,000. Households of more than one person cannot have assets of more than \$6,000.
- Recipients will receive a yellow and white Medical Care Program card to be used for all pharmacy services provided in the period prior to enrollment into a managed care organization and carved-out services.
- PAC services carved-out from managed care organization coverage are specialty mental health drugs, outpatient specialty mental health care and HIV drugs.
- For all carved-out drugs, PAC recipients will be required to pay co-payments of \$2.50 for generic and preferred brand name drugs and \$7.50 for other brand name drugs. Pharmacists may refuse to dispense PAC prescriptions if the required co-payment is not made. However, co-payments do not apply to contraceptives.

People on PAC will receive a card from their managed care organization for coverage of the following services:

- Free visits to a family doctor (also called a Primary Care Provider or PCP).
- Free outpatient visits to a counselor or psychiatrist for mental health services.
- Additional limited services for individuals with diabetes.
- Pharmacy services with possible low co-payments or in some cases no co-payments at all for prescription drugs (Jai Medical Systems is waiving co-pays for prescriptions written by participating PCPs).
- PAC will cover all of the services that are covered by the Maryland Family Planning Program except sterilization (tubal ligation).

Please note:

- PAC will not cover specialty care or inpatient and outpatient hospital care.
- HIV medications and most mental health drugs are “carved out” from the PAC Program and will be covered by the fee-for-service Medicaid Pharmacy Program. Co-payments will be levied, however, the pharmacist may waive these copayments.

How to apply

1. PAC candidates may call toll-free at 1-800-226-2142 and ask for a PAC application form.
2. Applicant may go to the web at <http://www.dhmf.state.md.us/mma/pdf/pacapplication.pdf> and print an application.
3. Placing the phone number on the form is important in case there are questions.
4. Completed application forms are to be mailed to:

PAC Eligibility Services
P.O. Box 386
Baltimore, MD 21203-0386

5. Letters will be sent, stating whether or not applicants qualify for PAC. A new application is required each year to remain in PAC.

Completing the managed care organization enrollment process

- Member ID cards and enrollment packets will be issued by mail. The packet explains how to pick an MCO.
- PAC recipients must select an MCO. If they do not select an MCO, one will be assigned.

Note: There will be three MCOs providing services for PAC recipients. These are Jai Medical Systems, UnitedHealthcare and Maryland Physicians Care.

- PAC recipients must pick a primary care provider (PCP) who is part of that MCO. If the recipient fails to select a PCP, one will be assigned.

The following table shows MCO contact information:

MARYLAND MEDICAID • PRIMARY ADULT CARE /HEALTHCHOICE PROGRAM

PHARMACY BENEFIT MANAGERS' PHONE NUMBERS FOR MANAGED CARE ORGANIZATIONS

Managed Care Organization (MCO)	Pharmacy Benefit Manager	Hours of Operation for Pharmacy Benefit Manager	Phone Number for Pharmacy Providers	Phone Number for Physician Providers
Jai Medical Systems, Inc.	BioScrip	24 hours – 7 days a week	1-800-213-5640	1-800-555-8513
Maryland Physicians Care	Express Scripts, Inc.	7:00am – 7:00pm	1-877-776-8735	1-877-776-8735
United Healthcare	Medco Health	24 hours – 7 days per week	1-800-922-1557	1-800-310-6826 Physician Prior Authorization Phone Unit 24 hours – 7 days per week

*** Per Caremark - they only handle calls from pharmacists; therefore, MCO information has been included for physician questions.

FOR ELIGIBILITY ISSUES: Call the Eligibility Verification System (EVS) 1-866-710-1447 (Available 24 hours/7 days)

PAC Recipient Hotline 1-888-754-0095

Recipient inquiries/complaints about MCO enrollment – PSI Enrollment Broker 1-866-675-5880

Recipient eligibility application for PAC – 1-800-226-2142