IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS

BT201677 NOVEMBER 22, 2016

Changes to managed care pharmacy benefit managers coming January 1, 2017

As announced in *Indiana Health Coverage Programs (IHCP) Bulletin <u>BT201666</u>, effective January 1, 2017, the IHCP will have four health plan options for Hoosier Healthwise and Healthy Indiana Plan (HIP) members. These options will be offered through the managed care entities (MCEs): Anthem, CareSource, MDwise, and Managed Health Services (MHS).*

Also effective January 1, 2017, the management of pharmacy benefits for Hoosier Healthwise members will transition from OptumRx to the MCEs. Each MCE along with its contracted pharmacy benefit managers (PBMs) will manage Hoosier Healthwise member pharmacy benefits and process pharmacy claims.

MCEs and their PBMs will continue to manage member pharmacy benefits and process pharmacy claims for the HIP and Hoosier Care Connect programs as they do now. Some changes to the PBM vendors will take effect January 1, 2017. OptumRx will continue to be the PBM for all fee-forservice programs. Note: Providers are reminded that OptumRx will manage pharmacy claims for hepatitis C drugs for all IHCP members; see IHCP Bulletin BT201644.



Pharmacy providers are reminded to verify the member's eligibility for each date of service through the existing Eligibility Verification System (EVS) options. Doing so will identify a member's program and MCE assignment, which will determine the appropriate entity for pharmacy prior authorization (PA) requests and pharmacy claim submission. Newly enrolling HIP, Hoosier Care Connect, and Hoosier Healthwise members will be issued cards by the enrolling MCEs, which will also include plan-specific PBM information.

The contact information regarding pharmacy PA and claims for each of the five possible PBMs is identified in <u>Table 1</u>, attached to this bulletin. It may be helpful to keep this information handy for billing purposes. Contact numbers for providers and members who have questions about pharmacy services are also listed in Table 1 for easy reference.

Note that pharmacy claims submitted to OptumRx in error will reject with a message that identifies the correct bank identification number (BIN) and process control number (PCN) for the PBM associated with the member's enrollment.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 1-800-577-1278.

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Table 1 – Pharmacy benefit manager contact and claim submission information

| MCE/Program | Member Services | Pharmacy Benefit Contact Information | | | | | |
|--|---|---|--|--|--------|----------|--------------|
| | | Pharmacy Benefit Manager | Provider Services and Prior Authorization (PA) | Pharmacy Claims | BIN | PCN | RX Group |
| IHCP Fee-for-Service | 1-855-577-6317 | OptumRx | 1-855-577-6317 | 1-855-577-6317 | 001553 | INM | Not required |
| Anthem Healthy Indiana Plan (HIP) Hoosier Care Connect (HCC) Hoosier Healthwise (HHW) | 1-866-408-6131 (HIP & HHW) 1-844-284-1797 (HCC) 1-866-408-7188 (TTY) | Express Scripts, Inc. (ESI) | 1-800-345-4344 (HIP) 1-844-284-1798 (HCC) 1-866-408-6132 (HHW) | 1-800-473-0694 (HIP) 1-844-520-2680 (HCC) 1-800-716-3751 (HHW) | 003858 | MA | WKXA |
| CareSource Healthy Indiana Plan (HIP) Hoosier Healthwise (HHW) | 1-844-607-2829 | CVS Health | 1-844-607-2831 (HIP & HHW) | 1-800-342-5441 (HIP) 1-800-980-6765 (HHW) | 004336 | MCAIDADV | RX6421 |
| MDwise Healthy Indiana Plan (HIP) Hoosier Care Connect (HCC) Hoosier Healthwise (HHW) | 1-800-356-1204 | MedImpact | PA Phone 1-800-788-2949 PA Fax 1-858-790-7100 | 1-844-336-2677 (HIP, HCC, HHW) | 003585 | ASPROD1 | MDW |
| Managed Health Services (MHS) Healthy Indiana Plan (HIP) Hoosier Care Connect (HCC) Hoosier Healthwise (HHW) | 1-877-647-4848 | US Script (PA) CVS Health (Claims) | PA Fax (Standard) 1-866-399-0929 PA Phone (Standard) 1-866-399-0928 PA Fax (Specialty) 1-855-678-6976 | 1-800-311-0557 (HIP) 1-800-378-0779 (HCC) 1-800-378-0815 (HHW) | 004336 | MCAIDADV | RX5440 |