

POLICY AND PROCEDURE

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| DEPARTMENT: Pharmacy Operations | REFERENCE NUMBER: NV.PHAR.04 |
| EFFECTIVE DATE: 07/01/17 | P&P NAME: Continuity of Care |
| REVIEWED/REVISED DATE: 04/17/18; 01/08/19; 01/13/20; 02/03/21; 10/11/22, 01/31/23, 12/13/23 | RETIRED DATE: N/A |
| BUSINESS UNIT: SilverSummit Healthplan | PRODUCT TYPE: Medicaid |
| REGULATOR MOST RECENT APPROVAL DATE(S): N/A | |

SCOPE:

This policy applies to all directors, officers, and employees of Centene Corporation, its affiliates, health plans, and subsidiary companies (collectively, the "Company").

PURPOSE:

To describe policy relating to SilverSummit Health Plan's process for ensuring the appropriate, safe, and effective transition of medications, when applicable, for new members on a prescription medication not on the Preferred Drug List (PDL) to a prescription medication on the PDL. Includes continuity of care for psychotropic medication usage.

DEFINITIONS:

POLICY:

It is the policy of SilverSummit Health Plan to honor approved medication authorizations in place at the time a member transitions from FFS to an MCO for a maximum of sixty eight (68) calendar days. SilverSummit Health Plan will provide information to members and providers regarding the authorization process in the event the member or provider wishes to request continued authorization of a product not listed on the PDL.

It is the policy of SilverSummit Health Plan to honor authorizations for non-preferred psychotropic medications for up to six months following discharge from an institution. For recipients under the age of 18 years we will honor non-preferred psychotropic medications for up to six months following discharge from an institutional facility or when it is documented that the recipient has been started and stabilized on the non-preferred medication.

PROCEDURE:

1. For new members who are currently on prescription medications, the point of sale (POS) system will automatically allow up to a maximum of a 68-day supply. SilverSummit Health Plan will notify the prescribing provider and the member that the member has filled a prescription not on the PDL and the recommendation made to switch to a PDL agent.
2. If the provider wishes to keep the member on the current non-PDL medication, the provider should submit an authorization request to Centene Pharmacy Services for approval as outlined in EPS.PHARM.24. The request will be reviewed based on the criteria established by the P&T Committee as well as any specific clinical information that the prescriber has submitted.
3. In certain situations the POS system may not automatically allow the 68-day supply. In those situations the prescriber or pharmacist can contact Centene Pharmacy Services for an override. All members who have previously been on the medication, as verified by the prescriber or pharmacist, will be given an override for continuity of care.
 - a. If the pharmacy or prescriber verify the member has been on this medication a 68 day authorization will be given.
 - b. If the pharmacy or prescriber can verify the member has a current prior authorization on file:
 - I. The current expiration date of the authorization will be entered into the system.
 - II. If the pharmacy or prescriber does not know the current expiration date of the authorization if the medication is on the PDL an authorization will be given for one year. If the medication is not on the PDL it will be given a 68 day authorization.
4. For patients on non-preferred psychotropic drugs after discharge from an institution or for recipients under the age of 18 the prescriber or pharmacist can contact Centene Pharmacy Services to enter an override for 6 months.

REFERENCES: EPS.PHARM.24 Continuity of Care

ATTACHMENTS:

SUPPORT/HELP:

Resources available to support users of the P&P. Phone numbers, training programs, classes, and/or offices available to help with carrying out the procedure/work process.

EXAMPLE:

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| If you need help with: | Contact: |
| Questions about this policy | NVSS_Pharmacy@SilverSummitHealthPlan.com |
| Questions about requesting a continuity of care override | Centene Pharmacy Services 1-800-460-8988 OR 1-855-565-9520 |

REGULATORY REPORTING REQUIREMENTS:

DHCFP

REVISION LOG

| REVISION TYPE | REVISION SUMMARY | DATE APPROVED & PUBLISHED |
|----------------------------|--|--------------------------------------|
| Q2 2018 Annual Review | No Revisions | 04/17/18 |
| Q1 2019 Annual Review | No Revisions | 01/08/19 |
| Q1 2020 Annual Review | No Revisions | 01/13/20 |
| Q1 2021 Annual Review | No Revisions | 02/03/21 |
| 2022 Annual Review | Changed references of “Envolve Pharmacy Solutions” to “Centene Pharmacy Services”. | 10/11/22 |
| Q1 2023 Annual Review | Added additional phone number to Centene Pharmacy Services | 01/31/23 |
| 2023 Updated Annual Review | Annual Review moved to December 2023; Approved by SSHP QIC; No revisions. | 12/13/23 |

POLICY AND PROCEDURE APPROVAL

The electronic approval retained in RSA Archer, the Company’s P&P management software, is considered equivalent to a signature.