

FORWARDHEALTH
PHARMACY SERVICES LOCK-IN PROGRAM
HMO RESPONSIBILITIES FOR MEMBER REFERRAL TO
PHARMACY SERVICES LOCK-IN PROGRAM

FOR HMO USE ONLY

This document outlines the specific responsibilities of the HMO lock-in coordinator during and after a member's referral to the Pharmacy Services Lock-In Program, as well as the responsibilities of the HMO in the event of an appeal by the member.

The purpose of the Pharmacy Services Lock-In Program is to coordinate the provision of **restricted medications** for ForwardHealth members who have been identified through retrospective drug utilization review or other means (for example, physicians, pharmacists, or other providers) as abusing or misusing Medicaid services for restricted medications (that is, most Schedule II, III, IV, and V controlled substances). A current list of restricted medications can be found on the Pharmacy Resources page of the Providers area of the ForwardHealth Portal at <https://www.forwardhealth.wi.gov/WIPortal/content/provider/medicaid/pharmacy/resources.htm.page#>.

The Pharmacy Services Lock-In Program is administered by Acentra. For questions about the Pharmacy Services Lock-In Program, Acentra may be contacted by phone at 877-719-3123, by fax at 800-881-5573, or by mail at the following address:

Pharmacy Services Lock-In Program
c/o Acentra
PO Box 3570
Auburn AL 36831-3570

HMO Lock-In Coordinator Responsibilities When Referring a Member

The HMO lock-in coordinator should ensure that all required forms are completed and that all other procedures are in place to support a member's referral to the Pharmacy Services Lock-In Program. Unless otherwise noted, the required forms can be found on the Pharmacy-Related Forms page of the ForwardHealth Portal at <https://www.forwardhealth.wi.gov/WIPortal/Subsystem/Publications/ForwardHealthCommunications.aspx?panel=Forms>. The following are the responsibilities of the HMO lock-in coordinator when referring a member to the Pharmacy Services Lock-In Program:

- Determine that at least one criterion has been met to warrant referral of the member to the Pharmacy Services Lock-In Program. For a list of criteria, refer to the Pharmacy Services Lock-In Program HMO Referral for Pharmacy Services Lock-In of HMO Member form, F-00841.
- Ensure that there is sufficient documentation on file to support referral of the member to the Pharmacy Services Lock-In Program. The HMO is required to maintain the documentation in the event of an appeal by the member. The documentation should **not** be submitted with the referral unless the Division of Medicaid Services (DMS) specifically requests it.
- Secure a willing Medicaid-enrolled prescriber to function as the lock-in prescriber for restricted medications for the member being referred.
- Complete and submit the following required forms:
 - Pharmacy Services Lock-In Program HMO Designation of Prescriber for Restricted Medications Services form, F-00345
 - Pharmacy Services Lock-In Program HMO Referral for Pharmacy Services Lock-In of HMO Member form
- If applicable, secure alternate or additional Medicaid-enrolled prescribers for restricted medications. An alternate prescriber may prescribe restricted medications in the primary prescriber's absence. An additional prescriber may

prescribe restricted medications for a diagnosis that the primary lock-in prescriber does not manage for the member being referred.

- If applicable, submit **one** of the following forms for each alternate or additional prescriber:
 - A completed Pharmacy Services Lock-In Program Designation of Alternate Prescriber for Restricted Medications Services form, F-11183 (This form is completed by the lock-in prescriber and sent to the HMO lock-in coordinator. This form can be found on the Forms page of the ForwardHealth Portal at <https://www.forwardhealth.wi.gov/WIPortal/Subsystem/Publications/ForwardHealthCommunications.aspx?panel=Forms>.)
 - A completed Pharmacy Services Lock-In Program HMO Designation of Prescriber for Restricted Medications Services form (This is in addition to the form submitted for the primary lock-in prescriber.)

After receiving the required forms, Acentra will place the member in the Pharmacy Services Lock-In Program at the next scheduled monthly lock-in cycle and notify the member of the following:

- Their placement in the program
- Their right to appeal placement in the program
- The name and contact information of the assigned lock-in pharmacy
- That their lock-in prescriber information will be communicated by the HMO lock-in coordinator

HMO Lock-In Coordinator Responsibilities During Lock-In Term

While a member is in the Pharmacy Services Lock-In Program, the HMO lock-in coordinator is required to do the following:

- Respond to any inquiries regarding the HMO member's assigned lock-in prescriber(s).
- Direct any inquiries regarding the HMO member's assigned lock-in pharmacy to the Pharmacy Services Lock-In Program at 877-719-3123.

HMO Lock-In Coordinator Responsibilities at End of Lock-In Term

At the end of the member's two-year lock-in term, the HMO lock-in coordinator is required to do the following:

- Approximately 75 days prior to the end of the member's lock-in term, review the member's file to determine if lock-in should continue (The HMO lock-in coordinator should be prepared to defend a decision to continue lock-in since the member continues to have the right to appeal.)
- If the member's lock-in should continue, notify Acentra at least 60 days prior to the end of the member's lock-in term by completing a new Pharmacy Services Lock-In Program HMO Referral for Pharmacy Services Lock-In of HMO Member form and indicating on the form that the referral is a continuation.

Note: If Acentra does **not** receive a new Pharmacy Services Lock-In Program HMO Referral for Pharmacy Services Lock-In of HMO Member form indicating that lock-in should continue, the member will be removed from lock-in at the end of the two-year lock-in term.

If the HMO Lock-In Coordinator communicates to Acentra that lock-in is still required for the member, Acentra will notify the member and the lock-in pharmacy of this decision.

HMO Responsibilities in the Event of an Appeal

If a member referred for placement in the Pharmacy Services Lock-In Program files an appeal request, Acentra will notify both the appeals coordinator for the Wisconsin Department of Health Services (DHS) Managed Care Section and an appeals contact person designated by the HMO. When notified of a member appeal, the HMO is responsible for the appeal response.

The following are the HMO's responsibilities for handling appeal requests:

- Designate an appeals contact person to manage lock-in appeals. If an HMO does not designate a contact person to manage lock-in appeals, DMS will automatically designate the HMO lock-in coordinator as the default contact person.

- Prepare all documentation and act as the DMS representative for member appeals to the Division of Hearings and Appeals (DHA) related to the Pharmacy Services Lock-In Program referrals. This involves preparing a written response to the appeal suitable for submission to an administrative law judge. The written response should include any supporting documentation on file that was used to support the member's referral to the Pharmacy Services Lock-In Program. (This response becomes the evidence reviewed at the hearing with the member and the administrative law judge.)
- Submit the written response to the DHS Managed Care Section appeals coordinator within 10 business days of receiving notice of the appeal.
- Participate in the hearing held with an administrative law judge. (The DHS Managed Care Section appeals coordinator will provide the details [for example, date, time, procedures] of the appeal hearing to the HMO's designated appeals contact person.)

During the appeal process, the DHS Managed Care Section appeals coordinator serves as the point of contact between DHS, the HMO, and the DHA. Any questions or concerns that arise in preparing or submitting the appeal response should be directed to the DHS Managed Care Section appeals coordinator.

Note: The member's lock-in will continue unless and until the decision is overturned by the administrative law judge.