



Alabama Medicaid Pharmacist

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PDL Update

Effective April 1, 2023, the Alabama Medicaid Agency updated the Preferred Drug List (PDL) to reflect the recent Pharmacy and Therapeutics (P&T) Committee recommendations, as well as quarterly updates. The updates are listed below:

PDL Additions
Clindesse—Skin and Mucous Membrane Agents, Antibacterials
Trulicity—Incretin Mimetics
PDL Deletions
Capex Shampoo—Skin and Mucous Membrane Agents, Corticosteroids

Kepro

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Please fax all prior authorization and override requests directly to Kepro at 800-748-0116. If you have questions, please call 800-748-0130 to speak with a call center representative.



Changes to Hepatitis C Prior Authorization (PA) Criteria

Effective October 1, 2022, the Alabama Medicaid Agency removed the requirement of absence of alcohol and illicit drug use by recipients for the prior approval of antiviral drugs used in the treatment of hepatitis C. A copy of the patient's drug and alcohol screening lab report will no longer be required. All other criteria remain, including the patient consent form with the patient's and physician's signature, which must be submitted with requests.

The updated Prior Authorization (PA) request form and criteria booklet should be utilized by the prescriber or the dispensing pharmacy when requesting a PA. Updated forms and criteria can be found here: [https://medicaid.alabama.gov/content/9.0 Resources/9.4 Forms Library/9.4.13 Pharmacy Forms.aspx](https://medicaid.alabama.gov/content/9.0%20Resources/9.4%20Forms%20Library/9.4.13%20Pharmacy%20Forms.aspx).

Providers requesting PAs by mail or fax should send requests to:

Kepro
Medicaid Pharmacy Administrative Services
P.O. Box 3570
Auburn, AL 36831
Fax: 1-800-748-0116
Phone: 1-800-748-0130

Incomplete PA requests or those failing to meet Medicaid criteria will be denied. If the prescriber believes medical justification should be considered, the prescriber must document this on the form or submit a written letter of medical justification along with the PA form to Kepro. Additional information may be requested. Staff physicians will review this information.

Questions related to this policy update can be directed to the Alabama Medicaid Clinical Services Division at (334) 242-5050.

Postpartum Coverage Extended from 60 Days to 12 Months

The Alabama Medicaid Agency received approval from the Centers for Medicare and Medicaid (CMS) to extend postpartum coverage to pregnant Medicaid recipients from 60 days to 12 months with an effective date of October 1, 2022.

Medicaid covers over half of the births in the state. To help improve maternal health, the Agency requested this postpartum coverage extension, and the Agency plans to evaluate the usage of benefits and maternal health outcomes of this pilot program (e.g., screening for clinical depression, decreasing the prevalence of hypertension and diabetes during pregnancy, and increasing the rate of contraceptive care).

During the COVID-19 public health emergency (PHE), all states were required to provide continuous coverage to Medicaid recipients to be eligible for enhanced federal matching funds under the Families First Coronavirus Response Act. As a result, postpartum coverage has been continuous since the start of the coronavirus pandemic.

As of March 31, 2023, when the continuous enrollment requirement ended, pregnant recipients will keep their Medicaid coverage until 12 months after their pregnancy ends. It will then be determined if they are eligible for other Medicaid programs, ALL Kids, or they will be referred to the Federal Marketplace.

For questions related to the maternity services, please email Travis.Houser@Medicaid.Alabama.gov.

Continuous Enrollment and COVID-19 PHE Ended

Per federal guidelines, the COVID-19 public health emergency (PHE) ended on May 11, 2023. Therefore, some flexibilities the Alabama Medicaid Agency (Medicaid) implemented due to the COVID-19 PHE have ended. Medicaid intends to keep providers updated on changes that will be forthcoming during the return to normal operations. Medicaid is working with the Centers for Medicare and Medicaid Services (CMS) regarding the termination of certain flexibilities. Medicaid will provide notifications of changes through separate State Plan, Administrative Code and waiver notices, or provider ALERTs.

Below are some changes that are coming up soon that may impact Pharmacy and/or DME providers:

Effective June 1, 2023:

- Alabama Medicaid will discontinue the universal prior authorization number (999999999) to override early refill, maximum units, and mandatory three-month maintenance supply for outpatient pharmacy claims.
- Alabama Medicaid will resume routine edits and criteria requirements for outpatient pharmacy claims. The cumulative daily Morphine Milligram Equivalent (MME) edit will resume phase down at a future time; prior notice will be provided through a subsequent ALERT.
- Alabama Medicaid will resume routine edits and criteria for Durable Medical Equipment (DME) requests, including:
 - Prior Authorization for DME must be received within 30 days after the equipment is dispensed,
 - 30-day extensions will no longer be provided on prior authorizations, and
 - A prescription/order for DME items must be presented to the provider/fiscal agent within 90 days from the date it was written.

As noted in previous ALERTs:

- Effective May 12, 2023: Recipient signatures are required to be kept on file as verification that the recipient was present on the date of service for which the provider seeks payment. More information can be found in the Alabama Administrative Code, Chapter 1, Rule No. 560-X-1-.18. "Provider and Recipient Signature Requirements."
- Effective June 1, 2023: Providers should no longer bill the CR modifier for COVID-19 related services or equipment.
- Effective June 1, 2023: Medicaid will resume the referral requirements for EPSDT visits and prior authorizations that require EPSDT referrals.
- Effective October 1, 2024: Copayments will be reinstated for applicable services and recipients.
- Alabama Medicaid will continue to cover COVID-19 tests and vaccines. Any future changes to the current policy will be sent through a subsequent ALERT.

Please continue to visit the Alabama Medicaid website for up-to-date information related to the 'unwinding' process. If you have questions, please contact the Provider Assistance Line at (800) 688-7989, or Medicaid's Pharmacy and DME department at (334) 242-5050.

Telemedicine Delivery of Services

The Alabama Medicaid Agency (Medicaid) is implementing a Telemedicine Policy effective June 1, 2023. The Telemedicine Policy, including all applicable chapters, will be included in the July 2023 publication of the Provider Billing Manual.

2023 Telemedicine Policy: https://medicaid.alabama.gov/content/4.0_Programs/4.1_Covered_Services.aspx

Additionally, the following Telemedicine allowances will be discontinued **effective May 31, 2023**:

- Use of the modifier “CR” (catastrophe/disaster related) and place of service “02” on claims
- Interprofessional Telephone/Internet/Electronic Health Record Consultations: CPT codes 99446—99449 and 99451—99452
- Allowances for Telemedicine during COVID that are not included in the Telemedicine Policy

Medicaid will continue to allow audio-only telecommunications to be reimbursed a parity for dates of services rendered through **September 30, 2023**. On October 1, 2023, new rates for audio-only telecommunications will be established.

This audio-only telecommunications method can only be used in lieu of the audio and video telecommunications method where telemedicine services are approved by Medicaid.

Providers must place the ‘FQ’ modifier on the claim to designate that the service was rendered via an audio-only telecommunications method.

*FQ—THE SERVICE WAS FURNISHED USING AUDIO-ONLY COMMUNICATION TECHNOLOGY

Providers with billing questions should contact the Gainwell Technologies Provider Assistance Center at 1-800-688-7989.

Attention Prescribers and Dispensers of Schedule II Controlled Substances

Effective since October 1, 2021, prescribers of Medicaid eligible recipients are required to check the Alabama PDMP (Prescription Drug Monitoring Program) prior to prescribing a Schedule II controlled substance in accordance with Section 5042 of the SUPPORT Act. If the prescriber does not check the PDMP, the prescriber is required to document the reason in the medical record.

Exclusions to this requirement include:

- Prescriptions written for hospice patients
- Patients with an active cancer diagnosis
- Residents of long-term care nursing facility
- Children under the age of 18 (Schedule II prescriptions for ADHD only)

For more information, visit www.Medicaid.Alabama.gov to review the Provider Billing Manual, Chapter 27 (Pharmacy), Section 27.2.1, and Chapter 28 (Physicians), Section 28.2.

Providers may contact kelli.littlejohn@medicaid.alabama.gov with additional questions.

Preferred Drug List (PDL) and Pharmacy Quarterly Update

Effective April 1, 2023, the Alabama Medicaid Agency updated the PDL to reflect the quarterly updates listed below:

PDL Additions
Clindesse—Skin and Mucous Membrane Agents, Antibacterials
Trulicity—Incretin Mimetics
PDL Deletions
Capex Shampoo—Skin and Mucous Membrane Agents, Corticosteroids

For additional PDL and coverage information, visit our drug look-up site at <https://www.medicaid.alabamaservices.org/ALPortal/NDC%20Look%20Up/tabId/39/Default.aspx>.

The Prior Authorization (PA) request form and criteria booklet should be utilized by the prescriber or the dispensing pharmacy when requesting a PA. The PA request form can be completed and submitted electronically on the Agency's website at

https://medicaid.alabama.gov/content/9.0_Resources/9.4_Forms_Library/9.4.13_Pharmacy_Forms.aspx.

Providers requesting PAs by mail or fax should send requests to 1-800-748-0130.

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