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## Medicaid Director's Message

In this month's Medicaid Legislative Connect newsletter we are featuring two Medicaid managed care alignment initiatives with summer go live dates as well as our Build, Learn and Grow initiative.

First, we highlight Indiana's statewide uniform preferred drug list that becomes effective July 5, 2023. This effort ensures all Indiana Medicaid managed care entities' drug formularies align with the state's feefor-service formulary. This effort will improve member and provider experience with the Medicaid program.

Second, we highlight the upcoming transition of the state's prior authorization, utilization management and Right Choices Program from Gainwell Technologies to Kepro. Upon successful completion of readiness review, we anticipate this transition occurring later this summer.

Finally, we highlight how FSSA is leveraging federal relief funding through the Build Learn Grow program to improve the health and well-being of Hoosiers.

Allison Taylor Indiana Medicaid Director



## Statewide Uniform Preferred Drug List

The Medicaid team will achieve one of its 2023 top priorities this summer when all Indiana managed care entities align their drug lists with the state's fee-for-service drug list. This will result in a streamlined and more uniform experience for both members and providers.

Beginning July 5, all managed care plans will cover both preferred and nonpreferred drugs, maintain the same clinical criteria requirements and use the same format for prior authorization as the FFS program. Other drugs that are not listed on the PDL will continue to be managed by the MCEs and current MCE prior authorizations will continue until their original expiration date. Indiana Medicaid and OptumRx, the FFS pharmacy benefit manager, will administer the program for the state. The state's Drug Utilization Board and Therapeutics Committee will continue to review the Statewide Uniform Preferred Drug List and corresponding PA to ensure Indiana Medicaid prefers the most clinically appropriate and costeffective drugs for members.

The SUPDL initiative is similar to those already implemented by surrounding state Medicaid programs and will improve provider and member experience through enhanced and simplified medication access across all Indiana Health Coverage Programs prescription drug benefits without increasing overall prescription drug expenditures.

Medicaid members with a paid claim prior to July 5 for a nonpreferred drug may continue to receive coverage for the drug for up to 90 days. Communication is being sent to both members and providers informing them of the change. A provider may complete a prior authorization request for a member for a non-preferred drug they are currently on if the provider feels it is medically necessary to continue therapy. In addition, pharmacists may dispense a three-day emergency supply at the end of the transition period as needed.

Sign up for email and/or text notices of Medicaid and other FSSA news, reminders, and other important information at Indiana Medicaid.



## Fee-for-service prior authorization and utilization management transitioning to new vendor

Later this summer, the Medicaid team will achieve another 2023 goal toward aligning the state's managed care and fee-for-service programs. A new vendor known as Kepro will assume prior authorization and utilization management processing as well as the administration of the Right Choices Program for Indiana Medicaid's fee-for-service members. The Medicaid office will take over care management responsibilities for these members.

To ensure a seamless transition, Kepro will provide current IHCP providers with multiple training opportunities as well as post-go-live support. There will also be a new PA web portal accessed through the IHCP website and new, dedicated PA telephone and fax lines. Medicaid FFS members can expect PA decision letters that are easier to read and understand, an updated PA UM public webpage and warm handoffs for their care management needs.

Indiana Medicaid is also working diligently on readiness activities to ensure Kepro's provider portal is configured to Indiana market rules and that all relevant data systems successfully interface with one another. Additionally, Indiana Medicaid is developing proactive risk mitigation strategies to ensure there are no delays or interruption of services during the transition.

Indiana Medicaid is planning to incorporate additional provider experience improvements to the program once successful go-live and transition is achieved. Some of these future improvements will include developing new auto-approval rules to allow providers to obtain real-time approval for certain services that meet identified criteria without needing evaluation by an analyst and new online portal that gives providers immediate feedback regarding modifying or correcting their submissions to achieve a clean PA. These future improvements will foster improved efficiencies by reducing administratively based claim denials after the service has been rendered.

More information about the Kepro transition can be found in IHCP bulletins <u>BT202339</u> and <u>BT202301</u>.



## **Build Learn Grow program**

The Build Learn Grow Program consists of the projects overseen by FSSA and funded by federal relief dollars provided through the Coronavirus Response and Relief Supplemental Appropriations Act and American Rescue Plan Act.

FSSA is investing in three key areas: **services in the home or community**, **early childhood programs**, and **mental health services**.

To best support Hoosier families and the communities they live in, FSSA identified six outcome targets:

- ❖ Access to services: grow provider capacity to increase available services while improving public awareness and equitable utilization of these services
- **Quality of services**: improve quality of services
- **Family caregiver supports**: support unpaid and informal caregivers and their mental health
- Hoosier experience: improve the experience and satisfaction of Hoosiers who receive support from FSSA programs
- ❖ Workforce: retain and grow the direct service workforce
- Provider experience: offer clear guidance to support stabilization of provider operations and reduce provider administrative burden

FSSA is committed to sharing with stakeholders how these investments are improving the health and well-being of Hoosiers.

To view the April 2023 report, please click here.