



STATE OF HAWAII  
DEPARTMENT OF HUMAN SERVICES  
Med-QUEST Division  
Clinical Standards Office  
P. O. Box 700190  
Kapolei, Hawaii 96709-0190

January 2, 2009

MEMORANDUM

ACS M08-23

TO: Medicaid Physicians, Dentists, Other Providers with Prescribing Authority  
and Pharmacy Providers

FROM: Kenneth S. Fink, MD, MGA, MPH  
Med-QUEST Division Administrator

SUBJECT: **FEE-FOR-SERVICE (FFS) PROGRAM ONLY**

- 1. QUEST EXPANDED ACCESS (QExA) PROGRAM FOR FFS RECIPIENTS - EFFECTIVE FEBRUARY 1, 2009**
- 2. BEHAVIORIAL HEALTH MANAGED CARE PLAN, COMMUNITY CARE SERVICES (CCS), MANAGEMENT CHANGE - EFFECTIVE JANUARY 1, 2009**

**1. QExA Program - Effective February 1, 2009**

Effective February 1, 2009, QExA will begin service as a new Medicaid managed care program for seniors, 65 years of age and older, blind and/or disabled. This population currently receives healthcare through the FFS program (including those who also have Medicare Part D) and will become enrollees of a QExA plan, 'Ohana Health Plan or Evercare, effective February 1, 2009. (Note: QUEST recipients are NOT impacted by the new QExA program.)

**Pharmacy claims with a date of service of February 1, 2009, for Medicaid recipients in the QExA program will be paid by the QExA plans, including the excluded drugs for recipients who have Medicare Part D and Medicaid. FFS via Affiliated Computer Services (ACS) Pharmacy Benefit Manager (PBM) will deny these claims.**

**However, FFS via ACS PBM will continue to process the following pharmacy claims for Medicaid recipients in the QExA program:**

1. Claims for prescriptions written by dentists; and
2. Medicare Part D co-payments for the State Pharmacy Assistance Program (SPAP).

ACS will also continue to process claims for the small population not enrolled in QUEST or QEXA that will continue to receive care through the FFS program.

Each QEXA plan has its own formulary. Injectables may be billed under the pharmacy and/or the medical benefit. Certain supplies may be billed POS. Check with the individual plan for further information.

Pharmacies and prescribers with questions regarding pharmacy services, formulary, billing drugs, etc., need to contact the QEXA plan in which the recipient is enrolled. Please see below for health plan contact information effective February 1, 2009.

#### **'Ohana Health Plan**

- Claims and prior authorization (PA) issues:
  - Provider Hotline: 1-888-505-1198
  - Hours of operation: 24 hours, 7 days a week
- Website: [www.ohanahealthplan.com](http://www.ohanahealthplan.com)

#### **Evercare**

- Claims Issues:
  - Prescription Solutions Help Desk: 1-877-889-6510
  - Hours of operation: 24 hours, 7 days a week
- PA or clinical overrides:
  - 1-800-711-4555
  - Hours of operation:
    - Non-injectables: 6:00 a.m. to 5:00 p.m. HST, 7 days a week
    - Injectables/Specialty Pharmacy: 6:00 a.m. to 5:00 p.m. HST, Monday through Friday
- Website: [evercarehealthplans.com](http://evercarehealthplans.com)

**Note: When new recipients become eligible for Medicaid and qualify for the QEXA managed care program, there will be a four (4) to five (5) day interval between the recipient being determined eligible and the managed care plan's PBM having the recipient information to process claims Point Of Sale (POS). During this period, the claims need to be held until the recipient's information is received by the PBM. The recipient's eligibility for Medicaid may still be verified using the current processes. The managed care plan will receive eligibility information one day earlier than its PBM.**

For general information about the QExA program itself:

- a. See the QExA website at [www.qexa.org](http://www.qexa.org); or
- b. Call the QExA Helpline at 1-866-928-1959, 8 a.m. to 5 p.m. HST, Monday through Friday

If you have not yet contracted to be a QExA provider and are interested, we encourage you to contact the health plans. Their contact information and hours of operation are:

- **'Ohana Health Plan**

Provider Hotline Telephone: 1-888-846-4262, select Option 2 and request to be transferred to Provider Relations. Hours of operation: 7:30 a.m. to 5:30 p.m. HST, Monday through Friday.

- **Evercare**

Prescription Solutions Contracting Department Telephone: 1-800-613-3591. Hours of operation: 6:00 a.m. to 2:00 p.m. HST, Monday through Friday.

## **2. Behavioral Health Managed Care Plan, CCS, Management Change - Effective January 1, 2009**

The behavioral health managed care plan for the Medicaid seriously mentally ill (SMI) adults, Community Care Services (CCS), will be managed by APS Healthcare effective January 1, 2009. Hawaii Medical Services Association (HMSA) will discontinue their services after December 31, 2008, and deny claims with a date of service (DOS) of January 1, 2009 or later.

Pharmacy claims with DOS of January 1, 2009 or later must be submitted to the APS claims processor, Argus Health Systems with the new BIN and Processor Control Numbers (PCN) for APS. The payer sheet for APS is available at [www.argushealth.com](http://www.argushealth.com) for participating providers. All others must call the APS account representatives to activate contracts at 1-800-555-5690.

**For CCS pharmacy questions, starting January 1, 2009 the Perform Rx Help Desk is available 24 hours a day, 7 days a week by calling 1-866-397-4522.**

For FFS Medicaid pharmacy policy questions, please contact Lynn Donovan, R.Ph., Pharmacy Consultant at (808) 692-8116. For behavioral health medical policy questions, please contact Mr. Jonathan Harris R.N., Behavioral Health Nurse Consultant, at (808) 692-8149.

## Hawaii Medicaid Drug Coverage

Effective February 1, 2009  
 (~219,000 recipients)

| Hawaii Medicaid<br>(~219,000 recipients)  | QUEST<br>(~177,000 recipients)   | Fee-For-Service Medicaid<br>(~3,000 recipients)   | QUEST Expanded Access (QExA)<br>(~39,000 recipients)   |
|---|--|---|--|
| Status  | NO Changes   | NO Changes: <ul style="list-style-type: none"> <li>• Small population remaining - recipients with spend-down etc.</li> </ul>  | <b>NEW</b> ABD Managed Care Plans for: <ul style="list-style-type: none"> <li>• Medicaid Only and</li> <li>• Medicare and Medicaid/Dual Eligibles (DE)</li> </ul>  |
| Plans and Contact Information: <ul style="list-style-type: none"> <li>• Claims Processing and</li> <li>• Prior Authorization</li> </ul> | <ul style="list-style-type: none"> <li>• AlohaCare</li> <li>• HMSA</li> <li>• Kaiser</li> <li>• Summerlin</li> </ul> | <ul style="list-style-type: none"> <li>• Affiliated Computer Services (ACS) <a href="http://www.himed-questffs.org">www.himed-questffs.org</a></li> <li>• Call Center 1-877-439-0803</li> <li>• Fax number for drug PAs 1-888-335-8474</li> </ul> | <ul style="list-style-type: none"> <li>• Evercare</li> </ul> <p><b>Claims Issues: 1-877-889-6510</b> Hours of operation: 24 hours 7 days a week.</p> <p><b>PA or clinical overrides: 1-800-711-4555</b></p> <ol style="list-style-type: none"> <li>1. Non-injectables: 5am - 7pm Pacific Time 7 days a week</li> <li>2. Injectables: 5am – 7pm Pacific Time Monday – Fri. <b>Not open on weekends</b></li> </ol> |
| Dental Drugs and Medicare Part D Copayments (SPAP)  | QUEST dental drugs are covered by FFS.   | QExA, QUEST and FFS dental copayments are covered by FFS.   | <ul style="list-style-type: none"> <li>• Ohana Health Plan</li> </ul> <p><b>Provider Hotline for Claims and PA issues: 1-888-505-1198</b></p> <p>Hours of operation: 24 hours 7 days a week</p> <p>QExA dental drugs and Medicare Part D Copayments are covered by FFS.</p>  |
| <b>January 1, 2009 APS Healthcare</b>   | <b>Perform Rx Help Desk at 1-866-397-4522 Hours of operation: 24 hours/day 7 days/week.</b>                          |   |  |