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Section C: Covered Services

This section of the CenCal Health Pharmacy Manual contains an overview of prescription benefits provided to CenCal Health members, as well as specific guidelines for the pharmacy provider when providing prescription services to CenCal Health members. Information regarding claim submission through MedImpact’s online prescription claims processing system or for claims billed directly to CenCal Health is provided in the Claims Submission section of this manual. Additional information regarding the Medical Request Form (MRF) can be found in the section titled Medical Request Form (MRF) Process.

C1: Prescription Drugs

CenCal Health’s prescription drug formulary contains selected Federal Legend Drugs from all the major therapeutic drug classes. The drugs are listed in the drug formulary by both the generic and/or brand name. The “Brand” names listed are for reference use only and do not denote coverage. The Formulary can be found at: www.cencalhealth.org.

C2: Dual Eligible Members Prescription Drug Coverage

The provision of the drug benefit for our dual-eligible members (those individuals who have both Medicare and Medi-Cal coverage) has shifted from CenCal Health to a Medicare D provider. If the member has Medicare Part D coverage, the pharmacy must submit claims for Medicare-covered drugs/supplies to the Medicare carrier as the primary insurance. The following medications/classes of drugs will continue to be covered for dual-eligible members as long as the regular processes (i.e. step edits, quantity restrictions, prior authorization, etc.) are followed:

1. Medications related to anorexia, weight loss or weight gain;
2. Medications for symptomatic relief of cough and colds;

3. Some non-prescription medication, such as OTC's including formulary medical supplies; and OTC tobacco cessation products
4. Prescription vitamins and minerals on CenCal Health's Formulary

C3: Specialty Pharmacy Coverage

CenCal Health provides comprehensive specialty pharmacy services through our exclusive relationship with Diplomat Specialty Pharmacy. This exclusive agreement allows CenCal Health members to receive clinical assessments, patient education, and management of patient adherence to therapy by Diplomat Pharmacy.

The specialty pharmacy will provide CenCal Health members with high cost medications that treat chronic and complex diseases with a comprehensive approach in medication management. All Specialty Medications require a Medical Request Form (MRF).

For a complete list of Specialty Medications, please visit the CenCal Health Website:

<https://www.cencalhealth.org/providers/pharmacy/specialty-pharmacy/>

If you have any questions regarding this program under CenCal Health's pharmacy benefit, please contact the Pharmacy Department at (800) 421-2560, extension 1080 or contact Diplomat directly at (877) 319-6337.

C4: Over the Counter (OTC) Drugs

Selected over-the-counter (OTC) drugs are a part of the SBHI and SLOHI benefit if prescribed by a licensed provider/prescriber. Providers cannot separately bill for any OTC drugs for members residing in a nursing facility, as OTC drugs are included in the per-diem rate. OTC drugs are listed in the Formulary, which is available online at www.cencalhealth.org

C5: CenCal Health-DME & Medical Supplies

Pharmacy claims for the medical supplies and DME prescriptions listed below must be billed to CenCal Health's Pharmacy Benefit Manager (PBM)

Pharmacy Benefit Medical Supply/DME Items

- Blood Glucose Monitor
 - -Freestyle Lite
 - -Freestyle Freedom Lite
 - Freestyle InsulinX
 - Precision Xtra

- Lancet and Lancet Devices
- Insulin Syringes
- Peak Flow Meters
- Pill Cutters
- Inhaler Assisted Devices (Spacers)
- Blood Glucose Strips
 - Freestyle Lite
 - Freestyle Freedom Lite
 - Freestyle InsuLinx
 - Precision Xtra
- Injection Supplies other than Insulin Syringes
- Disposable Syringes
 - Disposable Needles
 - Disposable Syringe w/Needle
- Pen Needles
- All other DME and medical supplies must be billed directly to the CenCal Health Claims Department. Only contracted CenCal Health DME providers will be allowed to bill the Claims Department directly. Additional information for the billing of DME and medical supplies can be found in the CenCal Health provider manual at: www.cencalhealth.org/provider/forms-manuals-policies/provider-manual.

C6: CenCal Health-Dual Eligible Members/DME & Medical Supplies

If a member has Medicare Part B &/or D, the provider must bill Medicare as the primary insurer for Part B or D covered medical supplies and DME items. CenCal Health may be billed for a 20% Part B copay or deductible, after the Part B carrier claim has adjudicated and the member's deductible &/or copay has been determined. CenCal Health does not reimburse part D copays.

State law mandates Medi-Cal to be the payer of last resort, and requires the utilization of other available health care coverage prior to the utilization of Medi-Cal. Other coverage is always the primary payer and cannot be waived by the member. Please bill the members other coverage first prior to billing CenCal Health.