


No. UM - 011	Specialty Prescription Medication Management	
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DMHC TAG: Prescription Drug Requirements		

SPECIALTY PRESCRIPTION MEDICATION MANAGEMENT

For specialty medication classes and places of service for which Canopy Health retains financial risk as part of the medical benefit, Canopy Health also retains responsibility for utilization review and reporting, and for coordinating medication delivery to members. Where Canopy Health retains financial risk for self-injectable medications, utilization review and reporting are accomplished through a contracted pharmacy benefits manager (“PBM”) and dispensing specialty pharmacy.

Where the upstream health plan retains financial risk, Canopy Health follows the health plan’s processes for authorizing and dispensing of these medications. The upstream health plan also provides oversight which includes utilization review and reporting.

Role of the PBM

The PBM is the initial point of contact to receive the prior authorization requests, clinical documentation, and prescription from the prescriber for the medications covered under this policy.

If a medication is authorized by the PBM, the pharmacy contacts the member or provider to review the medication and arrange prompt delivery (to home or provider office as appropriate). The pharmacy follows up with the member to encourage medication adherence, address clinical concerns, and ensure that refills are sent as appropriate. The PBM contacts the prescribing provider as necessary to ensure that all subsequent authorizations are requested as appropriate.

Regulatory Compliance in UM Activities

The PBM follows NCQA standards and standard DMHC-required processes and timeliness standards to conduct utilization review, communicate denials to patients and prescribing providers, and provide reports to Canopy Health, as detailed in these Canopy Health's policies and procedures: Referral Policy (UM-008) and Referral Management (UM-009).

Managing requests for non-FDA approved medications

When a physician submits a request for a medication not approved by the FDA for that clinical situation (i.e., for that disease, age or sex, or other constraints), the PBM pharmacist will use the relevant policy developed by their pharmacy and therapeutics committee to determine if it is safe and medically necessary. In cases of clinical or policy ambiguity, the PBM pharmacist will consult with a pharmacist from the upstream health plan before rendering a decision. All denials are handled according to regulatory and legal requirements and national standards.

Managing requests for medications for experimental/investigational indications

When a physician submits a request for a medication not approved by the FDA and is explicitly intended as experimental or investigational outside of a clinical trial, the PBM will forward the request to the member's upstream health plan for its

determination and follow up, including communication about authorization decisions to the patient, the prescribing physician, and Canopy Health. If the health plan issues an approval, it will coordinate communication and delivery of the medication to the patient through either its own or Canopy Health's PBM and specialty pharmacy.

Managing requests for medications for clinical trials

When a physician submits a request for a medication not approved by the FDA and is requested as part of a formal clinical trial, the PBM will forward the request to the upstream health plan. If the health plan retains responsibility to authorize and pay for the medication, it follows standard procedures to communicate with members about its decisions and ensure medication delivery to the patient through its chosen specialty pharmacy or other vendor as required by the clinical trial protocol.

Managing requests to replace medications or arrange for "vacation overrides"

Canopy Health is not responsible to arrange replacement or to pay for medication that the member has lost, damaged, or otherwise mishandled such that it is not guaranteed to be safe (e.g. not kept at appropriate temperature). Canopy Health's specialty pharmacy may address such requests on a case-by-case basis and decide whether it will absorb the cost of medication that it decides to replace. Canopy Health's PBM and specialty pharmacy will process and approve requests for vacation overrides to dispense medication earlier than the standard frequency to avoid disruption in treatment when this is medically necessary.

Revision History:

Version	Date	Edited By	Reason for Change
6/13/2018		M. Durbin	Creation date

8/30/2018	M. Durbin	Clarified language to distinguish when Canopy Health retains financial risk for self-injectable medications.
1/1/2021	A. Kmetz	Updated to reflect the changed processes with a new PBM, Navitus.