



Pascua Yaqui TRBHA
CENTERED SPIRIT PROGRAM
Provider Manual - 2023



Section 3.16 Medication Formulary

- I. Statement of Purpose
- II. References
- III. Standards
- IV. Definitions
- V. Procedure
 - A. How is the formulary used to access medications?
 - B. Prior authorizations
 - C. How can behavioral health providers have input?

I. STATEMENT OF PURPOSE:

To ensure the availability of safe, cost-effective and efficacious medications, Arizona Health Care Cost Containment System (AHCCCS) maintains a list of medications that the Pascua Yaqui (PY) Tribal Regional Behavioral Health Authority (TRBHA), at a minimum, must have on its formularies. AHCCCS may add or delete medications from the minimum list based on factors such as obsolescence, toxicity, and substitution of superior products or newer treatment options. Eligible persons must have access to all covered laboratory, radiology, cardiology and other medical testing services.

II. REFERENCES:

The following Centered Spirit Program (CSP) Provider Manual sections can serve as additional resources for this content area:

- Section 3.14, Securing Services and Prior Authorization*
- Section 3.15, Psychotropic Medications: Prescribing and Monitoring*
- Section 3.21, Service Prioritization for Non-Title XIX/XXI Funding, Persons Determined to Have a Serious Mental Illness (SMI)*

The following citations and documents also serve as resources for this content area:

- 42 CFR Part 400
- 42 CFR Part 403
- 42 CFR Part 411
- 42 CFR Part 417
- 42 CFR Part 422
- 42 CFR Part 423
- A.R.S. 32-1901
- R9-22-209
- R9-31-209
- TRBHA Medication Formulary



III. **STANDARDS:**

Medications are available to:

- All Title XIX and Title XXI eligible persons;
- All persons determined to be Seriously Mentally Ill (SMI); and
- All other persons, based on available funding in accordance with *Section 3.21, Service Prioritization for Non-Title XIX/XXI Funding, Persons Determined to Have a Serious Mental Illness (SMI)* or as determined by the TRBHA to have a medication benefit.

At a minimum, the TRBHA's formulary includes all medications on the AHCCCS medication list, however, the Pascua Yaqui TRBHAs Centered Spirit Program (CSP) may choose to maintain a more comprehensive formulary of covered medications for its members.

The updated TRBHA medication list is posted on the CSP website at <http://notescl.pascuayaqui-nsn.gov:8008/departments.nsf/health/home>. Updated information concerning covered medical testing services is posted on the AHCCCS website as part of the AHCCCS Covered Services Guide (<http://www.hs.state.az.us/bhs/covserv.htm>).

IV. **AHCCCS DEFINITIONS:**

Formulary: A list of drugs that a health plan covers.

Behavioral Health Medical Practitioner: An individual licensed and authorized by law to use and prescribe medication and devices, as defined in A.R.S. § 32-1901, and who is one of the following with at least one year of full-time behavioral health work experience:

1. A physician;
2. A physician assistant; or
3. A nurse practitioner

Dual eligible: People who qualify for both Medicare and AHCCCS coverage are called "dual eligible persons." Most dual eligible persons do not have to pay Medicare premiums, because either AHCCCS pays them or because the person also qualifies for a Medicare Savings Program. AHCCCS, including AHCCCS Freedom to Work, may also help pay for Medicare co-insurance and deductibles, as well as some services Medicare doesn't cover. That's why you shouldn't decline Medicare Parts B or D if you also qualify for AHCCCS

Prescription Drug Plan (PDP): A Medicare Part D plan that only offers drug coverage. Also known as a "stand-alone" plan.



Prior Authorization: A health plan process of reviewing medical services or medications before they give you permission to go ahead with the service or use the medication. This is done to ensure that the service or medication is appropriate and necessary before the plan pays for it.

V. PROCEDURES:

A. How is the formulary used to access medications?

Formulary Medications: Behavioral health providers contracted with a TRBHA must reference the Medication List to determine what medications are available.

CSP maintains a list of all Formulary and Non-Formulary Medications.

B. Prior authorization.

If a TRBHA or behavioral health provider requires prior authorization for medications, the requirements outlined in *Section 3.14, Securing Services and Prior Authorization*, *Section 5.1, Notice Requirements and Appeal Process for Title XIX and Title XXI Eligible Persons*, and *Section 5.5, Notice and Appeal Requirements (SMI and General)*, must be met (see *Subsection 3.14.7-E*).

C. How can behavioral health providers have input?

Behavioral health providers can offer suggestions for adding or deleting medications to the TRBHA Medication Formulary.

What happens with my request?

The AHCCCS Chief Medical Officer will bring the request to the AHCCCS Pharmacy and Therapeutics Committee for review. The AHCCCS Pharmacy and Therapeutics Committee advises the Chief Medical Officer of requests for changes to the AHCCCS Medication Formulary.

The behavioral health provider must provide a copy of the proposed addition or deletion to the medication formulary to the TRBHA Utilization Review Specialist/Quality Manager for tracking and trending purposes.