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Medicaid Pharmacy Changes for Behavioral Health Medications

In an effort to align NYS Medicaid Fee-for-Service (FFS) coverage with the pharmacy changes associated with the NYC Behavioral Transition to Medicaid Managed Care (MMC) plans, **effective** October 1, 2015, course limitations on smoking cessation medications have been removed.

Additionally, members who currently have Medicaid FFS pharmacy benefit, with no managed care component for pharmacy, can obtain atypical long-acting injectables, as well as injectable naltrexone extended release (Vivitrol®) as both a medical and pharmacy benefit.

The chart below provides guidance for those members who have MMC pharmacy benefits to help determine coverage (MMC vs. FFS) for risperidone microspheres (Risperdal Consta(®), paliperidone palmitate (Invega Sustenna(®)and Invega Trinza (®), olanzapine (Zyprexa Relprevv(™), aripiprazole (Abilify Maintena(®), aripiprazole lauroxil (Aristada(™) and naltrexone (Vivitrol(®) as of 10/1/2015.

	Member's Geographic Location	Age	Coverage Provided By	Available through the Medical Benefit	Available through the Pharmacy Benefit
No	Entire State	All Ages	MMC Plan	Yes	Yes
Yes	New York City	21 or older	MMC Plan	Yes	Yes
Yes	New York City	20 or younger	Medicaid FFS	Yes	No*
Yes	Outside of New York City	All Ages	Medicaid FFS	Yes	No*

*Note - The Department is working on implementing system changes to allow for atypical long-acting injectables, as well as injectable naltrexone extended release (Vivitrol®) to be covered as a pharmacy benefit for those members with MMC who continue to access these medications through Medicaid FFS (as shown above). More information will be communicated on this as we make progress. The date of implementation is yet to be determined.

Prescribers should continue to use their professional discretion to determine the best method of accessing injectable medications that require the administration of a health care practitioner. Likewise, pharmacists should continue to use their professional judgement when providing such medications directly to the enrollee. Medicaid policy for appropriate delivery of medications, including adherence to signature requirements should also be followed.

For additional information on Medicaid FFS delivery requirements for prescription drugs, see page 11 of the September 2011 issue of the Medicaid Update, titled "New York Medicaid Pharmacy Services Signature Requirement", as well as page 15 of the January 2013 issue of the Medicaid Update, titled "Important Reminder to Pharmacies and DME Providers".