



Prescribed Drug Services

The Florida Medicaid program created a new way for Medicaid enrollees to receive services. The program is called the Statewide Medicaid Managed Care (SMMC) program. The Managed Medical Assistance program is the medical part of the SMMC program. The MMA program is operated by managed care plans. Managed care plans are companies that help people get their health care services. Managed care plans also pay the doctor or other health care providers like hospitals for treating the people in the managed care plan. Sometimes managed care plans require health care services to be authorized in advance, unless it is an emergency.

Prescribed Drug Covered Services:

Prescribed drug services are covered under the MMA program. The Agency's Preferred Drug List is a list of prescription drugs that are effective, safe, and affordable for providers to choose from when prescribing drugs for people with Medicaid. The Preferred Drug List can be found at:

http://www.ahca.myflorida.com/Medicaid/Prescribed_Drug/.

The MMA plans must cover all the drugs on the Agency's Preferred Drug List for the first year of operation, starting when the program begins in each region.

What is a Pharmacy Benefit Manager?

A pharmacy benefit manager (PBM) is a vendor contracted with an MMA plan that accepts pharmacy prescription claims for enrollees in the MMA plan. The PBM must guarantee these claims follow the coverage policy and determine the allowed payment.

Prescribed Drug Services Providers

MMA plans must list all providers in their network (including pharmacies) in their provider directory and on their website. This information can also be found on the Agency's Choice Counseling website at:

<http://www.flmedicaidmanagedcare.com>.

For the first 60 days after the MMA program starts in a region, enrollees can continue to receive their prescriptions through their current pharmacy provider until their prescription is moved to a provider in the MMA plan's network.

- ❖ PBMs must pay non-participating providers at established open network payback rates. After the MMA program has been in a region for 60 days, MMA plans must meet continuity of care requirements for their new enrollees' prescription drug benefits, but plans are not required to do so through an open pharmacy network.

To learn more about Statewide Medicaid Managed Care (SMMC):

Access the Agency's SMMC Program website at: www.ahca.myflorida.com/SMMC