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COVID-19
Guidance for Pharmacies and Prescribers
March 24, 2020

In response to the COVID-19 emergency, the Office of MaineCare Services has (OMS) implemented point of sale pharmacy changes, effective March 18, 2020. For our members who need prescription medications, MaineCare encourages the use of the following:

- **Pharmacy Drive-thru**
- **Mail Order** (Walmart 1-800-273-3455 and I Care 1-888-422-7319)
- **Pharmacy Delivery Services**

Q. What has MaineCare implemented for Pharmacy Services changes?

A. To ensure our members have access to the medications they need, for the duration of the COVID-19 emergency, MaineCare is:

- I. Waiving copays for prescriptions (excluding Maine Rx Plus and DEL programs)
 - MaineCare co-pays are set at the plan level for the various programs within MaineCare (MEPOP, MEDEL, Mail Order, Specialty, and HIV 5B). As claims come in for these individual plans and are adjudicated, MaineCare now calculates the claim and sends \$0.00 back as the member's co-pay and the full payment to the pharmacy rather than requiring the member to pay that portion to the pharmacy. Payment is now covered by MaineCare in full rather than payment coming from both the member and MaineCare.
- II. Allowing an additional early refill of brand name medications (MaineCare already provides members with the option of a 90-day supply of generic medications)
 - **Brand Name Drugs:**
 - Currently, MaineCare members can get up to a 34-day supply of brand medications. MaineCare is now allowing **one additional refill** of the days supply for which the brand name Rx is prescribed.
 - **Generic Drugs:**
 - MaineCare members can already receive up to a 90-day supply of generic medications through prescription.
 - MaineCare is advising our members to talk with their health care providers to see if a 90-day prescription is right for them.

- Submission Clarification Code 13 (SCC 13):
 - MaineCare is allowing pharmacies to use SCC 13, which is the Natural Disaster Emergency Override Code that pharmacies can use in the adjudication of pharmacy claims. This code indicates that an override is needed based on an emergency/disaster situation recognized for patients in response to COVID-19. To utilize SCC 13, the dispensing pharmacist must add the code when processing an early refill for a patient. The use of SCC13 will override a Reject 79 (Refill too soon).
- Controlled Substances:
 - Maine law ([Chapter 488](#)) limits the prescribing of controlled substances for chronic pain to 30 days; MaineCare recognizes those limits and has not made changes to Maine's existing controlled substance statutes.
 - Given that, please note that the "SCC 13" override noted above is not intended and should **not** be used for overriding prescribing amounts or refill limits for controlled substances (including both opioid pain medications and buprenorphine), although;
 - Prescribers may exercise professional judgement regarding the dispensing of early refills for controlled substances and must document the reason for the early refill.

III. Encouraging naloxone prescribing for opioid overdose rescue:

- MaineCare recognizes the potential risk for increases in drug overdose and overdose deaths during this high-stress time and continues to encourage providers and pharmacists to prescribe and dispense naloxone to all patients receiving prescriptions for opioid medications and/or buprenorphine for treatment of Opioid Use Disorder.
- For all patients without an existing provider prescription for naloxone, MaineCare encourages pharmacists to leverage their ability under [existing Maine law](#) to prescribe and dispense naloxone, or to access a standing order for naloxone available from Maine DHHS medical leadership.

IV. Extending Prior Authorization (PA) periods for prescriptions

- MaineCare will proactively review all existing PAs due to expire at the end of March and will extend them out to the end of April.
- This process will be reviewed on a month to month basis.
- All initial PA requirements on the MaineCare Preferred Drug List (PDL) remain in effect.

V. Waiving initial PA requirements for asthma and immune-related drugs (e.g. Neupogen).

- Respiratory: MaineCare moved acute albuterol inhalers to preferred on the PDL since these medications may be needed for any rescue breathing related effects of the virus. We also have many other products already covered, without prior

authorization, in the longer acting beta agonist category and multiple options for corticosteroids as well.

- Immune drugs: MaineCare has added Neupogen and Granix to the PDL and will handle any other requests through the Pharmacy Helpdesk (1-888-445-0497). We expect that these drugs would more than likely come through the medical benefit, but the Helpdesk will aid in any requests as they come in.
- For a listing of MaineCare's PDL, visit: <http://www.mainearepdl.org/pdl>

VI. Allowing prescribing via telehealth

- We have advised our members to pursue this option with their providers.
- CMS Telehealth Toolkits for General Practitioners can be found here: <https://www.cms.gov/files/document/general-telemedicine-toolkit.pdf>
- MaineCare-specific telehealth guidance is also available [online](#).

Q. How do these MaineCare pharmacy changes work with third-party insurance or Part D?

A. If MaineCare members have third-party insurance (TPL) or Part D, they still need to meet that insurer's refill requirements, as MaineCare only pays secondary. We are advising our members to contact their primary health insurance carriers to understand their requirements.

Q: What if an emergency closing of a pharmacy is required?

A: If a pharmacy must close for longer than 72 hours due to emergency circumstances, it is strongly recommended that the pharmacy notify the pharmacy board of the closing, the anticipated duration of the closing, and actions that are being taken to ensure patient continuity of care and to mitigate diversion of drugs. This will inform statewide efforts to evaluate adequate access to pharmaceutical services.

Q: Are there drug shortages related to COVID-19?

A: As would be expected, the COVID-19 pandemic is resulting in shortages of some drug products. MaineCare is closely monitoring these shortages, which are primarily the result of the following factors:

- Reduced production of active pharmaceutical ingredients (APIs) or final product in areas highly impacted by COVID-19, especially China, which is a key source for APIs used throughout the world.
- Restrictions on exports of APIs or final product by countries that supply many drugs to the U.S., such as India (which receives 70% of the APIs for drug products it produces from China).
- Excessive overstocking by pharmacies and patients.

Although MaineCare has made changes to the PDL for providers' ease of access, MaineCare suggests that enabling many patients to access more than their usual supply of drugs at one time could make it more difficult to avoid drug shortages. In fact, widescale adoption of such policies will lead to drug shortages that would not have otherwise occurred.

Please review the following resources on this issue:

FDA U.S. Food and Drug: <https://www.fda.gov/drugs/drug-safety-and-availability/drug-shortages>

Maine Board of Pharmacy: <https://www.maine.gov/pfr/professionallicensing/professions/pharmacy/>

MaineCare will continue to utilize our e-message service to deliver important updates and changes as they happen. If you are not already subscribed, you can do so by visiting:

<https://public.govdelivery.com/accounts/MEHHS/subscriber/new?preferences>.

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