

Policy Title: OH SPBM CSP Policy and Procedure (FFS)	Policy No.:
Effective Date: July 1, 2023	Version No.: 1
Authority:	Accountable Executive:

I. Scope:

Gainwell Technologies call center and CSP team

II. Policy Statement and Purpose

The Coordinated Services Program (CSP) involves the identification, evaluation, notification, enrollment, communication with the designated pharmacy, process for member to change the designated pharmacy, reassessment, continuation, state hearing notices and grievances, and disenrollment. Enrollment in the program includes member "lock-in" to a single pharmacy provider.

III. Objective

To maintain quality health care and improve the safety of SPBM members by avoiding duplication of services, inappropriate or unnecessary utilization of medical services, fraud and excessive use of prescribed drugs. Gainwell Technologies has the primary responsibility of administering the program for fee-for-service (FFS) members.

IV. Definitions

Acronym	Definition
OH SPBM	Ohio Single Pharmacy Benefit Manager
CSP	Coordinated Services Program
ODM	Ohio Department of Medicaid
OAC	Ohio Administrative Code
FFS	Fee-for-Service
OBM	Office of Budget and Management

V. Procedures

Identification

On a quarterly basis, pharmacy utilization reports will be generated and reviewed by Gainwell Technologies' CSP team. Ohio Department of Medicaid will have authority to accept or deny recommendations. External member referrals from individual prescribers, self-referrals, and ODM's program integrity unit/bureau referrals will also be reviewed at this stage. Individuals will be enrolled in CSP based on the criteria defined in OAC 5160-20-1.

Enrollment

(1) Initial enrollment.

(a) An individual proposed for enrollment in CSP will receive the "Notice of Proposed Enrollment in the Coordinated Services Program (CSP)" (ODM 01717, 10/2022), including the effective date of enrollment, from Gainwell Technologies.

Policy Title: OH SPBM CSP Policy and Procedure (FFS)	Policy No.:
Effective Date: July 1, 2023	Version No.: 1
Authority:	Accountable Executive:

(b) Initial CSP enrollment will be for twenty-four months from the effective date of enrollment.

(c) If an individual enrolled in CSP becomes ineligible for Medicaid, then resumes eligibility for Medicaid within the initial enrollment period, the individual will be reinstated into CSP until the initial enrollment period is exhausted.

For the initial enrollment, send the member the ODM 01717 at least thirty days prior to the enrollment date to allow time for due process and prior notice. Gainwell will provide the welcome letter and brochure to the member. OBM will issue a CSP identification card which identifies the member as a CSP member on the front of the card and include the names and phone numbers of their CSP providers on the back of the card.

(2) Continued enrollment.

(a) If after the initial enrollment period, Gainwell determines an individual's service utilization continues to support the reasons for enrollment the individual will continue to be enrolled in CSP for an additional twenty-four months upon ODM approval.

(b) Gainwell will notify the individual of the continued enrollment by issuing the "Notice of Continued Enrollment in the Coordinated Services Program (CSP)" (ODM 01705, 10/2022) in accordance with division 5101:6 of the Administrative Code. The welcome letter, brochure, and ID cards are not required to be resent prior to re-enrollment.

(c) If an individual enrolled in CSP becomes ineligible for Medicaid, then resumes eligibility for Medicaid within a continued enrollment period, the individual will be reinstated into CSP until the continued enrollment period is exhausted.

(3) Disenrollment. If an individual enrolled in CSP meets any of the exclusion criteria below, the individual will be disenrolled from CSP. If the individual no longer meets any of the exclusion criteria, Gainwell will reinstate the individual into CSP.

An individual may be excluded from CSP enrollment when he or she:

(a) Has a current diagnosis of cancer and is actively receiving chemotherapy or radiation treatment;

(b) Resides in a - nursing facility (NF) as described in section 5165.01 of the Revised Code, or an intermediate care facility for individuals with intellectual disabilities (ICF-IID) as described in section 5124.01 of the Revised Code.

(c) Is enrolled in the assisted living home and community-based services (HCBS) waiver program as described in Chapter 5160-33 of the Administrative Code.

(d) Receives hospice services.

Policy Title: OH SPBM CSP Policy and Procedure (FFS)	Policy No.:
Effective Date: July 1, 2023	Version No.: 1
Authority:	Accountable Executive:

(e) Is enrolled in both the Medicaid and Medicare programs or

(f) Is enrolled in the FFS program and, at the sole discretion of ODMs clinical staff, it is determined that it would not be appropriate to enroll the individual in CSP.

Provider assignment

When selecting a pharmacy for a member, consider the distance from the member's home, the primary provider of services for the member, care compliance contracts that may exist between the provider and member (for example, if the member receives care from an addiction services provider, pain specialist, or other specialist who requires that the member receive all prescriptions from them as part of provider care to the member), and member preference.

(1) Initial provider assignment.

(a) An individual enrolled in CSP may request an assigned provider within thirty days of the mailing date on the initial enrollment notification. If approved by Gainwell, this provider will serve as the individual's assigned provider. The assigned provider is to be enrolled with ODM, unless otherwise permitted by ODM.

(b) Gainwell will select an assigned provider for the individual for any of the following reasons:

(i) The individual does not select an assigned provider within thirty days of the mailing date on the initial enrollment notification.

(ii) The individual's selected assigned provider is denied by Gainwell; or

(iii) The selected assigned provider is unwilling or unable to accept the individual.

(c) Changes in pharmacy will be made immediately following a request for individuals who are receiving medication assisted treatment for addiction.

(2) Changing an assigned provider.

(a) An individual may request to change an assigned provider, or Gainwell may direct an individual to make an alternative selection of an assigned provider, under the following circumstances:

(i) The assigned provider's location is no longer accessible to the individual for any of the following reasons:

(a) The assigned provider's office has relocated or closed.

Policy Title: OH SPBM CSP Policy and Procedure (FFS)	Policy No.:
Effective Date: July 1, 2023	Version No.: 1
Authority:	Accountable Executive:

(b) The individual has moved or is unable to travel to the provider.

(c) The assigned provider is no longer an eligible provider.

(d) The assigned provider chooses not to provide services to the individual; or

(e) The individual transfers from the FFS program to a MCO, from a MCO to the FFS program or from one MCO to another.

(ii) The medical needs of the individual call for assignment of a provider with a different specialty.

(b) If Gainwell denies the individual's request to change the assigned provider, Gainwell will notify the individual in one business day, by issuing the "Notice of Denial of Assigned Provider or Pharmacy in the Coordinated Services Program (CSP)" (ODM 01718, 10/2022) in accordance with division 5101:6 of the Administrative Code.

(c) Gainwell will immediately upon notification change an individual's assigned pharmacy following a request from an individual or a representative from the treatment facility who has permission from the individual who is receiving inpatient treatment for addiction.

(d) Upon request, Gainwell will immediately change an individual's assigned pharmacy following discharge from an inpatient treatment program for addiction.

If the member's request does not meet one of these criteria, or if it does, but it is believed the member's desired provider might be contributing to FWA or may contribute to negative health outcomes for the member, the request to change may be denied. Issue ODM 01718 if a change request is denied.

Member Appeals

Issuing ODM 01717, 01718, or 01705 may result in a request of a state fair hearing as each form affords hearing rights. If a member requests a hearing within fifteen calendar days of the mailing date of the form, the proposed action must not be applied until after the hearing has taken place. Enrollment forms should be sent at least thirty days in advance to allow for the hearing process. If a member requests a state hearing, Gainwell will receive notice from Ohio Department of Job and Family Services (ODJFS) Bureau of State Hearings. ODJFS' staff will serve as the independent arbitrator.

Appeal Summary

If a member requests a state hearing, Gainwell will prepare an appeal summary and provide testimony in an evidentiary hearing with the member. The appeal summary must include the ODM CSP Hearings cover sheet which explains the CSP program and the seriousness of the members inclusion in the program, the ODJFS 4066 appeal summary form, and a copy of OAC 5160-20-01 with the appendix.

Policy Title: OH SPBM CSP Policy and Procedure (FFS)	Policy No.:
Effective Date: July 1, 2023	Version No.: 1
Authority:	Accountable Executive:

Include OAC 5160-26-03.1 which grants Gainwell the authority to operate an approved and customized CSP. Supply evidence showing that the member meets enrollment criteria, including but not limited to diagnoses, medical records, claims payment or utilization management history, information from OARRS and/or other reporting sources.

State Hearing

A state hearings officer will hear prepared testimony and the member's (or member's representative) testimony and will consider the evidence presented from both sides. The state hearings officer will provide a summary and notify all parties of the outcome. If the hearings officer finds in favor of the member, Gainwell will receive a compliance order via the ODJFS 4068 which will explain what actions must be taken and verified to satisfy the order. The two CSP actions are to remove the member or to allow provider change and Gainwell should submit the ODJFS 4068 back to ODJFS with evidence showing fulfillment of the order, within 7 business days. Activities for state hearings will occur in the ODJFS SHARE Portal.

If a state hearing upholds the denial, a member may appeal the denial through an Administrative Hearing. The member must submit an administrative appeal request to ODJFS within fifteen days of the state hearing decision. Enrollment or continued enrollment shall not be delayed once a member requests an administrative appeal.

If a state hearing upholds the denial in the administrative appeal, the member may additionally request a judicial review by appealing the decision to the court of common pleas in the county where he/she/they reside. If a member lives outside the state of Ohio, he/she/they may appeal to the court of common pleas in Franklin County, Ohio. The member must file a notice of appeal with the appropriate court of common pleas and mail a notice of appeal to the "Ohio Department of Job and Family Services, Office of Legal and Acquisition Services, 30 East Broad Street 31st Floor, Columbus, Ohio 43215-3414" within thirty days of the administrative appeal decision. The notice of appeal shall state the member's name and the ODJFS docket number and the date of the administrative appeal decision from which appeal is being made, and the grounds upon which it is being appealed.

Revision History _____
(Signature Required)

Annual Review Commencements and Authority:

Review Date	Archive Date	Policy Title	Authority
		Gainwell SPBM CSP Policy and Procedure (FFS)	