**PeopleSafe - Medical Foods**

[Details](#_Toc136354390)

[Service Benefit Information](#_Toc136354391)

[Prior Approval](#_Toc136354392)

[Prescription Requirements](#_Toc136354393)

[Coram and Medical Foods Coverage](#_Toc136354394)

[Process](#_Toc136354395)

[Price Estimates](#_Toc136354396)

[Scenarios](#_Toc136354397)

[Related Documents](#_Toc136354398)

**Description:** Information and procedures related to handling Medical Foods.

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| **Details** |

 This does NOT apply to MED D.

Medical Foods are specially formulated. They are intended for the dietary management of a disease with distinctive nutritional needs that cannot be met by a normal diet alone.

* The Medical Food [Benefit](#_Service_Benefit_Information) has been in effect since January 1, 2018.
* Requires [Physician’s Prescription](#_Prescription_Requirements) for each Medical Food.
* Requires [Prior Approval](#_Prior_Approval).
* Refer to the [FEP Shared - Medical Foods List (009161)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=7dd44b55-e4ce-41e0-8fa7-838ddcb5e810) as needed (This list is **internal information** and cannot be sent to members).

**Important Icon**The list’s medication names are intended to provide assistance; however, the names may vary; the **NDC** specifically identifies the covered item.

[Top of the Document](#_top)

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| **Service Benefit Information** |

Benefits are available for Medical Foods when administered under the supervision of a physician for any of the following:

1. For children through age 21 which are administered orally and provide the sole source (100%) of nutrition.
   1. This benefit is limited to one year following the date of the initial prescription or physician order for the medical food (**Example:** Neocate, in formula form only.)

**OR**

1. For children through age 21 which are specialized nutritional formulas intended for use solely under medical supervision in the dietary management of an inborn errors of amino acid metabolism.

**OR**

1. For any age member when medically necessary to be administered by a catheter or nasogastric tube.

[Top of the Document](#_top)

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| **Prior Approval** |

* Prior Approval is required for coverage on Medical Foods.
* CVS Caremark handles the PA for Medical Foods. For Medical Foods criteria, refer to [Medical Foods (009161)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=7dd44b55-e4ce-41e0-8fa7-838ddcb5e810).
* If approved, these claims process as Tier 2.

[Top of the Document](#_top)

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| **Prescription Requirements** |

To receive benefits for Medical Foods, the member must have a physician’s prescription for each Medical Food obtained at a Preferred Retail Pharmacy (including Over the Counter products).



* Pharmacies require a prescription in order to electronically transmit the claim to us.
* Educating the member to obtain a prescription for Medical Foods is important.
  + This ensures the members receive full benefits.
  + It may be possible to obtain a prescription over the phone for these items. This would save the member the time and effort involved in a prescriber's visit.
* If the member is submitting a Paper Claim for Medical Foods, a pharmacy receipt is required, refer to [Paper Claim Research (Submissions, Locating, Rejections and Reimbursements) (059668)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=4e81c6b3-9feb-442a-b625-508abf839729).

[Top of the Document](#_top)

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| **Coram and Medical Foods Coverage** |

 Does **not** apply to MED D.

Coram places outbound calls to the member:

* Verify the first order information and advise the package and branding looks different from CVS Caremark Mail Order packages, for example: Coram advises members that the Medical Foods comes from McKesson and the print packet is mailed from Caremark with a label and refill order form.
* Refill changes, for example: Member wants a different flavor, address change.
* Shipping delays, for example: When a corrected NDC is needed from Caremark, or a product is on back order.

Refer to the following:

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| **Benefit Plans** | **Coverage Details** |
| **All**  **(This does not apply to FEP)** | A prescription is required for Medical Foods. These orders are processed through the front end of CVS Caremark Mail Order Pharmacy as normal prescriptions are under the Mail Order benefit.  **Warm Transfer the following Standard Option Medical Food Call Types to Coram:**   * Customer Care is unable to determine the Order Status from the notes listed. * Received partial fill and needs remaining part of the fill sent. * Reship needed. * Lost in Transit * Return Order Pick up.   Coram’s phone number **(Internal do not provide to caller)**:  Call **1-888-334-7978** and select the appropriate prompt.   * **Hours of Operation:** * **Monday through Friday:** 8am - 12am (Midnight) CT. * **Saturday:** 8am – 5pm CT. * **Sunday:** Closed   + **After hours:** Members must call Customer Care back during Coram’s business hours to be warm transferred.   **Important Icon**Prior Approval is handled by CVS Caremark. |

[Top of the Document](#_top)

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| **Process** |

 This does NOT apply to MED D.

Perform the following steps for calls related to Medical Food:

**Notes:**

* + There are noMessaging Platform (MP) alerts for Medical Food Mail Orders.
  + Coram places the Quantity and Day Supply in the notes of what was shipped and places outbound calls to the member:
  + Verify the first order information and advise the package and branding looks different from CVS Caremark Mail Order packages.

**Example:** Coram advises members that the Medical Foods comes from McKesson and the print packet is mailed from Caremark with a label and refill order form.

* + Refill changes.

**Example:** Member wants a different flavor, address change.

* + Shipping delays

**Example:** When a corrected NDC is needed from Caremark, or a product is on back order.

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| **Step** | **Action** | |
| **1** | Determine the **Medical Foods Call Type**.   * Medical Foods Order Status, proceed to **Step 2**. * Medical Foods coverage inquiries refer to appropriate section:   + [Price Estimates](#_Price_Estimates)   + [Details](#_Details) * For general Medical Foods questions, Prior Approval inquiries, Prescription Requirements, Coram, and Benefit Details (handling Refills, Partial fills, Reships, or Lost in Transit) refer to [Details](#_Details). | |
| **2** | Locate the Order Number from the Main screen in PeopleSafe then click the **Order Number** and verify the shipping address, then proceed the next step. | |
| **3** | Verify theTracking Number displays on the Mainscreen.  **Important Icon**Do not provide the caller with this information, any tracking details must be provided from the Order Level Comments (See **Step 4**).   * If the tracking numberis available, proceed to **Step 4**. * If the tracking number is **not** available, click the Rx # and advise as to the order status with standard processing time; refer to the [PeopleSafe - Order Status (004758)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=684a02bb-9cb0-473d-9b90-56fc922c1ed6) Reference Table**.** | |
| **4** | Access the **Order Level Comments** (Department field = Corporate Accounts) and verify that the tracking numbers have been noted.  **Note:**   * If the tracking numbers are listed, advise the order has been shipped. The tracking number may be provided upon request. * If the tracking numbers are not listed, access the prescription number to determine order status and provide standard processing time. * If the order needs to be updated, proceed to **Step 5**.   **Notes:**   * + This tracking number can be provided if requested.   + Messaging Platform (MP) alerts do not exist for these orders. * Coram places the Quantity and Day Supply in the notes of what was shipped. | |
| **5** | Determine the status of the prescription by clicking the **prescription number**:  **Result:** The status displays**.**    **Notes:**   * Tracking information does not become available to Coram until the next business day after the order is shipped. * Orders are shipped via UPS.   **Exception:** Orders for California members are shipped via Golden State Overnight (GSO). | |
| **If the prescription status reflects…** | **Then…** |
| **Label Print**  **Important Icon**PeopleSafe reflects USPS tracking information, however the Order Level Comments has both tracking numbers for reference. | 1. Any update requested **must** be communicated to Coram. 2. Send an email with the below template to the following Coram contacts **and** proceed with Work Instruction processes:   [Stephanie.Holman@CoramHC.com](mailto:Stephanie.Holman@CoramHC.com)  CC: [Monique.Buchanan2@coramhc.com](mailto:Monique.Buchanan2@coramhc.com)    Use the following template:   * Member’s Name: * Member’s ID#: * Order Number: * Requested Updates:   + Stop order was requested (Advised no guarantee)   + Update address  1. Add the Sensitivity Stamp Label to the email on Outlook.   A screenshot of a computer  AI-generated content may be incorrect.  **Important Icon**These orders cannot have upgraded shipping. |
| **Awaiting Accepted, Translated OK,** or **Adjudication Accepted** | Proceed with the requested updates. |

[Top of the Document](#_top)

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| **Price Estimates** |

**Important Icon**Prior Approval is handled by CVS Caremark.

Perform the following steps:

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| **Step** | **Process** |
| **1** | Access the [FEP Shared - Medical Foods List (009161)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=7dd44b55-e4ce-41e0-8fa7-838ddcb5e810).  **Result:** Medicals Foods Excel Sheet downloads. Use **CTRL + F** and type the name of the Medical Food.  **Important Icon**The Medical Food List’s medication names may vary and may not be all inclusive; the NDC specifically identifies the covered item. If the medication is NOT on the list, proceed to **Step 2**. |
| **2** | Use the Medical Food NDC to run a Price Estimate, refer to [PeopleSafe - Test Claim (004573)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=59c4e7fa-4a87-43c4-89cd-5d4f8c6c3421).  **Note:** If unable to locate the medication through the NDC, take the first five numbers from the NDC and input it into the GCN field or type the drug name into the Drug Name field of your Price Estimate.  Possible outcomes:   * Accept, refer to [Details](#_Details). * Denied, access the denial details:   + Quantity Restrictions and/or Prior Approval needed, follow appropriate Prior Approval Process for the Client. Refer to the CIF.   + Over the Counter/Prescription:Advise the member they can submit a Prior Approval for coverage.   + Refill Too Soon, advise of the next available fill date. |

[Top of the Document](#_top)

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| **Scenarios** |

Refer to the following scenario:

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| **Scenario** | **Action** |
| **Member does not have a prescription for the Medical Foods**. | To receive benefits for Medical Foods, the member **must** have a physician’s prescription for each Medical Food obtained at a Preferred Retail Pharmacy.   * Pharmacies require a prescription in order to electronically transmit the claim to us. * Educating the member to obtain a prescription for Medical Foods is important.   + This ensures the members receive full benefits.   + It may be possible to obtain a prescription over the phone for these items. This would save the member the time and effort involved in a prescriber's visit. |
| **Member wishes to submit a Paper Claim for the Medical Foods**. | Inform the Member a pharmacy receipt is required and reference Paper Claim.  **Note:** If the member questions the reimbursement regarding [Paper Claim Research (Submissions, Locating, Rejections and Reimbursements) (059668)](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/view?docid=4e81c6b3-9feb-442a-b625-508abf839729) create a RM Task for possible adjustment. |

[Top of the Document](#_top)

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| **Related Documents** |

[Customer Care Abbreviations, Definitions, and Terms Index (017428)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c1f1028b-e42c-4b4f-a4cf-cc0b42c91606)

**Parent Document:** [CALL 0049 Customer Care Internal and External Call Handling](https://policy.corp.cvscaremark.com/pnp/faces/DocRenderer?documentId=CALL-0049)

[Top of the Document](#_top)

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