

Section 3.16 Behavioral Health Drug List

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3.16.1 Introduction

The Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS) maintains an approved list of medications, referred to as the [ADHS/DBHS Behavioral Health Drug List](#) that must be adopted by the Tribal and Regional Behavioral Health Authorities (T/RBHAs) and utilized as their formularies. The ADHS/DBHS Behavioral Health Drug List ensures the availability of safe, cost-effective and efficacious medications for eligible service recipients. ADHS/DBHS may add or delete medications from the list based on factors such as obsolescence, toxicity, and substitution of superior products or newer treatment options.

Medicare eligible behavioral health recipients, including persons who are dually eligible for Medicare (Title XVIII) and Medicaid (Title XIX/XXI), receive Medicare Part D prescription drug benefits through Medicare Prescription Drug Plans (PDPs) or Medicare Advantage Prescription Drug Plans (MA-PDs). Magellan does not participate in any PDPs or MA-PDs in Maricopa County. Prescription drug coverage for Medicare eligible behavioral health recipients enrolled in Part D is based on Part D plans' formularies. There may be an occasion when a behavioral health recipient's prescribed drug is not available through his/her Part D plan's formulary. This is considered a non-covered Part D drug. T/RBHAs and/or behavioral health providers must make attempts to obtain a drug not on a Part D plan's formulary by requesting an exception from the Part D plan.

3.16.2 Terms

Definitions for terms are located online at <http://www.azdhs.gov/bhs/definitions/index.php> and <http://www.magellanofaz.com/for-providers/provider-manual/definitions.aspx>. The following terms are referenced in this section:

[ADHS/DBHS Behavioral Health Drug List](#)
[Behavioral Health Professional](#)
[Depo-medications](#)
[Dual eligible](#)
[Medicare Advantage Prescription Drug Plan \(MA-PD\)](#)
[Prescription Drug Plan \(PDP\)](#)
[Prior Authorization](#)
[Schizophrenic Spectrum Disorder](#)
[Third Party Liability](#)

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[T/RBHA Formulary](#)

3.16.3 Procedures

3.16.3-A. How is the Behavioral Health Drug List used to access medications?

To ensure coverage of medications through the T/RBHA, providers must utilize the [ADHS/DBHS Behavioral Health Drug List](#).

Magellan, through its pharmacy benefit manager, maintains a formulary of medications, which includes all the medications on the ADHS/DBHS Behavioral Health Drug List. The Magellan formulary also provides information on quantity edits for medications. The Magellan medication formulary can be found on the Magellan of Arizona website at [Magellan formulary](#).

Title XIX/XXI eligible persons receiving medication(s) have the right to notice and appeal when a decision affects coverage for medication(s), in accordance with [Section 5.1, Notice Requirements and Appeal Process for Title XIX and Title XXI Eligible Persons](#). Non-Title XXI/XXI persons determined SMI have the right to notice and appeal when a decision affects medication coverage, in accordance with [Section 5.5, Notice and Appeal Requirements \(SMI and Non-SMI/Non-Title XIX/XXI\)](#).

Recipients can appeal by contacting Magellan at (602) 652-5863 or by submitting a letter or completed [form 5.3.1 \(ADHS/DBHS Appeal or SMI Grievance Form\)](#), no later than 60 calendar days after the date of Notice, to:

Magellan Health Services of Arizona
Attn: Grievance and Appeals
4801 E. Washington, Suite 100
Phoenix, AZ 85034

Behavioral health recipients with third party coverage, such as Medicare and private insurance, will have access to medications on their health plan's formulary through their third party insurer. If the desired/recommended prescription drug is not included on the health plan's formulary but may be covered by requesting an exception or submitting an appeal, the provider must attempt to obtain an exception for the medication or assist the recipient in submitting an appeal with the health plan. T/RBHAs will cover medications for persons determined to have SMI, regardless of Title XIX/XXI eligibility, when their third party insurer will not grant an exception for a medication that is a medication on the [ADHS/DBHS Behavioral Health Drug List](#).

Applicable co-payments must only be collected in accordance with [Provider Manual Section 3.4, Co-payments](#). For persons with coverage from third party payors, co-payments are collected in accordance with [Provider Manual Section 3.5, Third Party Liability and Coordination of Benefits](#).

T/RBHAs shall not require prior authorization processes for medications which have been approved for payment under Medicare plans.

Magellan will cover eligible member's Medicare cost share for formulary medications. Also, Magellan will alert pharmacies and providers on medication interactions or other safety concerns.

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3.16.3-B. Prior Authorization

ADHS/DBHS requires the RBHAs to prior authorize coverage of those medications indicated in the ADHS/DBHS Behavioral Health Drug List as requiring prior authorization and those that have age limits. (See [ADHS/DBHS Drug List and Prior Authorization Guidance Documents webpage.](#))

When these prior authorization criteria are utilized, the requirements outlined in [Section 3.14, Securing Services and Prior Authorization](#), [Section 5.1, Notice Requirements and Appeal Process for Title XIX and Title XXI Eligible Persons](#), and [Section 5.5, Notice and Appeal Requirements \(SMI and Non-SMI, Non-TXIX/TXXI\)](#), must be met.

T/RBHAs shall not require prior authorization processes for medications which have been approved for payment under Medicare plans.

3.16.3-C. How can the Behavioral Health Providers have input?

Behavioral health providers can offer suggestions for adding or deleting medications to the [ADHS/DBHS Behavioral Health Drug List](#) or their contracted T/RBHA's Medication Formulary.

Changes to the ADHS/DBHS Behavioral Health Drug List

To propose additions or deletions to the [ADHS/DBHS Behavioral Health Drug List](#), a behavioral health professional shall submit a written request to the T/RBHA Chief Medical Officer or designee:

Chief Medical Officer
Dr. Shareh Ghani
4801 East Washington Street
Phoenix, AZ 85034

Additions:

Requests for additions must include the following information:

- Medication requested (trade name and generic name, if applicable);
- Dosage forms, strengths and corresponding costs of the medication requested;
- Average daily dosage;
- Indications for use (including pharmacological effects, therapeutic uses of the medication and target symptoms);
- Advantages of the medication (including any relevant research findings if available);
- Adverse effects reported with the medication;
- Specific monitoring required; and
- The drugs on the current formulary that this medication could replace.

Deletions:

- A detailed summary of the reason for requesting the deletion.

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The T/RBHA Chief Medical Officer or designee will present requests, as determined appropriate, to the ADHS/DBHS Pharmacy and Therapeutics Committee.

The Pharmacy Administrator and Pharmacy Medical Director evaluate all requests for medication additions, deletions or changes to the RBHA formulary. Requests will be evaluated for adequately documented scientific and clinical rationale, and will be presented to the Magellan Pharmacy and Therapeutics Committee for discussion and recommendations. After further approval by the Magellan Chief Medical Officer, all proposed changes are forwarded in writing to ADHS/DBHS for final approval. Updated formularies will be available whenever changes have been made, in the [Pharmacy](#) section of the Magellan Web site.

3.16.4 References

The following citations can serve as additional resources for this content area:

[42 CFR 400.202](#)

[42 CFR 422.2](#)

[42 CFR 422.106](#)

[42 CFR 423.100](#)

[42 CFR 423.120](#)

[42 CFR 423.4](#)

[42 CFR 423.34](#)

[42 CFR 423.272](#)

[42 CFR 423.462](#)

[42 CFR 423.464](#)

[42 CFR 423.505](#)

[A.R.S. 32-1901](#)

[R9-21-207](#)

[R9-22-209](#)

[R9-31-209](#)

[AHCCCS/ADHS Contract](#)

[ADHS/RBHA Contracts](#)

[ADHS/IGAs T/RBHA](#)

[ADHS/DBHS Covered Behavioral Health Services Guide](#)

[ADHS/DBHS Behavioral Health Drug List](#)

[T/RBHA Medication Formulary](#)

[Section 3.14, Securing Services and Prior Authorization](#)

[Section 3.15, Psychotropic Medications: Prescribing and Monitoring](#)

[Section 3.25, Crisis Intervention Services](#)

[Section 5.1, Notice Requirements and Appeal Process for Title XIX and Title XXI Eligible Persons](#)

[Section 5.5, Notice and Appeal Requirements \(SMI and Non-SMI/Non-Title XIX/XXI\)](#)

[ADHS/DBHS Behavioral Health Drug List and Prior Authorization Guidance Documents webpage](#)

[Medicare Modernization Act Final Guidelines - Formularies](#)

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[Part D Voluntary Prescription Drug Benefit Program - Benefits and Costs for People With Medicare](#)
[Prescription Drug Benefit Manual - CMS](#)