

Pharmacy Benefit Coverage for Asthma Related Products

Minnesota Council of Health Plans, 2004

General Information: This grid contains general information about pharmacy benefits for children with asthma covered under commercial products (fully insured, self-insured) and government programs under contract with the Minnesota Department of Human Services (MNCare, PMAP, GAMC). Individual contract benefits may vary. The information was gathered in March 2004 and is subject to change.

Notes:

1. Spacers: Tubing spacers are free at any pharmacy. Coverage for other types of spacers varies by plan.
2. Inhalers: Benefit designs vary. However, in general one co-pay is charged per inhaler. Effective January 2004 the Minnesota Department of Human Services (DHS) reimbursement guidelines indicate that “school supplies” of inhalers will not be authorized for payment. If a claim is denied an individual member can request an override. There is no formal process for a provider to initiate an exception. Providers may seek guidance from the DHS provider relations help desk: 651-282-5545 should they choose to assist an individual member in obtaining an override.
3. To learn which asthma drugs are covered by a health plan visit www.mnhealthplans.org/consumers/prescrip_drugs. More current information is available from each health plan’s Web site.

	Provider Assistance	Spacers (See Note 1)	Peak Flow Meter	Nebulizer (See Note 2)	Additional Inhalers
Blue Cross Blue Shield/Blue Plus of Minnesota	1-800-821-4795 www.bluecrossmn.com	Covered as DME	Covered as DME	<ul style="list-style-type: none"> • Nebulizer covered as DME • Premixed medications covered as pharmacy 	Yes; limited to 1 override per year. Contact provider assistance.
First Plan of Minnesota	www.firstplan.org www.bluecares.com provides information on area DME providers Exceptions: Attn: Appeals Department, BCBSM, PO Box 64560, St. Paul, MN 55164-0560				
HealthPartners	1-800-492-7259 www.healthpartners.com Exceptions: Call 952-883-5813 (option 2) or Fax: 952-883-5875	Covered. May be obtained through pharmacy or DME vendor	Covered. May be obtained through pharmacy or DME vendor	<ul style="list-style-type: none"> • Nebulizer covered as DME • Premixed medications covered as pharmacy 	Yes. An override may be needed to ensure billing. Contact provider assistance.
Medica	1-800-788-2949 www.medica.com Exceptions: Obtain form online (available at www.Medica.com/forms) The attending physician should document on the prescription the number of inhalers recommended. Medica requires completion of a Quantity Limit Override Form (www.Medica.com/forms) by the prescribing physician if the additional inhaler EXCEEDS the total monthly allowance . Contact provider assistance.	Covered. May be obtained through pharmacy or DME vendor	Covered. May be obtained through pharmacy or DME vendor	<ul style="list-style-type: none"> • Nebulizer covered as DME • Premixed medications covered as pharmacy 	Yes. Two metered dose inhalers per fill allowed without prior authorization if the provider writes the prescription specifying the member needs for home AND one for school.
Metropolitan Health Plan	1-800-647-0550 www.mhp4life.org Exceptions: Pharmacy Coordinator, Metropolitan Health Plan, 822 South Third Street, Suite 140, Minneapolis, MN 55415 952-926-3575	Covered as DME	Covered as DME	<ul style="list-style-type: none"> • Nebulizer covered as DME • Premixed medications covered as pharmacy 	Yes. An override may be needed to ensure billing. Contact provider assistance.
PreferredOne	1-800-235-4357 www.preferredone.com Exceptions: Provider must register to obtain access to Web site information. Providers may also call the PreferredOne Customer Service Department to obtain formulary information for the Medication Request Form. Letters of Medical Necessity/Medication Request Form can be submitted by fax to 763-847-4041 or by letter to: Pharmacy Department, PreferredOne, 6105 Golden Hills Drive, Golden Valley, MN 55416	Covered as DME	Covered as DME	<ul style="list-style-type: none"> • Nebulizer covered as DME • Premixed medications covered as pharmacy 	Yes, no system limits in place
UCare Minnesota	1-800-413-2723 www.ucare.org Exceptions: Call 1-888-413-2723 or Fax 1-888-836-0730	Covered as DME	Covered as DME	<ul style="list-style-type: none"> • Nebulizer covered as DME • Premixed medications covered as pharmacy 	Yes; must be specified as a school supply on the prescription. An override may be needed to ensure billing. Contact provider assistance.

This grid was prepared by the Minnesota Council of Health Plans as part of a CDC cooperative agreement, *Controlling Asthma in American Cities*, administered by the American Lung Association® of Minnesota. Information was provided by each Minnesota health plan. For more information about this grid, contact Janny Brust at brust@mnhealthplans.org. Copying of this document is not allowed without permission from the Controlling Asthma in American Cities Project. Contact Jill Heins at jill.heins@alamn.org.