

STATE: MINNESOTA  
Effective: September 1, 2011  
TN: 11-16  
Approved:  
Supersedes: 10-18 (06-01)

ATTACHMENT 3.1-A  
Page 32.1

---

6.d. Other practitioners' services. (continued)

**I. Medication therapy management services**

Medication therapy management services are provided by qualified, licensed pharmacists to recipients to optimize the therapeutic outcomes of a recipient's medications. It is provided to recipients: 1) taking three ~~four~~ or more prescriptions to treat or prevent one ~~two~~ or more chronic medical conditions; or 2) with drug therapy problems that resulted in, or will likely result in, significant nondrug Medical Assistance Program costs.

Pharmacists must have graduated from an accredited college of pharmacy on or after May 1996, or completed a structured and comprehensive education program approved by the Minnesota Board of Pharmacy and the American Council of Pharmaceutical Education.

Medication therapy management services that are otherwise covered as direct face-to-face services may be provided via two-way, interactive video if the recipient is more than twenty miles from any enrolled medication therapy management provider and the interactive video site is in a trade area that does not contain an enrolled medication therapy management provider.

The service is comprised of the following components:

- A. assessing a recipient's health status;
- B. developing a medication treatment plan;
- C. monitoring and evaluating a recipient's response to the therapy
- D. providing a comprehensive medication review to identify, resolve, and prevent medication-related problems;
- E. documenting the care provided and communicating essential information to a recipient's primary care providers;
- F. providing oral education and training to enhance recipient understanding and appropriate use of medications;
- G. providing information, support services, and resources to enhance recipient adherence to therapeutic regimens;
- H. coordinating and integrating medication therapy management services within the broader health care services provided to a recipient.

STATE: MINNESOTA

Effective: September 1, 2011

TN: 11-16

Approved:

Supersedes: 10-16 (06-01)

ATTACHMENT 3.1-B

Page 31.1

**MAR 15 2012**

---

6.d. Other practitioners' services. (continued)

**I. Medication therapy management services**

Medication therapy management services are provided by qualified, licensed pharmacists to recipients to optimize the therapeutic outcomes of a recipient's medications. It is provided to recipients: 1) taking three ~~four~~ or more prescriptions to treat or prevent one ~~two~~ or more chronic medical conditions; or 2) with drug therapy problems that resulted in, or will likely result in, significant nondrug Medical Assistance Program costs.

Pharmacists must have graduated from an accredited college of pharmacy on or after May 1996, or completed a structured and comprehensive education program approved by the Minnesota Board of Pharmacy and the American Council of Pharmaceutical Education.

Medication therapy management services that are otherwise covered as direct face-to-face services may be provided via two-way, interactive video if the recipient is more than twenty miles from any enrolled medication therapy management provider and the interactive video site is in a trade area that does not contain an enrolled medication therapy management provider.

The service is comprised of the following components:

- A. assessing a recipient's health status;
- B. developing a medication treatment plan;
- C. monitoring and evaluating a recipient's response to the therapy
- D. providing a comprehensive medication review to identify, resolve, and prevent medication-related problems;
- E. documenting the care provided and communicating essential information to a recipient's primary care providers;
- F. providing oral education and training to enhance recipient understanding and appropriate use of medications;
- G. providing information, support services, and resources to enhance recipient adherence to therapeutic regimens;
- H. coordinating and integrating medication therapy management services within the broader health care services provided to a recipient.

STATE: MINNESOTA

ATTACHMENT 4.19-B

Effective: September 1, 2011

Page 37

TN: 11-16

Approved:

Supersedes: 09-23 (08-13, 07-12, 07-04, 05-09, 04-15(a), 03-29)

---

12a. Prescribed Drugs

Payment is determined in accordance with 42 CFR ~~§§447.331 to 447.333~~ §§447.512-518.

For drugs dispensed by a pharmacy, payment is the lower of:

- (1) the estimated actual acquisition costs of the drugs or the maximum allowable cost set by the State agency, plus a fixed dispensing fee; or
- (2) ~~the maximum allowable cost set by the State agency not to exceed in the aggregate the upper limits established under 42 CFR §447.332 for multiple course drugs, plus a fixed dispensing fee; or the provider's usual and customary charge to the general public.~~

~~(3)~~

The maximum allowable cost set by the State agency for multiple source drugs will not exceed, in the aggregate, the upper limits established under 42 CFR §447.512.

Effective July 1, 2019, for services provided on or after September 1, 2011, the State agency establishes the estimated actual acquisition cost to equal 102% ~~95%~~ of the wholesale acquisition cost (wholesale acquisition cost plus two percent) ~~average wholesale price (wholesale price minus 15 percent)~~. If a single-source product does not have a published wholesale acquisition cost, the State agency will request the wholesale acquisition cost from the drug's manufacturer. If no wholesale acquisition cost is provided by the manufacturer, the drug will not be covered.

Payment for over-the-counter drugs follows the methodology for drugs dispensed by a pharmacy described above. If the pharmacy is not accessible to, or frequented by, the general public, or if the over-the-counter drug is not on display for sale to the general public, the usual and customary charge is the actual acquisition costs plus a 50 percent add-on based on the actual acquisition cost.

STATE: MINNESOTA

ATTACHMENT 4.19-B

Effective: September 1, 2011

Page 37a

TN: 11-16

Approved:

**MAR 15 2012**

Supersedes: 10-01 (08-13, 07-12, 07-04, 05-09/04-15(a)/03-29)

---

12a. Prescribed Drugs (continued);

For drugs administered in an outpatient setting, payment for prescription drugs is the lower of the provider's usual and customary charge to the general public or 106% of the average sales price. If the average sales price is not available, payment will be the lower of the provider's usual and customary charge to the general public or the wholesale acquisition cost ~~the amount established for Medicare Part B.~~

~~Effective July 1, 2005, for antihemophilic factor drugs, the State agency established the actual acquisition cost to equal 70% of the average wholesale price (wholesale price minus 30%).~~

~~Effective March 1, 2007 for services provided on or after October 1, 2011, the rate for specialty pharmacy products is 84.5% of 83% of average wholesale price the maximum allowable cost set by the State Agency. The rate used is dependent upon the actual acquisition cost for the product. Specialty pharmacy products are those used by a small number of recipients or recipients with complex and chronic diseases that require expensive and challenging drug regimens.~~

~~Following is the chart listing the categories of specialty pharmacy products that receive one of the two discounts from the average wholesale price. Further detail can be found in the Minnesota Health Care Programs Provider Manual available through the agency's website.~~

STATE: MINNESOTA  
Effective: September 1, 2011  
TN: 11-16  
Approved:

ATTACHMENT 4.19-B  
Page 37b

Supersedes: 10-01 (06-13) **MAR 15 2012** 07-12, 07-04, 05-09/04-15(a)/03-29)

12a. Prescribed Drugs (continued):

<u>Drug Name or Therapeutic Area</u>	<u>% discount from AWP</u>
<u>Biologic Agents</u>	<u>15.5%</u>
<u>Immunologic Agents</u>	<u>15.5%</u>
<u>Endocrine and Metabolic Agents</u>	<u>15.5%</u>
<u>Enzyme Replacement Agents</u>	<u>15.5%</u>
<u>Injectable Antipsychotic Agents</u>	<u>15.5%</u>
<u>Pulmonary Hypertension Agents</u>	<u>15.5%</u>
<u>Oral Neoplastic Agents</u>	<u>17%</u>