

Ryan Kuehn

Non-Emergency Medical Transportation (NEMT) and Pharmacy Benefits Manager (PBM) Request for Comment	
RFI Question	Response
If Medicaid were to change its current broker model for non-emergency medical transportation (NEMT), what changes would you recommend?	None
If Medicaid were to change its current pharmacy benefit manager model, what changes would you recommend?	CVS Health believes the State can accomplish the objectives desired by going to a single PBM without having a requirement for a single PBM thus avoiding unnecessary disruptive changes. There are several advantages of allowing a MCO to work with their preferred PBM partner including: allowing the MCO individual plan flexibility to coordinate the management of the pharmacy benefit on a MCO by MCO basis and allowing the MCO to own the utilization management and risk under the capitation rate and being able to manage member outcomes by each MCO. Further, the State could maintain their single preferred drug list and continue to set reimbursement requirements under the MCO model contract that all MCOs and MCO subcontractor PBMs must follow while still allowing MCOs to work with their preferred PBM provider. As such, the State can develop and implement all of the requirements desired through the MCO model contract while keeping the pharmacy benefit carved-in and allowing the MCOs to make the best PBM partner decision. This allows the MCOs to make the best individual decisions for them, their members and providers without having to gain consensus across all MCOs on execution of the pharmacy benefit that may create high costs and administrative burden within particular MCOs and utilization management functions being independent from an operating and administrative perspective MCO by MCO.