Department: Social Services
Program Name: Clinical Services Program Management
Program is found in the following core budget(s): Clinical Services Program Management

HB Section(s):   **11.605**

1a. What strategic priority does this program address?

Health and continuum of care

1b. What does this program do?

Funding for Clinical Services Program Management (CSPM) supports contractor costs for pharmacy and clinical services. Conduent operates and manages the web-based clinical editing process for the point-of-sale pharmacy and medical claims, medical and drug prior authorization, pre-certification, and Drug Utilization Review (DUR). The current CSPM claim processing system allows each claim to be referenced against the participant's claims history including pharmacy, medical, and procedural data (ICD-10 and CPT codes), providing real-time data to participating MHD providers. For patients that meet approval criteria, the claim will be paid automatically. In instances when a phone call is necessary, the hotline call center is available seven days a week, which allows providers prompt access to a paid claim for the requested product or service. In addition to receiving messages regarding the outcome of the processing of claims and the amount to be reimbursed, pharmacy providers receive prospective drug use review alert messages at the time prescriptions are dispensed.

CyberAccess SM is a web-based tool that allows healthcare providers to electronically request drug and medical prior authorizations for their MO HealthNet patients, review historical claims data, view and/or enter clinical data in a patient's Electronic Health Record (EHR), select appropriate preferred medications and electronically prescribe, and electronically request inpatient certifications. The continued funding for *CyberAccess* SM is critical to continue supporting the pharmacy and medical cost containment initiatives and electronic health records. Early Periodic Screening, Diagnosis, and Treatment (EPSDT) forms and patient-specific lab results are currently available through the platform. Linkages to other health record systems yielding interoperability between systems are under development (Health Information Network {HIN}). A companion participant web portal tool, Direct Inform, has been developed and deployed to pilot providers.

Pharmacy

Through the Pharmacy Program, the division is able to maintain current cost containment initiatives and implement new cost containment initiatives.

Major initiatives include:

- Maintenance and Updates to Fiscal and Clinical Edits
- Quarterly Updates to the Missouri Maximum Allowable Cost (MACs)
- Prospective and Retrospective Drug Use for Drug Utilization Review (DUR)
- Routine/Ad hoc Drug Information Research
- Enrollment and Administration of Case Management
- Preferred Drug List (PDL) and Supplemental Rebates
- *See the Pharmacy tab for more details on these initiatives*

<div align="center">**PROGRAM DESCRIPTION**</div>

Department: Social Services   **HB Section(s):**   **11.605**
Program Name: Clinical Services Program Management
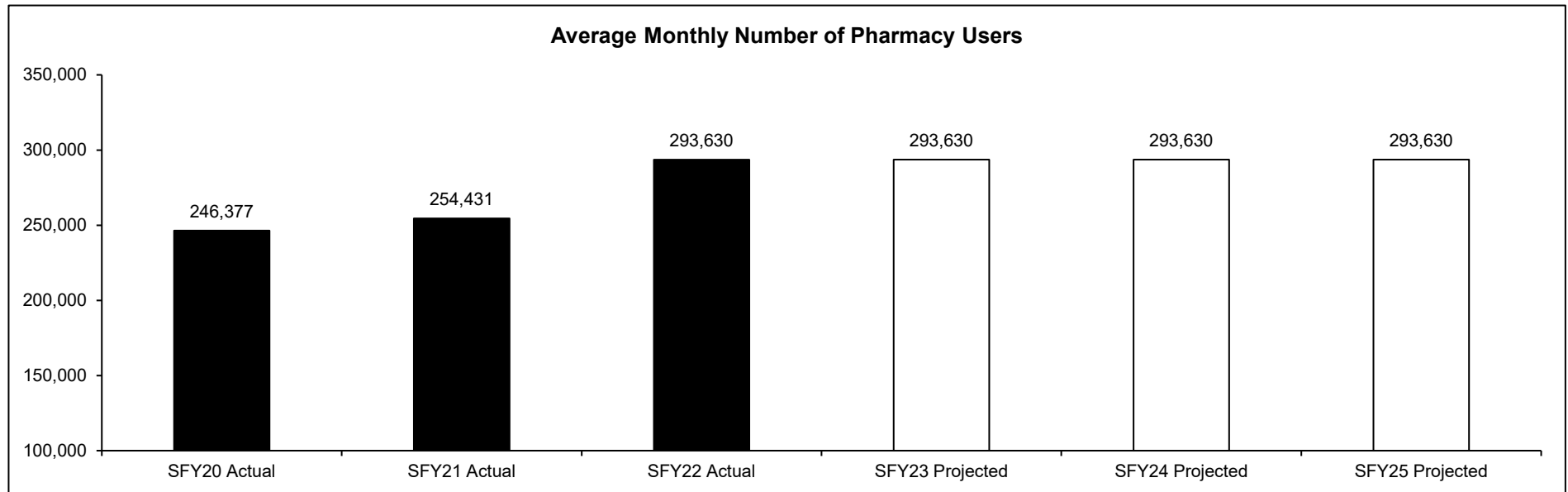**Program is found in the following core budget(s): Clinical Services Program Management**

<u>Clinical</u>

Major Clinical Services initiatives include:

- Smart Prior Authorization (PA) for Durable Medical Equipment (DME), Optical, Psychology, Medical Services, and Chronic Pain Management
- Home and Community Based Services (HCBS) prior authorizations
- Psychology and Bone Marrow Consultants
- Optical Program
- Medical Evidence-Based Guidelines - Oregon HealthCare Contract

---

2a.   Provide an activity measure for the program.

Average Monthly Number of Pharmacy Users

PROGRAM DESCRIPTION
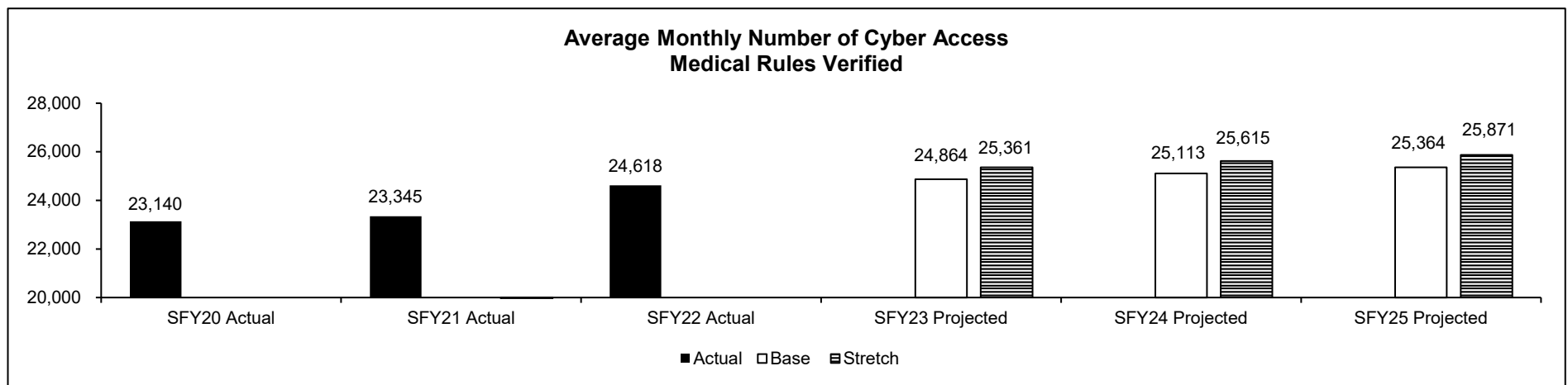
Department: Social Services

HB Section(s): **11.605**

Program Name: Clinical Services Program Management

Program is found in the following core budget(s): Clinical Services Program Management

---

2b. Provide a measure of the program's quality.

CyberAccess Provider Outreach Representatives continue to do provider outreach, expressing the importance of utilizing Cyber Access when verifying drug and medical rules.

Average Monthly Number of Cyber Access Drug Rules Verified

	SFY20 Actual	SFY21 Actual	SFY22 Actual	SFY23 Projected		SFY24 Projected		SFY25 Projected	
				Base	Stretch	Base	Stretch	Base	Stretch
Actual	1,392	1,350	1,514						
Base				1,529		1,544		1,560	
Stretch					1,560		1,575		1,591

Average Monthly Number of Cyber Access Medical Rules Verified

	SFY20 Actual	SFY21 Actual	SFY22 Actual	SFY23 Projected		SFY24 Projected		SFY25 Projected	
				Base	Stretch	Base	Stretch	Base	Stretch
Actual	23,140	23,345	24,618						
Base				24,864		25,113		25,364	
Stretch					25,361		25,615		25,871

Note: SFY22 numbers are higher due to the Public Health Emergency.

PROGRAM DESCRIPTION

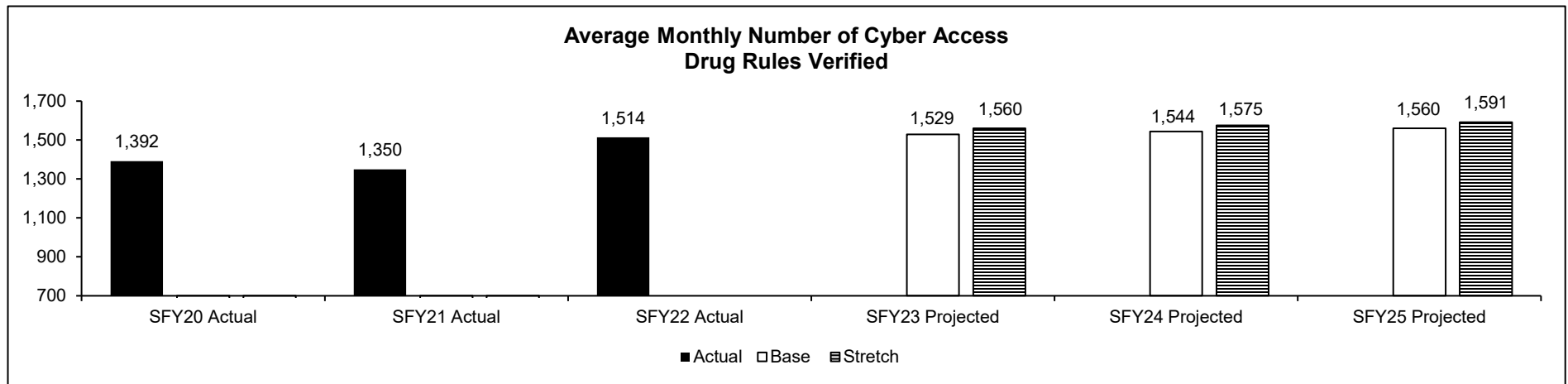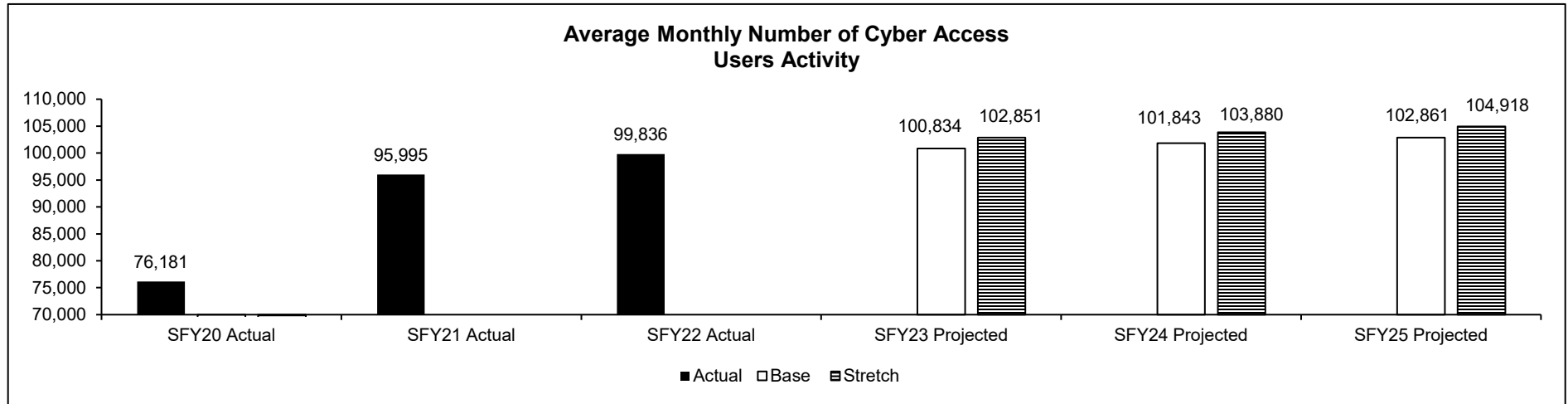**Department: Social Services**   **HB Section(s):**   **11.605**
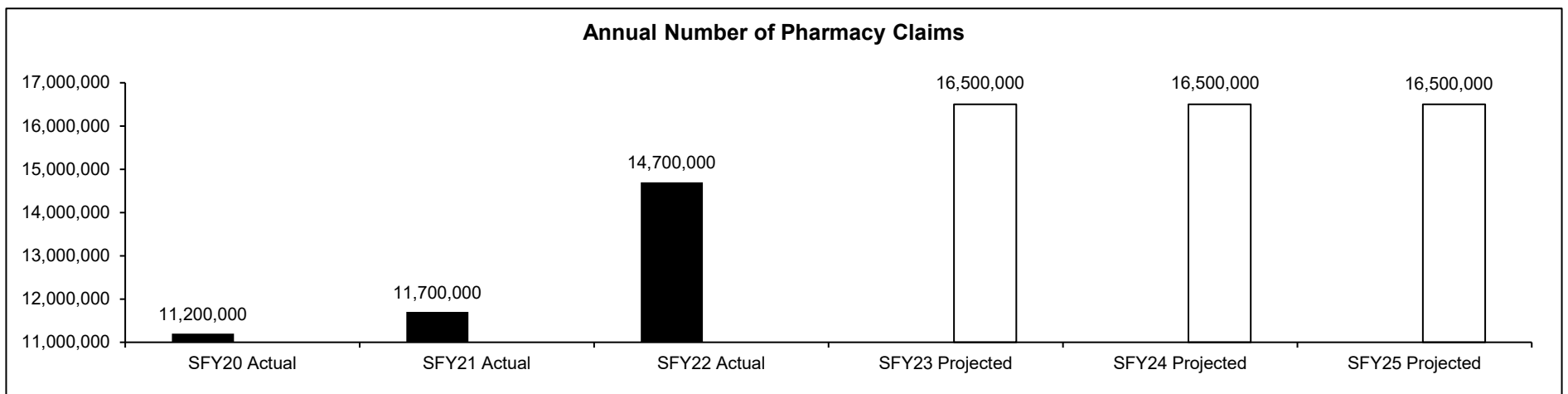**Program Name: Clinical Services Program Management**
Program is found in the following core budget(s): Clinical Services Program Management

2c.   Provide a measure of the program's impact.

**Average Monthly Number of Cyber Access
Users Activity**

Year	Value	Value
SFY20 Actual	76,181	
SFY21 Actual	95,995	
SFY22 Actual	99,836	
SFY23 Projected	100,834	102,851
SFY24 Projected	101,843	103,880
SFY25 Projected	102,861	104,918

■Actual □Base ▤Stretch

2d.   Provide a measure of the program's efficiency.

Annual Number of Pharmacy Claims

Year	Value
SFY20 Actual	11,200,000
SFY21 Actual	11,700,000
SFY22 Actual	14,700,000
SFY23 Projected	16,500,000
SFY24 Projected	16,500,000
SFY25 Projected	16,500,000

Note: SFY22 numbers are higher due to the Public Health Emergency.

PROGRAM DESCRIPTION

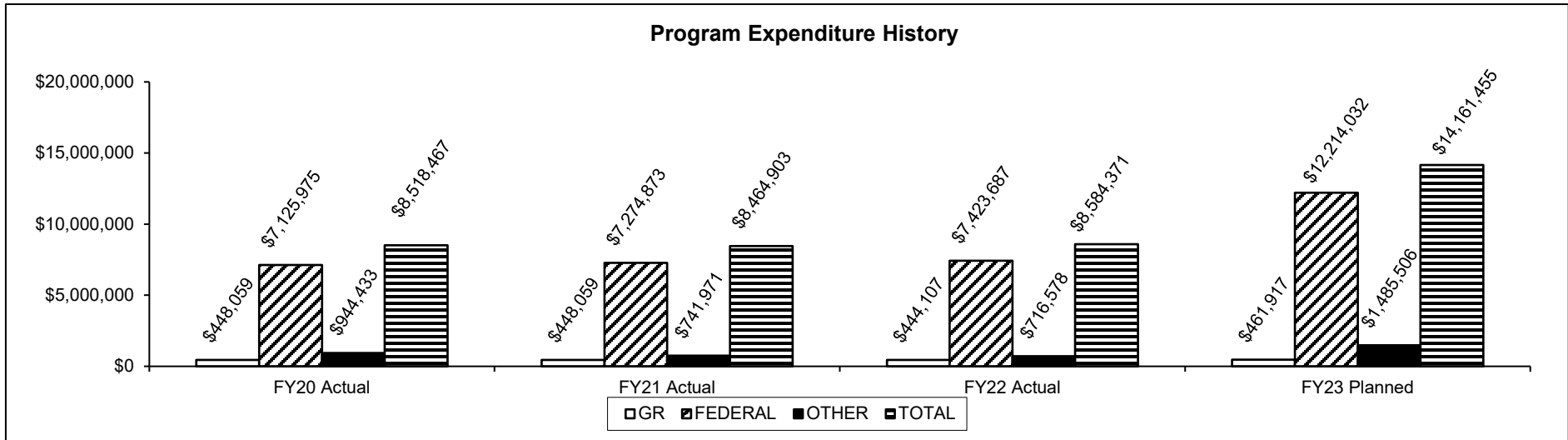**Department: Social Services**
Program Name: Clinical Services Program Management
Program is found in the following core budget(s): Clinical Services Program Management

HB Section(s): **11.605**

3. Provide actual expenditures for the prior three fiscal years; planned expenditures for the current fiscal year. (*Note: Amounts do not include fringe benefit costs.*)	

Program Expenditure History

	FY20 Actual	FY21 Actual	FY22 Actual	FY23 Planned
GR	$448,059	$448,059	$444,107	$461,917
FEDERAL	$7,125,975	$7,274,873	$7,423,687	$12,214,032
OTHER	$944,433	$741,971	$716,578	$1,485,506
TOTAL	$8,518,467	$8,464,903	$8,584,371	$14,161,455

Planned FY2023 expenditures are net of reverted.

4. What are the sources of the "Other " funds?

Pharmacy Rebate Fund (0114), Third Party Liability Fund (0120), and Missouri Rx Plan Fund (0779)

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

State statute: Section 208.201, RSMo. Federal law: Social Security Act Section 1902(a)(4). Federal Regulations: 42 CFR, Part 432.

6. Are there federal matching requirements? If yes, please explain.

Generally, MO HealthNet administrative expenditures have a 50% match. The Clinical Management Services for Pharmacy and Prior Authorization expenditures have a 75% match.

7. Is this a federally mandated program? If yes, please explain.

Yes. Section 1902 (a) (4) of the Social Security Act requires such methods of administration as necessary for the proper and efficient administration of the Medicaid State Plan.