Frequently Asked Questions about the MCO Common Formulary

Q: Where can someone sign up for Public Comment notification?

A: If you would like to receive the quarterly Public Comment notices please subscribe to the Medicaid ListServ. The subscription instructions are found here: http://www.michigan.gov/documents/LISTSERV_127789_7.pdf. This subscription-based e-mail service notifies subscribers of important news relative to the Michigan Medicaid Program, including Public Comment notices.

Q: What is the workgroup review schedule in order for the public to provide comment? What is the best method to provide comment?

A: The MCO Common Formulary Workgroup review schedule piggybacks off of the FFS P&T Committee quarterly meetings. The quarterly Public Comment period will be posted on the MCO Common Formulary webpage at Michigan.gov/MCOPharmacy.

Q: How will updates to the formulary be communicated?

A: The updated formulary will be posted after completion of the approval process following the MCO Common Formulary Workgroup meetings. Within the first pages of the updated formulary is a formulary change listing.

Q: How will drug manufacturers present clinical information about drugs to the plans?

A: There is no change. Drug manufacturers will continue to use the same process as prior to the MCO Common Formulary implementation. The Health Plans still have their own P&T Committees. This information should still be forwarded to the plans for review with their committees. The plans will then bring the information to the MCO Common Formulary Workgroup.

Q: Is a drug that is listed on the Michigan Pharmaceutical Product List (MPPL) automatically covered on the MCO Common Formulary?

A: No, if a drug is on the MPPL found at Michigan.fhsc.com >> Providers >> Drug Information >> MPPL and Coverage Information, but not covered on the MCO Common Formulary, the Health Plans must have a means to cover that drug through a non-formulary prior authorization process. Refer to the second page of the Medicaid Health Plan Common Formulary found at Michigan.gov/MCOPharmacy.

Q: Can plans cover a drug before it is on the MPPL?

A: New drug products are usually on the market for 6 months before considered for formulary addition. Due to the ability to be less restrictive, plans could choose to cover a drug prior to it being put on the MPPL. A non-formulary prior authorization can always be requested for medical necessity coverage considerations.
Q: Are each of the plans going to have the same PA length of approval?

A: The prior authorization (PA) Duration of Approval is identified in the PA Criteria document found at [Michigan.gov/MCOpharmacy](http://Michigan.gov/MCOpharmacy). Plans are allowed to be less restrictive.

Q: Is the FFS PA criteria the same as the published MCO Common Formulary PA Criteria??

A: No, the criteria may differ.