## Coverage

## 5450 <u>Coverage</u> (XX/XX/2024, GCR 23-144)

- (a) VPharm provides the following supplemental pharmacy coverage:
  - (1) VPharm covers beneficiary Medicare prescription drug plan cost-sharing after any federal low-income subsidy (LIS) is applied. This may include:
    - (A) Deductible,
    - (B) Co-payments,
    - (C) Coinsurance,
    - (D) The coverage gap, and
    - (E) Catastrophic copayments according to Medicare prescription drug plan rules.
  - (2) VPharm covers the Medicare prescription drug plan premium up to the low-income premium subsidy (LIS) amount (as determined by the Centers for Medicare and Medicaid Services).
- (b) VPharm also provides coverage for certain categories of drugs if they are not covered by the Medicare prescription drug plan. These categories of drugs are covered as they are under Medicaid and can be found in the Medicaid State Plan on the Agency of Human Services website.
  - (1) Coverage is subject to the requirements of the preferred drug list (PDL), which is available on the Department of Vermont Health Access website.
  - (2) Coverage for the pharmaceuticals described above shall be based upon current Medicaid payment and dispensing policies.
- (c) The following additional benefits are available for VPharm 1 beneficiaries only:
  - (1) One comprehensive visual analysis (including a refraction) and one interim eye exam (including a refraction) within a two-year period, and
  - (2) Diagnostic visits and tests related to vision.
- (d) Beneficiaries have co-payments as described in statute at 33 V.S.A. § 2073(d).
- (e) Beneficiaries may request coverage of a prescribed drug when an individual has exhausted the appeal process under the Medicare prescription drug benefit.
- (f) For VPharm beneficiaries who are eligible for and have applied for the Medicare prescription drug benefit but have not yet received coverage due to an operational problem with Medicare, or who otherwise have not received coverage for a needed drug: Vermont Medicaid will cover the drug if medically necessary and if it finds that good cause and hardship exist. Coverage will continue until the operational problem and good cause and hardship ends. The individual must have made every reasonable effort with Medicare, given the individual's circumstances, to obtain coverage.

## 5450.1 <u>Non-Drug Items</u> (XX/XX/2024, GCR 23-144)

(a) VPharm covers beneficiary cost-sharing for insulin and other diabetic supplies, including test strips, needles and syringes.

