



SPECIALTY NETWORK FOR CARE1ST AHCCCS
Effective 4/1/2019

March 1, 2019

Dear Care1st Providers and Staff:

Effective April 1, 2019, Care1st AHCCCS only will be moving to a Specialty Network primarily for chronic disease conditions that require Specialty medications. A complete list of impacted specialty medications is available by contacting Network Management at 602.778.1800 or 1-866.560.4042 (Options in order: 5, 7 in this order).

The Limited Specialty Network has been designed with a focus on the following 3 key measures:

- Certification in one of 3 Specialty Pharmacy organizations: URAC, JCAHO, or ACHC
- Documentation of a proactive adherence management tracking and reporting process to minimize gaps in treatment and identify barriers to care
- Drug therapy management programs that promote cost effective drug management and empowers membership to self-manage and self-treat their own disease or condition

The Specialty Network will include the following pharmacies:

Name	Location	Phone Number
EXACTUS PHARMACY SOLUTIONS INC	Tampa, FL	1-866-458-9246
CVS CAREMARK SPECIALTY PHARMACY	3 locations Nationwide (CA, KS, PA)	1-800-237-2767 or 1-866-387-2573

Letters will be mail March 1, 2019 to impacted members and providers. Phone calls to impacted members to assist with the transfer process to a new Specialty Pharmacy will begin March 4, 2019.

As providers, please note that your patient or the Specialty Pharmacy may be contacting you for a new prescription. We regret any inconvenience this may cause but please know that this network change is designed with the health of the patient in mind.

If a medication within the Specialty Network is required on an emergent basis, a one-time override may be available by contacting our Pharmacy Prior Authorization at 1-602-778-1800 or 1-866-560-4042 (Options in order: 5, 5).

OBTAINING SPECIALTY MEDICATIONS THROUGH THE PHARMACY BENEFIT

To order specialty oral and injectable drugs through our contracted Specialty Pharmacies:

1. Complete the Pharmacy Prior Authorization Request and fax to us at 1-602-778-8387
2. Once approved, the Pharmacy Department will fax back the approval to the practice
3. Specialty Pharmacy will process the order and reach out to the provider/member to make arrangements for delivery

Please Note: If prior authorization is not obtained before the order is placed, the plan decision and patient care may be delayed.

***NEW* Buy and Bill ONLY**

Effective 4/1/19, the following products will no longer be permitted on the pharmacy benefit. These products will be only supplied as Buy and Bill only (submitted as J-codes on medical claims).

- Viscosupplements – All require PA

Prior authorization for medications covered under the medical benefit are outlined on the Prior Authorization Guidelines located on our website www.care1staz.com > Care1st > Providers > Prior Authorization Guidelines & Criteria

Contact Pharmacy Prior Authorization at 1-602-778-1800 (Options 5, 5) if you have any questions. **Thank you!**

Care1st Network Management
Ph 602.778.1800/866.560.4042 (Options in order: 5, 7)
Fax 602.778.1875/E-mail SM_AZ_PNO@Care1stAZ.com

Visit our website at www.care1staz.com

Looking for your assigned Provider Network Rep? On our website go to Providers > Provider Rep Contact Info