



Chronic Renal Disease Program (CRDP)

Renal Disease Advisory Committee
April 21, 2017

► Authorization for the CRDP

- The Renal Disease Treatment Act, 35 P.S. §§ 6201-6208, Act 1970-140
 - ▼ Authorizes Department of Health to establish a program to assist persons who require lifesaving care and treatment for chronic renal disease and are unable to pay for such services
 - ▼ Is not an entitlement program.
 - ▼ Establishes a Renal Disease Advisory Committee of eleven members nominated by the governor with consent by two-thirds of the Senate; to consult with the department in the administration of the Act

Overview of Program Services

The CRDP, through contracted providers, provides care and treatment for eligible adults with end-stage renal disease.

The CRDP currently assists with costs related to:

- Dialysis services;
- Renal transplantation;
- Medical management;
- Inpatient and outpatient services;
- Home dialysis supplies and equipment;
- Medications; and
- Limited patient transportation.

Funding

The CRDP is a state-funded program. Program budget for the 2016-2017 state fiscal year is \$7,900,000.

- Pharmacy budget: \$4,900,000
 - \$3,758,252 for drug costs (net rebates)
 - \$737,294 cardholders' Medicare Part D premiums
 - \$404,454 for administrative costs
- Medical and Transportation budget: \$3,000,000
 - \$2,862,000 for claims payments to medical and transportation providers
 - \$138,000 for payments of administrative costs to transportation providers

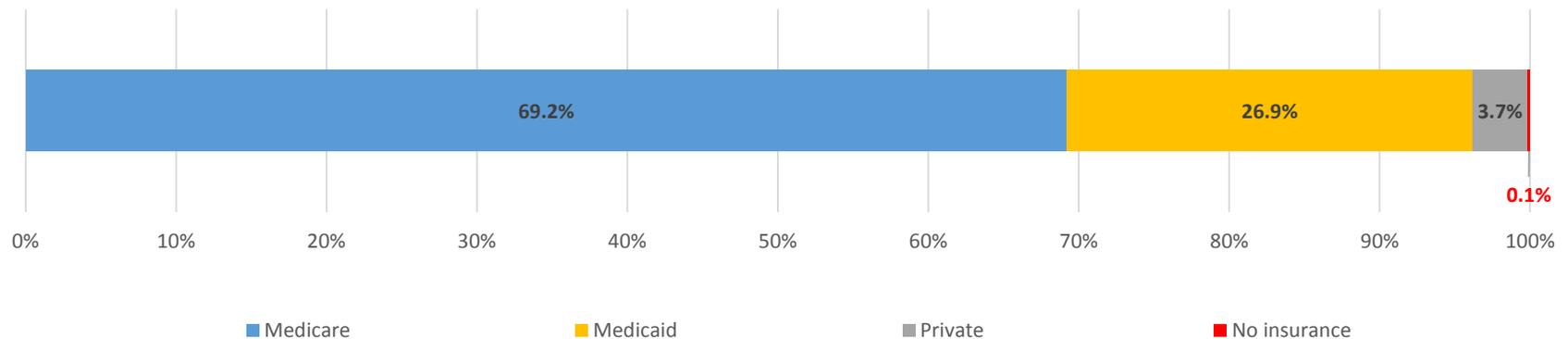
Current Eligibility Criteria for CRDP

- Medical/pharmacy
 - ▣ Household income at or below 300 percent of federal poverty income guidelines
 - ▣ Diagnosis of end stage renal disease
 - ▣ Pennsylvania resident
 - ▣ U.S. citizen or legal alien
- Transportation
 - ▣ CRDP enrollment
 - ▣ No other means of transportation available
 - ▣ Medical necessity for special modes including invalid coach and non-emergency ambulance

CRDP Enrollment – Insurance Coverage

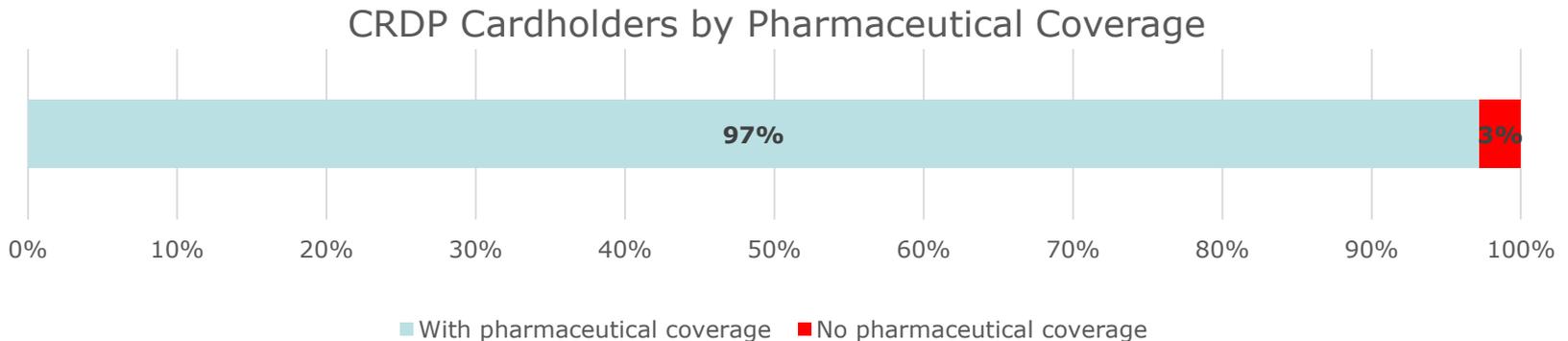
Based on a review of CRDP cardholders from September 2016 to January 2017, there was an average of 5,394 cardholders per week. Of these cardholders, seven or 0.1 percent had no insurance coverage. The remaining 5,387 or 99.9 percent had some type of insurance coverage

CRDP Cardholders by Insurance Coverage



CRDP Enrollment – Pharmaceutical Coverage

During the above referenced time period, there was an average of 5,244 or 97 percent of cardholders with pharmaceutical coverage and 150 or 3 percent of cardholders without pharmaceutical coverage.



Medical Claims Payment Rules

- The CRDP is the payer of last resort. Providers must seek and collect payment from all third-party payers who may be legally obligated to pay for services provided to CRDP cardholders, including, but not limited to, insurers, Medicare or Medicaid.
- If there is no third-party payer who may be legally obligated to pay for services provided, providers will submit a bill for services directly to the CRDP. Payments will be made in accordance with the fee schedule.

Medical Claims Payment Rules

- In addition to requesting payment for services, providers may submit a claim to CRDP for the cost of a patient's co-insurance or deductible.
 - When paying for co-insurance and deductibles, CRDP pays fifty percent of the amount billed. CRDP providers agree to accept fifty percent as payment in full.

SFY 15-16 Medical Claims Paid by Payment Method

Claims paid based on co-insurance

billed: \$1,909,222.56

Claims paid based on deductible

billed: \$ 33,500.51

Claims paid based on fee schedule

amount: \$ 60,446.15

Total: \$1,975,429.35

SFY 15-16 Medical and Transportation Expenditures by Provider Type

Medical providers:

Physician	\$100,818.14
Hospital	\$ 33,919.23
Dialysis center	<u>\$1,840,691.98</u>
Subtotal:	\$1,975,429.35

Transportation:	<u>\$651,303.78</u>
Total:	\$2,626,733.13

SFY 15-16 Medical Claims Paid by Patient Condition

Dialysis:	\$1,869,815.44
Transplant:	\$ 37,956.77
Dual dialysis transplant:	<u>\$ 67,657.14</u>
Total:	\$1,975,429.35

Pharmacy Services

- These are administered by a PACE contractor (Magellan), through a memorandum of understanding between Department of Health and Department of Aging.
- Under the CRDP, Medicare Part D premiums are paid for cardholders through contract agreements between PACE and Part D plans.

Pharmacy Services – Payment Rules

- At the pharmacy, CRDP cardholders pay co-pay of \$6 (generic) or \$9 (brand) for medications from the CRDP formulary.
- Medications are billed to primary insurance prior to CRDP.
- Pharmacy submits claims to Magellan for payment of medications that are not covered by cardholder's other insurance.

Pharmacy Services

- PACE utilizes a third party liability match to verify CRDP cardholders' enrollment in other insurance plans.
- PACE applies manufacturers rebates to the CRDP for drugs purchased for CRDP cardholders.

State Budget Cycle

