

UPDATED

Guidance for Pharmacies Assisting Medicaid Members During the Current State of Emergency Due To Hurricane Sandy*

The following information is applicable to providers servicing evacuated beneficiaries in need of emergency fills of prescriptions or fiscal orders (including prescription and over the counter drugs and medical supplies) when a State of Emergency has been determined by State or Local officials. In these situations, the provider should report the following on the claim:

- **NCPDP FIELD 420-DK SUBMISSION CLARIFICATION CODE 07** – *Medically Necessary (use to indicate the service is provided as a result of Immediate Urgent Care or Emergency.)*

- ❖ If a Medicaid member has had a prescription filled from a pharmacy that is inaccessible due to the storm, he/she can obtain a new prescription/fiscal order from the prescriber or a refill of the prescription can be transferred to another Medicaid participating pharmacy. Pharmacies should follow the instructions below to ensure appropriate processing and payment of the claim. Pharmacies must enter October 29, 2012 (the date the Hurricane reached the New York region) as the original date written on transferred prescriptions. Both pharmacies must document this as an emergency transaction.

- ❖ If a Medicaid member has had a prescription filled from a pharmacy that is inaccessible due to the storm, he/she can obtain a new prescription/fiscal order from the prescriber or a refill of the prescription can be transferred to a pharmacy that does not participate in the New York Medicaid program. Pharmacies must enter October 29, 2012 (the date the Hurricane reached the New York region) as the original date written on transferred prescriptions. Both pharmacies must document this as an emergency transaction.

- ❖ Pharmacies not participating in New York Medicaid can receive reimbursement using one of the following options:
 - For Chain pharmacies: If the dispensing pharmacy and the member's home pharmacy are part of the same chain, the home pharmacy can submit the claim to NY Medicaid. Chains should check with their headquarters to determine whether this is an option.

 - For Chain and non-Chain pharmacies: The dispensing pharmacy can be enrolled in the NY Medicaid Program on a temporary basis. Paper claims will be accepted and payment will be made by check to the dispensing pharmacy.
 - For Paper Pharmacy claims: use Pharmacy Paper Claim form , field # 3 (SA Exception Code Field) values "1" (Immediate/Urgent Care) or "3" (Emergency Care)
 - **See NY Medicaid Temporary Provider Enrollment Form.**

- ❖ If members are in need of new prescriptions/fiscal orders and are unable to access their prescriber(s), they should be advised to check with an urgent care or walk-in center to determine if they can provide new prescriptions. Members should be directed to the emergency department **only** if they have a medical emergency.
- ❖ If the pharmacy provider is unable to verify the Medicaid member's eligibility the member's NYS Medicaid card will suffice as eligibility verification. If the member does not have their NYS Medicaid card, call Medicaid member's local district office with member's name, date of birth and social security number to verify eligibility, and obtain the member's Medicaid identification number.
- ❖ If the Medicaid member also has a primary insurer but that insurer denies reimbursement for an early fill, NYS Medicaid will reimburse the claim. The pharmacy is advised to bill NYS Medicaid by entering in the **NCPDP FIELD 308-C8 OTHER COVERAGE CODE = 03** - Other Coverage Billed, claim not covered.
- ❖ If a prescriber cannot be reached for **prescriptions** requiring a Prior Authorizations (PA) the pharmacy can call 1-877-309-9493 to obtain a prior authorization for up to a 30 day emergency supply of the medication.
- ❖ Emergency **medical supply** items should be submitted by 0442 category of service (DME) providers using the Professional format (837P or HCFA 1500) with appropriate Emergency indicator to bypass prior authorization requirements during any declared state of emergency. (*On Professional format 837P loop 2400, segment SV109 – Emergency Code enter "Y"; on HCFA 1500 check box for "YES" in field 16A – Emergency Related*). For questions contact CSC at 1-800-343-9000.
- ❖ Early fills for members that have lost medications as a result of Hurricane Sandy will be allowed. An early fill response will be returned when a prescription claim is transmitted prior to the date when 75 percent of the previous supply would have been used if taken according to the prescriber's directions. During the State of Emergency, a pharmacy can override edit 01642 "Early Fill Overuse" denial at the point of sale by using the following combination:
 - **NCPDP FIELD 439-E4 REASON FOR SERVICE CODE AD** = Additional Drug Needed
 - **NCPDP FIELD 420-DK SUBMISSION CLARIFICATION CODE 07** = Medically Necessary - *use to indicate the service is provided as a result of Immediate Urgent Care or Emergency.*
- ❖ The New York State Education Department and Board of Pharmacy has also provided guidance to pharmacies for emergency access to prescription medications. **See New York State Education and Board of Pharmacy General Suggestions.**

- ❖ Pharmacies damaged by fire, flood or other disaster are required to notify the New York State Education Department and Board of Pharmacy of this and/or the loss of their records and pharmacy stock. This notification to the State Education Department will meet requirements for Medicaid and the Office of the Medicaid Inspector General (OMIG). Due to the large number of pharmacies with flooding and damage, notification by email (pharmbd@mail.nysed.gov) is sufficient for State Education Department purposes.

- ❖ If a member presents no evidence of a **non-controlled** substance and states they are in need of maintenance medication(s) or medical supplies, using responsible professional judgment, the pharmacist may provide a limited quantity, again at the discretion of the pharmacist as directed by the New York State Education Department and Board of Pharmacy. Use the following combination(s) when submitting these claims:
 - **NCPDP FIELD 420-DK SUBMISSION CLARIFICATION CODE 07** = Medically Necessary - *use to indicate the service is provided as a result of Immediate Urgent Care or Emergency. – and -*
 - **DDDDDDDD** in lieu of the prescription serial number for prescriptions

****This guidance will only be in effect until the State of Emergency has ended.***