

Pharmacy Update

December 2022

Medicaid Pharmacy Billing Guidance - Exceptions for Non-Enrolled Prescribers

Empire BlueCross BlueShield HealthPlus (Empire)

RXBIN: 020107
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RXGRP: WKKA

The New York State Medicaid program requires enrollment of all licensed prescribers and pharmacies who serve Medicaid members, including prescribing practitioners identified on pharmacy claims per the Centers for Medicare and Medicaid Services (CMS) and federal regulations. However, under the Medicaid Provider Enrollment Compendium (MPEC) found here: www.medicaid.gov/medicaid/program-integrity/affordable-care-act-program-integrity-provisions/index.html, there are two (2) exceptions to the provider enrollment requirement that are allowed:

1. Interns, Residents, and Foreign Physicians in Training

Pharmacies will receive **Reject 889 <<Prescriber Not Enrolled in State Medicaid Program>>** for prescriptions written by Interns, Residents, and Foreign Physicians in training.

Submission Clarification Code (SCC) '55' can be used to override Reject 889*

2. Out-of-State (OOS) Licensed Prescribers that are treating Medicaid Members for a single instance of emergency care within 180 days. These prescribers need to be either enrolled in Medicare with an "approved" status or enrolled in their own state's Medicaid plan.

Pharmacies will receive **Reject 889 <<Prescriber Not Enrolled in State Medicaid Program>>** for prescriptions written by OOS licensed prescribers.

Submission Clarification Code (SCC) '55' can be used to override Reject 889*

***Please note that overrides are subject to regular audit for appropriateness.**

Please Note:

- Pharmacists should document the enrollment status of the OOS Licensed Prescriber in Medicare or Medicaid in their own state and the circumstance in which the claim qualifies for a single instance of emergency medical care as noted above. **Please note the documentation submitted for these claims are subject to audit.**
- Pharmacists should use their professional judgement when using the overrides according to the above policy, prescriber's information at hand, and member history available. Pharmacists should contact **Empire** directly for claims that do not meet the exceptions outlined above.

This update applies to:
All Network Pharmacies

State(s):
New York

Line of Business:
Medicaid

Pharmacy Inquiries:
If you have questions, call the Pharmacy Help Desk number provided in the claim response or **1-833-252-0328** if one is not provided.

Payer Sheets:
For additional claim processing information, refer to the CVS Caremark Payer Sheets at www.caremark.com/pharminfo > NCPDP Payer Sheets.

* CVS is an independent company providing pharmacy services on behalf of Empire BlueCross BlueShield HealthPlus. CVS Caremark® is an independent company providing services to IngenioRx. Pharmacy network participation varies by plan.

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Questions:

All questions regarding this policy can be directed to the **Pharmacy Help Desk at 1-833-252-0328.**

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