



To: Utah Medicaid Pharmacy Providers

Notice: New Medicaid POS System Implementation

Goold Health Systems will implement the new Pharmacy Claims Point-of-Sale (POS) system for Utah Medicaid, which includes supporting NCPDP vD.0 on February 20, 2012. In order to deploy the new system and incorporate the new transaction standard, a **system downtime** is scheduled for:

Friday, February 17th, 5:00 p.m. MST to Monday, February 20th, 6:00 a.m. MST

No pharmacy claims will be processed by Medicaid on February 18 and 19, 2012. Please request that Medicaid members present their Medicaid card prior to providing services during the system downtime.

The new Utah Medicaid BIN/PCN will be:

NEW BIN	NEW PCN	OLD BIN	OLD PCN	Plan Name	Comments
015855	UTPOP	610438	<i>Not Used</i>	Utah Medicaid	Pharmacy Claims Only

Utah Medicaid will continue to allow NCPDP v5.1 claims for a short grace period on this new system. We encourage pharmacies to expedite transition to the new vD.0 standard. To download a copy of the Utah Medicaid NCPDP vD.0 and v5.1 payer sheets, please visit http://www.ghsinc.com/payer_sheets.

Throughout the design and development of the new system, GHS and Utah Medicaid have identified some required changes to the system and related required claim fields. To help minimize disruption to the pharmacies and members, a brief high-level overview accompanies this announcement to outline new system processing rules.

Please review the following items for clarifications regarding changes that will be implemented with the new system and share the information with your coworkers and industry peers. These changes will be effective immediately once the new claims processor is operational.

Medicaid ID Submission:

Pharmacies must submit the member ID number that is on the member's eligibility card. All member ID numbers will start with a zero with the exception of the Baby Your Baby claims. Claims will reject if the ID number submitted does not match the eligibility number on file.

Date of Birth:

Claims will reject if the date of birth submitted does not match what is on the eligibility file. For incorrect date of births, the member must contact their eligibility case worker for assistance.

Rejection Messages:

For claims that reject, the messaging back to pharmacies will be standard NCPDP messaging. Utah specific reject messaging will no longer be used after February 17th.

Preferred Drug List/Formulary:

Utah Medicaid's Preferred Drug List (PDL) was current as of February 15, 2012 and will be adhered to with the implementation of the new pharmacy POS system. The generic mandatory requirement will still be enforced. A select few brand name medications (with generics available) will be covered as preferred products. The PDL can be viewed at:

<http://health.utah.gov/medicaid/pharmacy/PDL/directory.php>.

With the implementation of the new system, existing pharmacy program policies will continue to be enforced. The new POS will allow Utah Medicaid to better enforce these policies. Examples include, but are not limited to, the following:

- Orally Disintegrating Tablet (ODT) formulations are not covered for **Non-Traditional and PCN** members.
- Over-the-Counter (OTC) medications have limited coverage for **Nursing Home, Traditional, Non-Traditional and PCN** members. Please refer to the OTC medication list for a list of covered products at:
<http://health.utah.gov/medicaid/pharmacy/coverage/directory.php>.
- Claims for multiple ingredients must be sent as a compound (multi-ingredient) claim and not as separate transactions.

Prior Authorizations:

Once a prior authorization (PA) has been given for a specific medication for a member, a PA number is not required to be sent by the pharmacy on the claims submission. Additionally, once approved, the member can receive the drug through any pharmacy provided that they are not in a lock-in or restriction program.

Even though PAs will not be pharmacy specific, they will be NDC specific. The PA Help Desk should be contacted for any PA claim rejections at 1-800-662-9651; Option 3, Option 3 and Option 2.

Production Changes

Date of Service: Now a required field in both NCPDP v5.1 and vD.0. The Date of Service submitted must be within the last year.

Ingredient Cost Submitted: Now a required field in both NCPDP v5.1 and vD.0. The amount submitted in this field will be included in the price calculations in addition to amounts currently utilized.

Prescription Payment Cap: A new prescription payment cap has been implemented. Any claim that exceeds the \$15,000 payment cap will be rejected with Reject code 78 and the following message: "Claim Exceeds {\$15,000}, please call POS Helpdesk". The POS Helpdesk staff will review the claim for payment.

Part B Crossover Claims: Will now follow the NCPDP D.0 Coordination of Benefits (COB) standard requirements.

72-Hour Overrides: Pharmacies must submit Prior Authorization Type Code of '2' and Prior Authorization Number Submitted of '72' to initiate a 72-hour override.

New Pharmacy PA Fax Number: With the implementation of the new Pharmacy POS, the fax number for requesting pharmacy prior authorizations will change. Effective Friday, February 17, 2012 at 5 pm the old fax number will no longer accept faxes. Beginning Sunday, February 19, 2012 prior authorization requests can be faxed to the new PA fax line at **855-828-4992**.

Please note that requests sent to the old fax number after the switch will not be received or processed.

We understand that change can be difficult and disruptive at times. We look forward to providing you with reliable and consistent pharmacy claims processing services on behalf of Utah Medicaid that will ultimately benefit both the stores and members. Thank you for your patience and cooperation.