

# *OVHA Pharmacy Bulletin*

Keeping our Pharmacies Current with Policy Changes and Alerts

<http://www.state.vt.us/ProviderPharmacyServices.cfm>

Volume 1

December 2006

## NEW MONTHLY NEWSLETTER PROVIDES ANOTHER VEHICLE FOR COMMUNICATION

**Please look for the *GREEN* newsletter in your mail twice monthly!**

To submit questions or suggest topics send an email to: ***OVHA-PH@ahs.state.vt.us***

## CLAIMS PROCESSING UPDATES

- **IMPORTANT! PCN (Processor Control Number) ERROR POSES AS ELIGIBILITY ERROR**

The most common claims processing issue experienced this year is a reject caused by submitting a claim to the incorrect PCN. Messaging will likely indicate that the member's coverage is terminated. However, the member may simply have become eligible for Medicare and become enrolled in a Part D wrap / VPharm coverage.

- The correct PCNs to use are as follows:

- VTM: Traditional Medicaid members without Medicare Part D coverage
- VTD: Dual Eligibles and VPharm members with Medicare Part D primary coverage

Note: If a claim rejects indicating that a member's coverage terminated, and you believe the member is currently an eligible member, try processing the claim to the other PCN.

- **DUR OVERRIDE PROCESSING (NCPDP Reject Code 88)**

Effective immediately, when a claim is rejected for a DUR edit, pharmacies may override the denial by submitting the appropriate DUR Reason for Service, Professional Service, and Result of Service codes.

Enclosed you will find a chart that details the Professional Service and Result of Service codes that will override a claim that has been denied for Drug-to-Drug Interaction, Ingredient Duplication and/or Therapeutic Duplication. Note that the designated Professional Service Code must accompany the appropriate Result of Service code as indicated in the chart to allow the override.

- **EARLY REFILL OVERRIDES (NCPDP Reject Code 79)**

The process for overriding claim rejections for early refill has not changed:

- 1) Enter the appropriate Submission Clarification Code (see chart next page for acceptable options)
- 2) In the Prior Authorization (PA) type field enter "01".
- 3) In the PA number field enter "4". (*Depending on your software, you may need to add up to ten leading or trailing zeros in the PA number field.*)

Note: A medication that is filled early with the same prescription number will generate an early refill reject 79 explained here. The same medication filled with a prescription number different from the previous fill will generate a DUR reject 88 with DUR reason for service code "ID – ingredient duplication" explained above.

Enclosed you will find a chart that details the Submission Clarification Codes and descriptions.

***OVHA requires that pharmacies use the Submission Clarification Code when overriding the early refill edit and MedMetrics will audit for compliance to this policy.***

# OVHA Pharmacy Bulletin

Keeping our Pharmacies Current with Policy Changes and Alerts

<http://www.state.vt.us/ProviderPharmacyServices.cfm>

## **DUR REJECT OVERRIDE PROCESSING (NCPDP Reject Code 88)**

The valid DUR Reason for Service Codes for Vermont Medicaid are:

- DD - Drug-Drug Interaction
- ID - Ingredient Duplication
- TD - Therapeutic Duplication

The only acceptable Professional Service Codes are:

- MR – Medication Review
- M0 – Prescriber Consulted
- R0 – Pharmacist Consulted Other

Please note that the designated Professional Service Code must accompany the appropriate Result of Service code as indicated below to allow the override:

DUR REASON FOR SERVICE (Conflict)	PROFESSIONAL SERVICE CODE (Intervention)		RESULT OF SERVICE CODE (Outcome)	
	CODE	DESCRIPTION	CODE	DESCRIPTION
DD, ID, TD	MR	Medication review	1B	Filled prescription as is
	M0	Prescriber consulted		
	R0	Consulted other		
	M0	Prescriber consulted	1C	Filled with different dose
	R0	Consulted other		
	MR	Medication review	1D	Filled with different directions
	M0	Prescriber consulted		
	R0	Consulted other		
	MR	Medication review	3E	Therapy changed
	M0	Prescriber consulted		
	R0	Consulted other		

## **EARLY REFILL REJECT OVERRIDE PROCESSING (NCPDP Reject Code 79)**

The valid Submission Clarification Codes for Vermont Medicaid are:

Submission Clarification Code	Description	Comments
03	Vacation Supply	
04	Lost Prescription	
05	Therapy	Use when prescriber changes dose
06	Starter Dose	
07	Medically Necessary	