



State of New Mexico  
Medical Assistance Program Manual  
**Supplement**



**DATE: July 28, 2005**

**NUMBER: 05-02**

**TO:** ALL PHARMACY PROVIDERS  
**FROM:** CAROLYN INGRAM, DIRECTOR  
MEDICAL ASSISTANCE DIVISION  
**BY:** CYNTHIA WILSON, BENEFITS BUREAU  
**SUBJECT: PREFERRED DRUG LIST IMPLEMENTATION FOR NATIVE AMERICANS**

Beginning **August 1, 2005**, non-SALUD Medicaid recipients who are Native American (American Indian), will be transitioned into the NMRx preferred drug list (PDL) program. The NMRx program is administered by Presbyterian Health Plan.

- The PDL **WILL** apply to prescriptions filled outside IHS/Tribal 638 facilities. These claims should be submitted to Presbyterian's claims processor.
- The PDL **WILL NOT** be applied to Indian Health Service (IHS) and Tribal 638 pharmacies since they have their own P&T committees and formularies. IHS and Tribal pharmacies should continue to submit their claims to the Medicaid fiscal agent, ACS.
- All Medicaid recipients (including Native Americans) who have been approved for stays in ICF-MR or nursing facilities, who are eligible for family planning benefits, or who are pending enrollment in SALUD!, will continue to have their pharmacy needs provided directly by the Medicaid fee-for-service program and not through NMRx.

**Overview - When a Medicaid client has been enrolled in the NMR<sub>x</sub> Pharmacy PDL Plan:**

- The recipient will receive a NMRx pharmacy card from Presbyterian Health Plan.
- The client's prescriptions will be subject to the PDL, quantity limits, medical exception requirements, and utilization controls of NMRx.
- The pharmacy will submit claims directly to the Presbyterian Health Plan's claims processor and will be paid by them. Questions on denials, payments, and policies will be handled by Presbyterian Health Plan. **Call 1-888-923-5757, option 3.**

**Pharmacy Billing – All Presbyterian pharmacy claims will be submitted to bin #: 610593 and group PHS.**

Claim processing will require the claim to be submitted using the patient ID number found on the Presbyterian Health Plan NMRx pharmacy card, **OR** with the member's 9 digit **social security number plus 01**.

**Transitioning Clients to the PDL – To assure a smooth transition:**

- Presbyterian Health Plan will make every effort to grant a 60-day grace period to transition the non-PDL item by issuing an automatic pharmacy exception.
- The 60-day grace period will NOT apply to:
  - ◆ Zyrtec, Clarinex or Allegra, where the preferred agent is loratadine OTC.
  - ◆ Nutritional supplements, diapers, non-PDL OTC's and brand medically necessary prescriptions.
- Presbyterian will send a letter to clients known to be taking a medication that is not on the PDL asking them to contact the prescriber to have the prescription changed.

- The 60-day grace period is only to transition the patient from an existing medication to a PDL medication. After the 60-day period, a claim will be denied for a non-PDL item without a pharmacy exception.
- Presbyterian Health Plan will consider medical exceptions for items not on the PDL, but will approve them only when medically necessary as determined by the information supplied by the prescriber. The request must be made on the appropriate form with the necessary documentation from the prescriber. See “Procedures for Prescriber” below.

### **Access to PDL**

- Internet: <http://www.phs.org/facilities/pharmacy/formulary.shtml>. Scroll down to “State NMRx Pharmacy Program”.
- Handheld device: FREE download available at [www2.epocrates.com](http://www2.epocrates.com), >> Get ePocrates Rx >> Register New Account >> Select Formulary.
- Pocket Formulary: To obtain a hard copy booklet, contact Presbyterian Health Plan at 1-888-923-5757, option 3.

### **Procedures for the Pharmacist – If a pharmacy claim is denied:**

- A message will be returned describing the specific action(s) that needs to be taken (e.g., step therapy requirement, non-PDL drug, quantity limit applies, prior authorization required, etc.).
- The pharmacist should notify the recipient that the drug prescribed requires additional action and/or information before the claim can be paid.
- Contact the prescriber to discuss the preferred drug options or other necessary action.

### **Procedures for the Prescriber – Prescribers DO NOT need to be a participating provider with Presbyterian Health Plan to prescribe drug items. If the prescriber wishes to request authorization for an item not on the PDL, the prescriber must request a “pharmacy exception”:**

- The pharmacy exception process form may be downloaded from Presbyterian Health Plan’s website at: <http://www.phs.org/resources/documents/exception.pdf>
- The pharmacy exception form may also be obtained by calling Presbyterian Health Plan at 1-888-923-5757, option 3.
- The prescriber must complete the form with all requested information and fax it to Presbyterian Health Plan at (505) 923-5540.

Medical exceptions will be issued by Presbyterian Health Plan, NOT by the Medical Assistance Division.

### **Utilization Controls - The Pharmacy PDL Administrator will enforce such utilization controls such as:**

- Require medical exceptions for “Dispense As Written” requests when generic items are available, non-PDL items, oral nutritional supplements and disposable diapers.
- Apply quantity limits, dose optimization, step therapy edits, and prescriber specialty for some items.
- Require 14-day initial supply and 90-day maintenance supply for certain drugs.
- Require tablet splitting for Lexapro, Celexa, Zoloft and Paxil and their generics. The pharmacy will be reimbursed to pre-split the tablets. The client will not be required to split tablets.

Information on these and other utilization controls may be found on the page for the NMR<sub>x</sub> Pharmacy PDL Plan at <http://www.phs.org/facilities/pharmacy/formulary.shtml#therapeutic>.

### **Reimbursement – The dispensing fee for drug items under this plan will be \$3.65.**

Maximum amounts for multi-source drugs will also apply, calculated by examining prices of therapeutically equivalent generic items. Pharmacy providers may provide input to Presbyterian Health Plan when an established upper limit for reimbursement does not seem reasonable.

### **Reminder on Behavioral Health Pharmacy Claims:**

- As a reminder, pharmacies must bill Medicaid prescriptions that are written by a behavioral health practitioner to ValueOptions by using Bin #: 0074117, Processor Control Number: RXI, and Plan Code: VONM. For questions and assistance in billing to ValueOptions, pharmacies may call the ValueOption Pharmacy Help Desk at 1-888-235-1288.
- To become a provider for ValueOptions, pharmacies must enroll by calling (602) 685-3964.

**Questions on the PDL and pharmacy policies will be handled by Presbyterian Health Plan. Call Presbyterian Health Plan at 1-888-923-5757. Please state that your question concerns the Pharmacy PDL Plan.**

If you need to contact the Medical Assistance Division, call (505) 827-3165. We appreciate your continued participation in the Medicaid program. We believe that with your help we can make this transition successful for everyone. Thank you.