

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Health Care Finance



Office of the Senior Deputy Director/Medicaid Director

Transmittal # 20-38

TO: District of Columbia Medicaid Pharmacy Providers & Prescribers

FROM: Melisa Byrd
Senior Deputy Director and State Medicaid Director

DATE: October 23, 2020

SUBJECT: 72-hour (3-day) Emergency Supply of Medication While a Prior Authorization (PA) Decision Is Being Finalized

Purpose

The purpose of the transmittal is to inform Medicaid pharmacy providers and prescribers that the District’s Medicaid Fee for Service (FFS) and Medicaid Managed Care Organizations (MCOs) – AmeriHealth Caritas DC, CareFirst BlueCross BlueShield Community Health Plan DC, Health Services for Children with Special Needs (HSCSN), and MedStar Family Choice DC – authorize in-network pharmacy providers to dispense a 72-hour (3-day) emergency supply of medication(s) (determined by the pharmacist) while a prior authorization (PA) decision is being finalized. A 72-hour (3-day) emergency supply of medication is available when medication must be started or to prevent interruption in treatment when a PA is required.

Information for Pharmacy Providers on dispensing a 72-hour (3-day) emergency supply

- The rule applies to any submitted pharmacy drug claim that results in a NCPDP Reject Code: 75 “Prior Authorization (PA) Required” and any drug(s) that is affected by clinical or PA edits and requires prior approval from the prescriber.
- If the prescriber cannot be reached or is unable to request the PA, the pharmacy should submit an emergency 72-hour prescription.
- Pharmacist should use his/her professional judgment regarding whether there is an immediate need every time the 72-hour option is used.
- The 72-hour emergency procedure should not be used for routine and continuous overrides.

- If the medication is a dosage form that prevents a 3-day supply from being dispensed, it is still permissible to indicate that the emergency prescription is a 3-day supply, and enter the full quantity dispensed. Dispense the minimum quantity as a 3-day supply. Examples include, but are not limited to, metered dose inhalers, nasal sprays, topical preparations and powders for reconstitution.
- Pharmacy claims requiring a PA will reject with the following code and messaging: 75 - Prior Authorization Required. Inform the Medicaid beneficiary, notify the prescriber that a PA is required, and contact the Pharmacy Benefit Manager (PBM) if needed. Follow the instructions in the PA error message and submit the indicated PA Type Code, Submission Clarification Code, and/or PA Auth Code if needed to obtain a paid claim for the 3-day emergency supply.

Contact

If you have any further questions, please contact the Division of Clinician, Pharmacy, and Acute Provider Services:

- Charlene Fairfax, Senior Pharmacist at (202) 442-9076 or charlene.fairfax@dc.gov;
- Gidey Amare, Pharmacist at (202) 442-5952 or gidey.amare@dc.gov; or
- Jonas Terry, Pharmacist at (202) 478-1415 or jonas.terry@dc.gov

**DC Medicaid Health Plans
Pharmacy Benefit Managers
Claims Processing and Contact Information Effective 10/01/2020**

Health Plans	Pharmacy Benefit Manager	Claims Processing Information	Contact Information
Fee for Service	Magellan	RX BIN: 018407 Rx PCN: DCMC018407 Rx Grp: DCMEDICAID	PBM Call Center: 1-800-273-4962
AmeriHealth Caritas DC	PerformRx	Rx BIN: 019595 Rx PCN: 06280000 Rx Grp: (Not Required)	Medicaid Provider Services (PBM): 1-888-602-3741 Medicaid Enrollee Services: 1-888-452-3647 Alliance Provider Services: 1-888-987-5821

			Alliance Enrollee Services: 1-888-987-5806
CareFirst BlueCross BlueShield Community Health Plan DC	Abarca	RX BIN: 610674 Rx PCN: ABARCA Rx Grp: THPDC	Help Desk: 1-866-287-6156 Enrollee Service: 1-855-326-4831 or 202-821-1100
Health Services for Children with Special Needs (HSCSN)	CVS/Caremark	Rx BIN: 004336 Rx PCN: Caremark or ADV Rx Grp: RX6534	CVS Customer Care: 1-866-885-4944 HSCSN Customer Care: 202-467-2737 or 1-866-937-4549
MedStar Family Choice DC	CVS/Caremark	Rx BIN: 004336 Rx PCN: MCAIDADV Rx Grp: RX0610	PBM Help Desk: 1-855-798-4244 (Preferred) or 1-800-966- 5772 Enrollee Services: 1 -888-404-3549

cc: Medical Society of the District of Columbia
DC Hospital Association
DC Primary Care Association
DC Health Care Association
DC Home Care Association
DC Behavioral Health Association
DC Coalition of Disability Service Providers