

# NYRx Helpful Hints for Pharmacies: Diabetic Testing Supplies

Items listed within the <u>NYRx Preferred Diabetic Supply Program Resource</u> **do not** require a prior authorization (PA) if submitted with the correct quantity, days' supply, and the required criteria is found in the member's Medicaid medical claim history at the time of pharmacy claim adjudication.

## **Diabetic Test Strips and Lancets**

NYRx coverage of preferred blood glucose test strips and lancets for members with diabetes aligns with Medicare Coverage of Diabetes Supplies.

Pharmacies must submit claims based on units per days' supply as follows:

- Members who use insulin: Maximum 300 test strips and lancets per 90-day supply
- Members who do not use insulin: Maximum 100 test strips and lancets per 90-day supply

## **Continuous Glucose Monitors and Disposable Insulin Pumps**

Continuous Glucose Monitors and Disposable Insulin Pumps should be billed at the pharmacy point-of-sale for the proper quantity and days' supply as outlined on the product label.

#### What Pharmacies Need to Do

The pharmacy should become familiar with the <u>NYRx Preferred Diabetic Supply Program</u>. When submitting claims for preferred diabetic supplies **do not** request a PA from the prescriber if the claim rejection states one of the following:

- Maximum Quantity Exceeded
- Early Fill Overuse
- · Recipient Ineligible on Service Date
- Refill Number Exceeds Maximum
- Therapeutic Duplication
- Client Has Medicare Part D or Client Has Other Insurance
  - o Coordination of Benefits Claim Processing
    - NYRx is always the payor of last resort and federal regulations require that all other available resources be used before NYRx considers payment.



• The following chart illustrates the appropriate value choices for the required field for each payer type:

Payer Type	339-6C (Other Payer ID Qualifier)	340-7C (Other Payer ID)	351-NP (Other Payer-Patient Responsibility Amount Qualifier)
Commercial Third Party Liability (TPL)	99	99	<b>01</b> , <b>04</b> , <b>05</b> , <b>06</b> , <b>07</b> , <b>09</b> , or <b>12</b>
Medicare Part B	05	Carrier #	<b>01</b> or <b>07</b>
Medicare C, Medicare Advantage, Medicare Manage Care	99	13	<b>01</b> , <b>04</b> , <b>05</b> , <b>06</b> , <b>07</b> , <b>09</b> , or <b>12</b>

• For questions about claim processing call eMedNY at 1-800-343-9000.

#### Resources

- NYRx Education & Outreach Website
- NYRx Preferred Diabetic Supply Program
- NYRx Preferred Diabetic Supply Program Resource

### **Contact Information**

The NYRx Education & Outreach Call Center is available by phone at 1-833-967-7310 or by email at <a href="https://nxeeogprimetherapeutics.com">NYRxEO@primetherapeutics.com</a> from 8:00 AM to 5:00 PM ET, Monday through Friday, excluding holidays.