



Department of Health

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Drug Coverage for New York State Medicaid Dual Eligible Members

Effective October 22, 2020, Medicaid will implement claims editing that will ensure over-the-counter (OTC) insulin and legend (Rx only) drugs with available OTC drug substitutes are appropriately billed to Medicare Part D prescription drug plans and Medicare Advantage Prescription Drug (MAPD) plans.

As previously communicated in the [December 2013](#) and [June 2014 Medicaid Update](#) articles, “Change in Coverage of Barbiturates for Dual Eligible Population” and “Update on Drug Coverage for the Dual Eligible Population” respectively, coverage is available for **select prescription vitamins and OTC drugs** for New York State (NYS) Medicaid dual eligible members. Only Medicaid reimbursable drugs excluded by Medicare are covered for dual eligible members. Therefore, pharmacies should bill Medicare Part D and MAPD plans for OTC insulin and some OTC products which have a coverable legend drug substitute.

Providers submitting claims for such drugs will receive the NCPDP reject code of 41 with message “**Submit bill to other processor or primary payer.**” When a provider receives this message, the member has Medicare Part D coverage for drugs and the claim should be submitted to the plan. The pharmacy should resubmit the claim to Medicare using the legend alternative, obtaining a new prescription if appropriate.

Providers may find additional relevant information at the following links:

- https://www.health.ny.gov/health_care/medicaid/program/medicaid_transition/docs/medicare_exempt_drugs.pdf
- <https://www.medicare.gov/drug-coverage-part-d>
- <https://www.medicare.gov/coverage/prescription-drugs-outpatient>

For billing questions please contact the eMedNY Call center at 1-800-343-9000.

Questions regarding the policy can be directed to the Pharmacy line at 518-486-3209 or by email to ppno@health.ny.gov.