



EFFECTIVE JULY 6, 2023

PRIOR AUTHORIZATIONS FOR MEDICAL SUPPLIES

When the pharmacy benefit transition from Medicaid Managed Care to NYRx occurred on April 1, 2023, prior approval/authorization (PA) requirements for certain medical supplies were temporarily relaxed (i.e., claims were not denied) to ensure a smooth transition for members. During this period, NYSDOH monitored claims and performed outreach to assist providers in obtaining PAs for future claims.

Beginning July 6, 2023, medical supply claims without appropriate prior approval/authorization will be denied.

The full list of products requiring PAs are in sections 4.1 through 4.3 of the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Procedure Codes Manual
https://www.emedny.org/ProviderManuals/DME/PDFS/DME_Procedure_Codes.pdf

Procedure codes underlined in the manual require PA. Example: A4421 for ostomy supply.

HOW TO REQUEST PA FOR MEDICAL SUPPLIES

- Providers can request and review PAs online via ePACES <https://epaces.emedny.org>.
- Supporting documentation must be submitted through ePACES (uploaded or faxed) with the PA request.
- Determination for a PA is made within 21 days of NYSDOH's receipt of the request.

For ePACES instructions: <https://www.emedny.org/selfhelp/ePACES/ePACESRefSheets.aspx>

For pharmacy billing and ePACES technical support: Call eMedNY 1-800-343-9000.

Call Center Hours: Mon - Fri 7 AM – 10 PM. Sat – Sun 8:30 AM – 5:30 PM.

Note: PA may also be requested via paper form EMEDNY-361502. Instructions are in the DME PA Guidelines https://www.emedny.org/ProviderManuals/DME/PDFS/DME_PA_Guidelines.pdf

DISPENSING VALIDATION SYSTEM (DVS) AUTHORIZATIONS

NCPDP transactions using HCPCS codes will automatically check DVS for authorization and issue a number - no additional steps are necessary. The items will be approved if the claim meets dispensing criteria.

CONTINUOUS GLUCOSE MONITORING (CGM) SUPPLIES

For CGM products under the Preferred Diabetic Supply Program (PDSP), pharmacies must use claim type R (NCPDP) and NDC codes for reimbursement. HCPCS codes may only be used for products not listed in the PDSP (e.g., Medtronic's CGM).

ENTERAL PRODUCTS

When submitting claims for enteral products, providers must include a PA that was processed through the automated DiRAD system.

HOW TO REQUEST PA FOR ENTERAL PRODUCTS

- Option 1: Enteral Web Portal <https://medicaidentalportal.health.ny.gov/portal/>
- Option 2: Interactive Voice Response (IVR) system 1-866-211-1736

In section 4.2 of the DMEPOS manual, products marked with an asterisk (*) require prior authorization via the Enteral Web Portal or IVR.

https://www.emedny.org/ProviderManuals/DME/PDFS/DME_Procedure_Codes.pdf

The fiscal order, including the authorization number, is sent to the dispensing provider who uses the portal or IVR to verify the information and submit the correct billing code.

- Enteral formula is billed using the HCPCS B series codes on either a Pharmacy (NCPDP) or a DMEPOS supply (Professional) claim.
- Formula is reimbursed by caloric units. One caloric unit equals 100 calories.
- Worksheets are in the DMEPOS manual to assist providers in using the automated approval systems.
 - Prescriber Worksheet: https://www.emedny.org/ProviderManuals/communications/Prescriber_Worksheet_Instructions.pdf
 - Dispenser Worksheet: <https://www.emedny.org/ProviderManuals/communications/Dispenser%20Worksheet.pdf>
- Trainings for the portal and IVR are available at <https://www.emedny.org/training>
 - Enteral Web Portal <https://youtu.be/VGcOownLWTk>
 - IVR <https://youtu.be/YhgoSvMEn1o>

NEED HELP?

Resource	For questions and guidance about:
Bureau of Medical Review 1-800-342-3005, option 1 OHIPMEDPA@health.ny.gov	DMEPOS supplies policy, prior authorizations, or DIRAD assistance
NYRx, Medicaid Pharmacy Program (518) 486-3209 NYRx@health.ny.gov	Preferred Drug Program (PDP) and Preferred Diabetic Supply Program (PDSP)
Office of Health Insurance Programs (OHIP) Policy Unit (518) 473-2160 pffs@health.ny.gov	CGM coverage guidelines
eMedNY 1-800-343-9000 www.emedny.org	ePACES, claims billing, provider enrollment, and provider training materials
Medicaid Update NYRx Special Edition Part 3 (March 2023) https://www.health.ny.gov/health_care/medicaid/program/update/2023/docs/mu_no4_mar23_speced_pr.pdf	Billing and PA for medical supplies and enteral products



NYRx Medicaid Providers Dispense Brand Name Drug when Less Expensive than Generic Program

Effective **7/13/2023**, the following changes will be made to the Dispense Brand Name Drug When Less Expensive Than the Generic Program:

- **Dexilant, Oseni, Protonix suspension, Pylera, Vascepa** and **Viibryd** will be **ADDED** to the program

In conformance with State Education Law, which intends patients receive the lower cost drug alternative, brand name drugs included in this program:

- **Do not require ‘Dispense as Written’ (DAW) or ‘Brand Medically Necessary’ on the prescription.**
- Have a generic copayment.
- Are paid at the Brand Name Drug reimbursement rate or usual and customary price, whichever is lower (SMAC/FUL are not applied).
- Do not require a new prescription if the drug is removed from this program.

IMPORTANT BILLING INFORMATION

Pursuant to this program, prescription claims submitted to the Medicaid program **do not require** the submission of Dispense as Written/Product Selection Code of ‘1’; **Pharmacies should submit DAW code 9** (Substitution Allowed by Prescriber but Plan Requests Brand). Pharmacies will receive a NCPDP reject response of “22” which means missing/invalid DAW code if other DAW codes are submitted. The only exception to this, is DAW code 1 and “*Brand Medically Necessary*” on the prescription.

List of Brand Name Drugs included in this program (updated 6/28/2023)

Advair Diskus	Epipen, Epipen JR	Protonix suspension
Alphagan P 0.15%	Firvanq	Pylera
Amitiza	Flovent HFA	Rapamune solution
Apriso	Glumetza	Renvela tablet
Azopt	Hetlioz	Restasis
Bethkis	Kazano	Retin-A cream
Cellcept suspension	Kitabis Pak	Symbicort
Ciprodex	Lialda	Tegretol suspension
Combigan	Nesina	Tegretol XR
Concerta	Nexavar	Trileptal suspension
Copaxone 20mg	Nuvaring	Vascepa
Daytrana	Oseni	Ventolin HFA
Depakote Sprinkle	Pentasa	Viibryd
Dexilant	Pradaxa	Zegerid

Drugs in this program may be subject to prior authorization requirements of other pharmacy programs. This list is subject to change.



NYRx Medicaid Pharmacy Prior Authorization Programs Update

On May 18, 2023, the New York State Medicaid Drug Utilization Review (DUR) Board recommended changes to the Medicaid pharmacy prior authorization programs. The Commissioner of Health has reviewed the recommendations of the Board and has approved changes to the Preferred Drug Program (PDP) within the fee-for-service (FFS) pharmacy program.

Effective **August 3, 2023**, prior authorization (PA) requirements will change for some drugs in the following PDP classes:

- Angiotensin Receptor Blockers
- Angiotensin Receptor Blocker Combinations
- Triglyceride Lowering Agents
- Anticonvulsants, Other
- Selective Serotonin Reuptake Inhibitors
- Psoriasis Agents, Topical
- Dipeptidyl Peptidase-4 (DPP-4) Inhibitors
- Glucagon Agents
- Glucagon-like Peptide-1 (GLP-1) Agonists
- Proton Pump Inhibitors
- Erythropoiesis Stimulating Agents
- Immunosuppressives, Oral
- Antihistamines, Ophthalmic
- Urinary Tract Antispasmodics
- Anticholinergic / COPD Agents
- Antihistamines, Second Generation
- Beta2 Adrenergic Agents, Inhaled, Long Acting

For more detailed information on the DUR Board, please refer to:

http://www.health.ny.gov/health_care/medicaid/program/dur/index.htm

For the most up-to-date information on NYRx, the Medicaid Pharmacy Prior Authorization (PA) Programs please refer to the NYRx Preferred Drug List (PDL) found at

https://newyork.fhsc.com/downloads/providers/NYRx_PDP_PDL.pdf This document contains a listing of drugs/classes that may be subject to NYRx Pharmacy Program specific criteria. Not all agents covered by NYRx are listed on the PDL. For a complete list of drugs covered by NYRx, visit the Medicaid Pharmacy List of Reimbursable Drugs found at <https://www.emedny.org/info/formfile.aspx>

To obtain a PA, please contact the clinical call center at 1-877-309-9493. The clinical call center is available 24 hours per day, 7 days per week with pharmacy technicians and pharmacists who will work prescribers or their authorized agent, to quickly obtain a PA.

Additional information is available at the following websites:

NYRx, The Medicaid Pharmacy Program

https://www.health.ny.gov/health_care/medicaid/program/pharmacy.htm and

<http://newyork.fhsc.com>

Medicaid practitioner administered drug policy and Medicaid fee-for service clinical criteria worksheets

https://www.health.ny.gov/health_care/medicaid/program/practitioner_administered/ffs_practitioner_administer.htm

eMedNY <http://www.eMedNY.org>

NYS DOH <https://www.health.ny.gov>