

Medicare Modernization Act

DHS MMA Project

Date: April 28, 2006

To: OMAP Pharmacy Providers

From: Jane-ellen Weidanz
MMA Project Manager

Subject: **Oregon DHS Rx Overrides Extended**

The Governor has directed the Department to extend the temporary payment authorization of Medicare Part D drugs. The Governor recognizes that pharmacies will be working extensively with the general Medicare population as the May 15, 2006, enrollment deadline approaches. Extending the state emergency payment system for dual eligible individuals should help alleviate some of the problems pharmacies and clients face.

Because of the ongoing problems that dual eligible clients are experiencing and the coming deadline, the DHS override system will continue through at least May 31, 2006. DHS will continue to work with the Centers for Medicare and Medicaid Services to fix systemic problems and will continue our work with prescription drug plans to resolve specific clients' problems.

Governor Kulongoski is aware of the massive, cooperative effort it has taken to help Medicare beneficiaries access their new prescription benefits. Thank you to all our pharmacy providers for your patience and flexibility as we try to make this transition as smooth as possible for our dual eligible clients.

Please review the process in place:

Override Criteria

1. Run an "E1" query to determine if the client is enrolled in a Part D plan;
2. For individuals enrolled in a Medicare Part D plan, try to resolve the issue directly with the plan;
3. If the client is not enrolled in a Medicare Part D plan, bill Wellpoint/Anthem, Medicare's point-of-sale (POS) solution; and

Medicare Modernization Act

DHS MMA Project

4. If you are unable to determine enrollment in Part D, you cannot bill Wellpoint, or the plan is telling you to charge copayments in excess of \$5 per drug for dual eligible individuals, please call the DHS Medicare Hotline at 1-877-585-0007.

POS Overrides—For individuals not enrolled in a Medicare plan

- If these criteria are met, DHS will authorize a point-of-sale override for those clients who did not get enrolled.
- The override allows the pharmacy to bill a one-month supply for a client.
- DHS **MUST** authorize **each** POS override for each client each day.
- DHS will provide an override code to bill the Office of Medical Assistance Programs (OMAP).

Paper Claim Overrides—For those being charged incorrect copayments

- Again, all criteria **MUST** be met in order for DHS to authorize payment.
- The pharmacy calls the DHS Medicare Hotline when the Part D plan tells pharmacies to charge copayments in excess of \$5 per drug.
- DHS will complete a paper claim and submit the claim on behalf of the pharmacy to OMAP as a secondary claim.
- DHS will provide the pharmacy a 5-digit authorization number and a faxed copy of the paper claim.
- DHS will process claims daily, and checks are sent weekly.

NOTE: These overrides are only used for dual eligible clients (people who have both Medicare and Medicaid). An override will be considered *unauthorized* if used for Medicaid-only or Medicare-only clients. Also, the override must be used for Medicare Part D covered drugs only, otherwise it will be considered unauthorized.

****For questions, please call the DHS Medicare Hotline at 1-877-585-0007.****

- *See also OAR 410-121-0149, Medicaid Temporary Prescription Drug Assistance for Fully Dual Eligible Medicare Part D Clients.*