

**Pharmacy Provider Training** 

Texas Managed Care Medicaid STAR and CHIP Programs

Question and Answers

### How often are price increases updated in your system and is Navitus current with its price updates?

Navitus subscribes to Medi-Span drug information reporting services and updates our systems weekly, typically every Tuesday.

# Are pharmacies allowed to obtain a login to the online portal to submit PAs electronically instead of paper PA forms?

Navitus implements an electronic PA process for some clinical edits and for non-preferred medications via the Point of Sale. If the necessary information from the claim isn't available or does not meet the criteria for an automatic approval, the PA forms are available on the Navitus website. All PA forms must be submitted by the patient's physician via fax or phone.

#### Are there NPI specific logins for each pharmacy?

Each pharmacy must utilize their NPI/NCPDP number assigned to the actual pharmacy location.

#### Which is the best formulary list to look up drugs that would be covered?

All three referenced websites listed below provide accurate information on the formulary and can be used to access formulary information.

- HHSC Vendor Drug Website www.txvendordrug.com
- Epocrates www.epocrates.com
- Navitus.com www.navitus.com

### Are there any plans for updating MAC prices more often since the generic prices have significantly increased?

Navitus reviews and updates its Maximum Allowable Cost (MAC) list of drugs and associated unit prices monthly. Navitus continually monitors our sources of drug acquisition prices. If an event occurs between MAC updates for a certain drug or drugs that significantly increases or decreases the acquisition cost of such drug, Navitus will adjust the MAC between updates.

#### Can unit of use bottles be broken or may whole bottles be dispensed?

This will depend on the specific product being dispensed. If there are questions on a specific NDC, please contact Navitus Texas Provider Hotline at 877-908-6023.

### Can a pharmacy call for a prior authorization if the unit of use exceeds the prescribed days' supply according to prescription? If not, then how does a pharmacy handle this issue?

This would not require a prior authorization, but similar to the previous question, this may depend on the specific product being dispensed. If the unit of use exceeds the prescribed days' supply according to the prescription for an unbreakable package (e.g., cefdinir suspension is available in 60ml and 100ml bottles, but the prescription directions require 70ml), the pharmacy may call Navitus Texas Provider Hotline at 877-908-6023 for an override. Customer Service may need to reach out to a clinical pharmacist to verify the dosing or offer other dosing suggestions; however the override can be entered without a prior authorization.

### Could you explain the 72 hour procedure?

If a Prior Authorization is required and not on file, a rejection message will be returned to the pharmacy indicating that the prescriber should contact Navitus. If the prescribing provider cannot be reached, or is unable to request a prior authorization, the pharmacy should move forward with submitting an emergency 72-hour prescription claim.

Pharmacies are required to dispense a 72-hour emergency supply of prescription drugs for all drugs not on the preferred drug list if the denial is solely due to lack of prior authorization.

If the medication is a dosage form that prevents a three-day supply from being dispensed (e.g. an inhaler, eye or ear drops, or creams) it is permissible to indicate that the emergency prescription is a three-day supply, and enter the full quantity dispensed.

The requirement that the Member be given at least a 72-hour supply for a new medication does not apply when the dispensing pharmacist determines that the taking of the prescribed medication would jeopardize the health or safety of the Member (e.g. if a potential adverse event may occur - high dose for a child, severe drug-drug interaction). In such event, expects the pharmacist to make good faith efforts to contact the prescriber.

The 72-hour supply applies to drugs on the Texas HHSC Vendor Drug formulary and requires PA approval because it is considered: (1) a "NON-preferred" drug and/or (2) require a clinical edit PA. If a drug is NOT on the Texas HHSC Vendor Drug formulary, it is NOT a covered item; and therefore, the 72-hr supply does not apply.

This procedure should not be used for routine and continuous overrides.

#### For a 72-hr emergency prescription, pharmacies should submit the following information:

- "8" in "Prior Authorization Type Code" (Field 461-EU).
- "8Ø1" in "Prior Authorization Number Submitted" (Field 462-EV).
- "3" in "Days Supply" (Field 4Ø5-D5, in the Claim segment of the billing transaction).
- The quantity submitted in "Quantity Dispensed" (Field 442-E7) should not exceed the quantity necessary for a three-day supply according to the directions for administration given by the prescriber. If the medication is a dosage form that prevents a three-day supply from being dispensed, e.g., an inhaler, it is still permissible to indicate that the emergency prescription is a three-day supply, and enter the full quantity dispensed.

### With the increase in prescription drug prices, for example Depakote ER 500 mg generic, what are you doing to increase payment to the pharmacy?

Navitus reviews and updates its Maximum Allowable Cost list of drugs and associated unit prices monthly. Navitus continually monitors our sources of drug acquisition prices. If an event occurs between MAC updates for a certain drug or drugs that significantly increases or decreases the acquisition cost of such drug, Navitus will adjust the MAC between updates.

Navitus subscribes to Medi-Span drug information reporting services. Navitus updates its systems on a weekly schedule. If the product undergoes a price change that is reported to Medi-Span, we would anticipate that the published and reported AWP would also increase. The product would adjudicate according to the reimbursement rate schedule contained in your pharmacy agreement with Navitus.

#### What can we do about negative margin reimbursements on formulary drugs?

Navitus adjudicates and reimburses pharmacy providers based on the executed pharmacy agreement with the pharmacy provider. Navitus does not warrant that any specific claim for reimbursement will always produce positive margin.

#### Can you provide more details on what situations MAC overrides would be appropriate?

Navitus adjudicates and reimburses pharmacy providers based upon the executed pharmacy agreement with the pharmacy provider.

Navitus will review documentation provided by a pharmacy for specific claims where the pharmacy believes that the reimbursement for a MAC item is insufficient. Documentation required for such review is contained in the Navitus Pharmacy Handbook that is available in our pharmacy portal at www.navitus.com. Also available in our pharmacy portal is the Navitus Pricing Research Request Form that must accompany all such requests.

Please note that Navitus is not obligated to make any adjustments to the unit cost for a product on our MAC list in the event that our research indicates that the claim paid according to the contractual fee schedule.

## Can we get an override if we notice a more expensive brand drug is covered verses a less expensive generic?

Neither Navitus nor our MCOs determine the products on the Texas Medicaid PDL. The PDL is determined solely by HHSC Vendor Drug Program. Pharmacies may contact HHSC directly with any concerns regarding the placement of medications on the PDL.

What is the correct procedure when a rejection of "maximum days' supply exceeded" is returned in the rejection response for an unbreakable package size?

The pharmacy should contact Navitus Texas Provider Hotline at 877-908-6023 if there are questions related to "maximum day supply" rejections.

# Are there any plans to increase days' supply on MCO claims to 90 days for maintenance meds, instead of only 30 day supplies?

The 90 day supply maintenance medications are listed below. There are no current plans to expand on the list at this time.

ACEBUTOLOL   LABETALOL HCL     ALEURONATE SODIUM   LISINOPRIL     ALENDRONATE SODIUM   LISINOPRIL     ALLOPURINOL   LISINOPRIL     AMITRIPTLINE HCL   LITHIUM CARBONATE CAP     AMICOPINE BESYLATE   LITHIUM CARBONATE TAB     ATENOLOL/CHLORTHALIDONE   LOSARTAN     ATENOLOL/CHLORTHALIDONE   LOSARTAN     ATENOLOL/CHLORTHALIDONE   LOSARTAN     ATENOLOL/CHLORTHALIDONE   LOSARTAN     ATENOLOL/CHLORTHALIDONE   LOSARTAN     ATENOLOL/CHLORTHALIDONE   LOSARTAN     BACLOFEN   MEDROXYPROGESTERONE ACETA     BENAZAPRIL HCL/HCTZ   METFORMIN HCL     BENZTROPINE MESYLATE   METHYLDOPA     BISOPROLOL FUMARATE   METHYLDOPA     BISOPROLOL FUMARATE   METHYLDOPA     BISOPROLOL FUMARATE   METHYLDOPA     CAPTOPRIL   NORTRIPTYLINE     CAPTOPRIL   NORTRIPTYLINE     CAPTOPRIL   OXYBUTYNIN CHLORIDE     CARBAMAZEPINE   OXYBUTYNIN CHLORIDE     CARDAMATE   OXYBUTYNIN CHLORIDE CR     DIGOXIN   POTASSIUM CHLORIDE CR     DIGOXIN   POTASSIUM CHLORIDE ER     DOXAZO		
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CAPTOPRILNORTRIPTYLINECAPTOPRIL/HYDROCHLOROTHIAOMEPRAZOLECARBAMAZEPINEOXYBUTYNIN CHLORIDECARVEDILOLPAROXETINE HCLCITALOPRAM HYDROBROMIDEPHENYTOIN SODIUM EXTENDEDCLONIDINE HCLPOTASSIUM CHLORIDE CRDIGOXINPOTASSIUM CHLORIDE LIQUIDDOXAZOSIN MESYLATEPOTASSIUM CHLORIDE LIQUIDDOXAZOSIN MESYLATEPOTASSIUM CHLORIDE LIQUIDDOXAPIN HCLPRAVASTATIN SODIUMENALAPRIL MALEATEPROPRANOLOL HCLENALAPRIL MALEATEPROPRANOLOL HCLENALAPRIL MALEATE/HCTZQUINAPRIL HCLESTRADIOLRAMIPRIL HCLFAMOTIDINERANITIDINE HCL SYRUPFLUDROCORTISONE ACETATERANITIDINE HCL SYRUPFLUOXETINE HCLSERTRALINE HCLFOLIC ACIDSIMVASTATINFOSINOPRIL SODIUMSPIRONOLACTONE/HCTZGEMFIBROZILTERAZOSIN HCLGLIPIZIDETOPIRAMATEGLIPIZIDETOPIRAMATEGLIPIZIDETRAZODONE HCLGLIPIZIDE ERTRANDOLAPRILGLYBURIDE MICRONIZEDTRIAMTERENE/HYDROCHLOROTH CAPGUANFACINE HCLTRIAMTERENE/HYDROCHLOROTH TABHALOPERIDOLVALPROIC ACIDHYDROCHLOROTHIAZIDE TABVERAPAMIL ER TABHYDROCHLOROTHIAZIDE TABVERAPAMIL ER TABHYDROCHLOROUNE SULFATEVITAMIN DIMIPRAMINE HCLZONISAMIDE	BISOPROLOL FUMARATE/HCTZ	METOPROLOL TARTRATE
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GLYBURIDETRAZODONE HCLGLYBURIDE MICRONIZEDTRIAMTERENE/HYDROCHLOROTH CAPGUANFACINE HCLTRIAMTERENE/HYDROCHLOROTH TABHALOPERIDOLVALPROIC ACIDHYDROCHLOROTHIAZIDE CAPVERAPAMILHYDROCHLOROTHIAZIDE TABVERAPAMIL ER TABHYDROXYCHLOROQUINE SULFATEVITAMIN DIMIPRAMINE HCLZONISAMIDE		
GLYBURIDE MICRONIZEDTRIAMTERENE/HYDROCHLOROTH CAPGUANFACINE HCLTRIAMTERENE/HYDROCHLOROTH TABHALOPERIDOLVALPROIC ACIDHYDROCHLOROTHIAZIDE CAPVERAPAMILHYDROCHLOROTHIAZIDE TABVERAPAMIL ER TABHYDROXYCHLOROQUINE SULFATEVITAMIN DIMIPRAMINE HCLZONISAMIDE		
GUANFACINE HCLTRIAMTERENE/HYDROCHLOROTH TABHALOPERIDOLVALPROIC ACIDHYDROCHLOROTHIAZIDE CAPVERAPAMILHYDROCHLOROTHIAZIDE TABVERAPAMIL ER TABHYDROXYCHLOROQUINE SULFATEVITAMIN DIMIPRAMINE HCLZONISAMIDE		
HALOPERIDOLVALPROIC ACIDHYDROCHLOROTHIAZIDE CAPVERAPAMILHYDROCHLOROTHIAZIDE TABVERAPAMIL ER TABHYDROXYCHLOROQUINE SULFATEVITAMIN DIMIPRAMINE HCLZONISAMIDE	GLYBURIDE MICRONIZED	TRIAMTERENE/HYDROCHLOROTH CAP
HYDROCHLOROTHIAZIDE CAPVERAPAMILHYDROCHLOROTHIAZIDE TABVERAPAMIL ER TABHYDROXYCHLOROQUINE SULFATEVITAMIN DIMIPRAMINE HCLZONISAMIDE	GUANFACINE HCL	
HYDROCHLOROTHIAZIDE TABVERAPAMIL ER TABHYDROXYCHLOROQUINE SULFATEVITAMIN DIMIPRAMINE HCLZONISAMIDE	HALOPERIDOL	VALPROIC ACID
HYDROXYCHLOROQUINE SULFATE VITAMIN D   IMIPRAMINE HCL ZONISAMIDE	HYDROCHLOROTHIAZIDE CAP	VERAPAMIL
IMIPRAMINE HCL ZONISAMIDE	HYDROCHLOROTHIAZIDE TAB	VERAPAMIL ER TAB
	HYDROXYCHLOROQUINE SULFATE	VITAMIN D
ISONIAZID	IMIPRAMINE HCL	ZONISAMIDE
	ISONIAZID	

### Can we bill nebulizers and chambers?

Below is a listing of GPIs for nebulizers that may be billed:

GPI-12	DRUG NAME
97101000000**	NEBULIZERS
971012000063**	NASAL NEBULIZERS

Below is a listing of NDCs for holding chambers that may be billed:

NDC	NDC NAME	NDC	NDC NAME
85460202	INSPIREASE DRUG DELIVERY	11391030101	BREATHERITE RIGID SPACER
456074413	AEROCHAMBER PLUS/SMALL MA	11391030102	BREATHERITE RIGID SPACER
456074513	AEROCHAMBER PLUS/MASK	11391030103	BREATHERITE RIGID SPACER
00456074613	AEROCHAMBER PLUS/LARGE MA	11391030104	BREATHERITE RIGID SPACER
00456315467	AEROCHAMBER PLUS	11391030105	BREATHERITE RIGID SPACER
04351052510	AEROTRACH PLUS	11391030110	BREATHERITE W/LARGE MASK
04351078710	AEROCHAMBER Z-STAT PLUS/M	11391030120	BREATHERITE W/MEDIUM MASK
04351078810	AEROCHAMBER MAX VALVED HO	11391030130	BREATHERITE W/SMALL MASK
04351079510	AEROCHAMBER/FLOWSIGNAL	11391030200	BREATHERITE
04351079710	AEROCHAMBER Z-STAT PLUS/F	11391030201	BREATHERITE COLLAPSIBLE
04351079750	AEROCHAMBER Z-STAT PLUS V	11391030202	BREATHERITE COLLAPSIBLE
04351079810	AEROCHAMBER PLUS FLOW VU	11391030203	BREATHERITE COLLAPSIBLE
04351079850	AEROCHAMBER PLUS FLOW VU	11391030204	BREATHERITE COLLAPSIBLE
04351080710	AEROCHAMBER Z-STAT PLUS/L	11391030205	BREATHERITE COLLAPSIBLE
04351080810	AEROCHAMBER MAX VALVED HO	11391030210	BREATHERITE W/LARGE MASK
04351088710	AEROCHAMBER Z-STAT PLUS/S	11391030220	BREATHERITE W/MEDIUM MASK
04351088810	AEROCHAMBER MAX VALVED HO	11391030230	BREATHERITE W/SMALL MASK
04351098510	AEROCHAMBER MV	13551060101	E-Z SPACER
04351098810	AEROCHAMBER MINI AEROSOL	49502020301	ACE AEROSOL CLOUD ENHANCE
08348000101	PRIMEAIRE DUAL-VALVED HOL	49502020701	EASIVENT
08348130301	LITEAIRE	49502020725	EASIVENT
08373076510	OPTIHALER	50383091899	NESSI SPACER/MOUTHPIECE
08373076550	OPTIHALER	50383091999	NESSI SPACER/SMALL/MED MA
08373080010	OPTICHAMBER ADVANTAGE	50383092299	NESSI SPACER/LARGE MASK
08373080050	OPTICHAMBER ADVANTAGE	52747051501	WATCHHALER
08373917700	VALVED HOLDING CHAMBER	54569434400	AEROCHAMBER PLUS/SMALL MA
08439620210	POCKET CHAMBER	54868451900	AEROCHAMBER PLUS
08439620250	POCKET CHAMBER	54868513100	AEROCHAMBER PLUS/SMALL MA
08462430100	BREATHERITE VALVED MDI CH	54868585200	AEROCHAMBER PLUS/MASK
08462430120	BREATHERITE VALVED MDI CH	83490051001	VORTEX VALVED HOLDING CHA
08462430200	BREATHERITE VALVED MDI CH	83490051002	VORTEX HOLDING CHAMBER/MA
08462430220	BREATHERITE VALVED MDI CH	83490051003	VORTEX HOLDING CHAMBER/MA
08591601001	RITEFLO	83490051022	VORTEX HOLDING CHAMBER/MA
11391030100	BREATHERITE	83490051023	VORTEX HOLDING CHAMBER/MA