



DIVISION OF MEDICAID OFFICE OF THE GOVERNOR

Pharmacy Program

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MEMORANDUM

TO: Pharmacy Providers
FROM: Judith P. Clark, R.Ph., Pharmacy Director
DATE: January 25, 2007
RE: Pharmacy Reminders

(1) *National Prescriber Identification Numbers*

(2) **Other insurance must be billed before Medicaid**

Effective October 1, 2004, when beneficiaries are covered by both Medicaid and other third party insurance, **pharmacy providers are required** to bill prescription drug claims to private third party insurance carriers before billing Medicaid. All Medicaid policies and procedures such as prior authorization requirements and limits are still applicable. Pharmacy audits are ongoing. For details regarding cost avoidance billing, refer to DOM's website at www.dom.state.ms.us, select Pharmacy Services, and go to Cost Avoidance billing instructions. The Centers for Medicare and Medicaid or CMS addresses this question: "The Medicaid program by law is intended to be the payer of last resort; that is, all other available third party resources must meet their legal obligation to pay claims before the Medicaid program pays for the care of an individual eligible for Medicaid."

Medicaid beneficiaries enrolled in Hospice Services are covered under a per diem rate which covers all services for that beneficiary. For those beneficiaries receiving Medicaid Hospice Services, all palliative therapy, or drugs used to treat beneficiary's terminal illness, is to be billed to the Hospice provider. Medicaid will only pay for drugs used for an indication not directly related to the beneficiary's terminal illness and are within the applicable Medicaid prescription service limits. Since plans of care are specific for beneficiaries, it is the responsibility of the dispensing pharmacy to bill the Hospice Provider or Medicaid appropriately. Medicaid's policies, prior authorizations, and limits are still applicable. The dispensing pharmacy must retain documentation regarding Hospice Services drug coverage for beneficiaries which is easily retrievable for auditing purposes. A listing of medications generally considered the responsibility of Hospice may be referenced on DOM's website at www.dom.state.ms.us, select Pharmacy Services, and select Pharmacy Billing for Hospice Patients.

Medicaid is always the payer of last resort.

Common Pharmacy Billing Errors¹

	Drug Name	Correct Billing/ Quantity	Common Incorrect Billing	Other Information
64116-0011-01	Actimmune 2MMI Units/.5ml	0.5ml	1	
00085-1341-01	Asmanex Twisthalr 220 MCG (120)	0.24gm	120 (doses)	
00085-1341-03	Asmanex Twisthalr 220 MCG (30)	0.24gm	30 (doses)	
00085-1341-02	Asmanex Twisthalr 220 MCG (60)	0.24gm	60 (doses)	
00037-0241-30	Astelin 137 MCG Nasal Spray (New Ready-Spray Bottle)	30ml	34 (prior formulation)	
52268-0502-01	Halflytely Bowel Prep Kit	1	2000 ml	
00173-0633-10	Lamictal 25MG Tab Starter	35	1	
00173-0594-01	Lamictal Tablet Starter Kit	98	1	
00173-0594-02	Lamictal Tablet Starter Kit	49	1	
00075-0620-40	Lovenox 40mg Prefilled Syringe	.4ml	1	1carton (10 syringes) = 4 ml
00085-1288-01	Nasonex 50 MCG Nasal Spray	17gm	34 (days supply)	
00300-1546-07	Prevacid Naprapac 500 (weekly blister card)	21 (14 Naproxen + 7 Prevacid)	28, 90	7 days supply should be billed
00300-1546-30	Prevacid Naprapac 500 (one month administration pack)	84	28, 90	28 days supply should be billed
00186-0915-42	Pulmicort 200 mcg Turbuhaler	1	200	
50242-0100-40	Pulmozyme 1mg/ml ampule (30 x 2.5ml amps per carton)	75ml	90	30 ampules at 2.5mls=75mls; must bill exact metric quantity dispensed.
00023-9163-32	Restasis .05% Ophth. Emulsion (32 x 0.4ml vials per Tray)	32 (vials)	30, 31 (days supply)	A 'bid' dose should be billed as 64
60574-4111-01	Synagis 100 mg Vial	1	100 mg	

¹ Claims will deny with message

