



Medicaid Pharmacy News

Dear Providers:

March 31, 2020

Wyoming Medicaid is committed to ensuring our clients continue to receive products and services with no interruptions or delays due to the novel coronavirus (COVID-19) outbreak.

In response to recommendations for social distancing, **Wyoming Medicaid is temporarily modifying certain policy conditions to allow for early refills coverage for up to a 90-day supply of routine, maintenance medications (if prescription allows), signature waiver for all prescriptions, and copay waiver for COVID-19 treatment medications.** Providers are encouraged to follow all applicable state and federal laws and regulations. All claims will be subject to post-payment review by Wyoming Medicaid Program Integrity.

HYDROXYCHLOROQUINE & CHLOROQUINE PRIOR AUTHORIZATION CRITERIA

Across the nation, there have been patterns of prescribing for people without an FDA approved diagnosis or without an active COVID-19 diagnosis. In an effort to ensure adequate access for clients and mitigate a potential drug shortage, a prior authorization requirement will be placed on hydroxychloroquine and chloroquine, effective April 1, 2020, for coverage through retail pharmacies.

REFILL TOO SOON

For early refills, in the Submission Clarification Code (420-DK) field, pharmacy providers should submit claims with “13” (Payer-Recognized Emergency/Disaster Assistance Request) to override “refill too soon” rejection during the declared emergency.

REFILL TOO SOON OVERRIDE (NCPDP Reject Code 79)	SUBMISSION CLARIFICATION CODE (420-DK): 13 = Payer-Recognized Emergency/Disaster Assistance Request
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COVID-19 COPAY EXEMPTION

Clients being treated for COVID-19 are exempt from copayment on drugs used to treat COVID-19. To process the copay exemption, in the PA Type Code Field (Field 461-EU), submit a “2” and in the PA number field (Field 462-EV) submit a “13” to denote “COVID-19 Copay Exemption” when submitting a prescription via POS or on the Universal Claim Form. **Please note the copay exemption applies only to COVID-19 treatment medications** and not to all medications used by a client who has tested positive for COVID-19.

COVID-19 COPAY EXEMPTION	PA TYPE CODE (461-EU): 2 (Med Cert) PA # (462-EV): 13 (COVID-19 Exemption)
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EMERGENCY OVERRIDE

As a reminder, in the event of an emergency the pharmacy is authorized to dispense up to a 72-hour emergency supply for medications that require a prior authorization.

72 HOUR EMERGENCY OVERRIDE <i>Can be used twice per drug per month; Maximum 3-day supply allowed No dispensing fee or copay applied</i>	PA TYPE CODE (461-EU): 2 (Med Cert) PA # (462-EV): 8 (Emergency Supply)
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Wyoming
Department
of Health

Division of Healthcare Financing

SIGNATURE LOGS

Wyoming Medicaid has updated their signature log policy during this novel coronavirus (COVID-19) outbreak. In response to recommendations for social distancing, Wyoming Medicaid is waiving the requirement that pharmacies obtain a client signature at the time of pick up or delivery. During this time, Wyoming Medicaid is requesting that pharmacies write “COVID-19 Precautions” in the client signature area as an equivalent to receiving a Wyoming Medicaid client signature.

If you have any questions and/or concerns, please contact the
Change Healthcare Pharmacy Help Desk at 877-209-1264.