

August 22, 2005

Dear Provider:

First Health Services, the Pharmacy Benefit Administrator for the Kentucky Medicaid Pharmacy Program, implemented prospective drug review edits that may be overridden by the provider at point of sale via pharmacy provider level overrides for the following criteria

- ❖ Therapeutic duplication
 - Narcotic analgesic class
 - Anxiolytics
 - Atypical antipsychotics
- ❖ Drug to drug interactions
 - Severity level 1 and 2
- ❖ Early Fill
 - CIIIs-applies to early dispensing of a CII

To submit a provider level overrides for these criteria please enter the appropriate intervention code and outcome code. DUR field IDs are as follows:

- **DUR REASON FOR SERVICE (Conflict code) (NCPDP FIELD ID 439-E4)**
- **DUR PROFESSIONAL SERVICE (Intervention code) (NCPDP FIELD ID 440-E5)**
- **DUR RESULT OF SERVICE (Outcome code) (NCPDP FIELD ID 441-E6)**

Select Code	Intervention/ Professional Service Code/ Description	Select Code	Outcome / Result of Service Code/ Description
X	GP/ generic product selection	X	1A/ filled as is, false positive
X	M0/ prescriber consulted	X	1B/ filled prescription as is
X	MR/ medication review	X	1C/ filled with different dose
X	PH/ patient medication history	X	1D/ filled with different directions
X	P0/ patient consulted	X	1E/ filled with different drug
X	RO/ pharmacist consulted other source	X	1F/ filled with different quantity
		X	1G/ filled with prescriber approval
		X	2A/ prescription not filled
		X	2B/ not filled, directions clarified
		X	3C/ discontinued drug
		X	3D/ regimen changed
		X	3E/ therapy changed

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If you have difficulty processing a claim please contact the First Health Technical Call Center at 1-800-432-7005.

Internet Web Site:

Medicaid's web site at <http://chfs.ky.gov/dms/> provides information about the Medicaid Pharmacy Program and related topics such as pharmacy provider letters, Pharmacy and Therapeutics Committee meetings and recommendations.

Contact Information:

<u>For Questions About</u>	<u>Contact</u>	<u>Phone</u>
Billing of pharmacy claims	Provider Help Desk	800-432-7005
This letter or Medicaid policies	Pharmacy Department	502-564-7490