



Fee-for-Service Pharmacy Provider Notice #221
****State Maximum Allowable Cost Price Error****

June 26, 2017

Dear Kentucky Medicaid Pharmacy Provider:

The Kentucky Department for Medicaid Services (DMS), in conjunction with Magellan Rx Management, has discovered that an inaccurate State Maximum Allowable Cost (SMAC) rate was applied to claims adjudicated for Montelukast 10mg tablets between 06/29/2016 through 04/20/2017, resulting in an overpayment. In the coming weeks, Magellan Rx Management will begin automatically re-adjudicating claims where an overpayment has been identified within the timeframe previously mentioned. All payment adjustments will be reflected in your remittance advice(s).

Thank you for your continued commitment to the health and welfare of Kentuckians throughout the Commonwealth! There is no action required on your part; however, please contact **Magellan Rx Management** at kyproviders@magellanhealth.com for additional information or for any questions you may have regarding this notice.

Sincerely,

Harris Taylor, CPhT

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Provider Relations Manager
kyproviders@magellanhealth.com



Kentucky Medicaid Fee-for-Service Pharmacy Program's Contact Information		
Clinical Support Center	1-800-477-3071 Sunday – Saturday 24 hours a day	Please contact the Clinical Support Center to request a PA or to check the status of a request. NOTE: The only drugs that are now required to be submitted via fax are Brand Medically Necessary, Buprenorphine products, Synagis®, and Zyvox®.
Pharmacy Support Center	1-800-432-7005 Sunday – Saturday 24 hours a day	Please contact the Pharmacy Support Center when claims assistance is required. Timely filing, lock-in, and early refill (ER) overrides can be obtained through this call center.
Provider Services	1-877-838-5085 Monday – Friday 8:00 am – 4:30 pm	Please contact Provider Services if you have questions about enrollment or when updating your license or bank information.
Member Services	1-800-635-2570 Monday – Friday 8:00 am – 5:00 pm	Please contact Member Services if you are a member or if you as the provider have questions regarding the member's benefits or eligibility coverage dates.