Magellan Rx MANAGEMENT

Kentucky UNBRIDLED SPIRIT

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THE NUMBERS LISTED BELOW ARE FOR FEE-FOR-SERVICE (FFS) SUPPORT

PHARMACY SUPPORT CENTER

1-800-432-7005

24 hours per day/7 days per week
For claim assistance, early refill overrides, and lock-in overrides

CLINICAL SUPPORT CENTER

PRIOR AUTHORIZATIONS

1-800-477-3071

24 hours per day/7 days per week

DIABETIC SUPPLY QUESTIONS

Prior Authorization

1-800-477-3071

CLAIM INQUIRY

1-800-432-7005

Please Note: Questions regarding claims prior to October 5, 2010, should be directed to 1-800-807-1232.

PROVIDER SERVICES

1-877-838-5085

M–F, 10:30 a.m.–4:30 p.m. (ET)
Providers should contact Provider Services for inquiries regarding enrollment and changes.

MEMBER SERVICES

1-800-635-2570

M–F, 8:00 a.m.–5:00 p.m. (ET)
Recipients should contact Member Services for medication replacement requests and co-pay and benefit information.

WEBSITES

Kentucky Department for Medicaid Services
DMS Pharmacy Website
Magellan Medicaid Administration
https://kentucky.magellanmedicaid.com

PROVIDER EDUCATION and FFS HELP

For onsite education presentations or any other questions, concerns or feedback regarding Fee-for-Service Medicaid, please contact Magellan Rx Management at kyproviders@magellanhealth.com.
Provider education is free of charge.

Kentucky Department for Medicaid Services 340B Procedures

Mandatory as of April 1, 2020 all pharmacies participating in the 340B Program, a value of "20" in the field 420-DK, "Submission Clarification Code" is require for all 340B purchased drugs dispensed to Medicaid beneficiaries in fee-for-service and managed care organizations. When outpatient pharmacy claims include the "20" in the "Submission Clarification Code" field, Kentucky DMS will exclude these claims from the rebate invoicing process.

For all healthcare providers participating in the 340B Program, a "UD" modifier on CMS 1500 forms is required for all 340B purchased drugs dispensed to Medicaid beneficiaries in fee-for-service and managed care organizations. If claims are being submitted on an 837P electronic form, the UD modifier will follow the HCPCS code in Loop 2400 SV101-2. When CMS 1500 and 837P claims include the "UD" modifier, Kentucky DMS will exclude these claims from the rebate invoicing process.

340B covered entities are responsible for reporting when 340B purchased drugs are used for eligible Medicaid patients and to subsequently ensure rebates are not invoiced to manufactures. All other fee-for-service, managed care, and dual eligible claims paid by Kentucky DMS are invoiced to drug manufacturers. For additional information on Kentucky DMS's 340B policies, please visit the Kentucky DMS Pharmacy web page.

Drug Utilization Review: Antidepressant Black Box Warnings

Antidepressant medications such as tricyclics (TCAs), selective serotonin reuptake inhibitors (SSRIs), serotonin norepinephrine reuptake inhibitors (SNRIs), and dopamine norepinephrine reuptake inhibitors (DNRIs) are important tools in treating depression and/or anxiety. They are effective in managing symptoms associated with these conditions and as part of a treatment plan to achieve remission. Many of these products are approved for use in children and adolescents as well as adults.

The US Food and Drug Administration (FDA) has applied labeling changes for these medications based on data suggesting that there is an increased risk of suicidal behavior and thinking (known as suicidality) in certain populations following treatment initiation, typically in the first 1-2 months. Children, teenagers, and young adults are more often affected and a causal relationship has been established in patients 18 to 24 years of age[1]; suicidality is more common in patients with a personal or family history of bipolar disorder. DMS reminds healthcare providers continue taking the following actions to promote positive outcomes for patients and families:

- Provide patients and/or caregivers with the FDA-approved medication guide
- Counsel patients and caregivers beginning a new medication or an increase in dose to pay close attention to changes in mood, behaviors thoughts and feelings for the next 4-12 weeks; review other side effects as appropriate
- Advise patients/caregivers to report sudden changes to a healthcare provider, maintain follow-up appointments and seek emergency medical care for suicidality
- Discourage discontinuation of medication without prescriber consultation

1 https://wayback.archive-it.org/7993/20170722143548/https://www.fda.gov/Drugs/DrugSafety/InformationbyDrugClass/ucm096273.htm