Pharmacy Providers: **Temporary Solution to Part B Covered Drug Coinsurance Payments**

Florida Medicaid is implementing the following policy, retroactive for services provided on or after January 1, 2006. This is to resolve coinsurance payment issues related to drugs covered by Part B Medicare; specifically immunosuppressive agents for transplant patients and cancer chemotherapy/anti-emetic agents:

Payment for Part B Medicare covered Immunosuppressive drugs, cancer related chemotherapy agents and anti-emetics covered by Part B related to chemotherapy will be temporarily treated as “Medicare Part D Excluded Drugs” which means the coinsurance, following Medicare Part B payment will be payable by Medicaid as a prescription drug claim. The claim must be submitted to Medicaid as a Third Party Liable or TPL claim, including the Medicare Part B payment information and any Medicaid payment will be limited to the Medicaid allowable charge. This is the same payment methodology used prior to implementation of Medicare Part D on January 1, 2006. If Medicare Part B denies all payment for an immunosuppressive agent, this indicates the transplant procedure was not paid by Medicare and the claim should be submitted to the beneficiary’s Part D prescription drug plan. Coverage will likely require prior authorization by the Medicare Part D plan, at least for the initial claim.

For a full dual Medicare/Medicaid recipient, payment will be routine and not require any authorization other than the third party payment by Medicare Part B. Anyone who meets their share of cost and is on the eligibility file for the current month is a “full dual” Medicare/Medicaid recipient.

For the eligibility category of Qualified Medicare Beneficiary or QMB or QMBR who are not eligible for all Medicaid services but are always eligible for assistance with Medicare coinsurance, payment will be prior authorized by the Medicaid fiscal agent. These PA’s can be obtained by calling the ACS pharmacy help desk at (877) 553-7481.

**Important:**

Medicare coinsurance for these Part B covered drugs are eligible for payment as a Medicare/Medicaid Crossover claim which automatically transfers to Medicaid from the Medicare fiscal intermediary when Medicare allowable payment is made. Because many pharmacies do not have valid crossover payment information on file with the Medicaid fiscal agent or do not have a Medicare provider number the solution described above is being provided temporarily. Medicaid is working to resolve this issue systematically and all providers will be required to bill through the Medicare/Medicaid crossover system when completed.

Pharmacy providers will receive a mailing within the next thirty days explaining what information is required for Medicare/Medicaid crossover payments, how to enroll as a Medicare provider, and including a form for return of that information to the Medicaid fiscal agent. Following this mailing a transition to appropriate crossover payment for Part B coinsurance charges and a termination date for the temporary payment as a TPL drug claim will be set.

Jerry Wells, Chief
Medicaid Pharmacy Services
(850) 487-4441