

KMAP GENERAL BULLETIN 20056

Kansas Medicaid Retail Pharmacy Disaster Preparedness Plan

Effective March 12, 2020, the following processes and procedures will be the standard Kansas Medicaid Covered Outpatient Drug (COD) disaster preparedness plan. The dates of effectiveness for implementation will vary depending upon the disaster and the impact across the state. This plan applies to retail and medical side billed drugs, unless clarified otherwise.

Copay exemptions (point-of-sale):

The FFS prescription copay requirement will be removed temporarily during the natural disaster time frame.

Drug shortages:

For any drug shortages which are for preferred PDL drugs or rebate eligible drugs, approvals for non-preferred PDL drugs or non-rebate eligible drugs will be made, as needed. When drug shortages are identified, a bulletin listing drugs approved to accommodate the shortages will be posted using the standard provider notification process.

Early refills – MCOs (point-of-sale):

Early refill requests by the patient can be approved by the pharmacists using the Submission Clarification Code (SCC) 13. This code can be used for all drugs, except for controlled substances. If SCC 13 is not an option available for an MCO, then a pre-programmed early refill limit will be made to allow a refill when 50% of the current fill has been used.

If a pharmacy is not able to use the SCC 13 early refill override option, notification should be made by the pharmacy to the MCO, at which point the MCO personnel will help navigate an alternative solution, if possible.

For controlled substances, early refills will be allowed on a case-by-case basis. The patient will need to request an early refill from the pharmacy. The pharmacy will need to reach out to the MCOs/FFS for a one-time override.

Current cumulative refill edits will apply.

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Early refills – FFS (point-of-sale):

The FFS early refill request process will continue according to current policy as listed in the Pharmacy Manual in the link below:

https://www.kmap-state-ks.us/Documents/Content/Provider%20Manuals/Pharmacy_20020_20027.pdf

Home Infusion:

All drugs not currently approved for home infusion but is an approved location/provider type per guidelines or package insert, may be approved to be given by providers licensed to provide home infusion services, for those products, on a case-by-case approval by the MCOs/FFS.

Out of Network Providers:

Out-of-network providers and pharmacies are allowed using the standard out-of-network process.

Patient signature/signature logs(point-of-sale):

For delivery of drugs, regardless of claim type, the pharmacy personnel shall write the name of the natural disaster (ex. “COVID-19”) on the signature slip or log (paper or electronic) along with the patient name, date, and prescription number.

Audit teams will be instructed to waive the signature requirement for claims filled between the dates set by Medicaid and posted online at <http://www.kdheks.gov/hcf/pharmacy/default.htm>, with the aforementioned documentation.

Prior authorization (PA):

New PA requests- No change.

Renewals- A 90-day extension will be given on any PA request coming due for renewal of maintenance drugs. Non-maintenance drugs with a PA will be evaluated and approved on a case-by-case basis by the MCOs/FFS.

Quantity limits:

Quantity limits will remain the same as in current policy and patient access to medications will be accounted for by the pharmacist’s use of the SCC 13 override option or the pre-programmed 50%

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utilization override. This method will allow the pharmacies to monitor their stock and make decisions based upon the needs of all their customers.

Drugs listed on the 90-day maintenance drug supply list, may require further review, if the drug supply on these medications becomes an issue.

Antibiotic, anti-fungal, antimalarial, anti-tuberculosis, antiviral agents, or any other drugs of impending necessity should be dispensed by the pharmacy based upon the State Board of Pharmacy and the State Board of Healing Arts guidance given in times of disaster.

Single Source Drug Limit (point-of-sale):

FFS will not enforce the limit for single-source drugs.

Spenddown exemption:

Drug claims will be exempt from spenddown requirements using the diagnosis provided by the state.

Qualified providers ordering drug treatment are required to document the confirmed diagnosis code of B97.29 on the prescription sent to the pharmacy, as well as for their medical claim submissions, as applicable.

Diagnosis codes:

- COVID-19 – Submit B97.29 (The claim does not need to be billed in combination with any other diagnosis code.)

Other:

Pharmacy Benefit Managers (PBMs) will suspend all routine or scheduled audits of pharmacies, on behalf of the MCOs, until after the end of the emergency period, to allow pharmacists to focus solely on addressing the needs of their customers.

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MCOs/FFS contact information website link:

http://www.kdheks.gov/hcf/pharmacy/pa_contact_information.htm

Acronyms:

FFS= Fee-for-Service

KDHE= Kansas Department of Health and Environment

KMAP= Kansas Medical Assistance Program

MCO= Managed Care Organizations

PA= Prior Authorization

PBM= Pharmacy Benefit Manager

PDL- Preferred Drug List

SCC= Submission Clarification Code

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