

**** Important Information ****

Date: 04/27/2017

From: Magellan Medicaid Administration on behalf of the TennCare Pharmacy Program

Participation in the TennCare pharmacy program requires pharmacists to adhere to specific procedures when unresolved point-of sale denials are encountered. Denials for non-preferred medications, step therapy, therapeutic duplication, and quantity limits are subject to the following requirements of TennCare and federal regulations. The pharmacist **must** attempt to contact the prescriber and/or Magellan Clinical Support Call Center at 1-866-434-5524 to resolve the denial.

Prior Authorization Required Form (PARF)

- **If the pharmacist is unable to resolve the denial and dispense the prescription in full, the pharmacist must complete and give the patient the *Prior Authorization Required Form (PARF)*.**
- The PARF explains why the patient is not receiving the prescribed medication or full amount, and how a patient may help initiate the prior approval process.
- If the pharmacist contacts the prescriber and he or she indicates that a prior authorization will be initiated (but has not yet been obtained), the pharmacist should provide the patient with the PARF.
- If the pharmacist is unsuccessful in reaching the prescriber and resolving the matter, the pharmacist should consider providing an emergency three-day supply of the medication in accordance with the procedures listed in the section below.
- Regardless of whether the patient receives an emergency supply, a PARF **must** be provided whenever the prescribed medication or the quantity ordered is not received.
- A copy of the PARF is also available online at <https://TennCare.magellanhealth.com> or by calling 1-866-434-5524.

Emergency Supply Override Process

- Claim denied for non-preferred or requiring PA.
- The pharmacist should determine if an immediate threat of severe adverse consequences exists should the patient not receive an emergency supply.
 - ****Note:** An emergency situation is a situation that, in the judgment of the dispensing pharmacist, involves an immediate threat of severe adverse consequences to the enrollee, or the continuation of immediate and severe adverse consequences to the enrollee, if an outpatient drug is not dispensed when a prescription is submitted.
 - The Emergency Supply Policy does not apply to drugs that are normally not covered by TennCare.
- In the pharmacist's judgment, if the dispensing of an emergency supply is warranted, determine the appropriate amount for a three-day supply. For unbreakable packages, the full package can be dispensed.

- **Resubmit the adjusted claim to Magellan, including both a Prior Authorization Type Code of “8” (NCPDP Field # 461-EU) and Prior Authorization Number NCPDP Field # 462-EV of “8888888888” to override the POS denial.**
 - The enrollee is not charged a co-pay for the emergency supply.
 - The emergency supply **DOES** count toward the monthly prescription limit.
 - Only one emergency supply is provided per drug per member per year.
 - Recipients are not permitted to receive, nor will TennCare pay for the remainder of the original prescription at any pharmacy unless the prescriber has received a PA. If the prescriber obtains a PA **OR** changes the drug to an alternative not requiring a PA **in the same month**, the remainder of the prescription and/or substitute prescription does not count toward the monthly limit.
 - To exempt the remainder of the prescription from the prescription limit once a PA is obtained, or to exempt the replacement prescription from counting toward the prescription limit, the value of “5” must be submitted in the Submission Clarification Code (NCPDP Field # 42Ø-DK) on the incoming claim within 14 days of the initial prescription.
- **In addition, the pharmacy is responsible for displaying the Emergency Supply and Appeal Posters and other applicable notices in public areas of their facility in accordance with TennCare rules, including TennCare Rules 1200-13-13-.11 and 1200-13-14-.12. TennCare official orange and green posters written in English and Spanish are required. Copies are not allowed. These posters describe TennCare enrollees’ right to appeal adverse decisions affecting services. Posters are available by e-mailing a request to TNProviderEducation@magellanhealth.com .**