

APRIL 15, 2020

(5.6) PHARMACY/MCO COMMON FORMULARY

Authority: 1.1 VI(D)

Submit all paid/denied/rejected/reversed claims for the time periods of 10/01/19-10/08/19 and 01/01/20-01/08/20.

- 1) Accurate NCPDP 831 Rejections
 - a) Must have NCPDP 831 rejection coding set as the primary rejection for carve-out claim
 - b) Must have less than 0.5% noncompliant claims
 - 2) Accurate NCPDP 70 Rejections
 - a) Must have less than 0.1% noncompliant claims for products covered on the Common Formulary
 - 3) Must have non-controlled refill thresholds set at no greater than 75%
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Below are the variables MDHHS is requesting for the claim submissions due on April 15th:

- Pharmacy NPI
- Date of Adjudication
- Date of Service
- NDC
- GCN/GSN or GPI (Coding variable)
- Label Name (Product Service Name)
- Quantity Dispensed
- Days Supply
- Prescription Number
- Beneficiary ID
- NCPDP Reject Code(s)
- NCPDP Reject Supplemental Message (If applicable)
- Claim Status (Paid/Denied/Rejected/Reversed)

The date of adjudication should be the date for each billing attempt by the pharmacy for a specific date of service. Both dates are requested as they may differ due to the providers ability to reverse and resubmit a claim at a later date. The beneficiary ID requested is their Medicaid ID assigned by the state. Make sure to provide **ALL** NCPDP reject codes and supplemental messages associated with each claim. Please provide this information in an electronic format (excel, csv, text delimited) and in separate files for each time period. No specific template is requested to allow for the inclusion of variables outside of the ones listed above.

Please submit the information requested to the MSA-MCPD FTP site in an electronic format.

Questions should be directed to Michael Melvin, Pharmacy Formulary Compliance Analyst at MelvinM3@michigan.gov, (517) 241-2749