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Thank you.



Operational update:

Kentucky Medicaid  
Pharmacy Benefit Manager

Pharmacy Provider Webinar  
Forum

WEDNESDAY APRIL 24, 2024

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# Introduction

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# Roles

Kentucky Department for Medicaid Services

# Roles

1	CHFS	Determine pharmacy benefit design
		Manage the network
		Establish reimbursement methodology
		Fund FFS Claims Payment
2	MCOs	Fund MCO Claims Payment
		Manage lock-in program
		Care management activities
		Manage drugs filled under medical benefit
		Third party liability (TPL) data
3	Gainwell	Provide MI with eligibility, FFS TPL, and provider network files
		FFS Medical Claims Processor
		Encounter Files
4	MedImpact	Claims Adjudication including Prior Authorizations
		Pharmacy Fiscal Agent
		Appeals and Grievances, Reporting
		PDL Management (effective 1/1/2024)
		MAC Management (effective 1/1/2024)



# Pharmacy Benefit Manager Change

Kentucky Department for Medicaid Services

# KY Fee-for-Service (FFS) Pharmacy Benefit Manager Change

- **Effective January 1, 2024**, MedImpact Healthcare Systems, Inc. began processing pharmacy claims and prior authorizations for **all Kentucky Medicaid Fee- for- Service Members**.
- MedImpact remains the PBM for Kentucky Managed Care and there are no changes to the billing procedures for Managed Care members.
- For Fee-For-Service members, all pharmacy claims submitted with a date of service on or after January 1, 2024, should be submitted to MedImpact.



# KY Fee-for-Service (FFS) Pharmacy Benefit Manager Change

**Please note:** Effective January 1, 2024, all **FFS claims with dates of service 1/1/2024 and beyond** will need to be routed to MedImpact using the **BIN/PCN/Group\*** information described below.

## REQUIRED BIN/PCN/GROUP for KY FFS Members: NCPDP Transaction Header Segment

Field #	NCPDP Field Name	Value	Payer Usage	Notes
101-A1	BIN #	026309	Mandatory	Same value for all KY FFS members
104-A4	PCN #	KYPROD1	Mandatory	Same value for all KY FFS members
301-C1	Group ID	KYF01	Mandatory	Same value for all KY FFS members

- There are **no changes** to the billing procedures for **Managed Care** members.

## REQUIRED BIN/PCN/GROUP for KY MCO Members: NCPDP Transaction Header Segment FOR MCO

Field #	NCPDP Field Name	Value	Payer Usage	Notes
101-A1	BIN #	023880	Mandatory	Same value for all KY MCO members
104-A4	PCN #	KYPROD1	Mandatory	Same value for all KY MCO members
301-C1	Group ID	KYM01	Mandatory	Same value for all KY MCO members





# FFS Reversal and Rebill of Claims prior to 1/1/2024 (Magellan Claims)

Kentucky Department for Medicaid Services

# FFS Reversal and Rebill of Claims prior to 1/1/2024

- On 3/21/2024, all switch vendors enabled the routing of transactions to MedImpact using the Magellan claim routing information (BIN/PCN/Group) that was in effect until 12/31/2023:  
    BIN: 011529  
    PCN: P022011529  
    Group: KYMEDICAID
- This routing information should only be used for reversals (B2) of claim transactions originally processed by Magellan. MedImpact will not accept any new claim transactions (B1) where the Magellan routing information is submitted, regardless of the Date of Service. If a rebill is required, use the Magellan routing information for the reversal (B2), and then the MedImpact routing information for the replacement claim (B1).
- This window for reversals will be available for 60 days, or through **5/20/2024**, at which time the switches have been instructed to terminate routing of transactions submitted with the Magellan routing information.
- You may contact our Call Center at 877-403-6034 or email to the Account team at [KYMFFS@MedImpact.com](mailto:KYMFFS@MedImpact.com).



# Reduced Provider Payments (Due to Reversals)

Kentucky Department for Medicaid Services

# Reduced Provider Payments (Due to Reversals)

- Reversal and resubmission of claims can cause a temporary reduction in expected weekly payments. The reduction in payments is due to reversals from a previous EOB cycle that result in an accounts receivable that is applied to the next provider payment.
- While resubmission of the same claim results in a payment to the provider, they must go through the standard EOB cycle to allow funding for payment as seen in the table below.
- This is more impactful during the months of January and June when NADAC pricing is adjusted.

EOB Start	EOB End	Invoice Date to MCO/DMS	Provider Payment Issued
Managed Care Payments			
Friday	Following Thursday	Friday after end of cycle	Following Friday after end of cycle
1/5/2024	1/11/2024	1/12/2024	1/19/2024
1/12/2024	1/18/2024	1/19/2024	1/26/2024
Fee-for-Service Payments			
Friday	Following Thursday	Friday after end of cycle	Second Friday after end of cycle
1/5/2024	1/11/2024	1/12/2024	1/26/2024
1/12/2024	1/18/2024	1/19/2024	2/2/2024



# Reduced Provider Payments (Due to Reversals)

- This can result in a reduction of the weekly payment received after the reversal was submitted but will be resolved once the resubmission processes through the EOB cycle and will be received in the next payment cycle as seen in the table below.

Original claim Fill Date	Original Claim Paid Date	Reversal and Resubmission Date Adjudicated	Paid Date Reduced by Reversal	Resubmission Paid Date
Managed Care Example				
1/18/2024	1/26/2024	1/31/2024	2/2/2024	2/9/2024
1/25/2024	2/2/2024	2/6/2024	2/9/2024	2/16/2024
Fee-for-Service Example				
1/18/2024	2/2/2024	1/31/2024	2/2/2024	2/16/2024
1/25/2024	2/9/2024	2/6/2024	2/9/2024	2/23/2024

- If you have any questions or concerns, please reach out to the mailbox that corresponds to the payment in question and one of our team members will reach out to discuss further.
  - Managed Care Payment Questions: [KYMCOPBM@MedImpact.com](mailto:KYMCOPBM@MedImpact.com)
  - Fee-For-Service Payment Questions: [KYMFFS@MedImpact.com](mailto:KYMFFS@MedImpact.com)



# Checks from Providers

Kentucky Department for Medicaid Services

# Checks from Providers

- The prior processor, Magellan, was able to accept payments from pharmacies for self-audited claims on behalf of the Commonwealth of Kentucky. MedImpact does not support this.
- MedImpact's preferred method for handling claim corrections is through electronic processing of reversals and resubmission.
- We can support claim-level adjustments (CLA) through an offline adjudication solution **if reversal and resubmission is not possible.**
  - This allows adjustments to flow through our downstream processes to support accounting, reporting, and audit requirements.
- If you feel you have a claim processed and paid in error, cannot reverse/resubmit the claim, and believe you need to return money to the Commonwealth, please contact the MedImpact KYFFS Account team for assistance at [KYMFFS@MedImpact.com](mailto:KYMFFS@MedImpact.com)
  - The Account team will work with internal MedImpact departments to perform CLAs. Related recovery amounts will be recouped from future claim payments.
- Please do not send any checks for any purpose to MedImpact without prior agreement.
  - Any checks sent to MedImpact will be returned to the sender.



# MedImpact Provider Portal

Kentucky Department for Medicaid Services



# MedImpact Provider Portal

- The KY Provider Portal has been updated to accommodate both MCO and FFS information. Some features, such as the drug lookup tool, folder names, and where things are stored have been enhanced.
- Additional materials on billing procedures for KY FFS and MCO members is available on the Provider Portal under the Provider Information drop down.

Website: <https://kyportal.medimpact.com/>

- **Kentucky Medicaid D.0 Payer Specs:**

- [https://kyportal.medimpact.com/sites/default/files/2024-11/medimpact\\_ky\\_medicaid\\_payer\\_sheet\\_v1.3.pdf](https://kyportal.medimpact.com/sites/default/files/2024-11/medimpact_ky_medicaid_payer_sheet_v1.3.pdf)

- **Kentucky Provider Billing Manual:**

- MCO: [https://kyportal.medimpact.com/sites/default/files/2024-01/mco\\_provider\\_billing\\_manual\\_01012024\\_final.pdf](https://kyportal.medimpact.com/sites/default/files/2024-01/mco_provider_billing_manual_01012024_final.pdf)
- FFS: [https://kyportal.medimpact.com/sites/default/files/2024-12/provider\\_billing\\_manual\\_fee\\_for\\_service\\_final.pdf](https://kyportal.medimpact.com/sites/default/files/2024-12/provider_billing_manual_fee_for_service_final.pdf)



# MedImpact Provider Portal

## Pharmacy Memos and Newsletters

- Important pharmacy notifications distributed via email

## Provider Information

- Documents such as PHE unwinding, provider directory, payer specs, manuals, and 340B Process.

## Prior Authorization

- Prior Authorizations (ePA, Fax/Telephonic PA), Denials, Appeals

## Links

- Helpful resources (CDC, CMS, DMS, NCPDP, ADA)

## Tools

- Drug lookup and pharmacy locator



# MedImpact Portal

<https://kyportal.medimpact.com>



MEMBER PORTAL

PROVIDER PORTAL

CLIENT PORTAL

CONTACT

WELCOME

## Department for Medicaid Services

Welcome to the Kentucky Cabinet for Health and Family Services,  
Department for Medicaid Services Managed Care Organizations  
Pharmacy Program portal, administered and maintained in conjunction  
with MedImpact.



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# MedImpact Provider Portal

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WELCOME

## Medicaid Provider Portal

Welcome to the Kentucky Cabinet for Health and Family Services, Department for Medicaid Services Managed Care provider portal, administered and maintained in conjunction with MedImpact.

**Sign in to the Pharmacy Portal**

PHARMACIES ONLY: Access your claims and payment information, and other pharmacy support features

**SIGN IN**

R<sub>X</sub> Pharmacy

RX 123456



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# MedImpact Provider Portal

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## Drug Information

Information related to covered products and services.

[<< Back to Client Home](#)

[<< Back to Member Home](#)

### Preferred Drug List (PDL)

DATE ADDED

 [Preferred Drug List \(PDL\) - Effective 1/16/2024](#)

01/16/2024

### Prior Authorization (PA) Criteria

DATE ADDED

 [Prior Authorization \(PA\) Criteria - Effective 1/6/2024](#)

01/06/2024

### Quantity Limits

DATE ADDED

 [Maximum Quantity Limits - Effective 1/6/2024](#)

01/06/2024



# MedImpact Provider Portal



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## Provider Forms

Prior authorizations and other forms.

### Prior Authorization (PA)

DATE ADDED

 <a href="#">Universal Prior Authorization (PA) Form - All Drugs</a>	12/08/2023
 <a href="#">Prior Authorization (PA) Form - Benzodiazepines</a>	04/12/2022
 <a href="#">Prior Authorization (PA) Form - Stimulants</a>	04/12/2022

### Electronic Prior Authorization (ePA)

Electronic Prior Authorization (ePA) offers a streamlined solution for PA request initiation that improves prescriber and patient experience. For information regarding how to submit requests using ePA, click [here](#).

### Fax Prior Authorizations

Please fax prior authorization requests to the following number:

**Prior Authorization Fax Line**  
(858) 357-2612



# MedImpact Provider Portal



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## Provider Information

Manuals, payer specs, and more!

[<< Back to Client Home](#)

### NCPDP Telecommunication Standard

[Click here for NCPDP membership and standards information.](#)

### Payer Specs

DATE ADDED

 [Kentucky Medicaid D.0 Payer Specs \(Managed Medicaid & FFS\)](#)

12/01/2023

### Manuals

DATE ADDED

 [Provider Billing Manual \(Managed Medicaid\)](#)

01/01/2024

 [Provider Billing Manual \(Fee For Service\)](#)

12/20/2023





# MedImpact Provider Portal

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WELCOME

## Medicaid Provider Portal

Welcome to the Kentucky Cabinet for Health and Family Services, Department for Medicaid Services Fee-For Service and Managed Care provider portal, administered and maintained in conjunction with MedImpact.

Sign in to the Pharmacy Portal

PHARMACIES ONLY: Access your claims and payment information, and other pharmacy support features

SIGN IN

R<sub>x</sub> Pharmacy

RX 123456






# MedImpact Provider Portal

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## Search By:

☒ BRAND NAME ☐ NDC ☐ GENERIC NAME ☐ LABEL NAME ☐ THERAPEUTIC CLASS

## Formulary Search

 Please enter a brand name above.



# Pharmacy Financial Payment Cycle

Kentucky Department for Medicaid Services

# Pharmacy Financial Payment Cycle

- Fee-For-Service is on a 7-day weekly EOB Cycle
- MCO will remain on the 7-day weekly EOB cycle.
- The first EOB cycle for KY Fee-For-Service started 1/1/24.
- Pharmacies received payments from Magellan for any claims processed prior to 1/1/24.



# Pharmacy Financial Payment Cycle

- 7-Day payment cycle:

EOB Calendar 2024		
7-DAY		
EOB	Start Date	End Date
23582	12/29/2024	1/4/2024
23583	1/5/2024	1/11/2024
23584	1/12/2024	1/18/2024
23585	1/19/2024	1/25/2024
23586	1/26/2024	2/1/2024
23587	2/2/2024	2/8/2024
23588	2/9/2024	2/15/2024
23589	2/16/2024	2/22/2024
23590	2/23/2024	2/29/2024
23591	3/1/2024	3/7/2024
23592	3/8/2024	3/14/2024
23593	3/15/2024	3/21/2024
23594	3/22/2024	3/28/2024
23595	3/29/2024	4/4/2024
23596	4/5/2024	4/11/2024
23597	4/12/2024	4/18/2024
23598	4/19/2024	4/25/2024
23599	4/26/2024	5/2/2024
23600	5/3/2024	5/9/2024
23601	5/10/2024	5/16/2024
23602	5/17/2024	5/23/2024
23603	5/24/2024	5/30/2024
23604	5/31/2024	6/6/2024
23605	6/7/2024	6/13/2024
23606	6/14/2024	6/20/2024
23607	6/21/2024	6/27/2024
23608	6/28/2024	7/4/2024

EOB Calendar 2024		
7-DAY		
EOB	Start Date	End Date
23609	7/5/2024	7/11/2024
23610	7/12/2024	7/18/2024
23611	7/19/2024	7/25/2024
23612	7/26/2024	8/1/2024
23613	8/2/2024	8/8/2024
23614	8/9/2024	8/15/2024
23615	8/16/2024	8/22/2024
23616	8/23/2024	8/29/2024
23617	8/30/2024	9/5/2024
23618	9/6/2024	9/12/2024
23619	9/13/2024	9/19/2024
23620	9/20/2024	9/26/2024
23621	9/27/2024	10/3/2024
23622	10/4/2024	10/10/2024
23623	10/11/2024	10/17/2024
23624	10/18/2024	10/24/2024
23625	10/25/2024	10/31/2024
23626	11/1/2024	11/7/2024
23627	11/8/2024	11/14/2024
23628	11/15/2024	11/21/2024
23629	11/22/2024	11/28/2024
23630	11/29/2024	12/5/2024
23631	12/6/2024	12/12/2024
23632	12/13/2024	12/19/2024
23633	12/20/2024	12/26/2024
23634	12/27/2024	1/2/2025



# Holiday EOB Schedule Impacted- Memorial Day

- Please be advised that due to the Memorial Day holiday, electronic and paper check payments made for the EOB cycle end dates below may experience an estimated one to three business days processing delay in your receipt of electronic payments or paper checks. However, if MCO funding is delayed, this delay could be extended to the next payment cycle. We apologize for any inconvenience.
- Individual banking institution policies re: application of ACH payments may vary: dates provided are estimates only.

Program	EOB Start	EOB End	Pay Date	Bank Holiday
FFS	5/3/2024	5/9/2024	5/24/2024	5/27/2024
MCO	5/10/2024	5/16/2024	5/24/2024	
MCO	5/17/2024	5/23/2024	5/31/2024	



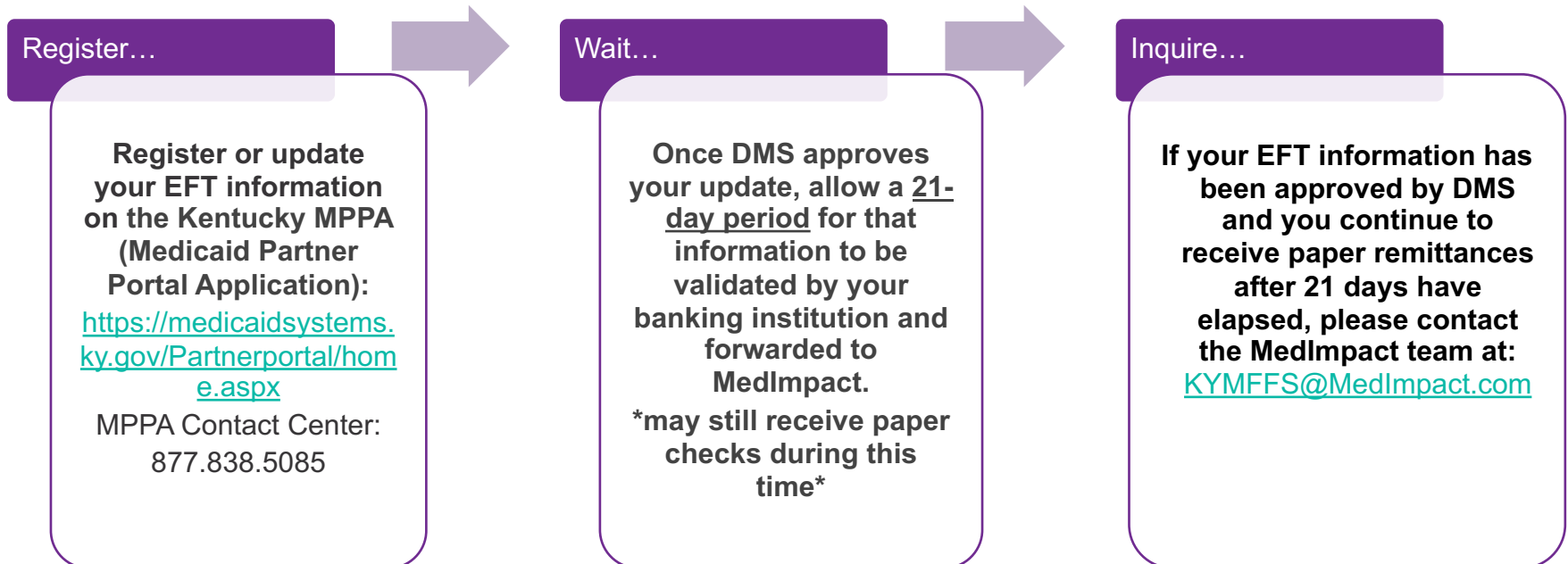
# Electronic Payment

MedImpact continues to encourage all pharmacies who are currently receiving paper reimbursements to register with Kentucky Medicaid for electronic payments.

Average Days from payment to deposit:

Electronic – 3 days  
Paper Checks – 11 days

## What's the process?



# P&T Committee

Kentucky Department for Medicaid Services

# P&T Committee

- P&T Meetings will now be hosted by MedImpact.
- The meeting dates for 2024 are:
  - January 18, 2024 (completed)
  - April 18, 2024 (completed)
  - July 18, 2024
  - October 17, 2024
- Meeting time is 1:00pm to 4:00pm ET
- The meeting schedule and invite information will also be posted to the portal <http://kyportal.medimpact.com/provider-documents/pt-committee>
  - A link to the individual meetings can be found in the meeting specific agenda once posted.
- Invites are NOT sent for these meetings by MedImpact or DMS. Pharmacy providers interested in joining should add the meetings to their calendar.
- Pharmacists interested in applying to join the P&T committee please see a link to the Kentucky Board and Commissions below.  
<https://governor.ky.gov/services/application-for-boards-and-commissions>





# Reminders

Kentucky Department for Medicaid Services

# NADAC Appeals

Providers can contact the NADAC help desk to provide notification of recent drug price changes that are not reflected in posted NADAC files.



The NADAC help desk can be contacted through the following means.

Toll-free phone: (855) 457-5264

Electronic mail [info@mslcrps.com](mailto:info@mslcrps.com)

Facsimile: (844) 860-0236



Pharmacy providers should use the NADAC [help desk form](https://www.Medicaid.Gov/medicaid/prescription-drugs/downloads/retail-price-survey/hdform.Pdf) to submit NADAC pricing inquiries. This form is available at <https://www.Medicaid.Gov/medicaid/prescription-drugs/downloads/retail-price-survey/hdform.Pdf>. All fields must be complete for proper submission of this form. Please do not include any personal health information (PHI) with submitted form or invoice.



Please note that the NADAC help desk will not address pharmacy inquiries into specific Kentucky claim reimbursement related questions or concerns. Please contact MedImpact regarding specific claim reimbursement questions.



# MAC Inquiries-Appeals

- Pharmacies can initiate a MAC research request by completing the form located here:
- <https://kyportal.medimpact.com/provider-documents/maximum-allowable-cost-mac>
- MAC inquiries apply to generic drugs only.
- Return the form with a copy of the invoice listing the current acquisition cost to MedImpact.
  - Attn: MAC department
  - Fax: 877-357-0005
  - E-mail: [StateMACProgram@medimpact.com](mailto:StateMACProgram@medimpact.com)



# MAC Research Request Form



## Kentucky Medicaid MAC Price Research Request Form

Please return this form with a copy of the invoice listing the current acquisition cost to MedImpact  
Attn: MAC Department  
Fax: 877-357-0005 or E-mail: [StateMACProgram@medimpact.com](mailto:StateMACProgram@medimpact.com)

By submitting this form, I am requesting that MedImpact research the Kentucky Medicaid Maximum Allowable Cost (MAC) List price of the drug listed on this form and respond about product availability or a price modification based on the information provided in the "Comments" section below.

### \*DENOTES REQUIRED FIELDS

\*DATE:

Provider Information		
*PROVIDER NAME:		*CONTACT NAME:
*PHONE NUMBER:	*FAX NUMBER:	*NPI NUMBER:
*EMAIL ADDRESS		

Drug Information			
*DRUG NAME:		*DRUG STRENGTH:	*DRUG DOSAGE FORM:
*NDC NUMBER:	*RECIPIENT ID NUMBER:		*RX NUMBER:
*PROVIDER ACQUISITION COST:	*DAW CODE:	QUANTITY DISPENSED:	*DATE OF SERVICE:

Comments
<input type="text"/>

MedImpact Use Only – Do Not Mark in this Area!
RESPONSE DATE:
RESPONSE:
<input type="text"/>
<input type="text"/>
<input type="text"/>

Note: Processing May Be Delayed if Information Submitted is Illegible or Incomplete.



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# Important Information

Kentucky Department for Medicaid Services

# Important Information

## Upcoming Informational Sessions

To facilitate information exchange and answer your questions, MedImpact will hold a series of web-based quarterly informational meetings as outlined below.

July	Status updates. Answer questions.	All providers <b>Date: TBD</b> Notification/Invitations are emailed to pharmacy providers 14 days and 3 days prior to the webinar and will include Microsoft Teams Meeting link and login instructions.
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# Important Information

## First Quarter Pharmacy Newsletter



### Pharmacy Quarterly Newsletter

Quarter 1 2024



Volume 1, Number 1

#### FFS Claims Processing Prior to 1/1/2024

MedImpact, along with DMS and Magellan, have established a process for rebills and reversals of claims processed by Magellan prior to 1/1/2024. Effective 3/21/2024, all switch vendors will enable routing of transactions to MedImpact using the Magellan claim routing information (BIN/PCN/Group) that was in effect until 12/31/2023:

BIN: 011529  
PCN: P022011529  
Group: KYMEDICAID

This routing information should only be used for reversals (B2) of claim transactions originally processed by Magellan. MedImpact will not accept any new claim transactions (B1) where the Magellan routing information is submitted, regardless of the Date of Service. If a rebill is required, use the Magellan routing information for the reversal (B2), and then the MedImpact routing information (see below) for the replacement claim (B1). This window for reversals will be available for 60 days, or through 5/20/2024, at which time the switches have been instructed to terminate routing of transactions submitted with the Magellan routing information.

For more information, visit: [https://kyportal.medimpact.com/sites/default/files/2024-02/kyfts\\_prior\\_1.1.24\\_claims\\_processing\\_final.pdf](https://kyportal.medimpact.com/sites/default/files/2024-02/kyfts_prior_1.1.24_claims_processing_final.pdf)

#### Generic Fluticasone HFA Moved to Preferred PDL Status

On 12/31/2023, GlaxoSmithKline (GSK) discontinued all strengths of Flovent HFA and Flovent Diskus. Supply was expected to diminish across the United States starting the first quarter of 2024. To minimize therapy disruptions for patients as well as the provider community, generic Fluticasone HFA inhalers moved to preferred status in the Glucocorticoids, Inhaled PDL class. This change went into effect on 1/5/2024.

#### GoodRx Pricing Integration

The integration of GoodRx pricing allows members with **commercial insurance** to access both the negotiated rate for prescription drugs through their plan sponsor and also the network rates through GoodRx. The plan will compare the two rates and pass along the lowest rate to the member. When the GoodRx pricing is utilized, a remittance fee may be charged to the pharmacy. In some instances, pharmacies are seeing what they believe may be a net loss on some claims due to the low negotiated rate through GoodRx and the additional remittance fee charged to the pharmacy. **If a member has Medicaid as the secondary payer, pharmacies should continue to submit the claim to Kentucky Medicaid after first billing to the primary insurance. Providers must bill all other payers first. Kentucky Medicaid is always the payer of last resort.**

For more information, visit: [https://kyportal.medimpact.com/sites/default/files/2024-03/kym\\_goodrx\\_march\\_2024.pdf](https://kyportal.medimpact.com/sites/default/files/2024-03/kym_goodrx_march_2024.pdf)

#### Lagevrio™ Reimbursement

In November 2023, distribution switched from government-managed to traditional commercial distribution. MedImpact has updated the pricing algorithm to allow ingredient cost reimbursement for the NDC distributed through commercial vendors. Providers should continue to dispense the government-provided EUA product until their supply is exhausted. Prescriptions dispensed using the commercially distributed product for Kentucky Managed Care members prior to 2/8/2024, may be reversed and reprocessed to include the ingredient cost in the final paid amount. Providers who do not reprocess previously submitted claims will be automatically reprocessed in the next 60 days by MedImpact.



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### Pharmacy Quarterly Newsletter

Quarter 1 2024



Volume 1, Number 1

For more information, visit: [https://kyportal.medimpact.com/sites/default/files/2024-02/kym\\_provider\\_comm\\_lagevrio\\_final.pdf](https://kyportal.medimpact.com/sites/default/files/2024-02/kym_provider_comm_lagevrio_final.pdf)

#### Levemir Discontinuation

Novo Nordisk has announced the permanent discontinuation of their Levemir® products:

- Levemir® FlexPen® was discontinued on 4/1/2024, with supply disruption mid-January 2024.
- Levemir® vial will be discontinued on 12/31/2024.

Currently, Levemir® products are preferred agents for Kentucky Medicaid. To avoid treatment disruption as supply decreases, providers may consider changing therapy to another insulin.

For the full list of preferred products for Kentucky Medicaid, visit: <https://kyportal.medimpact.com/provider-documents/drug-information>

#### NADAC/WAC Pricing Reminder and Provider Payment Algorithms

The provider is paid at the lesser of:

- Wholesale Acquisition Cost (WAC) + dispense fee; OR
- Federal Upper Limit (FUL) + dispense fee; OR
- State Maximum Allowable Cost (MAC) + dispense fee; OR
- National Average Drug Acquisition Cost (NADAC) + dispense fee; OR
- Usual & Customary (U&C);

A professional dispensing fee of \$10.64 is paid once per member, per drug, per provider, every 23 days for any qualifying dispensed prescription. The final reimbursement determination pricing information is returned in the claim response Basis of Reimbursement Determination (NCPDP field#522-FM). The value and the corresponding reference price source are shown below:

- 4 – Usual & Customary Paid as Submitted
- 6 – MAC
- 10 – ASP
- 13 – WAC
- 20 – NADAC
- 24 – FUL

MedImpact reimburses providers as required, according to the Kentucky Department of Medicaid Services (DMS) fee-for-service (FFS) reimbursement methodology. The FFS methodology includes the NADAC benchmark at which most claims reimburse. Providers can see the most up-to-date NADAC prices on the CMS website which is linked below. Website users may track changes inclusive of the updated NADAC price and effective date. For brand products, compendia posted updated NADAC price(s) may be backdated to the effective date of the WAC or AWP increase. To identify updated NADAC price changes, please see below.

- Click on the CMS Pharmacy Pricing Page: [Pharmacy Pricing: Medicaid](#)
- Scroll to the NADAC Cost Comparison Data Section
- Click on the most recent weekly NADAC Comparison downloadable files. The file identifies what NADAC prices have been updated, the new and old NADAC price along with the effective date. Field values in this file are described below.



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# Important Information

## MedImpact Contact Information:

Team	Question Type	Contact Info
KY Account Team FFS	Program questions	<a href="mailto:KYMFFS@medimpact.com">KYMFFS@medimpact.com</a>
KY Account Team MCO	Program questions	<a href="mailto:KYMCOBPM@medimpact.com">KYMCOBPM@medimpact.com</a>
Pharmacy Provider Network Questions	EFT, RA questions	Email: <a href="mailto:PharmacyOperationsSups@MedImpact.com">PharmacyOperationsSups@MedImpact.com</a> or Web: <a href="https://pharmacy.MedImpact.com">https://pharmacy.MedImpact.com</a>





# Important Numbers

## Claim Submission

**BIN: 023880  
(MCO)**

**BIN: 026309 (FFS)**

**PCN: KYPROD1**

**Group ID: KYM01  
(MCO)**

**Group ID: KYF01  
(FFS)**

Member number is  
Medicaid ID

*Note: The BIN and  
group number  
changes for FFS.  
The PCN will be the  
same.*

## Pharmacy Provider Help Desk

**MCO: 800-210-7628**

**FFS: 877-403-6034**

24 hours a day/ 7 days a  
week

(Pharmacy Provider  
Assistance for program  
questions)

## Clinical Call Center

**MCO: 844-336-2676**

**FFS: 877-403-6034**

8:00AM-7:00PM EST, 7  
days a week

**Fax: 858-357-2612**

(Same fax for MCO and  
FFS)

## MedImpact Pharmacy Portal

Kentucky specific info  
available at:

**[https://kyportal.  
medimpact.com](https://kyportal.medimpact.com)**

## Member Services

**Phone: 800-635-2570**

Hours: 8:00AM–5:00PM  
EST

Monday – Friday

## Voice Response Eligibility Verification (Member)

**Phone: 800-807-1301**

24 hours a day/ 7 days a  
week.

## Provider Management/Enroll ment

**Phone: 877-838-5085**

**Fax: 502-226-1898**

Hours: 8:00AM-4:30PM  
EST, Monday – Friday



# Frequently Asked Questions

Kentucky Department for Medicaid Services

# Frequently Asked Questions

**Q. Does a pharmacy need to re-enroll for Fee-for-Service with MedImpact?**

No, you are already enrolled in the CHFS pharmacy network for both MCO and FFS.

**Q. How do I submit claims for Fee-for-Service?**

BIN Number: 026309

PCN: KYPROD1

Group ID: KYF01

**Q. Is there a different number for MedImpact's help desk for Fee-for-Service?**

Yes.

Pharmacy and Clinical Call Center Phone: 877-403-6034

Hours: Technical Call Center: 24 hours a day, 7 days a week

Clinical Call Center: 8:00 am – 7:00 pm EST, 7 days a week

MCO numbers remain unchanged.



# Frequently Asked Questions

**Q. How does the “lowest of logic” for payments to pharmacies work?**

All available price inputs are calculated, and the lowest instance will be the Medicaid allowed amount and will be the final price type.

**Q. Where can I find the single Preferred Drug List (PDL) and how often is it updated?**

Effective 1/1/24 MedImpact will be managing the PDL. It will be posted on the MedImpact portal. Updates will occur with P&T changes as needed.

(<https://kyportal.medimpact.com/provider-documents/drug-information>)

**Q. Will the dispensing fee be reduced if paid at usual and customary (U&C)?**

The claim will be paid at U&C, no additional fees will be paid. This is the same for MCO and FFS.



# Frequently Asked Questions

**Q. Do pharmacies need to get new Prior Authorizations from MedImpact?**

Members existing Prior Authorizations have been transferred to MedImpact and will be in effect through their original end date.

**Q. Do pharmacies need to submit OPPRA (Other Payer-Patient Responsibility Amount – NCPDP Field NP) for COB claims?**

No, CHFS is requiring OPAP (Other Payer Amount Paid – NCPDP Field HC) for COB claims.

**Q. With the change to MedImpact have there been a lot of PDL (formulary) changes?**

No, there haven't been major changes to the formulary. The portal contains links to documents, notices, past and upcoming changes to the PDL and P&T committee meeting information.



# Frequently Asked Questions

## **Q. Did Member Medicaid ID's change?**

No. However, the old PBM stored multiple old ID numbers, but MedImpact will only store one alternate ID. Pharmacies should request the member's new card and update their system with the new ID.

## **Q. Why is the claim rejecting for “No member found” when the submitted Medicaid ID is correct?**

MedImpact verifies a member on their Medicaid ID and their date of birth. Please confirm the member DOB and update it in your pharmacy system. Please refer the member-to-member services at 800-635-2570 to ensure the Commonwealth has the correct date.

## **Q. Where can pharmacies initiate a MAC research request?**

The form can be found on the MI portal with the link below.

<https://kyportal.medimpact.com/provider-documents/maximum-allowable-cost-mac>



# Questions?

[KYMCOPBM@medimpact.com](mailto:KYMCOPBM@medimpact.com)

[KYMFFS@medimpact.com](mailto:KYMFFS@medimpact.com)

A copy of the deck will be available on the MI portal.

Please visit:

<https://kyportal.medimpact.com/provider-documents/provider-webinars>

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The MedImpact logo, featuring the word "MedImpact" in a bold, sans-serif font. The "i" in "Impact" is stylized with a dot that forms a small circle. The logo is positioned in the bottom right corner of the slide.



Thank you.



# Resources

Kentucky Department for Medicaid Services

# CHFS Provider Enrollment

- Since you are already enrolled in Kentucky Medicaid, there is nothing you need to do.
- MedImpact will use the Commonwealth's existing pharmacy network for the Medicaid FFS pharmacy program.

## Provider Enrollment

### Kentucky Cabinet for Health and Family Services Provider Management/Enrollment Unit

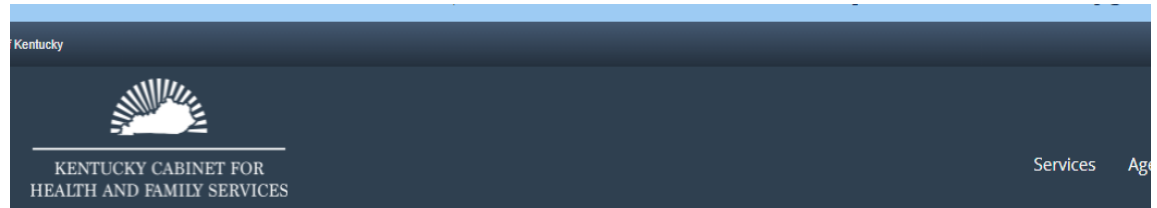
Phone: 877-838-5085

Fax: 502-226-1898

Hours: 8:00am – 4:30pm EST

Monday - Friday

<https://chfs.ky.gov/agencies/dms/dpi/pe/Pages/mppa.aspx>



[CHFS](#) > [Agencies](#) > [Department for Medicaid Services](#) > [Division of Program Integrity](#) > [Provider Enrollment](#) > Medicaid Partner Portal Application

#### PROVIDER ENROLLMENT

### Medicaid Partner Portal Application

#### KY MPPA Web Address Changed

The KY MPPA web address (URL) changed Sept. 7, 2019.

Users who access the new KY MPPA site through KOG will be directed to the new location. Users who access KY MPPA through the Let's Get Started link will need to update their bookmark/favorite/shortcut.

Access the [KY MPPA website](#)

To get started and learn more about KY MPPA, visit the [KY MPPA Training Resources web page](#).

- Access the Training Resources Topic Map for an overview of training materials available. Use the topics menu to locate training materials in the Training Media and Training Document areas.
- Follow the link in the Upcoming Training Webinars section to register to attend the live webinar training series. A registration link is also available under Helpful Links.
- Access the self-paced training plans to learn about KY MPPA on your own schedule.

#### Helpful Links

[Register for KY MPPA](#)

[Subscribe to CHFS e](#)  
Provider Enrollment

#### KY MPPA Web I

[Newsletters and Rel](#)

[Training Resources](#)

#### Additional Info

- Authorized Delega
- Organization Admi



# CHFS Pharmacy Enrollment Process

- Pharmacy Enrollment and any changes to provider information must be made through the [Medicaid Partner Portal Application \(MPPA\)](#)
- MedImpact receives provider enrollment and payment method information from The Commonwealth daily (Monday-Friday). This information is loaded into the system nightly.
- Per KY Regulations, The Commonwealth has sixty (60) days to complete a “clean” application. Clean means no corrections. The Commonwealth doesn’t typically take the full 60 days, but it is dependent on the volume of applications and could take on average from 5-30 days.
- All new enrollees will be set up to receive checks, via US mail until their EFT information is processed by The Commonwealth and sent to MedImpact. This process takes up to 21 days.



# CHFS Pharmacy Enrollment Process

- Pharmacy information updates, such as change of ownership, changing banks or bank accounts that may affect the EFT information can also take up to 21 days to be processed by The Commonwealth and sent to MedImpact. During this 21-day period, payment method is reverted to check payments sent via US mail.
- Until MedImpact receives the final, approved information, we cannot make any manual updates to the payment method during this processing time.
- Due to the timing of the data received from The Commonwealth, pharmacies could potentially get a manual check and an EFT payment for a single EOB cycle.
- Pharmacies may check the portal for application and change updates and call The Commonwealth Provider Enrollment at 877-838-5085 **M-F 8:00 am – 4:30 pm EST.**



# NADAC/WAC Pricing

- NADAC prices for brand name products increase throughout the year, with most price increases occurring in the months of January and July because of drug manufacturers increasing their Wholesale Acquisition Cost (WAC) and Average Wholesale Price (AWP) prices.
- MedImpact would like to provide a review of the NADAC process and the ability to potentially reverse and reprocess claims on products which providers' acquisition cost may have increased.
  - MedImpact reimburses providers as required, according to the Kentucky Department of Medicaid Services (DMS) fee-for-service (FFS) reimbursement methodology. The FFS methodology includes the NADAC benchmark at which most claims reimburse. The NADAC is a published pricing benchmark maintained by the Centers for Medicare & Medicaid Services (CMS), not MedImpact or DMS; therefore, neither MedImpact nor DMS have the capability to adjust the NADAC price. NADAC updates are posted to the CMS website every Wednesday.
    - Updated brand NADAC prices are typically reflective of increases in WAC and AWP for the previous week.
  - Drug Compendia (e.g.: First Databank and Medi-Span) pull down the updated NADAC file and incorporate the changes into their Medicaid Pricing Modules.
  - Updated weekly NADAC prices are then loaded into MedImpact's claim adjudication system the following Friday.
  - NADAC prices are reviewed for updates on both a weekly and monthly schedule – Weekly due to changes in published rates (i.e., WAC)



# NADAC/WAC Pricing

- Providers can see the most up-to-date NADAC prices on the CMS website which is linked below. Website users may track changes inclusive of the updated NADAC price and effective date. For brand products, compendia posted updated NADAC price(s) may be backdated to the effective date of the WAC or AWP increase.
- To identify updated NADAC price changes please see below.
  - Click on the CMS Pharmacy Pricing Page: [Pharmacy Pricing: Medicaid](#)
  - Scroll to the NADAC Cost Comparison Data Section
  - Click on the most recent weekly NADAC Comparison downloadable files. The file identifies what NADAC prices have been updated, the new and old NADAC price along with the effective date. Field values in this file are described below

NADAC File Name	Field Description
NADAC Effective Date	The date the NADAC price becomes effective; typically, retroactive to the date of the WAC change.
As of Date	The date the NADAC price was updated by Myers & Stauffer (M&S); aligns with the weekly (Wednesday) M&S maintenance cycle.



# NADAC/WAC Pricing

- Providers who feel they may have adjudicated claims prior to the NADAC prices being updated should review posted NADAC rates along with your product invoices. Changes related to these manufacturer increases may impact your reimbursement for newly purchased inventory.
- See [CMS pharmacy pricing](#) for the most up-to-date NADAC prices.
- Website users may track changes inclusive of the updated NADAC price and effective date.
- Any questions or concerns regarding NADAC pricing, please contact Myers and Stauffer, the CMS NADAC vendor:
  - Email [info@mslcrps.com](mailto:info@mslcrps.com)
  - Toll-free help desk phone number (855) 457-5264



# NADAC/WAC Pricing Example

Date	12/1/23	1/1/24	NADAC PRICE UPDATE OCCURS IN EARLY FEBRUARY. (There is usually a ~1 month lag for NADAC price updates)	2/15/24
NADAC Price	\$103	\$103		\$88
WAC Price (based on daily compendia updates)	\$100	\$90 (based on WAC decrease)		\$90
Pharmacy Acquisition Cost	\$98	\$98		\$85
Pharmacy Reimbursement Based on Lowest of Logic	\$100 (WAC) + \$10.64 (DF) = \$110.64	\$90 (WAC) + \$10.64 (DF) = \$100.64		\$88 (NADAC) + \$10.64 (DF) = \$98.64





# Universal PA Form

- MedImpact uses a Universal PA form that is required by the Department for Medicaid Services. Best practices for submitting a PA are to utilize Electronic Prescribing System (ePA) which is integrated into physician's ePA or covermymeds.com.
- For manual prior authorizations, please submit MedImpact's Universal PA form.
- To access, view and print the form please visit:

<https://kyportal.Medimpact.Com>

- Select provider portal → resource → forms
- Fax document to 858-357-2612



# Vaccine Counseling

- Effective November 1, 2022, for pharmacy providers
- Billing manual can be found at: [provider billing instructions \(kymmis.com\)](#)
- For any questions, please contact Gainwell
  - Provider representatives for walkthrough of claims submission professional panels

[Vicky.Hicks@gainwelltechnologies.Com](mailto:Vicky.Hicks@gainwelltechnologies.Com)

[Martha.Senn@gainwelltechnologies.Com](mailto:Martha.Senn@gainwelltechnologies.Com)

- Gainwell provider call center number: 1-800-807-1232
- Gainwell provider inquiry email  
[ky\\_provider\\_inquiry@gainwelltechnologies.com](mailto:ky_provider_inquiry@gainwelltechnologies.com)



# Ethics Point

- MedImpact utilizes Ethics Point to provide secure and independent reporting that offers:
  - Confidential reporting that allows the reporter to remain anonymous if they choose
  - 24-hour telephone and web-based reporting options
  - Ability to follow-up on the report, even if reported anonymously

Public Internet	Toll-Free Phone
From any computer having internet access (home, public library, neighbor, etc.), Go to <a href="http://www.Ethicspoint.com">www.Ethicspoint.com</a> and click on "file A new report", and follow the instructions.	Call your Ethics Point toll-free hotline at 1-800-915-2185. An intake specialist will assist you with entering your report into the Ethics Point system.