To:

Dispensing
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Programs

Drug Utilization Review and Pharmaceutical Care Services May Be Submitted in the Same Transaction

Effective for claims processed on and after December 14, 2004, Wisconsin Medicaid is enhancing the pharmacy real-time claims submission process in the Point-of-Sale system to allow a response to a Drug Utilization Review alert and Pharmaceutical Care service claim to be submitted in the same transaction.

Currently, Wisconsin Medicaid accepts only one set of Drug Utilization Review (DUR) fields per transaction in the pharmacy Point-of-Sale (POS) system. Effective for claims processed on and after December 14, 2004, Wisconsin Medicaid will accept up to two sets of DUR fields per transaction. Providers may continue to send one set of DUR fields if the 439-E4, "Reason for Service," field for both DUR and Pharmaceutical Care (PC) are the same. However, the POS system enhancement will now allow providers to submit both a response to a DUR alert and a PC dispensing fee in the same transaction.

As a reminder to providers, the pharmacy is required to obtain participant consent for PC services prior to providing PC services for SeniorCare participants.

Required National Council for Prescription Drug Programs Fields for Claims Submissions and Reversals

Wisconsin Medicaid requires the following National Council for Prescription Drug Programs (NCPDP) version 5.1 fields when providers submit noncompound drug claims or reversals with a response to a DUR alert and PC dispensing fee:

NCPDP Field	NCPDP Field Name
473-7E	DUR/Prospective Payment System (PPS) Code Counter
439-E4	Reason for Service
440-E5	Professional Service
441-E6	Result of Service
474-8E	DUR/PPS Level of Effort (LOE)*

*The DUR/PPS LOE is only required on PC reimbursement claim submissions.

Providers are required to have NCPDP field 473-7E, "DUR/PPS Code Counter," present since Wisconsin Medicaid, BadgerCare, and SeniorCare will now monitor that field for both compound and noncompound transactions.

For compound drug claims, providers are still required to indicate a DUR/PPS LOE code to determine compound drug dispensing fee reimbursement. A PC service cannot be billed for a compound drug.

Software Testing with Wisconsin Medicaid

Pharmacy providers may test POS system changes at any time with Wisconsin Medicaid. Providers interested in software testing should contact the Wisconsin Division of Health Care Financing (DHCF) Electronic Data Interchange (EDI) Department for a test packet. After providers receive a test packet, they may contact their software vendor to coordinate testing.

Providers should work closely with their software vendors, information technology staff, and software user guides to verify that POS claims and reversals are submitted accurately according to the Wisconsin Medicaid Companion Document to HIPAA Implementation Guide: NCPDP 5.1 (Rev. 12/14/04). This document is available on the "Electronic Data Interchange (EDI) Information" page of the Medicaid Web site at *dhfs.wisconsin.gov/medicaid/*. The NCPDP 5.1 Implementation Guide is available from the NCPDP Web site at *www.ncpdp.org/*.

Providers and their software vendors can contact the DHCF EDI Department if they are interested in testing. For more information about the EDI Department or testing, providers may call the EDI Department at (608) 221-9036 or e-mail *wiedi@dhfs.state.wi.us*.

For More Information

Providers should refer to their Wisconsin Medicaid Companion Document to HIPAA Implementation Guide: NCPDP 5.1 (Rev. 12/14/04) for more information on NCPDP fields. Refer to the Drug Utilization Review and Pharmaceutical Care section of the Pharmacy Handbook for Wisconsin Medicaid's policy on submitting claims for a response to a DUR alert and a PC dispensing fee.

Information Regarding Medicaid HMOs

This *Wisconsin Medicaid and BadgerCare Update* contains Medicaid fee-for-service policy and applies to providers of services to recipients on fee-for-service Medicaid only. For Medicaid HMO or managed care policy, contact the appropriate managed care organization. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.