



Pharmacy Pearls

Transition to NYRx Medicaid Pharmacy Program

For a comprehensive FAQ, please visit:

Contact: AHPPharmacist@urmc.rochester.edu

https://www.health.ny.gov/health_care/medicaid/redesign/mrt2/pharmacy_transition/pharmacy_transition_faq.htm

Current Process vs New Process Starting April 1st, 2023

Q: How do NYS Medicaid-enrolled patients currently get their prescriptions?

A: Currently, NYS Medicaid patients access their pharmacy benefits through a health plan, rather than Medicaid Fee-For Service (now called NYRx). This includes anyone enrolled in Managed Care (MC) plans, Health and Recovery Plans (HARPs) and HIV-Special Needs Plans (HIV-SNPs). Currently, *the state reimburses the health plan* rather than the pharmacy.

Q: After April 1st, 2023, how will NYS Medicaid-enrolled patients get their prescriptions?

A: After April 1st, all NYS Medicaid patients enrolled in MC plans will receive their prescription drugs through NYRx, the Medicaid Pharmacy Program. NYRx allows NYS *to pay pharmacies directly* for medications and supplies for Medicaid members. Patients can continue to use their same pharmacy as long as the pharmacy is registered under the NYRx Program.

Q: Why is this happening?

A: Among other things, transition to NYRx provides NYS with full visibility into prescription drug costs, centralizes and leverages negotiation power with manufacturers, provides a single drug formulary with standardized utilization management protocols, and addresses the growth of the 340B program and associated reductions in NYS rebate revenue.

Q: Are any plans excluded from this transition?

A: Yes, Managed Long-Term Care plans (e.g. PACE, MAP, MLTC), the Essential Plan, and Child Health plus (CHP) will not be affected by this transition.

Q: How will the role of MC plans change after the pharmacy benefit is transitioned in the Medicaid NYRx Pharmacy program?

A: MC plans will continue to be responsible for providing NYS Medicaid-enrolled patients other non-pharmacy benefits, including medical benefits.

Resources for Providers

- Policy and coverage questions may be sent to NYRx@health.ny.gov.
- Provider enrollment and billing questions can be directed to the eMedNY Call Center at (800) 343-9000.
- For provider assistance with prior authorizations (PAs), clinical concerns, and the Preferred Drug Program, contact the Magellan Clinical Call Center at (877) 309-9493. Select option "1" for prescriber. The call center is operational 24/7. Fax requests are permitted for most drugs. Completed PA forms should be faxed to (800) 268-2990. Fax requests may take up to 24 hours to process. PA forms and references are available [here](#). If there is a delay in obtaining a PA on a medication, the provider can call (877) 309-9493 to request a 72-hour emergency fill to hold the patient over until the PA is obtained.
- For a comprehensive list of the NYRx Preferred Drug Program, Clinical Drug Review Program, Drug Utilization Review Program, Statewide Medication Assisted Treatment Formulary, Brand Less Than Generic Program, Mandatory Generic Drug Program and the Dose Optimization Program, click [here](#).

Note: You must be enrolled as a referring or billing provider with NYS Medicaid in order for pharmacies to bill through NYRx. Interns and residents need not enroll, as pharmacies can override these claims as long as their supervising physician is included on the prescription.

What Patients Need to Know

Q: How was this transition in my pharmacy benefit communicated to me?

A: NYRx sent mailings to all NYS Medicaid-enrolled MC plan members who will be transitioning their pharmacy benefit to NYRx. If a phone number was on file, text messages were also sent.

Q: Will I need a new pharmacy insurance card?

A: No, existing Medicaid patients will not receive a new card and there will be no change to member ID. They can continue to use their existing NYS Benefit Card or their MC Health Plan card at the pharmacy.

Q: How do I know if my pharmacy is enrolled with NYRx?

A: You can verify enrolled pharmacies by accessing the [eMedNY website for members](#) and select “Find a Pharmacy/Medical Equipment Supplier”. Most major chains and independent pharmacies located in NYS are enrolled.

Q: Will my insulin pump supplies be impacted by this transition?

A: No, external ambulatory infusion pumps for insulin are not part of the pharmacy benefit transition and will remain the responsibility of the MC plan.

Q: Will my continuous glucose monitor (CGM) be filled under my MC medical benefit or my NYRx pharmacy benefit?

A: Preferred CGM devices should be billed via the Medicaid NYRx Pharmacy Benefit. The preferred list can be found [here](#). Non-Preferred CGM devices should be billed under the MC medical benefit.

Q: Can I continue to get my medications delivered to me through mail order? What about existing refills?

A: Yes, patients with NYRx can continue to receive their medications through their mail order pharmacy as long as the pharmacy is enrolled in the NYRx program. Refills are still valid on current prescriptions within 1 year from date of issue.

Q: I still have questions. Is there a phone number I can call?

A: The NYRx Helpline for Members phone number is (855) 648-1909. Regular hours are M-F 8am-8pm and Sat 9am-1pm. There will be additional hours Sat 4/1 and Sun 4/2 from 9am-5pm.

What Providers Need to Know

Q: How will the pharmacy benefit transition impact Value Based Payment (VBP) arrangements that MC plans current have with providers?

A: NYS DOH does not view the transition as a barrier for existing or future VBP arrangements. NYS DOH will be delivering data to the plans in the form of a daily claims file as well as a set of on-demand reports. These reports will provide for timely access to critical data and ensure that existing VBP arrangements between MC plans and providers continue post transition.

Q: Does this affect practitioner administered medications?

A: No, MC plans are still responsible for developing coverage and billing policies for practitioner administered (J-code) medications.

Q: Which medications and supplies are covered?

A: This [link](#) can be used to access the “Medicaid Pharmacy List of Reimbursable Drugs”. Click [here](#) for the “List of OTC Categories and Supply Codes”.

Q: Will all prior authorization approvals issued prior to April 1st, 2023 be honored after the transition?

A: Yes, PAs issued by the MC plan prior to April 1st will be honored.

Q: Will there be a transition period to allow my patient to continue to receive their prescribed medication if their medication is no longer preferred under NYRx?

A: Yes, there will be a transition period from April 1st to June 30th, 2023 where a patient may be provided a one-time, temporary fill for up to a 30-day supply for a medication that would normally require PA under the NYRx Preferred Drug Program. This allows time for prescribers to either seek PA or change to a preferred medication.

Q: What about prior authorizations for medical supplies that are billed through the pharmacy benefit? Will there be a transition period with these products as well?

A: Yes, DME authorization requirements will be temporarily relaxed during the transition period from April 1st to June 30th, 2023. NYSDOH DME staff will monitor these claims and outreach to providers to assist in obtaining the appropriate authorizations for future claims.

DISCLAIMER: The transition to the NYRx Medicaid Pharmacy Program is scheduled to go-live on April 1st, 2023. There are political and budgetary factors that may affect the existence of this program and/or go-live date. We will continue to provide updates as they come on this transition.