

The Official Newsletter of the New York State Medicaid Program

January 2023 Volume 39 | Number 1

### NYRx Pharmacy Benefit Transition Special Edition – Part Two



**Effective April 1, 2023**, New York State (NYS) Medicaid members enrolled in mainstream Medicaid Managed Care (MMC) Plans, Health and Recovery Plans (HARPs), and Human Immunodeficiency Virus-Special Needs Plans (HIV-SNPs) will receive their pharmacy benefits through the NYS Medicaid Pharmacy Program (NYRx) instead of through their MMC Plan. The pharmacy benefit transition to NYRx does not apply to NYS Medicaid members enrolled in Managed Long-Term Care (MLTC) Plans [e.g., MLTC, Programs of All-Inclusive Care for the Elderly (PACE), Medicaid Advantage Plus (MAP)], the Essential Plan (EP), or Child Health Plus (CHP). Transitioning the pharmacy benefit from MMC to NYRx will provide NYS with full visibility into prescription drug costs, allow centralization of the benefit, leverage negotiating power, and provide a uniform list of covered drugs with standardized utilization management protocols simplifying and streamlining the drug benefit for NYS Medicaid members and MMC enrollees. NYS Medicaid members have comprehensive drug coverage and equitable access to an extensive network of over 5,000 pharmacy providers. This guidance provides information in addition to what was provided in the October 2022 *NYRx Pharmacy Benefit Transition* – *Part One* Special Edition issue of the *Medicaid Update*, located at: <a href="https://www.health.ny.gov/health.care/medicaid/program/update/2022/docs/mu\_no11\_oct22\_speced.pdf">https://www.health.ny.gov/health.care/medicaid/program/update/2022/docs/mu\_no11\_oct22\_speced.pdf</a>.

#### **Information for Pharmacies**

**Effective April 1, 2023**, pharmacies will need to bill NYRx using the Client Identification Number (CIN), which can be found on the NYS Medicaid Common Benefit Identification Card (CBIC) and on the MMC card of the enrollee. Each MMC Plan will implement point-of-service claim denial messaging that directs pharmacies to bill NYRx where applicable. In a future update, NYS Department of Health (DOH) will provide the claim denial messaging that will be used by MMC Plans, starting April 1, 2023.

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When submitting NYRx claims to NYS Medicaid via the National Council for Prescription Drug Program (NCPDP) D.0 format, the Bank Identification Number (BIN) and Processor Control Number (PCN) are required. Specific details can be found in the October 2022 NYRx Pharmacy Benefit Transition - Part One Special Edition issue of the Medicaid Update, located at: <u>https://www.health.ny.gov/health\_care/medicaid/program/update/2022/docs/mu\_no11\_oct22\_speced.pdf</u>. NYS Medicaid members may also contact the NYS Medicaid Consumer Helpline by calling (800) 541-2831 to obtain their CIN.

#### Member/Enrollee Identification Number – Client Identification Number

The MMC Plan Identification (ID) number card contains the Client Identification Number (CIN), which is unique to NYS Medicaid members and MMC enrollees and should be used to bill NYRx. The CIN is always represented in the following format: "**XX00000X**", and in some cases, the CIN may be embedded in the MMC Plan ID Number of the enrollee. The CIN can be found on **both** the Plan ID Card and NYS Medicaid CBIC of the NYS Medicaid member and MMC enrollee.

The chart below indicates the CIN format for each MMC Plan ID card. Card samples which identify the CIN location on the MMC Plan ID card can be found on the New York State Medicaid Managed Care (MMC) Pharmacy Benefit Information Center website, located at: <u>https://mmcdruginformation.nysdoh.suny.edu/</u>.

Plan Name	Member/Enrollee Plan Identification (ID) Number: "Member Plan ID# is Client Identification Number (CIN)", "Embedded in Plan ID#", or "CIN Shown Separately on Plan Card"	
Affinity by Molina Healthcare	CIN Shown Separately on Plan Card	
Amida Care	Member Plan ID# is CIN	
CDPHP	CIN Embedded in Member's Plan ID#	
Emblem Health	CIN Embedded in Member's Plan ID#	
Empire BCBS HealthPlus	Member Plan ID# is CIN	
Excellus	CIN Shown Separately on Plan Card	
Fidelis	CIN Shown Separately on Plan Card	
Healthfirst	Member Plan ID# is CIN	
Highmark BCBS of Western NY	CIN Shown Separately on Plan Card	
Independent Health	CIN Embedded in Member's Plan ID#	
MetroPlus	Member Plan ID# is CIN	
Molina Healthcare	Member Plan ID# is CIN	
MVP Healthcare	CIN Shown Separately on Plan Card	
United Healthcare	CIN Shown Separately on Plan Card	
Univera Healthcare	CIN Shown Separately on Plan Card	
VNS Health	CIN Shown Separately on Plan Card	

#### MMC Plan ID Card Format:

#### **Eligibility Determination**

Pharmacists may conduct an eligibility check and/or obtain the CIN of the NYS Medicaid member and MMC enrollee, by using one of the methods in the chart below.

Method	Summary	Resources
E 1 Transaction	Eligibility Verification: Instructions to	New York State Department of Health
	complete this transaction begin on page 10	(NYS DOH) Office of Health Insurance
	of the resource document provided.	Programs (OHIP) Standard Companion
		Guide – Transaction Information
		document, located at:
		https://www.emedny.org/hipaa/5010/tra
		nsactions/NCPDP_D.0_Companion_Gu
		ide.pdf
electronic	Providers must have an ePACES account	eMedNY ePACES Help/Log-in:
Provider	then have available and be prepared to	https://epaces.emedny.org/
Assisted Claim	enter the following information:	
Entry System	Obtain Client Identification Number (CIN):	ePACES - MEVS Eligibility Request
(ePACES)	<ul> <li>First and Last Name</li> </ul>	instructional document:
	<ul> <li>Date of Birth (DOB)</li> </ul>	https://www.emedny.org/HIPAA/QuickR
	<ul> <li>Social Security Number (SSN)</li> </ul>	efDocs/ePACES-Eligibility_Request.pdf
	Gender	
	Eligibility Verification:	
	<ul> <li>First and Last Name</li> </ul>	
	• DOB	
	SSN or CIN	
	Gender	
Touchtone	Eligibility Verification: Providers must have	New York State Programs MEVS
Telephone	the following information:	Instructions for Completing a
Verification	CIN	Telephone Transaction document:
System	Provider National Provider Identifier	https://www.emedny.org/ProviderManu
	(NPI) or Medicaid Management	als/5010/MEVS%20Quick%20Referenc
	Information System (MMIS) Number	e%20Guides/5010_MEVS_Telephone_
	Ordering Provider NPI (if applicable)	Quick_Reference_Guide.pdf

#### Methods to Check Eligibility or Obtain the CIN:

#### Identifying Transition Fills

As previously noted in the October 2022 *NYRx Pharmacy Benefit Transition – Part One* Special Edition issue of the *Medicaid Update*, located at: <u>https://www.health.ny.gov/health\_care/medicaid/program/update/2022/</u><u>docs/mu\_no11\_oct22\_speced.pdf</u>, a one-time "transition fill" will be allowed for non-preferred drugs and diabetic supplies. Pharmacists may work with the patient and contact their prescriber to either change the prescription to another drug or supply or obtain a prior authorization (PA) following the transition fill.

Transition fills will be identified in the eMedNY claim response using **NCPDP field 548-6F**, *Approved Message Code*, with code "**005**" — *Claim paid under the plan's transition benefit period, otherwise claim would have rejected as PA is required.* 

#### Vaccines Administered by Pharmacists

As indicated in the *Scope of Benefits* document, located at: <u>https://www.health.ny.gov/health\_care/medicaid/</u> <u>redesign/mrt2/pharmacy\_transition/repository/docs/rx\_scope\_of\_benefits.pdf</u>, vaccines that are administered by pharmacists are subject to the benefit transition and should be billed to NYRx. Policy and billing guidance for vaccines can be found within the *New York State Medicaid Fee-for-Service Program Pharmacists as Immunizers Fact Sheet*, located at: <u>https://www.health.ny.gov/health\_care/medicaid/program/docs/phar</u> <u>immun fact.pdf</u>.

Policy and billing instructions for the administration for Coronavirus Disease 2019 (COVID-19) vaccines can be found under the "Both Medical and Pharmacy" tab of the NYS DOH "COVID-19 Guidance for Medicaid Providers — Coverage and Billing Guidance" web page, located at: <u>https://www.health.ny.gov/health\_care/medicaid/covid19/guidance/index.htm</u>.

#### **Diabetic Supplies**

The Scope of Benefits document, located at: <u>https://www.health.ny.gov/health\_care/medicaid/redesign/mrt2/pharmacy\_transition/repository/docs/rx\_scope\_of\_benefits.pdf</u>, provides a summary of diabetic supply items that are subject to the benefit transition. Diabetic diagnostics, continuous glucose monitors (CGM), glucose testing supplies, insulin syringes, disposable insulin pumps (Omnipod), and infusion supplies, will be transitioned to NYRx. NYRx covers all of these items, some of which are part of the Preferred Diabetic Supply Program (PDSP), located on the Magellan Health, Inc. Rx Management, LLC "Preferred Diabetic Supply Program" web page, at: <u>https://newyork.fhsc.com/providers/diabeticsupplies.asp</u>. NYS DOH will allow a one-time transition fill from April 1, 2023, through June 30, 2023, for non-preferred diabetic supplies that are not part of the PDSP and will honor PAs already provided by the MMC Plans.

# Please note: Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Coverage and Billing Guidance will be provided in a subsequent Medicaid Pharmacy Benefit Transition – Part Three Special Edition issue of the *Medicaid Update*.

#### Brand Less than Generic Program

The Brand Less than Generic (BLTG) program is an initiative that promotes the use of certain multi-source brand name drugs when the cost of the brand name drug is less expensive than the generic equivalent. For a current listing of brand name drugs included in the BLTG program, providers can refer to the most recent program update on the Magellan Health, Inc. Rx Management, LLC "Brand Less Than Generic Program" web page, located at: <u>https://newyork.fhsc.com/providers/bltgp\_about.asp</u>.

Pharmacies will receive the following denial message when submitting claims for generic drugs in the BLTG program.

- NCPDP Response Code/Message: "421", Dispense Brand Drug Instead of Generic Equivalent
- NCPDP Reject Code/Message: "606", Brand Drug / Specific Labeler Code Required

Denials for generics can be avoided by dispensing the brand name products. A new prescription is **not** required.

#### Information for All Providers (Including Pharmacies)

#### Member Fact Sheet

Providers must use the *Member Fact Sheet*, found in *Appendix B: Member Fact Sheet* of this issue, to provide NYS Medicaid members and MMC enrollees with the resources and information they need regarding the benefit transition. A print-friendly version of the *Member Fact Sheet* is available on the NYS Member Dashboard homepage, located at: <u>https://member.emedny.org/</u>.

#### Prescription Limit Reminder— Duration and Refills

Prescriptions are valid and may be filled for up to one year from the date issued, with the exception of controlled substance prescription drugs. After the prescription expires, a new prescription will be required from the prescriber, even if refills remain on the original prescription.

#### Practitioner Administered Drugs

NYS DOH recognizes the need for certain drugs requiring administration by a practitioner to be available through the Medical and Pharmacy Benefit. Practitioner administered drugs (PADs) that are listed on the eMedNY "Medicaid Pharmacy List of Reimbursable Drugs" web page, located at: <u>https://www.emedny.org/info/formfile.aspx</u>, may be billed directly to the NYRx under the pharmacy benefit. PADs obtained by the practitioner, may be billed as a medical claim to the MMC Plan of the enrollee.

NYS DOH analyzed PADs that are provided as a Pharmacy Benefit through MMC Plans. As a result of this analysis, NYS DOH has added certain PADs to the NYRx formulary. **Please note:** PADs dispensed as a Pharmacy Benefit must be delivered by the pharmacy directly to the site of administration. Additional information regarding pharmacy dispensing of PADs and delivery requirements can be found in the *NYRx, The NY Medicaid Pharmacy Program – Pharmacy Manual Policy Guidelines*, located at: <u>https://www.emedny.org/ProviderManuals/Pharmacy/PDFS/Pharmacy Policy Guidelines.pdf</u>, under the following sections: "Pharmacy Dispensing of Drugs That Require Administration by a Practitioner" and "Delivery". These requirements ensure proper storage and handling.

#### **Over the Counter Drugs**

There are some over the counter (OTC) drugs that may have been covered by MMC Plans that are not covered by NYRx; however, there are equivalent/comparable products available through NYRx. OTC drugs covered by the NYRX can be found on the eMedNY "Medicaid Pharmacy List of Reimbursable Drugs" web page, located at: <u>https://www.emedny.org/info/formfile.aspx</u>.

#### **Provider Enrollment**

Providers servicing NYS Medicaid members and MMC enrollees must be enrolled by April 1, 2023.

#### How to Check Provider Enrollment Status

Providers can check their enrollment status by utilizing the tools available on the NYS DOH "Medicaid Enrolled Provider Lookup" web page, located at: <u>https://health.data.ny.gov/Health/Medicaid-Enrolled-Provider-Lookup/ru78-uxr9</u>. Providers can search by entering their NYS Medicaid provider ID or their NPI. Providers can use the table provided below to determine their current enrollment status and the corresponding action necessary as required from the "Medicaid Type" provided in the lookup tool. Providers who have submitted enrollment applications may check the status of their application in the "Medicaid Pending Provider Listing," which is updated weekly on the eMedNY "Medicaid Managed Care Network Provider Enrollment" web page, located at: <u>https://www.emedny.org/info/ProviderEnrollment/ManagedCareNetwork/index.aspx</u>.

Provider Type	"Medicaid Type"	Enrollment Status	Action Required
	Fee-for- service (FFS)	Enrolled (Qualified Billing Provider)	No action
Pharmacy	Managed Care Organization (MCO)	Not enrolled (MCO Credentialed as a non-billing provider)	Enroll with NYS Medicaid as a billing provider
	No result	Not enrolled	Enroll with NYS Medicaid as a billing provider
	FFS	Enrolled (Qualified Billing Provider)	No action
	MCO	Not enrolled (MCO Credentialed as a non-billing provider)	Enroll with NYS Medicaid as a billing or an OPRA provider
Practitioner/ Prescriber	Ordering, Prescribing, Referring, Attending (OPRA)	Enrolled (Qualified non-billing provider)	No action
	No result	Not enrolled	Enroll with NYS Medicaid as billing provider or if eligible as a OPRA provider

#### Providers

Providers who prescribe drugs and supplies for NYS Medicaid members and/or MMC enrollees must be enrolled in NYS Medicaid as either an "Individual Billing" provider or as an OPRA provider for NYS Medicaid to cover the products. NYRx will pay for covered products and services for MMC enrollees when their prescriber is enrolled in NYRx.

# Physicians, Nurse Practitioners, Physician Assistants, Podiatrists, Dentists, Optometrists, Audiologists, and Certified Nurse Midwives

Providers who wish to **receive payment for covered NYS Medicaid services** should apply as an "Individual Billing Medicaid". Information regarding how to enroll is available on the eMedNY "Provider Enrollment and Maintenance" web page, located at: <u>https://www.emedny.org/info/ProviderEnrollment/index.aspx</u>. Providers who wish to **enroll as an OPRA provider (non-billing)** should alternatively enroll as a OPRA provider on the eMedNY "Provider Enrollment and Maintenance" web page, located at: <u>https://www.emedny.org</u> should alternatively enroll as a OPRA provider on the eMedNY "Provider Enrollment and Maintenance" web page, located at: <u>https://www.emedny.org</u> /info/ProviderEnrollment/index.aspx.

Exceptions to the prescriber enrollment requirements for certain authorized prescribers are outlined in the *Reminder: Pharmacy Billing Guidance Exceptions for Non-Enrolled Prescribers* article published in the June 2022 issue of the *Medicaid Update*, located at: <u>https://www.health.ny.gov/health\_care/medicaid/program/update/2022/docs/mu\_no7\_jun22\_pr.pdf</u>.

#### Pharmacies

NYRx will pay for covered products and services for MMC enrollees when their pharmacy is enrolled in NYRx. NYS DOH has updated the pharmacy enrollment policy, found within the *NYRx, The NY Medicaid Pharmacy Program – Pharmacy Manual Policy Guidelines*, located at: <u>https://www.emedny.org/ProviderManuals</u> /<u>Pharmacy/PDFS/Pharmacy\_Policy\_Guidelines.pdf</u>, which now allows enrollment of community-based pharmacies located in NYS or in the bordering states (Connecticut, Massachusetts, New Jersey, Pennsylvania and Vermont). The policy also provides a pathway to enrollment for pharmacies servicing MMC enrollees that are located outside of NYS and outside of the bordering states, or those that dispense drugs by exclusive arrangement.

#### **DMEPOS Providers**

The updated DMEPOS provider enrollment policy can be found within the New York State Medicaid Program Durable Medical Equipment, Prosthetic, Orthotic, and Supply Manual Policy Guidelines, located at: https://www.emedny.org/ProviderManuals/DME/PDFS/DME\_Policy\_Section.pdf. DMEPOS providers that are located outside NYS may apply for enrollment if they meet the newly established guidelines. DMEPOS providers located in states bordering NYS may enroll if they support NYS Medicaid members in the common medical marketing area. Out-of-state DMEPOS manufacturers and mail order suppliers may also be considered on a case-by-case basis, as outlined in the New York State Medicaid Program Durable Medical Equipment. Prosthetic. Orthotic. and Supply Manual Policy Guidelines, located at: https://www.emedny.org/ProviderManuals/DME/PDFS/DME\_Policy\_Section.pdf.

Information about the Durable Medical Equipment (DME) supplier application process can be found on the eMedNY "Provider Enrollment and Maintenance" web page for DME, located at: <u>https://www.emedny.org/info/ProviderEnrollment/dme/index.aspx</u>.

#### Physician Dispensers

For the current NYRx policy regarding physician dispensers, providers can refer to the *Policy Clarification for Practitioner Dispensing* article in the July 2022 issue of the *Medicaid Update*, located at: <u>https</u>://www.health.ny.gov/health\_care/medicaid/program/update/2022/docs/mu\_no8\_jul22\_pr.pdf. Physicians who are already enrolled in NYS Medicaid as a *Physician - Individual Billing Medicaid (Category of Service 0460)* or *Practitioner Group (Category of Service 0046 or 0090)* may submit claims as described in the article above.

#### **Appendix A: Resources**

		Resources	
Торіс	Description	Contact Information	Website Links
Claims Processing for Outpatient Pharmacy Benefits	Questions regarding billing and pharmacy claims processing, lost or stolen medications and remittances.	Claims eMedNY Support: (800) 343-9000, Option 1	<ul> <li>General Information found on the eMedNY homepage: <u>https://www.emedny.org/</u></li> <li>eMedNY Pharmacy Manual: <u>https://www.emedny.org/Provide</u> <u>rManuals/Pharmacy/index.aspx</u></li> <li>New York State (NYS) Department of Health (DOH) Office of Health Insurance Programs (OHIP) NCPDP D.0 Standard Companion Guide – Transaction Information: <u>https://www.emedny.org/HIPAA/</u> 5010/transactions/NCPDP_D.0_ Companion_Guide.pdf</li> </ul>
NYRx, the New York Medicaid Pharmacy Program Prior Authorization (PA) criteria	Questions regarding PA or inquiries about quantity/age/d ay's supply and other edits or medication questions.	<ul> <li>Magellan Health, Inc. Clinical Call Center: (877) 309-9493</li> <li>NYRx Medicaid Prior Authorization Request Form for Prescriptions: https://newyork. fhsc.com/downl oads/providers/ NYRx PDP_PA Fax_Standardi zed.pdf</li> </ul>	<ul> <li>Magellan Health, Inc. NYRx, the Medicaid Pharmacy Program: <u>https://newyork.fhsc.com/</u></li> <li>Magellan Health, Inc. NYRx, the Medicaid Pharmacy Program Preferred Drug List (PDL) Listserv email notification sign- up: <u>https://newyork.fhsc.com/provid</u> <u>ers/notify.asp</u></li> </ul>
Preferred Diabetic Program	Questions regarding billing.	eMedNY Support: (800) 343-9000, Option 2	N/A
	PA requests	Magellan Health, Inc. Clinical Call Center: (877) 309- 9493	N/A
	Preferred Diabetic Supply List (PDSL), etc.	N/A	NYRx, the Medicaid Pharmacy Program, Preferred Diabetic Supply Program: <u>https://newyork.fhsc.com/providers/diab</u> <u>eticsupplies.asp</u>

Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) (DME) Procedures and Supplies	Questions regarding DME PA criteria; frequency/qua ntity/durations limits, etc., and billing information.	<ul> <li>OHIP DME: (800) 342-3005</li> <li><u>ohipmedpa@he</u> <u>alth.ny.gov</u></li> </ul>	eMedNY DME Manual: https://www.emedny.org/ProviderManu als/DME/
		Benefit Transition	
Pharmacy Information for Consumers, Pharmacies, and Providers	N/A	N/A	NYS DOH Medicaid Pharmacy Program (NYRx): <u>http://www.health.ny.gov/health_care/m</u> <u>edicaid/program/pharmacy.htm</u>
Pharmacy Frequently Asked Questions (FAQs)	FAQs related to the benefit transition.	N/A	NYS DOH Transition of the Pharmacy Benefit from Managed Care (MC) to the Medicaid Pharmacy program, NYRx Frequently Asked Questions (FAQs): <u>https://www.health.ny.gov/health_care/</u> <u>medicaid/redesign/mrt2/pharmacy_tran</u> <u>sition/pharmacy_transition_fag.htm</u>
Pharmacy Scope of Benefits	N/A	N/A	Scope of Benefits charts: <u>https://www.health.ny.gov/health_care/</u> <u>medicaid/redesign/mrt2/pharmacy_tran</u> <u>sition/repository/rx_scope_of_benefits.h</u> <u>tm</u>
	I	Eligibility	
Eligibility Verification and ePACES	Questions related to ePACES or for assistance with billing and performing	<ul> <li>Touchtone Telephone Verification System: (800) 997-1111</li> <li>eMedNY Support:</li> </ul>	<ul> <li>ePACES Help/Log-in: <u>https://www.emedny.org/epaces</u></li> <li>NYS Programs MEVS Instructions for Completing a Telephone Transaction: <u>https://www.emedny.org/Provide</u></li> </ul>
	MEVS transactions.	(800) 343-9000, Option 2	rManuals/5010/MEVS%20Quick %20Reference%20Guides/5010 MEVS_Telephone_Quick_Refe rence_Guide.pdf

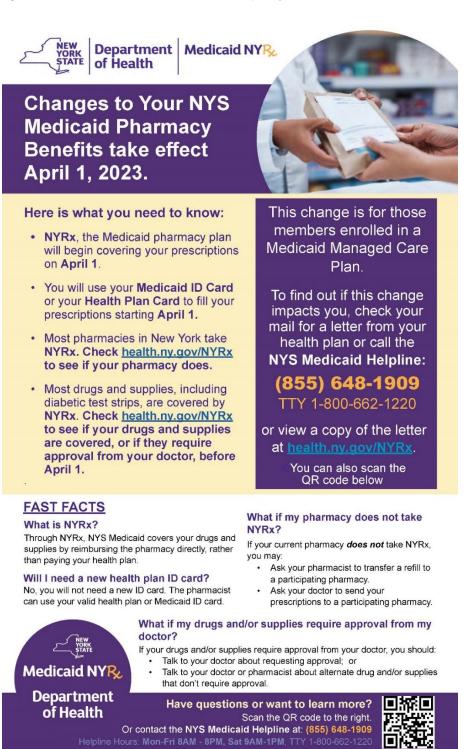
	Ро	licy and Program Inform	ation
NYRx PDL Medicaid List of Reimbursable Drugs (Formulary)	The NYRx PDL contains a full listing of drugs/classes subject to NYRx. Providers may review the Medicaid Pharmacy List of Reimbursable Drugs for products	Magellan Health, Inc. Clinical Call Center: (877) 309-9493	Magellan Health, Inc. NYS Medicaid Pharmacy Program: https://newyork.fhsc.com/ eMedNY's Medicaid Pharmacy List of Reimbursable Drugs: https://www.emedny.org/info/formfile.as px
Medicaid Pharmacy Program, Policy and Coverage	covered. For questions related to the Pharmacy program, 340B billing, drug pricing, lost or stolen medications, etc.	<ul> <li>Pharmacy Bureau: (518) 486-3209</li> </ul>	NYS DOH Medicaid Pharmacy Program (NYRx): http://www.health.ny.gov/health_care/m edicaid/program/pharmacy.htm
Provider Enrollment	Provider enrollment, revalidation and NPI termination questions.	<ul> <li>eMedNY Support: (800) 343-9000, Option 2</li> <li>providerenrollm ent@health.ny. gov</li> </ul>	eMedNY's Provider Enrollment and Maintenance: <u>https://www.emedny.org/info/ProviderE</u> <u>nrollment/index.aspx</u>
Provider Manuals (Physician, Pharmacy, DME, etc.) and Billing Guidelines	The Provider Manuals tab has billing and policy related guidance (e.g., billing guidelines, procedure codes, fee schedules, etc. for each provider type).	N/A	<ul> <li>eMedNY's Provider Manuals: https://www.emedny.org/Provide rManuals/index.aspx</li> <li>eMedNY's General Billing Guidelines: https://www.emedny.org/Provide rManuals/AllProviders/index.asp X</li> </ul>

		Training	
Provider Outreach and Training	Providers may visit the training website to review eMedNY trainings available.	N/A	eMedNY's Provider Training: https://www.emedny.org/training

#### **Appendix B: Member Fact Sheet**

#### Member Fact Sheet

Providers must use the *Member Fact Sheet*, found in *Appendix B: Member Fact Sheet* of this issue, to provide NYS Medicaid members and MMC enrollees with the resources and information they need regarding the benefit transition. A print-friendly version of the *Member Fact Sheet* is available on the NYS Member Dashboard homepage, located at: <u>https://member.emedny.org/</u>.



# **Provider Directory**

#### Office of the Medicaid Inspector General:

For suspected fraud, waste, or abuse complaints/allegations, please call 1-877-87FRAUD, (877) 873-7283, or visit the Office of Medicaid Inspector General (OMIG) web site at: <u>www.omig.ny.gov</u>.

#### **Provider Manuals/Companion Guides, Enrollment Information/Forms/Training Schedules:** Please visit the eMedNY website at: <u>www.emedny.org</u>.

#### Providers wishing to listen to the current week's check/EFT amounts:

Please call (866) 307-5549 (available Thursday PM for one week for the current week's amount).

#### For questions about billing and performing MEVS transactions:

Please call the eMedNY Call Center at (800) 343-9000.

#### **Provider Training:**

Please enroll online for a provider seminar at: <u>https://www.emedny.org/training/index.aspx</u>. For individual training requests, please call (800) 343-9000.

#### **Beneficiary Eligibility:**

Please call the Touchtone Telephone Verification System at (800) 997-1111.

#### Medicaid Prescriber Education Program:

For current information on best practices in pharmacotherapy, please visit the following web sites:

- DOH Prescriber Education Program page: <u>https://www.health.ny.gov/health\_care/medicaid/program/prescriber\_education/presc-educationprog.</u>
- Prescriber Education Program in partnership with SUNY: <u>http://nypep.nysdoh.suny.edu/</u>.

#### eMedNY

For a number of services, including: change of address, updating an enrollment file due to an ownership change, enrolling another NPI, or revalidating an existing enrollment, please visit the eMedNY Provider Enrollment page at: <u>https://www.emedny.org/info/ProviderEnrollment/index.aspx</u>, and choose the appropriate link based on provider type.

#### **Comments and Suggestions Regarding This Publication**

Please contact the editor, Angela Lince, at medicaidupdate@health.ny.gov.