

## Medicaid Pharmacy Benefit Transitioning to New York State Medicaid Fee-for-Service

Effective May 1, 2021, the pharmacy benefit for New York State (NYS) Medicaid Managed Care (MMC) and Health and Recovery Plan (HARP) Members will transition to the NYS Medicaid Fee-For-Service (FFS) Pharmacy Program. This change will impact prescription drug coverage for MVP Health Care® (MVP) Medicaid and Harmonious Health Care Plan Members.

### Provider Impact

- Prescribing Providers do not need to send in new prescriptions.
- Prescribing Providers who are not enrolled in the FFS program must enroll to continue serving Medicaid Managed Care Members. Additionally, prescribers that are initiating prescriptions or fiscal orders for drugs or supplies subject to the carve-out must enroll in the FFS program in order for MMC Members' prescriptions to be filled. Enrollment and/or billing questions should be directed to the eMedNY Call Center at **800-343-9000**.
- Providers must have an active or pending NYS Medicaid Management Information System (MMIS) number to participate with and be reimbursed for services provided to MVP Medicaid Managed Care, MVP Child Health Plus, and MVP HARP Members. To apply, please visit **[emedny.org/info/providerenrollment](https://emedny.org/info/providerenrollment)**.
- MVP medical and pharmacy policies will be updated to reflect the transition of the pharmacy benefit to FFS.

### Drug, Medical, and Durable Medical Equipment (DME) Coverage

- Any approvals for pharmacy medications obtained through MVP will no longer be valid as of May 1, 2021.
- FFS will cover pharmacy medications filled at a retail or specialty pharmacy and may have different criteria for coverage of these medications. Please see the NYS DOH website for details, including a list of covered drugs: **[newyork.fhsc.com/downloads/providers/NYRx\\_PDP\\_PDL.pdf](https://newyork.fhsc.com/downloads/providers/NYRx_PDP_PDL.pdf)**.
- MVP will continue to cover physician-administered medications ("buy and bill"). Prior authorization, quantity limits, etc. will still apply.
- MVP will continue to cover certain DME, prosthetics, orthotics, and supplies. View these items in the *Durable Medical Equipment, Prosthetics and Supplies Manual* located at **[emedny.org](https://emedny.org)**.
- Members and Providers with questions or complaints associated with DME and/or supplies subject to the carve-out should contact the Office of Health Insurance Programs Operations at **800-342-3005** or **[ohipmedpa@health.ny.gov](mailto:ohipmedpa@health.ny.gov)**.
- Medical coverage (physician-administered medications and institutional claims) will be billed to MVP. Prior authorization, quantity limits, etc. on medical drugs will still apply per MVP policies.
- MVP prior authorization forms are located at **[mvphealthcare.com/providers](https://mvphealthcare.com/providers)**. Select *Forms*, then *Prior Authorization*.

To view all communications, visit **[mvphealthcare.com/FastFax](https://mvphealthcare.com/FastFax)**

To receive future FastFax messages by email, contact your Professional Relations Representative

**Questions?** Contact your MVP Professional Relations Representative or call the MVP Customer Care Center for Provider Services at **1-800-684-9286**.

