



Department
of Health

Transition of Pharmacy Benefit from Managed Care to NYRx

All Stakeholders: Implementation Update

April 18, 2023

Overview

- NYRx Program Updates
- Information for Providers
- Information for Members
- Resources and Updates
- Q&A

April 18, 2023

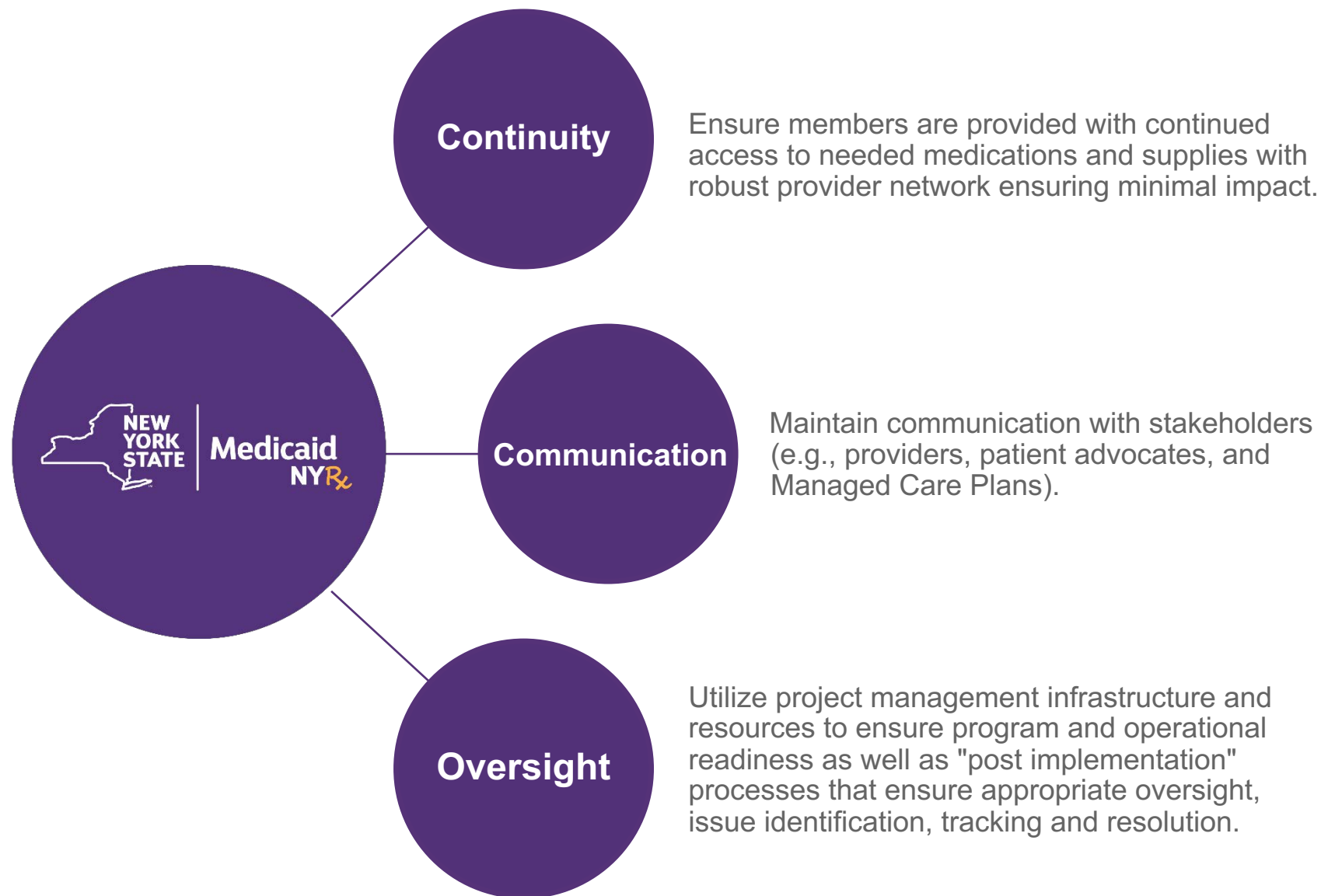


Transition Overview

- As of April 1, 2023, Medicaid members enrolled in mainstream Managed Care (MC) plans, Health and Recovery Plans (HARPs), and HIV-Special Needs (SNPs) are receiving their pharmacy benefits through the Medicaid Fee for Service (FFS) Pharmacy Program.
- The transition does not apply to members enrolled in Managed Long-Term Care plans (e.g., PACE, MAP, and MLTC), the Essential Plan, or Child Health Plus.
- The transition does not change the scope of benefits (e.g., copayments and covered drugs) of the existing Medicaid Pharmacy Benefit.

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Transition Guiding Principles



NYRx Program Updates

April 18, 2023

 Health  Insurance

APRIL 1, 2023 | Albany, NY

Governor Hochul Launches New Statewide Medicaid Pharmacy Benefit Program

Acting Health Commissioner Dr. James McDonald:

"Today's shift back to a fee-for-service pharmacy benefit model is the right move for New York and ensures all communities across the state will have continued access to low-cost prescription medications."

New York State Medicaid Director Amir Bassiri:

"The eight million New Yorkers enrolled in Medicaid will receive their same prescription medications, only from a larger network of pharmacies at no extra cost and with fewer restrictions and less confusion than before."

Long-Awaited Transition to [NYRx](#) Provides Eight Million Members Expanded Access to Prescription Medications at More Than 5,000 Pharmacies Statewide

Change Invests \$705 Million in Medicaid Funding Directly to 340b providers, including Ryan White HIV/AIDS programs, Federally Qualified Health Centers and Hospitals

Managing Implementation

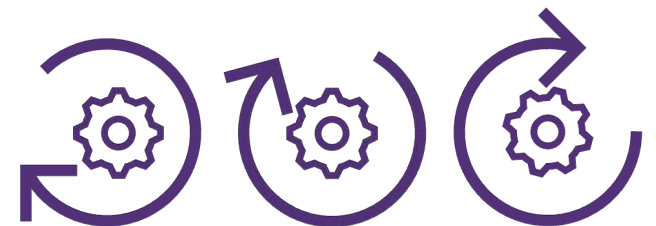
NYSDOH and Medicaid contractors continue to proactively adjust and strengthen their existing systems and resources to support over 7 million members.



**Data Analytics
and Sharing**



**Communications
and Support**



Flexible Processes

April 18, 2023

Data Analytics

NYSDOH and Medicaid contractors have been monitoring real-time and daily data, including:

- Claims volume
- Top billing edits
- Prior authorizations (PAs)
- Non-preferred drugs
- Call center feedback
- Website traffic



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Communications and Support

- NYSDOH has been checking in regularly with key stakeholders to track activities and resolve issues.
- Daily meetings with systems, call centers, and Managed Care Plans (MCPs)
- Meetings with Medicaid stakeholders, including:
 - Pharmacy associations and providers, e.g., Pharmacists Society of the State of New York (PSSNY)
 - Member associations, e.g., Medicaid Matters
 - Local Departments of Social Services (LDSS)
 - Other NYS agencies



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Flexible Processes

By carefully monitoring operations and leveraging flexible processes, NYSDOH made quick adjustments to systems and resources where necessary.

Actions include:

- Turning on/off specific billing edits
- Relaxing PA requirements for certain products
- Adjusting call center resources and processes
- Sending timely communications to providers (via listserv, fax, and website updates)

Example 1: Calls About Member IDs



PROACTIVE TASKS	ISSUE IDENTIFICATION	ACTION	RESOLUTION
<p>Communications and support before 4/1:</p> <ul style="list-style-type: none"> • Medicaid Update • Member Website • FAQs • Member Fact Sheet • Letters to Members • NYRx Medicaid Helpline • Text Messages • Social Media 	<p>On 4/3, NYRx Medicaid Helpline and eMedNY Call Center experienced a substantial increase in calls about member IDs.</p> <p>Some pharmacies were unsure about member IDs.</p>	<p>NYSDOH quickly sent communications to pharmacies by:</p> <ul style="list-style-type: none"> • Fax • Listserv • Website content • Reminder messages on the phone trees • Targeted outreach to pharmacies 	<p>Call volume rapidly decreased and stabilized.</p> <p>NYSDOH continues to monitor feedback from call centers and stakeholders to ensure that pharmacies know the correct guidance about member IDs.</p>

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Example 2: Claim Billing Edits

PROACTIVE TASKS	ISSUE IDENTIFICATION	ACTION	RESOLUTION
<p>Communications and support before 4/1:</p> <ul style="list-style-type: none"> • Medicaid Update • eMedNY Trainings • Letters to Providers • Quick Reference Guide • Pharmacy Checklist 	<p>While monitoring claims dashboards, website traffic and call center feedback, NYSDOH identified frequent billing edits that pharmacies encountered when submitting claims to NYRx.</p>	<p>NYSDOH quickly responded with the following:</p> <ul style="list-style-type: none"> • developed a resource about top billing edits and distributed it by fax to pharmacies • sent targeted outreach and education to pharmacies • adjusted claim billing edits 	<p>Claim denials and eMedNY call volume decreased and stabilized.</p> <p>NYSDOH continues to monitor claims and educate pharmacies about how to resolve billing edits.</p>

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Providers

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*The Medicaid Eligibility Verification System (MEVS) Denial Code for a transaction is returned within the Additional Message Info (526-FQ) and indicates the MEVS error for rejected transactions.

NYRx Edit #	NYRx Description	NCPDP reject response	More information and how to resolve	Resources
02242	Early Fill Overuse	79 - Fill Too Soon	Prescription being filled or refilled is too soon to fill; resubmit at appropriate time. Alternatively, an override may be available if the Medicaid member resides in a long-term care facility, or for other situations.	<p>August 2021 MU page 14 https://www.health.ny.gov/health_care/medicaid/program/update/2021/docs/mu_no10_aug21_pr.pdf</p> <p>Provider Communication New Patient LOA</p> <p>Pharmacy Manual page 8</p>
01631	Client Has Other Insurance	13 - MI/ Other Coverage Code *Additional MEVS Denial Code: 717 - Client Has Other Insurance	<p>The system identifies another insurance (e.g., Medicare, commercial insurance) for the member that is not being submitted on the claim. Pharmacy must resubmit billing other coverage as Primary with Medicaid as Secondary in a coordination of benefits (COB) claim when drug is covered by Primary. Pharmacies may resubmit claim for drugs that are a Primary coverage uncovered benefit in some circumstances, such as a Medicare member with Part D and claim is an OTC.</p> <p>Pharmacies should be directing the member to either their Local Department of Social Services (LDSS) or the New York State of Health customer services, depending on where they had their Medicaid eligibility determined. This will allow the member to get their information updated as efficiently as possible.</p> <ul style="list-style-type: none"> Human Resource Administration (HRA) for New York City (718) 557-1399 Medicaid Helpline (800) 541-2831 	<p>November 2021 MU pages 3 and 16 https://www.health.ny.gov/health_care/medicaid/program/update/2021/docs/mu_no13_nov21_pr.pdf</p> <p>October 2022 MU page 6 https://www.health.ny.gov/health_care/medicaid/program/update/2022/docs/mu_no12_oct22_pr.pdf</p> <p>July 2017 MU COB other coverage 4 https://www.health.ny.gov/health_care/medicaid/program/update/2017/jul17_mu.pdf</p> <p>July 2018 MU COB other coverage code 3 https://www.health.ny.gov/health_care/medicaid/program/update/2018/jul18_mu.pdf</p>

Version: April 10, 2023

2

Top Claim Billing Edit Resource


- Information about how to resolve top claim billing edits
 - NYRx edit # and description
 - NCPDP reject response
 - Actions for resolution
 - Resources, including NYRx manual and Medicaid Update articles
- Posted on [emedny.org/nyrx](https://www.emedny.org/nyrx) and faxed to pharmacies.


https://www.emedny.org/nyrx/Top_Edit_Resource.pdf

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NYS Medicaid Managed Care P x +

mmcdruginformation.nysdoh.suny.edu

Managed Care Plans 



Contact Information

For questions regarding your eligibility or to find out which managed care plan you are enrolled in, you may call the Medicaid Helpline at 1-800-541-2831. It is available from 8:00 a.m. through 8:00 p.m., Monday through Friday and from 9:00 a.m. to 1:00 p.m., on Saturday.

Managed Care Plan Cards

The [Pharmacy Benefit Information Center](#) has examples of MCP cards.

Note: The look of some cards may have changed, but every MCP card has the member's CIN.

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Identifying Members

The [January 2023 Medicaid Update Special Edition Part 2](#) has:

- A full list of CIN formats for each managed care plan card
- Methods to obtain a member's CIN and check eligibility
- Members can use their existing benefit cards and do not need to obtain new cards.

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

Checking Member Eligibility

Method	Summary
E1 Transaction	<p>Instructions for E1 transactions begin on page 10 of the NCPDP D.0 Standard Companion Guide www.emedny.org/HIPAA/5010/transactions/NCPDP_D.0_Companion_Guide.pdf</p>
<p>ePACES</p> <p>epaces.emedny.org</p>	<p>Providers must have an ePACES account and the member's CIN to check their eligibility status. If the CIN is not available, providers must have the member's:</p> <ul style="list-style-type: none"> • First Name and Last Name • Date of Birth • Social Security Number (SSN) • Gender
<p>Telephone Verification System (MEVS)</p> <p>1-800-997-1111</p>	<p>Providers must have the following information:</p> <ul style="list-style-type: none"> • Member's CIN • Provider's National Provider Identifier (NPI) or Medicaid Management Information System (MMIS) Number • Ordering Provider's NPI (if applicable) <p>MEVS Quick Reference Guide www.emedny.org/ProviderManuals/5010/MEVS%20Quick%20Reference%20Guides/5010_MEVS_Telephone_Quick_Reference_Guide.pdf</p>

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Reminder: Transition Period and Access to Non-Preferred Products

- There is a transition period from April 1 through June 30, 2023 where a member may be provided with a one-time, temporary fill for up to a 30-day supply for a drug that would normally require prior authorization (PA) under the [NYRx Preferred Drug Program](#).
- The one-time transition fill does not mean no PA is required for future fills.
- The transition period is intended to give additional time for prescribers to either seek prior authorization or change to a preferred drug which does not require prior authorization.

Note: PAs issued by Medicaid Managed Care plans prior to April 1, 2023 (that are active/valid after April 1, 2023) are being honored by NYRx. This includes clinical PAs that also require authorization under NYRx.



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Preferred Drug List

The [Preferred Drug List \(PDL\)](#) contains a full listing of drugs/classes subject to the NYRx Program and additional information on clinical criteria.

Products on the PDL are still subject to clinical criteria.

A prior authorization may be required for a preferred product if a member does not meet clinical criteria.

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Brand Less Than Generic (BLTG)



- The [Brand Less Than Generic Program](#) is a cost containment initiative which promotes the use of certain multi-source brand name drugs **when the brand name drug is more cost effective for NYS than the generic equivalent.**
- Brand name drugs are reimbursed at the brand reimbursement rate, and there is a preferred copayment of \$1.
- Generic drugs included in this program require prior authorization.
- A pharmacist filling a generically written prescription can select the brand name product which would be a less expensive alternative for the member without prescriber involvement.
- Pharmacies should monitor their inventory of brand name products.

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- What's New
- Information
- Provider Enrollment
- Provider Manuals
- Provider Outreach and Training
- Contacts
- eMedNY HIPAA Support
- eMedNY Tools Center
- PTAR

NEW! For Practitioners ONLY
PROVIDER ENROLLMENT
PORTAL
ENROLL TODAY!

Pharmacy Benefit Transition

NEW YORK STATE | Department of Health | Medicaid NYRx

LEARN MORE



welcome to
eMedNY

Are you compliant with NYSDOH
EFT Requirement?

Login ePACES

[ePACES Information](#)

Login eXchange

[eXchange Information](#)

NEW YORK STATE Medicaid NYRx

[Member Resource Site](#)

Provider Enrollment Portal

Web Portal

[Web Portal Information](#)

Enteral Web Portal

Login PTAR

NEW MEDICARE CARDS

MEDICAID MANAGED CARE NETWORK

PTAR
[click here for more information](#)

REVALIDATION
[click here for more information](#)

www.emedny.org/nyrx



PHARMACY BENEFIT TRANSITION

Effective April 1, 2023, NYS Medicaid members enrolled in mainstream Medicaid Managed Care (MMC) Plans, Health and Recovery Plans (HARPs), and HIV-Special Needs Plans (SNPs) will receive their pharmacy benefits through the NYRx Pharmacy program 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, 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 negotiation power, and provide a uniform list of covered drugs with standardized utilization management protocols simplifying and streamlining the drug benefit for NYS Medicaid members. NYS Medicaid consumers have comprehensive drug coverage and equitable access to an extensive network of over 5,000 pharmacy providers.

Providers, including prescribers, pharmacies and DMEPOS providers, **must be enrolled** in NYS Medicaid to receive reimbursement for services provided to Medicaid members. See [provider enrollment](#) for more information.

Failure to enroll will result in denial of claims for prescriptions, effective April 1, 2023.

For information about enrollment exceptions, please review the [Pharmacy Billing Guidance Exceptions for Non-Enrolled Prescribers in Medicaid](#).

For more information about the transition, please visit the [NYRx pharmacy benefit transition website](#) or see the *Useful Links* section on the right side of this page.



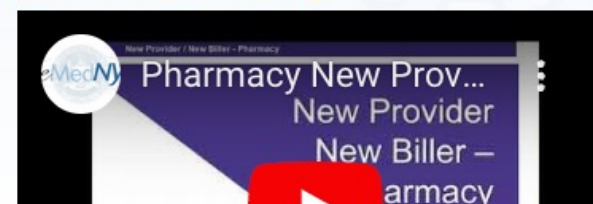
Useful Links

- [Pharmacy Benefit Transition](#)
- [NYRx Medicaid Pharmacy Program](#)
- [Medicaid Pharmacy List of Reimbursable Drugs](#)
- [Provider Enrollment](#)
- [Provider Enrollment Status Resources](#)
- [Medicaid Preferred Drug Program](#)
- [Medicaid Pharmacy Program Member Resources](#)
- [Top Edit Resource Spreadsheet](#)
- [ProDUR-ECCA D.0 Provider Manual](#)

Important Medicaid Updates

- [October 2022 Medicaid Update Special Edition Part 1](#)
- [January 2023 Medicaid Update Special Edition Part 2](#)
- [March 2023 Medicaid Update Special Edition Part 3](#)

Provider Training



Provider Training > Videos

Provider Training Videos



Topics:

(Select one or more topics to view videos that pertain to that topic)

- Claims
- eMedNY Provider Enrollment Portal
- Enrollment
- Enteral Authorization
- ePACES
- Medicaid Eligibility Verification System (MEVS)
- New Provider / New Biller
- NYRx Pharmacy Program
- Prior Approval / DVS

Filter on Topic(s)

Search:


(Enter in a search term to search the Title, Topic, Description and Provider Type)

Search

Clear / Show All

Sort By: Date Updated (newest to oldest)

Views:




Pharmacy New Provider/New Biller

NEW PROVIDER / NEW BILLER , NYRX PHARMACY PROGRAM

[Download PDF Supplemental](#)

Published: 03/29/2023 Type: Training Provider: Pharmacy

★ FEATURED VIDEO




NYRx - Preferred Diabetic Supply Program (PDSP)

NYRX PHARMACY PROGRAM

This video will familiarize providers with the Preferred Diabetic Supply Program.

[Download PDF Supplemental](#)

Published: 04/13/2023 Type: Training Provider: DME, Pharmacy



NYRx - Pharmacists as Immunizers

NYRX PHARMACY PROGRAM

This video provides information related to Pharmacists as Immunizers.

[Download PDF Supplemental](#)

Published: 04/13/2023 Type: Training Provider: Pharmacy

Provider Training Videos

Check out the provider training videos on emedny.org!

- Pharmacy New Provider / New Biller
- Pharmacists as Immunizers
- NYRx Website Review
- Preferred Drug Program (PDP)
- Preferred Diabetic Supply Program (PDSP)
- Enteral Formula Prior Authorization

www.emedny.org/training/videos.aspx

Members

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Changes to Your NYS Medicaid Pharmacy Benefits take effect April 1, 2023.

Here is what you need to know:

- NYRx, the Medicaid pharmacy plan will begin covering your prescriptions on April 1.
- You will use your Medicaid ID Card or your Health Plan Card to fill your prescriptions starting April 1.
- Most pharmacies in New York take NYRx. Check health.ny.gov/NYRx to see if your pharmacy does.
- Most drugs and supplies, including diabetic test strips, are covered by NYRx. Check health.ny.gov/NYRx to see if your drugs and supplies are covered, or if they require approval from your doctor, before April 1.

This change is for those members enrolled in a Medicaid Managed Care Plan.

To find out if this change impacts you, check your mail for a letter from your health plan or call the NYS Medicaid Helpline:

(855) 648-1909

TTY 1-800-662-1220

or view a copy of the letter at health.ny.gov/NYRx.

You can also scan the QR code below

Member Fact Sheet

FAST FACTS

What is NYRx?

Through NYRx, NYS Medicaid covers your drugs and supplies by reimbursing the pharmacy directly, rather than paying your health plan.

Will I need a new health plan ID card?

No, you will not need a new ID card. The pharmacist can use your valid health plan or Medicaid ID card.

What if my pharmacy does not take NYRx?

If your current pharmacy *does not* take NYRx, you may:

- Ask your pharmacist to transfer a refill to a participating pharmacy.
- Ask your doctor to send your prescriptions to a participating pharmacy.

What if my drugs and/or supplies require approval from my doctor?

If your drugs and/or supplies require approval from your doctor, you should:

- Talk to your doctor about requesting approval; or
- Talk to your doctor or pharmacist about alternate drug and/or supplies that don't require approval.



Available in multiple languages



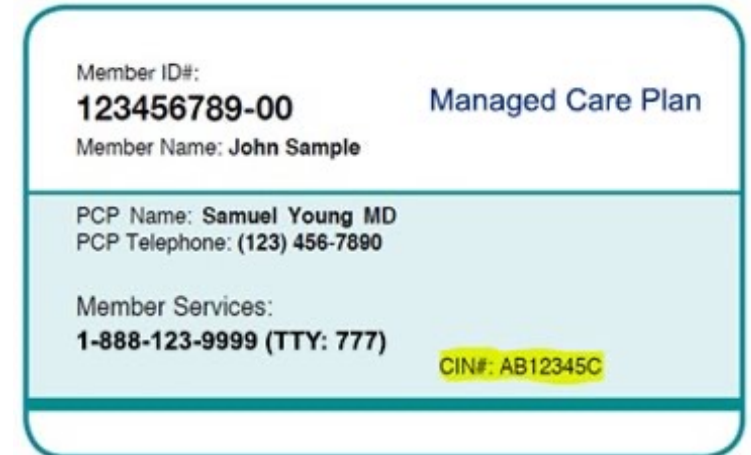
Accessing NYRx Benefits

As of April 1, 2023, a member can show the pharmacy their:

- Managed Care Health Plan Card; OR
- NYS Benefit Card
also known as the Common Benefit Identification Card (CBIC)

Each card contains the member's unique **Client Identification Number (CIN)** which providers use to check eligibility and submit claims to Medicaid.

If you need a replacement NYS Benefit Card, call the NYRx Medicaid Helpline (855) 648-1909, TTY (800) 662-1220.



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NYRx Helpline for Members



Phone: (855) 648-1909

TTY: (800) 662-1220

Regular Hours: Monday - Friday 8AM - 8PM. Saturday 9AM - 1PM

Website: member.emedny.org

Members and their caretakers can contact the NYRx helpline if they have questions about their Medicaid pharmacy coverage.

Language assistance is available.

Resources and Updates

April 18, 2023



Search for OTC and Prescription Drugs

Benefits and Information



Medicaid List of Covered Drugs and Over the Counter (OTC) Products

This page provides a search for drugs/OTCs covered by NYRx, the Medicaid Pharmacy Program. All drugs covered by NYRx can be found using this tool.

1. Enter the full name or partial name of the drug (at least 4 letters), and then click the "Search" button. If you search by partial name, the tool will look for all drugs containing those letters, not just those that begin with it. For example, entering "lip" will show Glipizide and Lipitor in the search results.
2. If your drug is found in the search results, then it is covered by Medicaid.
3. Please Note: You may get an error message if you search on certain drugs when they contain special characters in the description, for example parentheses (), etc. If this happens, please try entering in a partial name and then click the "search" button to get all matching results. This issue will be addressed in a future release.

Clear
Search
1 - 5 of 21

Product Name	Generic Name	Item Type	Description	Prior Approval
ALBUTEIN 25% VIAL	ALBUMIN HUMAN	Prescription	Brand	PA not required
ALBUTEIN 5% VIAL	ALBUMIN HUMAN	Prescription	Brand	PA not required
ALBUTEROL 2.5 MG/0.5 ML SOL	ALBUTEROL SULFATE	Prescription	Brand	PA not required
ALBUTEROL 5 MG/ML SOLUTION	ALBUTEROL SULFATE	Prescription	Generic	PA not required
ALBUTEROL HFA 90 MCG INHALER	ALBUTEROL SULFATE	Prescription	Generic	PA required / may be required

Member Tool

Search for Over the Counter and Prescription Drugs

Note: If you cannot find a drug or if you are not sure if a drug is covered, please ask your doctor or pharmacist for help.

<https://member.emedny.org/pharmacy/search-drugs>

SEARCH TIPS

home | self help | glossary | site map

ENHANCED BY Google

What's New | Information | Provider Enrollment | Provider Manuals | Provider Outreach and Training | Contacts | eMedNY HIPAA Support | eMedNY Tools Center | PTAR

Medicaid Pharmacy List of Reimbursable Drugs

This page contains drug information from the pharmacy file. The full list of reimbursable drugs may be viewed online or downloaded, using the link provided below. Only those prescription and non-prescription drugs which appear on the list are reimbursable under the fee-for-service Medicaid Pharmacy Program.

Attention Prescribers:

- The Medicaid Pharmacy List of Reimbursable drugs includes only those drugs covered under the Pharmacy benefit and is not inclusive of all covered practitioner administered drugs. Information regarding Medicaid **fee-for-service** covered Practitioner Administered Drugs can be found in the [Provider Manuals](#) in the Procedure Code and Fee Schedule sections for Drugs, and in Provider Communications.
- For coverage information regarding Practitioner Administered Drugs for **managed care** enrollees, please refer to the managed care plan's medical benefit policies and procedures.

[View/Download PDF of Reimbursable Drugs](#)

[Download CSV of Reimbursable Drugs](#)

[View/Download Formulary and Benefits File Format](#)

This zip file contains eight pipe delimited text files and creates the following output files: Formulary Status; Copay List; Age Limit Coverage; Gender Limit; Prior Auth Coverage; Quantity Limit Coverage; Text Message Coverage; Cross Reference

[Formulary File Information](#)
This file contains the Formulary File Information and field layouts.

Find File Information

Field:

Value:

Sort By:

NYRx Formulary for Providers

Medicaid Pharmacy List of Reimbursable Drugs

- PDF, CSV, and TXT formats
- Online search tool
- Search tips in the top left

www.emedny.org/info/formfile.aspx

Maximum Reimbursable Amount (MRA

Cost) - The cost calculated per unit based on current reimbursement methodology:

https://www.health.ny.gov/health_care/medicaid/program/docs/

Cost Alternate (ALT) - identifies the National Average Drug Acquisition Cost (NADAC) price, if available. If the MRA and ALT fields are equal, the ALT field will be set to zeroes. Additional information about NADAC pricing can be found at: <https://www.medicaid.gov/medicaid/prescription-drugs/pharmacy-pricing/index.html>

PA Code Field Values:

- PA code "0" = PA not required
 - PA code "N" = PA required
 - PA code "G" = PA required / may be required
- PA may be required if drug is non-preferred OR clinical criteria including FQD limits OR step therapy requirements are not met. Details regarding these limitations can be found by accessing the [Preferred Drug List](#)

Labeler - Manufacturer

OTC Indicator -

"Y" Identifies an OTC product that are both covered by Medicaid and meet the definition of a Covered Outpatient Drug under § 1927(k)(4) of the Social Security Act.

"N" Identifies an OTC products that are both covered by Medicaid, but do not meet the definition of a Covered Outpatient Drug under § 1927(k)(4) of the Social Security Act.

The screenshot shows the eMedNY website interface. At the top, there are navigation links: home, self help, glossary, and site map. Below these is a search bar with the text "ENHANCED BY Google" and a magnifying glass icon. A vertical red banner on the left side of the page reads "SEARCH TIPS". Below the search bar, there are several buttons: Outreach, Contacts, eMedNY HIPAA Support, eMedNY Tools Center, and PTAR. The main content area features a "Find File Information" section with a yellow header. This section contains three input fields: "Field:" with a dropdown menu set to "NDC Code", "Value:" with a text input field, and "Sort By:" with a dropdown menu set to "NDC Code". A green "Search" button with a magnifying glass icon is positioned below these fields. The background of the website has a blue and white molecular structure pattern.

NYRx Formulary for Providers

Medicaid Pharmacy List of Reimbursable Drugs

- PDF, CSV, and TXT formats
- Online search tool
- Search tips in the top left

www.emedny.org/info/formfile.aspx

Reminder: Update Your Medicaid Enrollment

Make sure your Medicaid profile is up to date, including phone number and mailing address.

MEMBERS	PROVIDERS
<p>If you enrolled through NY State of Health:</p> <ul style="list-style-type: none"> • Call 1-855-355-5777 (TTY: 1-800-662-1220); • Log into your account at nystateofhealth.ny.gov; or • Contact an enrollment assistor <p>If you enrolled through your local district, contact your Local Department of Social Services (LDSS).</p> <p>Members in New York City should contact NYC Human Resources Administration (HRA).</p> <p>More information at health.ny.gov/stayconnected</p>	<p>Contact eMedNY to update your information:</p> <ul style="list-style-type: none"> • Call 1-800-343-9000; or • Visit emedny.org for <ul style="list-style-type: none"> • Provider Enrollment Portal • Change of Address Form • Maintenance Forms

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Provider Enrollment & Maintenance



IF ANY OF THESE QUESTIONS APPLY TO YOU,
CLICK ON YOUR PROVIDER TYPE ON THE RIGHT →

Useful Information



Reminder: Provider Enrollment and Billing

- Providers must be enrolled in Medicaid Fee-For-Service to continue serving Medicaid Managed Care members and bill claims to NYRx.
- In preparation for the April 1 transition, NYSDOH and MCPs sent communications to non-enrolled providers about requirements and exceptions (including guidance for [unlicensed interns, residents, and foreign physicians in training](#)).
- NYSDOH continues to educate non-enrolled providers about enrollment and billing.


www.emedny.org/info/ProviderEnrollment

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Medicaid Update: NYRx Special Editions

- **Part 1 – October 2022** ([PDF](#)) ([Web](#))
 - NYRx programs that apply to Medicaid Managed Care members starting April 1
- **Part 2 – January 2023** ([PDF](#)) ([Web](#))
 - Message responses to claims submissions, including transition fills
- **Part 3 – March 2023** ([PDF](#)) ([Web](#))
 - Dual eligible coverage
 - Medicare Limited Income Newly Eligible Transition Program (LINET)
 - Information for DME providers
 - PA guidance for DME

April 18, 2023




NEW YORK STATE
Department of Health
Medicaid Program

March 2023
Volume 39 | Number 5

Medicaid Update

SPECIAL EDITION

PART THREE



Inside this issue:

NYRx Pharmacy Benefit Transition

Pharmacy Providers
Dual-Eligible Coverage
Medicare Limited Income Net Program - LINET

Provider Enrollment
Durable Medical Equipment, Prosthetics, Orthotics, & Supplies (DMEPOS) Providers
Information for DMEPOS Providers

Appendix A: Additional Prior Authorization Guidance

Appendix B: Resources

Appendix C: Member Fact Sheet

NYRx Pharmacy Benefit Transition

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Resources



Websites

- **NYRx Benefit Transition:** Information regarding the transition of the pharmacy benefit from Managed Care to NYRx https://www.health.ny.gov/health_care/medicaid/redesign/mrt2/pharmacy_transition
- **Member Website:** NYRx information and tools for Medicaid members <https://member.emedny.org>
- **Health Commerce System (HCS):** Notices to pharmacies are posted on the HCS, which is a shared resource for all NYS healthcare providers, public health employees, and partner agencies. <https://commerce.health.state.ny.us>
- **DOH Medicaid Update:** https://www.health.ny.gov/health_care/medicaid/program/update/main.htm
- **eMedNY Provider Training:** <https://www.emedny.org/training/index.aspx>

Email and Listservs

- NYRx@health.ny.gov -- Please include **Pharmacy Benefit Transition** in the subject line.
- **Medicaid Redesign Team (MRT) Listserv** https://health.ny.gov/health_care/medicaid/redesign/listserv.htm
- **Magellan Listserv** <https://newyork.fhsc.com/providers/notify.asp>
- **eMedNY Listserv** https://www.emedny.org/Listserv/eMedNY_Email_Alert_System.aspx

Next All Stakeholders Meetings

- Tuesday, May 16, 2023 at 1:00 PM
- Tuesday, June 20, 2023 at 1:00 PM

Registration information will be sent via the [MRT Listserv](#) and posted on the [pharmacy transition website](#) about one week prior to each date.

Questions?

Please submit your questions in Slido.

Please go to www.slido.com or scan the QR code.

- **Event code: nyrx041823**
- Name and Email: Please enter your contact information so that we can follow up about your question after the webinar.
- Click “Add label” to categorize your question. This is helpful for organization and efficiency.

Thank you for being patient while we review your questions. Visit the transition website for [Frequently Asked Questions](#).

