



Department
of Health

Transition of Pharmacy Benefit from Managed Care to NYRx

All Stakeholders: Implementation Update

January 17, 2023

Overview

- Member Letters
- Provider Letters
- NYRx Programs
 - Brand Less Than Generic
 - Preferred Diabetic Supply Program
- Resources and Updates
- Q&A

January 17, 2023

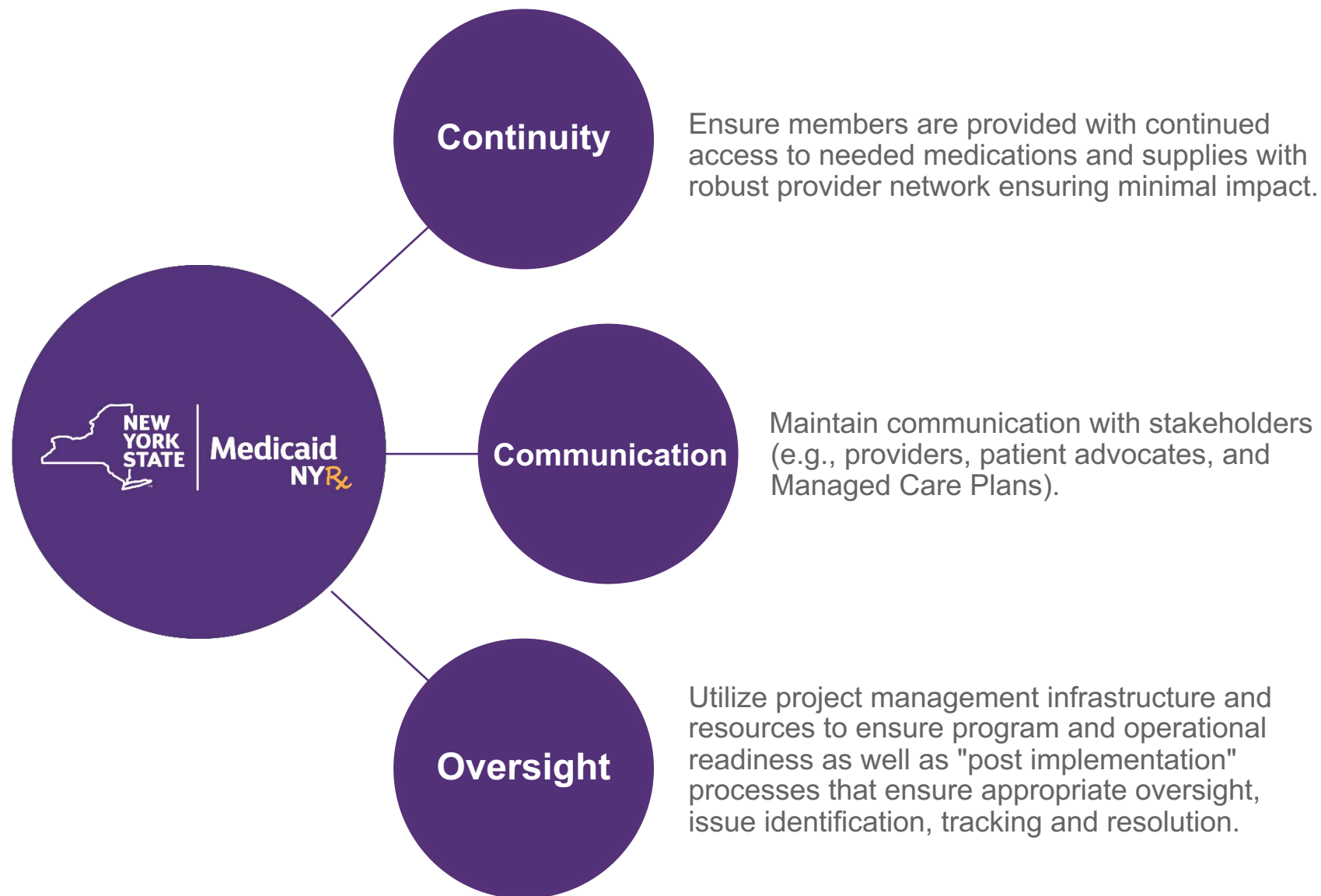


Transition Overview

- Beginning April 1, 2023, Medicaid members enrolled in mainstream Managed Care (MC) plans, Health and Recovery Plans (HARPs), and HIV-Special Needs (SNPs) will receive their pharmacy benefits through the Medicaid Fee for Service (FFS) Pharmacy Program.
- The transition will 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 will not change the scope of benefits (e.g., copayments and covered drugs) of the existing Medicaid Pharmacy Benefit.

January 17, 2023

Transition Guiding Principles



Member Letters

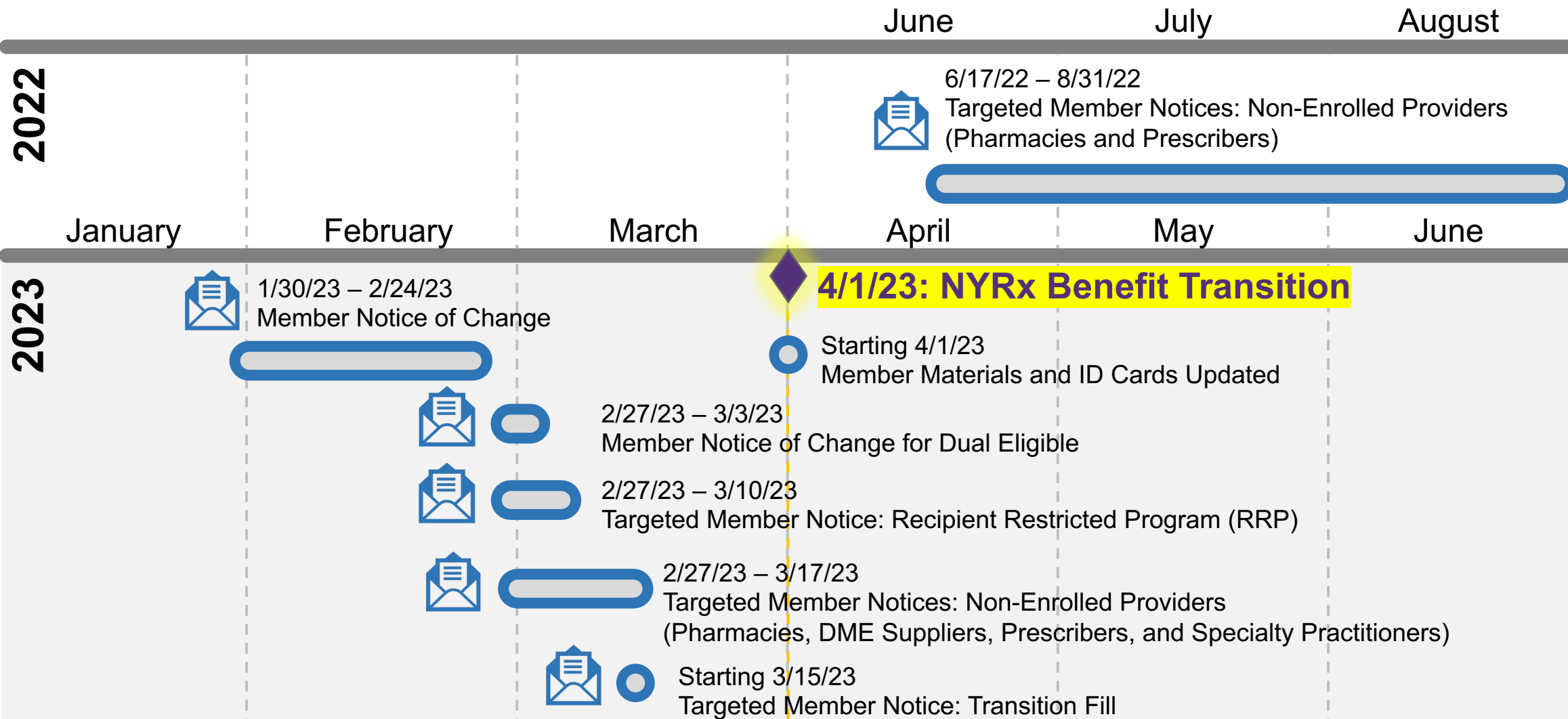
January 17, 2023

Notices to Members About the Transition

Notice Title	Purpose
Member Notice of Change	Notify members of change in plan benefit and transition of pharmacy and durable medical equipment (DME) benefits to FFS.
Member Notice of Change for Dual Eligible	Notify Integrated Benefit (IB) dual eligible and Medicare dual eligible members that certain prescription vitamins and over the counter (OTC) drugs will be covered by NYS Medicaid FFS.
Targeted Member Notices: Non-Enrolled Providers (Pharmacy, DME Supplier, Prescriber, and Specialty Practitioner)	Notify members about providers they are using that are not enrolled in FFS and provide guidance on transferring to enrolled providers.
Targeted Member Notice of Recipient Restriction	Notify members with restrictions imposed by the Office of the Medicaid Inspector General (OMIG) about the carryover of restriction lift/end dates to NYS Medicaid FFS.
Targeted Member Notice: Transition Fill	Notify members with prescriptions for non-preferred products about the transition fill period April 1 – June 30, 2023.

January 17, 2023

Communications to Members



Managed Care Plan (MCP) Member Mailing

Provider Letters

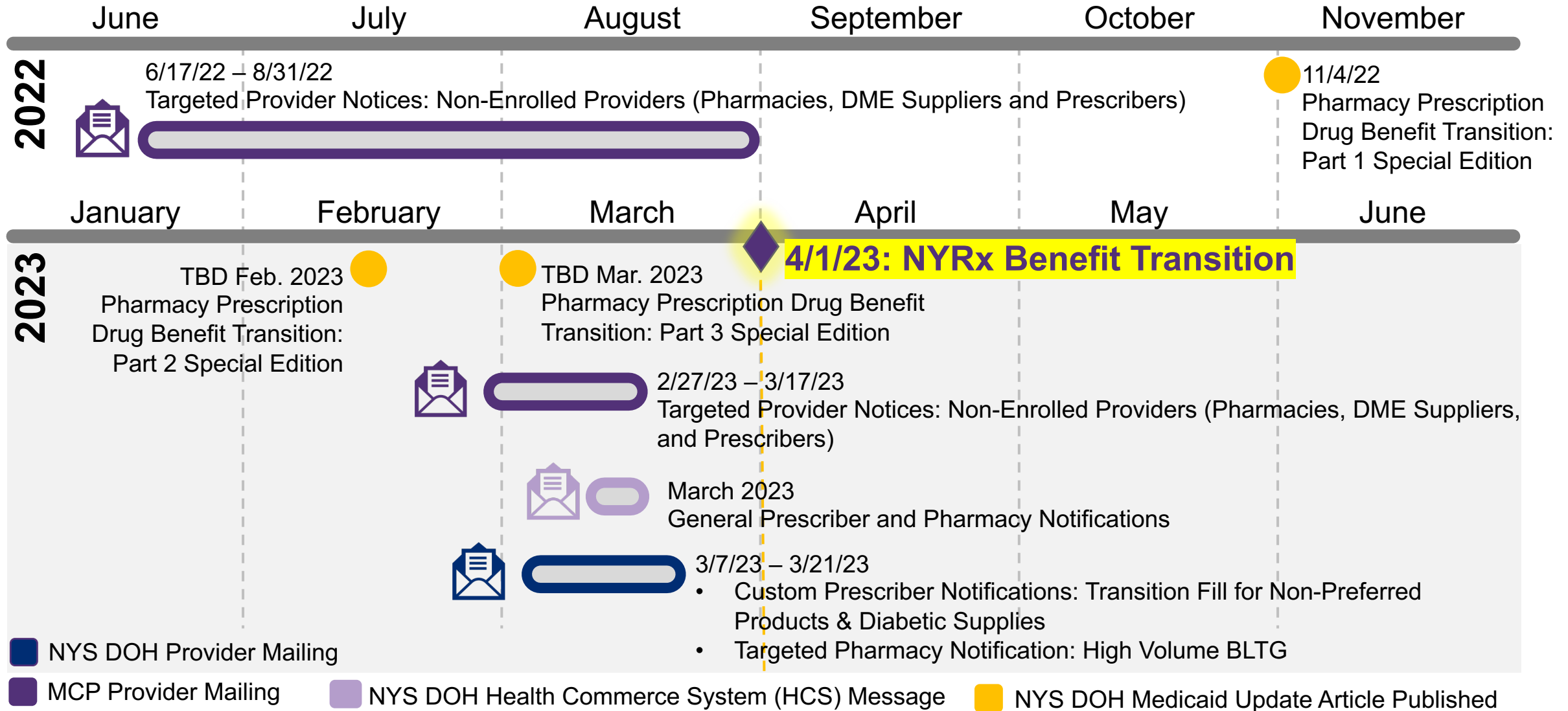
January 17, 2023

Notices to Providers About the Transition

Notice Title	Purpose
Targeted Provider Notices: Non-Enrolled Providers (Pharmacy, DME Supplier, and Prescriber)	Notify managed care providers that they must enroll with NYS Medicaid FFS to continue serving members.
Custom Prescriber Notifications: Transition Fill for Non-Preferred Products (Drugs and Diabetic Supplies)	Notify prescribers who have patients with prescriptions for non-preferred products about the transition fill period April 1 – June 30, 2023
Targeted Pharmacy Notification High Volume BLTG	Notify pharmacy providers about the Brand Less Than Generic (BLTG) Program and the point of service message when submitting claims for the generic version of a drug in BLTG.
General Prescriber and Pharmacy Notifications	Notify prescribers and pharmacy providers about the transition and include information about the Preferred Drug and Preferred Diabetic Supply Programs.

January 17, 2023

Communications to Providers



NYRx Programs

January 17, 2023

NYRx, the Medicaid Pharmacy Program

Home Site Map Contact Us

Programs Resources

Current Pharmacy Programs and Updates

NOTICE! Effective 4/1/2023: The Pharmacy benefit will transition from Managed Care to NYRx, The Medicaid Pharmacy Program

[Preferred Drug List](#)
[Preferred Drug Program](#)
[Brand Less Than Generic Program](#)
[Dose Optimization Initiative](#)
[Drug Utilization Review Board \(DURB\) Recommendations](#)
[Preferred Diabetic Supply Program](#)
[Single State Supplemental Rebate Agreements \(SRAs\) for Preferred Anti-Retrovirals \(ARVs\)](#)
[Single Statewide Medication Assisted Treatment \(MAT\) Formulary](#)
[SMAC Program](#)

Recent Pharmacy News

OCTOBER 2022

[Medicaid Pharmacy Prior Authorization Programs Update - Effective November 17, 2022](#)

JULY 2022

[Medicaid Pharmacy Prior Authorization Programs Update - Effective August 11, 2022](#)

MAY 2022

[Attention: The Utilization Threshold Program has been revised effective July 1, 2022](#)

FEBRUARY 2022

[Updated Guidance: Statewide Formulary for Opioid Dependence Agents and Opioid Antagonists](#)
[Medicaid Pharmacy Prior Authorization Programs Update - Effective March 22, 2022](#)

January 17, 2023

NYRx and Magellan

NYRx works with many [contractors](#), including Magellan, to support the Medicaid program.

Magellan provides administration and clinical call center support for NYRx programs, including but not limited to:

- [Preferred Drug Program \(PDP\)](#)
- [Preferred Diabetic Supply Program \(PDSP\)](#)
- [Brand Less Than Generic Program \(BLTG\)](#)

For the latest program updates, visit newyork.fhsc.com or sign up at newyork.fhsc.com/providers/notify.asp to receive email notifications.

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.

January 17, 2023

Preferred Diabetic Supply Program (PDSP)

- Since 2009, NYRx has managed a Preferred Diabetic Supply Program to provide Medicaid members access to quality glucose meters, test strips, and disposable insulin pumps while at the same time reducing overall program costs.
- Prescribers should review the [Preferred Supply List](#) prior to the benefit transition effective April 1, 2023.
- A prior authorization may be required for a preferred product if a member does not meet clinical criteria.
- Non-preferred products require prior authorization.

January 17, 2023

NYRx Diabetic Supplies

			Effective: 10/01/22
Manufacturer	Product	NDC	Description
ABBOTT	FREESTYLE FREEDOM LITE	99073070914	Meter
ABBOTT	FREESTYLE INSULINX	99073071143	Meter
ABBOTT	FREESTYLE LITE METER	99073070805	Meter
ABBOTT	FREESTYLE PRECISION NEO METER	57599517501	Meter
ABBOTT	PRECISION XTRA MONITOR	57599881401	Meter
ABBOTT	FREESTYLE INSULINX TEST STRIP	99073071231	Strips
ABBOTT	FREESTYLE INSULINX TEST STRIPS	99073071227	Strips
ABBOTT	FREESTYLE LITE TEST STRIP	99073070822	Strips
ABBOTT	FREESTYLE LITE TEST STRIP	99073070827	Strips
ABBOTT	FREESTYLE PREC NEO TEST STRIPS	57599157701	Strips
ABBOTT	FREESTYLE PREC NEO TEST STRIPS	57599157904	Strips
ABBOTT	FREESTYLE TEST STRIPS	99073012050	Strips
ABBOTT	FREESTYLE TEST STRIPS	99073012101	Strips
ABBOTT	PRECISION XTRA TEST STRIPS	57599972804	Strips
ABBOTT	PRECISION XTRA TEST STRIPS	57599987705	Strips
ABBOTT	FREESTYLE LIBRE 14 DAY READER	57599000200	Reader
ABBOTT	FREESTYLE LIBRE 14 DAY SENSOR	57599000101	Sensor
ABBOTT	FREESTYLE LIBRE 2	57599080000	Sensor
ABBOTT	FREESTYLE LIBRE 2	57599080300	Reader
ABBOTT	FREESTYLE LIBRE 3	57599081800	Sensor
ABBOTT	PRECISION XTR B-KETONE STRIP	57599074501	Ketone Strips
ASCENSIA	CONTOUR METER	00193718901	Meter
ASCENSIA	CONTOUR NEXT METER	00193737701	Meter
ASCENSIA	CONTOUR NEXT GEN	00193791701	Meter
ASCENSIA	CONTOUR NEXT EZ METER	00193725201	Meter
ASCENSIA	CONTOUR NEXT EZ METER SYSTEM	00193755301	Meter
ASCENSIA	CONTOUR NEXT ONE METER	00193782501	Meter
ASCENSIA	CONTOUR NEXT ONE METER	00193781801	Meter
ASCENSIA	CONTOUR NEXT TEST STRIP	00193731025	Strips
ASCENSIA	CONTOUR NEXT TEST STRIP	00193731150	Strips
ASCENSIA	CONTOUR NEXT TEST STRIP	00193731221	Strips
ASCENSIA	CONTOUR TEST STRIP	00193707025	Strips
ASCENSIA	CONTOUR TEST STRIP	00193708050	Strips
ASCENSIA	CONTOUR TEST STRIP	00193709021	Strips
DEXCOM	DEXCOM G6 RECEIVER	08627009111	Meter



Resources and Updates

January 17, 2023

NEW YORK STATE Department of Health Medicaid NYRx New York State Medicaid Members

Member Dashboard

NYRx, the Medicaid Pharmacy Program Member Resources

Welcome to NYRx, the Medicaid Pharmacy Program Member Resources
 Effective April 1, 2023, your pharmacy benefit will transition from Managed Care to NYRx, the NYS Medicaid Pharmacy Program. This website provides information and tools about your pharmacy benefits, including what drugs and supplies are covered and where you can find a nearby pharmacy that takes NYRx.

What is NYRx, The NYS Medicaid Pharmacy Program?
 NYRx covers your prescription drugs, over-the-counter products, and medical supplies. In some instances, if you have a primary insurance and also qualify for Medicaid, then Medicaid would only be billed after your primary insurance to assist with paying the primary insurance copay or with coverage of a drug that is excluded from that insurance plan.

How do I contact someone for help about my benefits?
 For help by phone, contact the NYS Medicaid Helpline at: (800) 541 2331
 Helpline Hours: Mon-Fri 8AM-8PM, Sat 9AM-1PM, Language help is available

Helpful information is also available online:

- The **FAQs about NY Medicaid Benefits** provides answers to the most common questions, including about copays and renewals.
- The **FAQs about the Transition of the Pharmacy Benefit** provides answers to questions received from members, providers, and other stakeholders about the transition from Medicaid Managed Care to NYRx.

Check out the new look!
member.emedny.org

eMedNY | NYS Medicaid Helpline (800) 541-2831

NEW YORK STATE Department of Health

Department of Health

New York State Medicaid Members

Benefits and Coverage

NYRx, the Medicaid Pharmacy Program

Member Dashboard

Pharmacy Members

Benefits and Coverage

Covered Medical Supplies

Search and Tools

Pharmacy & Medical Equipment

OTC and Prescription Drugs

What if my drug and/or medical supply requires approval from my doctor?
If your drug and/or medical supply requires approval from your doctor, you should:

- Talk to your doctor about requesting approval, or
- Talk to your doctor or pharmacist about an alternate drug and/or medical supply that does not require approval. You can use the **Medicaid List of Covered Drugs and Over the Counter (OTC) Products** and/or **Covered Medical Supplies** search options on this website, to find covered products.

What if a pharmacy does not take NYRx, the Medicaid Pharmacy Program?
If your current pharmacy does not take the 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. You can use the **Find a Pharmacy/Medical Equipment Supplier** search option on this website to find participating pharmacy or medical supplier.

Do I have a copay?
Copay amounts are as follows:

- \$3.00 for non-preferred Brand Name Drugs
- \$1.00 for Generic Drugs, preferred Brand Name Drugs, and Brand Drugs included in the Brand Less than Generic Drugs Program
- \$0.50 for Non-Prescription (over the counter) Products
- \$1.00 for Medical Supplies

Are there any copay exemptions?
Copays are not needed for certain members and service categories. This is programmed within the claims system to return a zero-copay amount automatically if you qualify.

Is there a maximum copay amount to be paid pay over a period of time?
There is a maximum amount for all copays incurred per year (\$200) and it is calculated on a quarterly basis. This includes pharmacy copays. The copay year starts April 1 and ends March 31. When a member reaches the quarterly copay maximum (\$50), they will receive a letter confirming the date on which the

Department of Health



Search for a Pharmacy or Medical Equipment Supplier

Find what you are looking for where you need it



Member Dashboard

Pharmacy Members

Benefits and Coverage

Covered Medical Supplies

Search and Tools

Pharmacy & Medical Equipment

OTC and Prescription Drugs



Drugs and medical supplies may be available at a pharmacy. Additionally, medical supplies are available at a DME Supplier.

Use the search tool to locate a pharmacy or DME supplier near you that takes Medicaid Fee for Service:

- Name (optional):** Provide at least the first three letters of the pharmacy or supplier's name. For example, enter "Wal" to search for pharmacies including Walgreens and Walmart
- Select Service:** Select the type of service location (Pharmacy, Medical Equipment Supplier & Dealer, or All)
- Select County OR Zip Code and Within:** Select either a county or enter a zip code and select a distance range within miles

If you do not find the name of your pharmacy or supplier in the search results, try a broader search by leaving the name field blank. If you are searching by zip code, you may need to adjust the distance range.

Please note: Not all pharmacy names will be an exact match

Example: Market 32 or Price Chopper may fall under the name Golub Corporation. If the pharmacy name in the list is not an exact match, check if the address matches the pharmacy you are looking for.

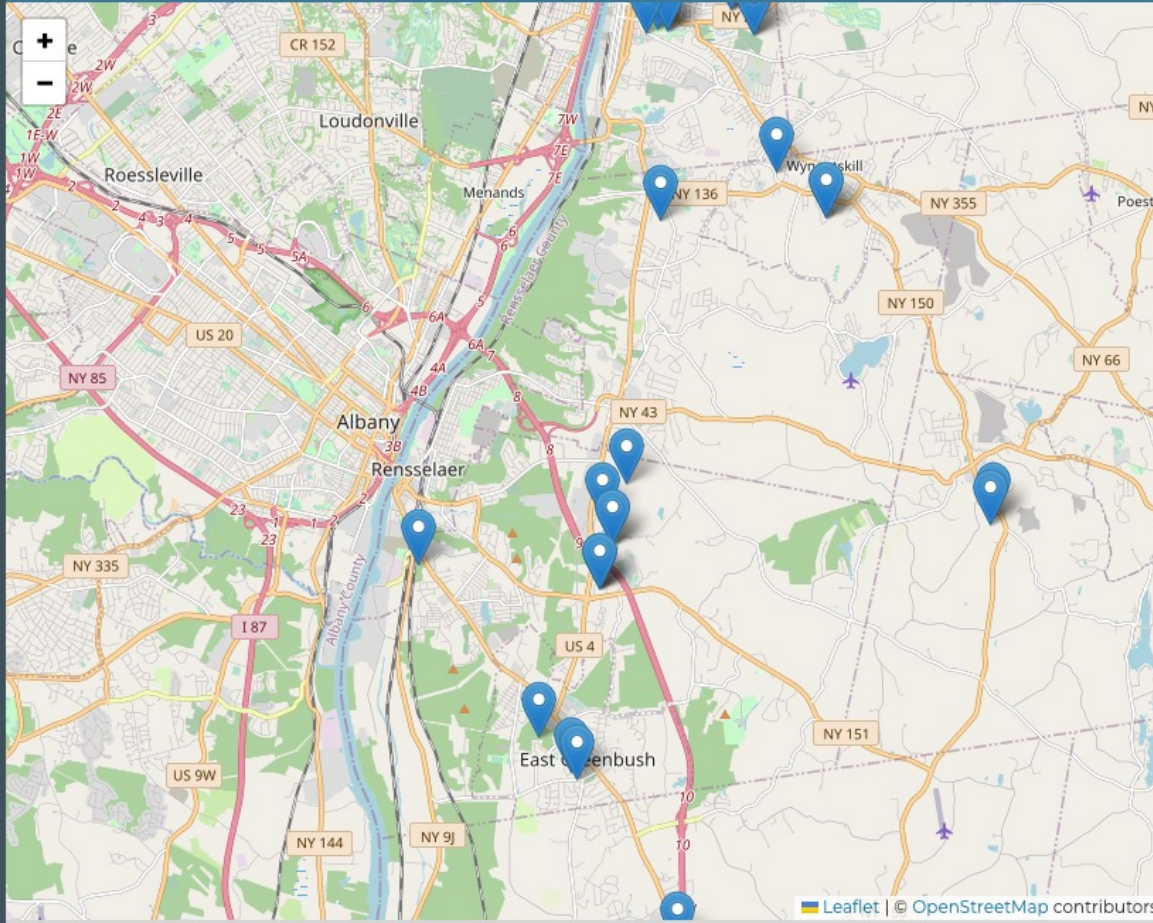


Search for a Pharmacy or Medical Equipment Supplier

Find what you are looking for where you need it



- Member Dashboard
- Pharmacy Members
- Benefits and Coverage
- Covered Medical Supplies
- Search and Tools
 - Pharmacy & Medical Equipment
 - OTC and Prescription Drugs



GENOA HEALTHCARE LLC
 (PHARMACY)
 2431 6TH AVE STE P
 TROY, NY
 Phone: (518) 874-0096

GOLUB CORPORATION
 (PHARMACY)
 716 HOOSICK RD
 TROY, NY
 Phone: (518) 266-9947

GOLUB CORPORATION
 (PHARMACY)
 501 COLUMBIA TPKE
 RENSSELAER, NY
 Phone: (518) 479-4388


HOOSICK FALLS INC
 (PHARMACY)
 24 CHURCH ST
 HOOSICK FALLS, NY
 Phone: (518) 686-5711

LINDSAY DRUG CO INC
 (PHARMACY)
 416 5TH AVE
 TROY, NY
 Phone: (518) 235-2522


MARTINS FOODS OF S BURLINGTON
 (PHARMACY)
 9 126TH ST
 TROY, NY
 Phone: (518) 233-8296


MARTINS FOODS OF SO BURLINGTON LLC
 (PHARMACY)
 40 MAIN AVE PHARMACY
 WYNANTSKILL, NY

Name Pharmacy Rensselaer Zip Ccc Within...




New York State Medicaid Members






Search for OTC and Prescription Drugs

Benefits and Information



- Member Dashboard
- Pharmacy Members
- Benefits and Coverage
- Covered Medical Supplies
- Search and Tools
 - Pharmacy & Medical Equipment
 - OTC and Prescription Drugs



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 3 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.

1 - 4 of 4

Product Name	Description	Prior Approval
LIPITOR 10 MG TABLET	PFIZER/VIATRIS	PA required / may be required
LIPITOR 20 MG TABLET	PFIZER/VIATRIS	PA required / may be required
LIPITOR 40 MG TABLET	PFIZER/VIATRIS	PA required / may be required
LIPITOR 80 MG TABLET	PFIZER/VIATRIS	PA required / may be required

Please Note:

If a drug in the list says prior approval (PA) is required or may be required, please contact your doctor or pharmacist. Depending on your medical history, they can help you get a PA for that drug or find another drug on the Medicaid Preferred Drug List that is right for you.

More website updates coming soon!

A black spotlight on a tripod stands on the left side of the slide. A beam of light from the spotlight illuminates the text 'Spotlight FAQ 142' and 'Section: Provider Impact'.

Spotlight FAQ 142

Section: Provider Impact

Will providers and members be informed of the medications in need of a prior authorization before implementation on April 1, 2023?

Yes, members and providers will receive letters regarding non-preferred products recently utilized by the member. A one-time transition fill will be provided before prior authorization is required. For more information on the transition fill period please reference FAQ 051, FAQ 113, and FAQ 124.

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

January 17, 2023

A black spotlight on a tripod stand, with a beam of light shining from the lens towards the text.

Spotlight FAQ 139

Section: Scope of Benefits

Does the NYRx pharmacy program publish the clinical criteria for drug prior authorizations for members and providers to review?

NYRx, the Medicaid Pharmacy program publishes a full listing of drugs and clinical criteria for the Preferred Drug Program, Clinical Drug Review Program (CDRP), DUR Program, Brand Less than Generic Program (BLTG), Dose Optimization Program and the Mandatory Generic Drug Program (MGDP) on the [Magellan Medicaid Administration Website](https://www.health.ny.gov/health_care/medicaid/redesign/mrt2/pharmacy_transition/pharmacy_transition_faq.htm). You can also sign up to receive email notifications about the latest program updates.

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

January 17, 2023

A black silhouette of a spotlight on a tripod stands on the left side of the slide. A bright yellow beam of light emanates from the spotlight, illuminating the text to its right.

Spotlight FAQ 141

Section: Provider Impact

Do pharmacists need to be enrolled as Medicaid providers to be reimbursed for vaccinations and administration?

No. The pharmacy must be enrolled in the NYS Medicaid program, and enrolled pharmacies are eligible for reimbursement of covered vaccination services.

For billing guidance, please review the [Pharmacists as Immunizers Fact Sheet](#).

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

January 17, 2023

Key Deliverables and Timeline Updates

Deliverable(s)	Target Date	
Complete Work Plan and Establish State Transition Team	June 2022	✓
Recurring Workgroup Calls with Health Plans about Transition begin	June 2022	✓
Finalize NYS DOH/Managed Care Plan Roles	June 2022	✓
Finalize NYS DOH/Managed Care Plan Scope of Benefits and Transition & Communications Timeline	July 2022	✓
NYS DOH Website Go-Live	July 2022	✓
Recurring All Stakeholders meetings begin	August 2022	✓
Transition Analysis Conducted (e.g., Formulary, DME, OTC Comparisons), Changes Made To Smooth Transition and Transition Strategy Finalized	August 2022	✓

January 17, 2023

Key Deliverables and Timeline Updates

Deliverable(s)	Target Date
Initial Special Edition Medicaid Update Published	November 2022 ✓
Second Special Edition Medicaid Update Published	February 2023
Member Notice of Change and Non-Enrolled Provider Notifications Sent	February 2023
Systems Stress Testing Conducted	February 2023
Third Special Edition Medicaid Update Published	March 2023
Make Required Changes to Common Benefit Identification Card (CBIC) Carrier or Notice	April 2023
Go Live	April 1, 2023

January 17, 2023

Resources



Websites:

NYRx Benefit Transition: Information regarding the transition of the pharmacy benefit from Managed Care to NYRx will be posted on the DOH website at

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

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/>

Email: NYRx@health.ny.gov – Please include **Pharmacy Benefit Transition** in the subject line.

DOH Medicaid Update: https://www.health.ny.gov/health_care/medicaid/program/update/main.htm

MRT Listserv: https://health.ny.gov/health_care/medicaid/redesign/listserv.htm

Magellan Listserv: <https://newyork.fhsc.com/providers/notify.asp>

Next All Stakeholders Meeting: Feb. 21, 2023

The Slido form and Webex registration for the February 21 All Stakeholders Meeting will be sent via the [MRT Listserv](#) and posted on the [transition website](#).

- February 10 – Announcement with Webex and Slido information
- February 17 – Deadline to submit questions in Slido ahead of the meeting
- February 21 – At the end of the presentation, the NYRx team will answer questions received in Slido.



January 17, 2023

Questions?

Please submit your questions in Slido.

If you cannot access Slido in Webex, please go to www.slido.com or scan the QR code.

- Event code: nyrx011723
- Passcode: rxtransition2023

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](#).



Add label

- Benefits/Coverage (Drugs)
- Benefits/Coverage (Supplies)
- General
- Managed Care
- Member Impact
- PA and Billing Process
- Provider Enrollment