

Tip Sheet for Pharmacy Providers Changes to the Point-of-Sale Facilitated Enrollment (POS FE) Process Updated April 2008

The Centers for Medicare & Medicaid Services (CMS) continues to improve the POS FE process for dual eligible and other low-income subsidy (LIS) eligible individuals by working with the administrator of the POS FE process, WellPoint, and its subsidiaries, UniCare Life & Health Insurance Inc. and WellPoint NextRx (Pharmacy Benefits Manager). We want to make this process as easy and reliable as possible for pharmacies to use in those rare cases where LIS-eligible individuals are not yet reflected in CMS systems when they first present at a pharmacy. Recent changes we want to bring to your attention include:

- <u>Minimizing Claim Reversals to Pharmacies</u>
 - In 2007, CMS and WellPoint NextRx took several key steps to minimize claim reversals to pharmacy providers. First, we implemented improved edits to ensure that claims are rejected immediately for individuals who are not Medicare-eligible or have an existing Part D plan enrollment. Most recently, to further reduce claim reversals to pharmacies, we have instituted a process to recover funds from Medicare beneficiaries who use the POS FE process although they are not eligible for Medicaid or LIS.¹ Instead of reversing claims in these circumstances, WellPoint (through its subsidiary, UniCare) sends a notice to these individuals (an "Evidence of Eligibility" letter), requesting that they either: (1) provide proof of their Medicaid eligibility or qualification for extra help; or (2) reimburse UniCare for the claim amount(s).
- <u>Exceptions Process</u>

For claims that rejected in 2007 because they were submitted more than 30 days after the POS FE date of service, CMS Regional Office caseworkers are able to submit POS FE exceptions to the 30-day claims processing limit to WellPoint NextRx. In 2008, this 30-day claims processing limit has been extended to 90 days. Claims that are submitted more than 90 days after the POS FE date of service may be submitted as exceptions to the appropriate CMS Regional Office, as described further below.

¹ If state systems do not confirm Medicaid eligibility in the POS FE service month and LIS eligibility cannot be confirmed through CMS, WellPoint (through its subsidiary, UniCare) will request proof of Medicaid/LIS eligibility from the individual. If no documentation is provided within 60 days, UniCare will seek reimbursement from the individual for the costs of the claims. This differs from the 2006 and early 2007 POS FE process in which such claims would have been reversed to the pharmacy provider. Note that the new recovery process allows the beneficiary to provide documentation of Medicaid/LIS eligibility to UniCare after receiving POS FE services.

As a reminder, before processing POS FE claims, pharmacy staff need to verify the following:

- The beneficiary's Medicare eligibility;
- That the beneficiary has no active Part D Plan enrollment; and
- The beneficiary's Medicaid or LIS eligibility.

Note: If the beneficiary has both Medicare and Medicaid, *please transmit both the Medicare and Medicaid numbers*.

If you are unable to process a 2008 POS FE claim:

- If the date of service is *less than 90 days* from the date of submission and after January 1, 2008, contact the POS FE Pharmacy Benefits Manager, **WellPoint NextRx help desk at 1-800-957-5147.**
- If the date of service is *greater than 90 days* before the date of submission or prior to January 1, 2008, use the attached fax sheet to request an exception. Submit the request to the CMS Regional Office that services your state.

For more information about the POS FE process, please see the "Point-of-Sale Facilitated Enrollment (POS FE) Process: Four Steps for Pharmacists," available at: http://www.cms.hhs.gov/Pharmacy/downloads/POSFEFourSteps041808.pdf



Pharmacy <u>Fax Request</u> to the CMS Regional Office For Point-of-Sale Facilitated Enrollment Claims Over 90 Days Old

Fax to: Regional Office Name:

Fax Number:

CMS Regional Office (RO) Number and Name	States/Territories Served	Regional Office Caseworker Fax Number	Regional Office Caseworker Phone Number (For follow-up if the pharmacy has not been contacted in 3 business days)
RO 1 Boston	CT, MA, ME, NH, RI, VT	617-565-3856	617-565-1232
RO 2 New York	NJ, NY, PR, USVI	212-265-2665	212-616-2222
RO 3 Philadelphia	DE, DC, MD, PA, VA, WV	215-861-4176	215-861-4226
RO 4 Atlanta	AL, FL, GA, KY, MS, NC, SC, TN	404-562-7386	404-562-7500
RO 5 Chicago	IL, IN, MI, MN, OH, WI	312-886-5705	312-353-1102
RO 6 Dallas	AR, LA, NM, OK, TX	214-767-0323	214-767-6401
RO 7 Kansas City	IA, KS, MO, NE	816-426-7604	816-426-5783
RO 8 Denver	CO, MT, ND, SD, UT, WY	303-844-2776	303-844-4024
RO 9 San Francisco	American Samoa, AZ, CA, Northern		
	Mariana Islands, Guam, HI, NV	415-744-3761	415-744-3617
RO 10 Seattle	AK, ID, OR, WA	206-615-2363	206-615-2354

Please provide all of the following beneficiary and pharmacy information [Note: Incomplete requests may result in processing delays.]:

Beneficiary Information:

Beneficiary Medicare Number
Beneficiary First Name
Beneficiary Last Name
Date of Birth
Gender
Street Address
Zip Code
Date of Service
The beneficiary has Medicare and (Please check one):
Medicaid \Box Low Income Subsidy (LIS) \Box
Pharmacy Information:

Pharmacy Name
Pharmacy Contact
Pharmacy Phone Number
Pharmacy Email Address