



State of New Jersey
Department of Human Services
Division of Medical Assistance & Health Services

NEWSLETTER

Volume 26 No.07

July 2016

TO: All Providers of Pharmaceutical Services – **For Action**
Health Maintenance Organizations – **For Information Only**

SUBJECT: (1) **Termination of NJ FamilyCare Fee-for-Service Pharmacy Provider Participation**
(2) **Termination of NJ FamilyCare Fee-for-Service Prescriber Participation**

EFFECTIVE: On or about August 15, 2016

PURPOSE: To notify NJ FamilyCare (NJFC) fee-for-service (FFS) pharmacy providers of (1) a decision by the New Jersey Division of Medical Assistance and Health Services (DMAHS) to terminate the participation of pharmacies who have not re-enrolled in the NJFC FFS program; and (2) the impact of a similar decision for prescribers who did not complete re-enrollment by July 11, 2016.

BACKGROUND: On or about June 1, 2014, DMAHS began the process of re-enrolling NJFC FFS providers who were enrolled in NJFC prior to January 1, 2013. A similar process was initiated for pharmacies on December 1, 2015. Any provider who enrolled on or after January 1, 2013 or submitted a completed enrollment packet for re-activation of their NJFC FFS provider number on or after January 1, 2013 was not required to re-enroll in the NJFC FFS program (see Medicaid Newsletter Volume 24, No. 04 for additional information regarding the re-enrollment process).

With the exception of pharmacies, the enrollment of any NJFC FFS provider not re-enrolled in the NJFC FFS program by July 11, 2016 has been terminated. **Pharmacy services prescribed by a practitioner who has not completed their re-enrollment are not covered by the NJFC FFS program and Point-of-Sale (POS) requests for payment for these services shall be denied payment by State of New Jersey.** Certain accommodations have been made by DMAHS to minimize possible interruptions in pharmacy services and are intended to provide non-enrolled practitioners an opportunity to re-enroll or request participation in the NJFC FFS program as a non-billing provider.

ACTIONS:

(1) Termination of NJFC FFS pharmacy provider participation:

DMAHS shall terminate the enrollment of any FFS pharmacy provider whose re-enrollment application has not been received by August 15, 2016. To ensure compliance with the Patient Protection and Affordable Care Act (PPACA) of 2010, commonly called the Affordable Care Act (ACA), those pharmacies whose re-enrollment applications are not received by August 15, 2016 shall be terminated.

Pharmacies whose re-enrollment in the NJFC FFS program has not been completed and have submitted POS FFS claims to NJFC for payment consideration shall receive in the POS response: **Error Code 0696 – Claim denied provider not re-enrolled.** For additional information regarding the re-enrollment process, pharmacies should view the Division of Medical Assistance and Health Services Newsletter, Volume 24, No. 04, dated May 2014 which may be found under **Newsletters & Alerts** at: www.njmmis.com.

(2) Termination of NJFC FFS Prescriber Participation:

On July 11, 2016, DMAHS terminated the enrollment of any FFS providers, including prescribers, who had not completed a provider re-enrollment application to ensure compliance with the Patient Protection and Affordable Care Act (PPACA) of 2010.

Termination of prescribers may cause possible disruptions in pharmacy services. To minimize interruptions on or after July 11, 2016, the Division implemented a fifteen (15) day “grace period” for NJFC beneficiaries to receive medications in cases where the prescriber has not re-enrolled. FFS beneficiaries are eligible to receive up to a 30-day supply of any medications prescribed during a 15-day grace period established after a denial by Error Code 2266 (see below) and the resubmission of the denied claim.

The pharmacy may request that the prescriber contact the Molina Medicaid Solutions Provider Services Unit at 1-800-776-6334 to determine their enrollment status or to request a NJFC FFS enrollment application. Prescribers may enroll in NJFC as billing providers by completing the FD-20 provider enrollment application or as non-billing providers by completing the abbreviated provider enrollment application (FD-20B) (see Newsletter Volume 22, No. 20 for non-billing provider information). Both applications may be downloaded from the web under **Newsletters & Alerts** at www.njmmis.com.

Pharmacies may request prior authorization for prescribers not yet re-enrolled for any prescriptions in which (1) a drug quantity greater than 30 days is medically necessary or product packaging requires the dispensing of greater than a 30 days supply; or (2) a prescription needs to be dispensed outside of the 15-day grace period and the prescriber has not completed the re-enrollment process. The pharmacy or prescriber may contact the Molina Medical Exception Process (MEP) Unit at 1-877-888-2939 to request prior authorization.

The following Error Codes shall post to POS claims when medications have been prescribed by a practitioner who has not re-enrolled in the NJFC program:

Error Code	Explanation
2266	Ineligible prescriber – 15-day grace period begins for prescriber
2267	DS limit exceeded for grace
2268	RX in 15-day grace period
2269	Ineligible prescriber-outside of grace period, no fills allowed

If you have any questions concerning this Newsletter, please contact the Molina Medicaid Solutions Provider Services at 1-800-776-6334.

RETAIN THIS NEWSLETTER FOR FUTURE REFERENCE