



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

MEDICAID ALERT

FEBRUARY 7, 1997

TO: All Pharmacy Providers
SUBJECT: General Assistance Claims
EFFECTIVE: February 1, 1997

BACKGROUND: As Newsletter Volume 7, Number 7 discussed, the Division of Family Development (DFD) and the Division of Medical Assistance and Health Services (DMAHS) have jointly developed a project which will effect the processing and payment of all medical services claims for the General Assistance (GA) program through Unisys, the Medicaid fiscal agent. During the transition, certain GA pharmacy claims were denied for eligibility reasons, even though the GA beneficiary presented the pharmacist with a valid monthly identification card or letter.

ACTION: The problem that caused the denial of certain valid GA pharmacy claims has been eliminated. GA pharmacy claims submitted to Unisys between February 1, 1997 and February 6, 1997 that were denied and the reason for the denial was that the beneficiary was not eligible for GA on the date of service will be paid if resubmitted.

If you have any questions, please contact the Chief, Pharmaceutical Services, at (609) 588-2724.

RETAIN THIS MEDICAID ALERT CHRONOLOGICALLY BEHIND THE
MEDICAID ALERTS TAB (GREEN TAB MARKED "4")