



State of Vermont Department of Vermont Health Access (DVHA) NOB 1 South, 280 State Drive Waterbury, VT 05671-1010

June 25, 2021

Reminder: Vermont Medicaid Billing with Closed Primary Commercial Insurance

Federal Statute requires pharmacies to bill a member's primary commercial insurance before billing Vermont Medicaid as the secondary payer.

Pharmacy claims are rejected by a member's primary insurer if the member has been terminated from the policy or the policy has been terminated. Occasionally, the TPL information has not been updated and the member's primary insurance policy is still active in the Medicaid system.

If a pharmacy determines (e.g., either through the receipt of an "Other Payer Reject Code" or by validating the policy closure with the member) the primary insurance is no longer active, the pharmacy can submit the claim to Medicaid as the primary payer.

Vermont Medicaid will allow claims to process without delay

Claims submitted to Medicaid using **Other Coverage Code 3** with one of the following NCPDP Version D.0 Other Coverage Rejection codes:

- **65** = Patient is not covered
- **68** = Filled after coverage expired
- **69** = Filled after coverage terminated

Per Federal Statute, Medicaid is the payor of last resort. Claims submitted to Medicaid as the primary insurer with Other Coverage Rejections "65, 68 and 69" will be reviewed, and if billed incorrectly will be subject to recoupment or referred for further review by Medicaid Program Integrity.

For questions, please contact the Change Healthcare Pharmacy Help Desk at 1-844-679-5362 or send inquiries via email to <u>PBA_VTHelpdesk@changehealthcare.com</u>.

Thank you for your ongoing support of the State of Vermont's Medicaid pharmacy benefits programs.