



DIVISION OF MEDICAL SERVICES PROVIDER BULLETIN

Volume 27 Number 13

<http://www.dss.mo.gov/dms>

December 20, 2004

HOSPICE AND PHARMACY BULLETIN

CONTENTS

- MEDICATION CLAIMS PROCESSING FOR RECIPIENTS ENROLLED WITH A HOSPICE
 - PRIOR AUTHORIZATION PROCESS
 - MEDICATION LISTS
-

MEDICATION CLAIMS PROCESSING FOR RECIPIENTS ENROLLED WITH A HOSPICE

Effective January 5, 2005 Missouri Medicaid will begin processing pharmacy claims through the traditional Point-of-Sale (POS) system for recipients enrolled with a hospice. All pharmacy claims processed on or after January 5, 2005, regardless of the date of service will process in the new manner. The attached therapeutic drug classes will be assumed to be related to the terminal illness and will not be reimbursed by Missouri Medicaid without prior authorization.

In addition to the therapeutic drug classes listed on the attached, **the hospice provider continues to be responsible for all medications needed for the palliation and management of the terminal illness and related conditions as required by federal regulation (42 CFR 418.96)**. This change in the processing of payment for medications does not represent a change in policy. Only the manner in which medication claims will be processed for payment has changed. Missouri Medicaid will continue to reimburse Medicaid pharmacy providers for pharmacy claims which are not related to the hospice patient's terminal illness and related conditions. For Missouri Medicaid recipients, the hospice must reimburse all other medications.

PRIOR AUTHORIZATION PROCESS

Missouri Medicaid will prior authorize drugs on the attached listed therapeutic drug classes only when it is determined the drugs are unrelated to the terminal diagnosis or a related condition. Since the hospice provider must coordinate all care it is the

responsibility of the hospice to obtain prior authorization for these drugs. Prior authorization requests will be processed by calling the Pharmacy Help Desk at 800-392-8030 or by faxing a Drug Prior Authorization form to 573-636-6470. This form is available on the DMS website at www.dss.mo.gov/dms.

MEDICATION LISTS

Effective January 5, 2005, Missouri Medicaid will no longer require hospice providers to submit a medication list. A medication list that identifies all medications the patient uses and whether the medication is needed for the palliation and management of the terminal illness or a related condition must be retained in the patient's file. Per existing policy 13.9.E(1) in the Hospice Provider Manual, the hospice must also provide a letter or statement to the recipient's pharmacy that identifies the medications that are not the responsibility of the hospice. This letter or statement should include the following:

Patient name

Patient Medicaid ID Number (DCN)

Service dates

Drug name(s)

Statement that the named drugs are not the responsibility of the hospice

Provider Bulletins are available on the DMS Website at <http://www.dss.mo.gov/dms/pages/bulletins.htm>. Bulletins will remain on the Published Bulletin site only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin site.

Missouri Medicaid News: Providers and other interested parties are urged to go to the DMS Website at <http://dss.missouri.gov/dms/subscribe/MedNewsSubscribe.htm> to subscribe to the listserve to receive automatic notifications of provider bulletins, provider manual updates, and other official Missouri Medicaid communications via e-mail.

MC+ Managed Care: The information contained in this bulletin applies to coverage for:

- MC+ Fee-for-Service
- Medicaid Fee-for-Service
- Services not included in MC+ Managed Care

Questions regarding MC+ Managed Care benefits should be directed to the patient's MC+ Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MC+ card or by calling the Interactive Voice Response (IVR) System at 1-800-392-0938 and using Option One.

Provider Communications Hotline
800-392-0938 or 573-751-2896

Drug Classes Covered By Hospice (require Medicaid PA)

The following list of drug classes will generally be the responsibility of the hospice (unless prior authorization is obtained via the DMS Pharmacy Help Desk by calling 800-392-8030).

Antibiotics W1A-J, W1L, W1O-Z, W2A-C, W2AE-G, W2Y

Analgesics H3A-E, H3G-H

Anti-anemics N1B, C3B, C6L

Anti-emetics H6J

Antifungals W3A-D

Antineoplastics/Hormonal Neoplastics V1A-F, V1H-K, V1M, V1O-Q, V1T, V2A

Antipsychotics H2I, H2L, H2O, H7O-V, H7X

Antispasmodics/Motility J9A-B

Antivirals W5A-D, W5H-M

Anxiolytics H2F, H2P

Digestants D4Q

Expectorants and cough products B3A, B3J, B3K, H6N, H6C-D

Glucocorticoids P5A-C

Lactulose D6S

Laxatives/Cathartics D6S, D6T, Q3S

Palliative Medications (mucositis/stomatitis D4H, D4I)

Sedatives/Hypnotics H2E, H2Q

Thickening Agents U6C

ARCHIVED