

October 29, 2014 (Updated December 9, 2014, and January 9, 2015)
Announcement 825

Update for Pharmacies: <u>Override Period</u> for Point-of-Sale Processing for Claims Adjudication Process to Validate Ordering, Prescribing and Referring (OPR) Practitioners <u>Ends February 5, 2015</u>

The practitioner writing a prescription for a Medicaid Fee-for-Service recipient needs to be enrolled as a full Medicaid service provider or an OPR-only provider by October 29, 2014.

Effective on and after October 29, 2014, if the prescriber does not have prescriptive authority or if the prescriber is not enrolled as a full Nevada Medicaid service provider or an OPR-only provider, then the edit will result in a claim denial. A **30-day** override period started October 29, 2014, when the pharmacist may choose to override a denied claim for OPR. Pharmacies will receive the following message to place the override:

PRESCRIBER NOT ENROLLED IN NV MEDICAID,
ONE-TIME OVERRIDE PERMITTED PER Rx
SUBMIT PA TYPE '01',PA '22222222222'

To enter the override, submit '01' in the Prior Authorization Type Code (461-EU) and '22222222222' in the Prior Authorization Number Submitted (462-EV) fields. One override per prescription is permitted.

After the override period, the pharmacy will not be able to override a denied claim due to the OPR hard edit placed in the Point-of-Sale system. The pharmacy is **encouraged** to inform recipients and physicians that future prescriptions will not be able to be filled unless the physician is enrolled in Nevada Medicaid.

<u>Update:</u> The override period was extended beyond the 30-day period. The last day of the override period will be February 5, 2015. Only one override is allowed during the override period.