



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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TO: Idaho Medicaid Pharmacy Providers

FROM: First Health Services Corporation

SUBJECT: Idaho Medicaid Pharmacy Claims Processing is Changing Saturday, January 30, 2010

DATE: January 25, 2010

Dear Pharmacy Provider:

Please use the following information to prevent disruption of services and delays in claims processing during transition of pharmacy claims processing from HP (formerly EDS) to First Health Services. This is the final update you will receive before processing changes are implemented.

Transition Schedule for Electronic Transactions:

- **Friday, January 29 at 8:00 p.m. Mountain Time:** HP (formerly EDS) **will shut down** Point-of-Sale (POS) claims processing and all related National Council for Prescription Drug Programs (NCPDP) transaction processing
- **Saturday, January 30 at 8:00 a.m. Mountain Time:** First Health Services begins POS/NCPDP claims processing. A new Beneficiary Identification Number (BIN), Processor Control number, and Group ID is attached.

System Down Time Related to the Transition:

The POS system will not be available from 8:00 p.m. Mountain Time on 1/29/2010 until 8:00 a.m. on 1/30/2010. Pharmacies who need to dispense drugs for Medicaid participants during this 12-hour period can verify Medicaid eligibility and payment rules for their transactions by calling the First Health Services call center at the number listed below.

Transition Schedule for Paper Drug Claims:

- **Friday, January 23:** HP (formerly EDS) will no longer accept paper drug claim forms.
- **Friday, January 23:** First Health Services will begin to accept and process paper drug claim forms. Paper claim forms should be submitted to

**First Health Services
Idaho Paper Claims Processing Unit
Post Office Box C85042
Richmond, VA 23261-5042**

- Paper claims submitted to First Health Services must be on the Universal Claim Form (UCF). If you need to obtain an UCF, please contact CommuniForm Printing and Promotional Products at **(800) 869-6508**, or go to website: <http://communiform.com/ncpdp>. First Health Services will return any pharmacy paper claims not submitted on this form.

Sources of information for this transition:

- **First Health Services Call Center, Pharmacy Claims**
(800) 922-3987, anytime
- **Website, Claims Submission Manual**
<https://Idaho.fhsc.com>
The manual contains complete Payer Specifications in Appendix A.
- **First Health Services Web Support Call Center**
(800) 241-8726, Monday–Friday, 8:00 a.m.–6:00 p.m. Mountain Time

Aspects that are not changing now:

- Durable medical equipment (DME) and J-code claims continue to be processed by HP (formerly EDS) until further notice.
- Medical claims will continue to be sent to HP (formerly EDS), until further notice.
- Provider Record Update (PRU) process is continuing and providers should finish the update as quickly as possible. Idaho Medicaid will continue to accept claims from currently active pharmacy providers who have not completed their Provider Record Update for a grace period during the transition period. Please finish your update!

Information for Former Provider Electronic Solutions (PES) and Paper Claims Processors

The HP (formerly EDS) Provider Electronic Solutions (PES) software used by some pharmacies **will no longer function for drug claims after 8:00 p.m. Mountain Time on January 29.** Pharmacies should contact First Health Services and consider Web claims submission or mail their paper drug claims to First Health Services. Information for the website and Web Support Call Center is listed above. The PES software will continue to function for DME claim submission, and for eligibility inquiries submitted by DME providers.

First Health Services 835 Electronic Remittance Advice Information

Pharmacy Providers not already registered for 835 Electronic Remittance Advice with First Health Services (by 12/15/2009) will receive a paper remittance advice for claims submitted to First health Services from January 30, 2010 on, until registration is received and processed by First Health Services. Please call (804) 965-7619 for more information.

NEW Aspects of Payer Specification

Transaction Header Segment	Field Number	Values	Comment ALL NEW
BIN Number	101-A1	014864	NEW
Processor Control Number	104-A4	P043014864	NEW
Software Vendor/Certification ID	110-AK	TBD - NOTE	Assigned when vendor is certified with First Health Services. Billings will reject if missing or not valid
Patient Segment	Field Number	Values	Comment
Pregnancy Indicator	335-2C	Blank-Not Specified 1 = Not Pregnant 2 = Pregnant	NEW
Insurance Segment	Field Number	Values	Comment
Group ID	301-C1	IDMEDICAID	NEW
Claim Segment	Field Number	Values	Comment
Number of Refills	415-DF	0-99	Enter number of refills - REQUIRED
Prescription Origin Code	419-DJ	0 = Not specified 1 = Written 2 = Telephone 3 = Electronic 4 = Facsimile	NEW
Pricing Segment	Field Number	Values	Comment
Patient Paid Amount	433-DX		Required when submitting Other Coverage Code = 2. <u>Rejected if:</u> Not submitted with Other Coverage Code = 2 OR Submitted on claims where Other Coverage Code is NOT equal to 2.

COB Segment	Field Number	Values	Comment
Other Payer Reject Count	471-5E		Required when submitting Other Coverage Code = 3
Other Payer Reject Code	472-6E		Required when submitting Other Coverage Code = 3
Clinical Segment	Field Number	Values	Comment
Diagnosis Code Count	491-VE		Required when submitting Diagnosis information.
Diagnosis Code Qualifier	492-WE		Required when submitting Diagnosis information.
Diagnosis Code	424-DO		Required when submitting Diagnosis information.