



## Department of Health

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### **New Edit on Orally Prescribed Controlled Substances to be Implemented in Medicaid Fee-for-Service**

**Effective August 27, 2015**, the Department will implement a new edit on prescription claims for orally prescribed controlled substances to ensure the proper days' supply is submitted on the claim. Per 10 NYCRR Section 80.68 and 80.70, in an emergency, a practitioner may orally prescribe up to a 5-day supply of a Schedule II controlled substance or benzodiazepine and a Schedule III or Schedule V controlled substance.

This means if a claim is submitted with an origin code of "2" in field 419-DJ, and it is for a controlled substance, as listed above, a new edit will trigger a rejected claim when the day supply has been exceeded per regulation. The new codes are returned in the Response Status Segment as follows:

**New MEVS Rx Denial Code 733** – which means (Controlled Substance Oral Prescription Exceeds the Emergency 5 Day Supply Limit) will be returned in field 526-FQ (Additional Message Information).

**New NCPDP Reject Code 7X** – which means (Days Supply Exceeds Plan Limitations) will be returned in field 511-FB- Reject code.

Code descriptions can be found also in the ProDUR-ECCA D.0 Provider Manual:

[https://www.emedny.org/ProviderManuals/Pharmacy/ProDUR-D.0-ECCA\\_Provider\\_Manual/Pro%20DUR%20ECCA%20Provider%20Manual%20\(D.0\).pdf](https://www.emedny.org/ProviderManuals/Pharmacy/ProDUR-D.0-ECCA_Provider_Manual/Pro%20DUR%20ECCA%20Provider%20Manual%20(D.0).pdf)

Please contact the eMedNY Call Center at (800) 343-9000 with questions regarding this billing requirement or any billing issue.