



Department of Health

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Retroactive Prior Authorization (PA) for Point-of-Service (POS) Medicaid Fee-for-Service Pharmacy claims

Effective August 27, 2015, the Department will implement a system change that will allow for processing of a retroactive claim with PA criteria when the date of service is 90 days or less from the date of submission (current date). This means that a claim with PA criteria can be submitted or adjusted for up to 90 days in the past from the current date.

For drug claims that pass PA criteria, an automated PA will be applied to the claim within the system and no further action will need to be taken regarding the PA. For drug claims that fail criteria the pharmacy will receive the message: “Unable to Process a Pharmacy PA. Please Call Magellan at **(877) 309-9493**”, in the claim response. This means when a claim for a drug fails criteria, the prescriber or their authorized agent would have to contact Magellan Medicaid Administration and complete a PA request via the phone (at the above phone number) or fax process at: <https://newyork.fhsc.com/>

The new functionality explained above supplements the policy found in the February 2014 Medicaid Update referenced below which instructs on performing Prospective Drug Utilization Review (Pro-DUR) and the process for drugs subject to PA criteria: http://www.health.ny.gov/health_care/medicaid/program/update/2014/feb14_mu.pdf