

Dear Prescriber,

If you do not write prescriptions, you may disregard this message.

Throughout the COVID-19 state of emergency, Health First Colorado (Colorado's Medicaid Program) is updating the prescription drug policy to authorize the following:

## **Prescription Refills and Early Refills**

The policy for early refills on prescriptions is changing except for mail-order pharmacies. Pharmacists and health care providers shall use best clinical judgment to determine if a member needs an early refill due to COVID-19.

Pharmacies will be able to refill any prescription after 50% of the medication day supply has lapsed. This changed from 75% for controlled substances and 85% for non-controlled substances. Pharmacies can enter an override on the claim if needed due to COVID-19, if 50% of the day supply has lapsed from the previous fill. For example, if a medication has a 30-day supply, it can be refilled at 15 days.

If a member requires a refill before 50% of the day supply has lapsed, the pharmacy override is not available. Health care providers need to contact the Magellan Rx Management Pharmacy Call Center for a one-time refill authorization.

**Emergency Refill:** Per State law (CCR 3.00.23) pharmacists may dispense one refill for non-controlled maintenance medications if unable to get a timely refill authorization from a prescriber. Medicaid can cover this fill. Pharmacies must follow all documentation requirements set forth by the State of Colorado Board of Pharmacy.

## Maintenance Medications (100-Day Supply)

Maintenance (chronic use) medications can be dispensed up to a maximum of 100-day supply for one co-pay (if applicable). The maximum day supply allowed by Medicaid for non-maintenance medications is 30 days. Where practical and appropriate, prescribers and pharmacists should utilize 100-day supply of long term maintenance medications. Colorado law allows pharmacists to dispense larger quantities without prescriber approval, as long as the quantity does not exceed the total number of units remaining on the prescription, including refills.

## Prescription-Required Cough and Cold Products

Prescription cough and cold products for all ages will not require prior authorization except for (Medicare-Medicaid) Dual Eligible members. Prescription cough and cold products include non-controlled products and Guaifenesin/Codeine (ie Cheratussin AC, Virtussin AC).

## Other Prescription and OTC Medications

Coverage may be found on the Preferred Drug List (PDL) and Appendix P available on the <u>Pharmacy Resources web page</u>. Prescription drugs not present on either document are generally a covered benefit (payable without prior authorization). This includes hydroxychloroquine.

Providers Serving (Medicare-Medicaid) Dual Eligible Members

Prescription cough and cold products used for chronic conditions may be covered by Medicare and should not be billed to Medicaid. Prescription cough and cold products for acute conditions are covered with prior authorization. If a member is a dual-eligible member and has a prescription for a cough and cold product for an acute condition, call the Magellan Rx Management Pharmacy Call Center for prior authorization.

Contact the Magellan Rx Management Pharmacy Call Center at with any questions about the status of a prior authorization, pharmacy claim or any concerns related to a Health First Colorado member or medication access issue such as a shortage or back order. Magellan can be reached at 1-800-424-5725, 24 hours a day, 7 days a week.

Thank you,

Department of Health Care Policy & Financing

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