

Provider Update



Amerigroup Kansas, Inc. Changes Pharmacy Benefit Manager Starting April 1, 2015

Summary of change: Effective April 1, 2015 Amerigroup Kansas will be using Express Scripts as its pharmacy benefit manager (PBM) for necessary prescription drugs.

✦ **What this means to you:** For your information only; no immediate action is necessary.

What is the impact of this change?

The change to Express Scripts as our pharmacy benefit manager (PBM) will change the claims processing information. **Please continue to refer to the state Preferred Drug List (PDL) and formulary when prescribing medications for your patients.** You will be able to access these at <https://www.kmap-state-ks.us/Public/Provider.asp> or <http://www.kdheks.gov/hcf/pharmacy/>

Although most drugs on the PDL are covered, **some medications will require prior authorization.** To request authorization, go online to <https://providers.amerigroup.com/Help/Pages/login.aspx>.

Our Pharmacy Online Prior Authorization Tool allows you to:

- Verify member eligibility
- Attach clinical documentation
- Use the drug lookup tool
- Enter multiple requests for multiple drugs at one time
- Appeal denied requests
- Upload supporting documents and review appeal status
- Request medical injectables for those medications obtained by your office/facility for onsite infusion or administration

You may also submit a pharmacy prior authorization request by calling Express Scripts at 1-855-201-7170 or faxing your request to 1-800-601-4829.



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Pharmacy coverage specifications

Pharmacy Claim Submission Information	<ul style="list-style-type: none">To submit a pharmacy claim to Express Scripts on or after April 1, 2015, use the following BIN/PCN/GroupRx information:<table border="1" data-bbox="548 430 1073 674"><thead><tr><th colspan="2">Claim Submission Information</th></tr></thead><tbody><tr><td>BIN:</td><td>003858</td></tr><tr><td>PCN:</td><td>MA</td></tr><tr><td>Group:</td><td>WKGA</td></tr></tbody></table>	Claim Submission Information		BIN:	003858	PCN:	MA	Group:	WKGA
Claim Submission Information									
BIN:	003858								
PCN:	MA								
Group:	WKGA								
Member ID Cards	Amerigroup members will receive a new ID card to use at participating pharmacies.								
Copayments	<ul style="list-style-type: none">Copayments apply only to members with unmet spend down <p>Exception: Members with unmet spend down are not subject to out-of-pocket expenses for drugs covered under the AIDS Drug Assistance Program (ADAP)</p>								
Quantities	Standard is up to a 31-day supply.								
Prior Authorization	Certain medications will require prior authorization. Visit our provider website providers.amerigroup.com to learn more about the process and the benefits of using our online prior authorization submission tool https://providers.amerigroup.com/Help/Pages/login.aspx								
Emergency Medications	A 72-hour supply of medication is permitted in the event of an emergency or while waiting for prior authorization for a medical necessity or nonformulary medication.								

Learn more online

Visit our provider website for more information about the prior authorization process, requirements for generics, step therapy and quantity edits. An updated version of our provider handbook and quick reference card will be posted on our website at providers.amerigroup.com/KS. Printed copies are available upon request.

What if I need assistance?

If you have questions about this communication, received this fax in error or need assistance with any other item, call Provider Services at 1-800-454-3730.

