







MARCH 2024

KMAP GENERAL BULLETIN 24059

Change Healthcare Outage Continues

The Optum Change Healthcare (CHC) system outage continues. Prior notice can be found in Kansas Medical Assistance Program (KMAP) updated bulletin 24052 here.

For managed care organization (MCO) services, please refer to the MCO's website for directions.

Pharmacy

Providers may submit point of sale (POS) transactions through RelayHealth or RedSail Technologies[®] for claims payment. RelayHealth now routes transactions through RedSail Technologies[®] to KMAP as of 6:00 p.m. March 1, 2024.

If a pharmacy is unable to use RelayHealth or RedSail Technologies® instead of CHC for POS transactions, providers may dispense covered drugs in the quantity prescribed as appropriate to fill, up to a 30-day supply. Providers without an alternative to CHC are reminded to validate the following for a member's date of service:

- 1. Verify member eligibility on the Provider Secured Portal.
- 2. Search the National Drug Code (NDC) List for coverage based on member eligibility here.
- 3. If prior authorization is indicated on the NDC List:
 - a. And the drug does not have a known prior authorization approval and/or has had less than a year's worth of paid claims with KanCare, then reach out to the provider to initiate a prior authorization.
 - b. And the patient has paid claims for the drug for a year or more, then prior authorization is waived.

Billing for the emergency medications should be done once CHC's service becomes available and KMAP has reconnected to CHC. Providers should bill within 30 days of reestablished connectivity for emergency medications dispensed during the CHC outage.

Authorizations for Electronic Visit Verification (EVV)

For EVV authorizations, prior authorization is waived for new dates of service with a prior authorization date after February 21, 2024.

KMAP

Kansas Medical Assistance Program

- <u>Bulletins</u>
- Manuals
- Forms

Customer Service

- 1-800-933-6593
- 7:30 a.m. 5:30 p.m. Monday - Friday









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Other Electronic Claim Submission

While waiting for CHC to become available, providers have the following options:

- Submit claims via the Provider Secure Portal
- Submit a paper claim (excluding Pharmacy)

Claims may be held, but it is advised that an alternate submission method is used.

Appeals Process

Should the pharmacy receive a denial on an emergency dispensing due to the CHC outage, an appeal may be requested through the KMAP Customer Service call center at 1-800-933-6593. Please advise a customer service representative (CSR) you have an emergency dispensing denied claim due to the CHC outage and need to file an appeal. If the CSR is not able to resolve your questions on the initial call, an appeal will be forwarded to the grievance and appeal team. The following documentation elements will be needed to process an appeal request for the emergency fill medication:

- Internal Control Number (ICN) for the denied claim (13-digit number)
- Prescription number
- NDC
- Quantity Dispensed
- Request Rationale: Bulletins 24052 Emergency Dispense and 24059 Appeals Process
- Provider contact information

NOTE: Appeals will be on a claim-by-claim basis.

Timely Filing

Fee-for-Service: Providers should submit a bypass request if their claim exceeds timely filing limitations during this period. A cover letter to the attention of the Timely Filing Coordinator explaining the reason for the bypass request is **due to the Change**Healthcare outage, referring to General Bulletin 24052. Refer to the *General Billing Fee-for-Service Provider Manual* on the KMAP website for additional information on timely filing.

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