IHCP *bulletin*

IHCP announces billing guidance for Paxlovid pharmacy claims

On July 6, 2022, the Food and Drug Administration (FDA) announced an update to the Paxlovid (nirmatrelvir and ritonavir) Emergency Use Authorization (EUA), authorizing pharmacists to prescribe the drug with certain limitations.

Effective immediately, the Indiana Health Coverage Programs (IHCP) will reimburse IHCP-enrolled pharmacy providers for Paxlovid pharmacy claims ordered by a pharmacist per FDA's Paxlovid EUA and Health and Human Services (HHS) *Public Readiness and Emergency Preparedness (PREP) Act* guidance.

Paxlovid pharmacy claims for the treatment of mild-to-moderate coronavirus disease 2019 (COVID-19) will be reimbursed for all eligible IHCP members meeting the Paxlovid EUA criteria and any additional requirements or limitations specified by the Indiana Department of Health (IDOH) or Centers for Disease Control and Prevention (CDC).

The National Council for Prescription Drug Programs (NCPDP) has provided instruction on claim submission in the Emergency Preparedness guidance under Section 11.15: *Billing of a Self-Administered Free COVID-19 Oral Antiviral During an Emergency*, which requires the use of Drug Utilization Review (DUR)/prospective payment system (PPS) service codes to identify the services associated.

Fee-for-service (FFS) pharmacy claims will be submitted through OptumRx, using the standard point-of-sale (POS) system or via paper pharmacy claims. POS pharmacy claims should be submitted using the information summarized in Table 1.

Table 1 – Summary of updated pharmacy POS NCPDP code

Product Name	Professional Service Code (440-E5)	Service Clarification Code (SCC, 420-DK)	Incentive Amount (Administration Fee, 438-E3)
Paxlovid (nirmatrelvir and ritonavir)	PE*	<blank>	$10.48

PE – Patient education should be submitted to identify the professional services associated with the unique dispensing requirements of the product.

Paxlovid claims ordered by a pharmacist should be submitted using the pharmacy's National Provider Identifier (NPI) as the provider NPI and the prescriber NPI. If the pharmacy NPI is not systemically tolerated in the prescriber NPI field, the individual pharmacist's NPI may be used. However, submission clarification code (SCC) 42 will be needed to override reject 71 – *Provider not covered*.

For FFS members, questions about COVID-19 oral antivirals or this bulletin should be directed to the OptumRx Clinical and Technical Help Desk by calling toll-free 855-577-6317. Questions about COVID-19 oral antivirals and pharmacy claim submission for members in the Healthy Indiana Plan (HIP), Hoosier Care Connect and Hoosier Healthwise should be referred to the managed care entity (MCE) with which the member is enrolled.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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