GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Health Care Finance

TO: District of Columbia Medicaid Pharmacy Providers

FROM: Department of Health Care Finance, Health Care Delivery Management Administration

DATE: September 19, 2018

SUBJECT: MCO Pharmacy Reimbursement Inquiry Template

****PROVIDER NOTICE****

During several recent meetings with Medicaid pharmacy providers, DHCF was made aware of ongoing provider concerns with the level of reimbursement paid by the Medicaid managed care plans (MCOs) for pharmacy claims ingredient costs and dispensing fees. Pharmacy providers requested and attained a meeting with MCO plan management, pharmacy directors and PBM contractors to discuss these concerns. The MCOs in turn asked for documentation of specific disputed claims from the pharmacies in order to perform an informed analysis and review. To facilitate this review process DHCF has developed uniform template to assist Pharmacy providers with reporting these contested reimbursement amounts to each individual MCO.

We ask that interested pharmacy providers complete the reporting template and submit it to the appropriate MCO within the next thirty (30) days via secure email with a password that can be sent in a separate email.

The receiving MCO will be given thirty (30) days from the receipt of the template to review the submission, verify payment accuracy and respond to the pharmacy provider with needed steps, if any, to resolve the issues identified.

Please copy Elisa Fauntleroy, Managed Care Program Manager, on all reporting template submissions and responses at elisa.fauntleroy@dc.gov.

If you have questions, please feel free to contact Charlene Fairfax, RPh, CDE, Senior Pharmacist at Charlene.fairfax@dc.gov or 202-442-9076.

Thank you for your cooperation and service to our Medicaid beneficiaries.