


Pharmacy Claim Processing Quick Reference Sheet for Passport Advantage HMO (PAD)



	GENERAL INFORMATION	CONTACT/ HELP
<p>CONTACT INFORMATION and PRESCRIPTION CLAIM PROCESSING HELP</p>	<p>Get help and answers to questions regarding:</p> <ul style="list-style-type: none"> • Online, concurrent DUR claims messaging, including: (a) duplicate therapy; (b) early refills and frequency limitation; (c) duplicate drugs; (d) potential drug interaction(s); (e) drug preference messaging; and (f) minimum/maximum dose range. • Formulary, • Coverage determination and prior authorization status, • Coordination of benefits, • Quantity limits, • Reimbursement, and • Network contracting. 	<p>PerformRx Pharmacy HelpDesk: (866) 533-5490 24 hours a day, 7 days a week</p> <p>Passport Advantage BIN # 012353 PCN# 03650000</p>
<p>MEMBER ELIGIBILITY</p> 	<p>PAD member eligibility may change on a month-to-month basis.</p> <p>Verify member eligibility online through the Argus IPNS Point-of-Services (POS) processing system each time a member presents for services.</p> <p>You may also call the PAD Interactive Voice Response (IVR) system to verify eligibility by entering the member's social security or Plan ID number.</p>	<p>Pharmacies call PAD Provider Services: (800) 578-0775 Monday – Friday 8:00 a.m. to 8:00 p.m.</p> <p>Members call PAD Member Services: (800) 578-0603, then press 1 (TTY: 1-800-648-6056) 7 days a week 8 a.m. to 8 p.m.</p>
<p>NPI/ PRESCRIBER ID</p>	<p>Pharmacies are required to process prescription claims using the prescriber's National Provider Identifier (NPI).</p> <ul style="list-style-type: none"> • If a valid prescriber NPI is not used, the claim will reject. • If a valid prescriber does not have an NPI number, the pharmacy may process with the prescriber's default DEA number. <p>To obtain a prescriber's NPI, go to the following web site: https://nppes.cms.hhs.gov/NPPES/NPIRegistryHome.do.</p> <p>PerformRx continues to encourage all pharmacies to acquire their NPI, as required by CMS.</p>	<p>PerformRx Pharmacy HelpDesk (866) 533-5490</p>
<p>COVERAGE DETERMINATION</p>	<p>Call the PerformRx Pharmacy HelpDesk for the status or questions regarding coverage determinations. The PAD Coverage Determination Form is available on the Pharmacy Center of our web site, www.passportadvantage.org.</p>	<p>PerformRx Pharmacy HelpDesk (866) 533-5490</p>

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EARLY REFILLS Override Code: 555555	For “refill too soon” rejections due to a dosage increase, please enter override code 555555 and resubmit. Call for any drug requiring a coverage determination; an override code will not work for these claims.	PerformRx Pharmacy HelpDesk (866) 533-5490
TRANSITION CODES Override Codes: <ul style="list-style-type: none"> • 41000 (during 90 days) • 42000 (after 90 days – for LTC only) 	During the first 90 days on Passport Advantage, members are eligible for a refill of non-formulary drugs. Retail transition supplies should automatically process. If not, use override code 41000 and resubmit. After the initial 90-day transition period, long-term care (LTC) members are eligible for an additional one-month transition supply. If the system rejects during this time, use override code 42000 and resubmit. Call for assistance if the appropriate code receives a transition rejection.	PerformRx Pharmacy HelpDesk (866) 533-5490
CHANGE IN LEVEL OF CARE Override Code: 23000	Members with a change in their level of care based on a changed inpatient location code are allowed a one-time, one-month transition supply per drug. If a member changes level of care due to a hospitalization, enter a reason for service of NP (new patient) on the claim (provided it is the first fill in a given month). Please call if more than one change in level of care occurs within a one month period.	PerformRx Pharmacy HelpDesk (866) 533-5490
COMPOUND PRESCRIPTIONS	Compounds require a coverage determination. In addition, CMS-excluded drugs (including bulk chemicals) are not covered. Please see the Compound Payer Sheet in the Pharmacy Center of our web site, www.passportadvantage.org .	PerformRx Pharmacy HelpDesk (866) 533-5490
PAPER CLAIMS	Paper claims from pharmacies for secondary billing, claim reversals or retroactive member eligibility must be submitted within 180 days of the date of service. Paper claims from members who pay more than their cost share for covered prescriptions may be submitted up to March 31st of the following year.	Mail paper claims to the following address: Passport Advantage Medicare Claims P.O. Box 486 Essington, PA 19029
COORDINATION OF BENEFITS/ THIRD PARTY LIABILITY (COB/TPL)	Pharmacies must bill claims for Passport Advantage members with other primary insurance to the primary insurance first. If the member states that he/she does not have primary coverage and the claim still rejects, contact the PerformRx HelpDesk.	PerformRx HelpDesk (866) 533-5490

Additional Resources

PerformRx Pharmacy Provider Manual for Passport Advantage, available on the Pharmacy Center of www.passportadvantage.org.

