



Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

Soft Drug Utilization Review (DUR) Edits (Medicaid)

RXBIN: 04336

RXPCN: MCAIDADV

RXGRP: RX0540, RX0574, RX0828, RX0542, RX0543

Molina Healthcare of Washington is an existing Plan Sponsor with CVS Caremark®. Effective **April 8, 2024**, Molina Healthcare of Washington implemented additional soft DUR edits. Drugs configured with the new soft DUR edit will reject as **REJECT 88 <<DUR REJECT ERROR>>** for therapeutic duplication-DUR/PPS Code required. Outlined on page two are the DUR intervention codes that can be utilized to override the soft DUR edits, as applicable.

The chart on page two describes the twelve DUR rejects and associated Professional Service (PPS) codes that may be used to override the reject when applicable. **Be sure to review the entire DUR message for instructions. This may require viewing additional screens in your software application.** Additionally, a single claim may trigger more than one concurrent DUR reject. Providers will need to enter the corresponding PPS codes documenting their action for each soft reject.

Do not save PPS and Result of Service Codes on any prescriptions that have previously rejected for DUR. For an initial fill or any refills,

Provider CANNOT pre-empt the reject by entering PPS Codes prior to the first submission of the claim. You must allow the reject to occur and then enter the appropriate PPS Codes on resubmission. Entering PPS Codes prior to allowing the claim to reject will cause the claim to continue to reject.

This update applies to:

All Network Pharmacies

State(s): Washington

Line of Business: Medicaid

Customer Care for Plan Members:

1-800-869-7165

Pharmacy Inquiries:

If you have questions, call the Pharmacy Help Desk number provided in the claim response or

1-800-364-6331 if one is not provided.

Payer Sheets: For additional claim processing information, refer to the CVS Caremark Payer Sheets at [caremark.com/pharminfo](https://www.caremark.com/pharminfo) > **NCPDP Payer Sheets**

Pharmacy network participation varies by plan.

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PPS Professional Service Code	Result of Service Code
<p>MØ - Prescriber Consulted</p> <p>PØ - Patient Consulted</p> <p>PM - Patient Monitoring</p> <p>RØ - Pharmacist consulted other source</p>	<p>1B - RPH determines alert is not relevant for the Rx and member</p> <p>1C - Filled with a different dose</p> <p>1D - Filled with different directions</p> <p>1F - Filled with a different quantity</p> <p>1G - Filled with a Prescriber approval</p> <p>2A - RPH determines Rx should not be filled as written</p> <p>4B - Dispensed, Palliative Care</p> <p>4C - Dispensed, Hospice</p> <p>4D - Dispensed, Cancer Treatment</p>