

Reminder: Real-time authorizations now available for over 100-day medication supply

As a reminder, you **no longer need to call to get authorization** for more than 100 days' medication supplies for eligible Alberta Blue Cross® plan members. Simply submit your direct bill claim. You will receive a rejection message if the claim cannot be submitted electronically.

If the claim rejects with response code **GD: Not eligible for a quantity authorization**, it may be due to one of the following reasons:

- The member is on Group 1 or 66, and they have not been on the plan for a minimum of 90 days
- The member does not have the required history of the drug on their plan
- The member's coverage terminated prior to the duration of the days' supply
- The member has Palliative Care

When a refill claim for a plan member is early, you will get the **OU – Refill is X days early** response code. However, if the reason for early dispensing is travel, the following CPhA intervention code can be used:

MV—Vacation Supply

The claim will be adjudicated and accepted if the member is eligible for a travel supply up to a maximum of 200 days on hand. Where applicable, coordination of benefits will be applied at the time of claim.

Alberta Blue Cross response code and message	What's the reason for early refill?	Is the MV intervention code appropriate?
OU – Refill is X days early	Member is traveling for leisure	Yes
	Member is traveling for work	Yes
	Member is moving	No

Use of the MV intervention code to support a pharmacist's decision to dispense early must be documented and supported by citing the following on the prescription record/patient file:

- Date of early dispense
- Reason for early dispensing
- A summary documenting the communication with the prescriber, caregiver and/or patient for the early dispense request

Documentation may be requested for compliance verification and must be kept on the patient's file for two years.

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Please note: Some plans limit the number of travel supplies (per product) an individual may have within a benefit year. These limits cannot be overridden. They will be applied to claims utilizing the MV intervention code.

Dispense responsibly to protect drug supply: Pharmacists should continue to use professional judgment with regards to the availability of drugs in their pharmacy and dispense a lesser days' supply when necessary to maintain the integrity of Alberta's supply chain.

Process to claim over 100-day supply



Direct bill

Submit claim for over 100-day supply

1. Member presents prescription for greater than 100-day supply.
2. Submit real-time claim for required medication.
3. The claim will be adjudicated and accepted if the member is eligible for a supply of greater than 100 days to a maximum of 200 days. No further action is required. **Where applicable, coordination of benefits will be applied at time of claim.**
4. Claim rejected with response code **SD**: "Maximum days' supply allowed is X." Days' supply exceeds quantity authorized. **Action required:** resubmit the claim after adjusting the quantity to "X" days as indicated in the SD response code. The claim will adjudicate in real-time, according to the members' coverage.
5. Claim rejected with response code **D9**: "Call Adjudicator." Authorization may be eligible, but requires the pharmacy provider to contact Alberta Blue Cross for consideration of approval.



Phone

Call only in listed situations

Only in the circumstances listed below should you contact Alberta Blue Cross for authorization of an over 100-days' supply:

1. Product dispensed is a narcotic or controlled drug benefit.
2. Claim is for a biologic or high-cost drug. **Please allow two weeks for the review and approval process.**
3. Packaging of medications does not allow for the drug to be dispensed in the amount of the days' supply requested, such as didrocal kits, insulins or inhalers.
4. Claim rejected with response code **D9**: "Call Adjudicator." Authorization may be eligible, but requires the pharmacy provider to contact Alberta Blue Cross for consideration of approval.
5. Claim rejected with response code **KN**: "Day supply limit for period exceeded". The days' supply requested is greater than the approved special authorization period. The member may need to reach out to their prescriber to renew their special authorization.

Before you place your call, please have the following information available:

- Pharmacy license number
- Member's first and last name
- Member's date of birth
- Alberta Blue Cross ID number
- Personal Health Number (PHN)
- DINs
- Quantity requested
- Days' supply
- Departure and return dates

For assistance with benefit or claim inquiries, please contact an Alberta Blue Cross Pharmacy Services Provider Relations contact centre representative at

780-498-8370 (Edmonton and area)

403-294-4041 (Calgary and area)

1-800-361-9632 (toll free)

FAX 780-498-8406 (Edmonton and area)

FAX 1-877-305-9911 (toll free)

Alberta Blue Cross offers online access to current Pharmacy Benefacts and supplemental claiming information to assist with the submission of your direct-bill drug claims.

Visit ab.bluecross.ca/providers/pharmacy-home.php

