

Pharmacy Update

July 13, 2023

Compound Claims Submission

Meridian

RXBIN: 004336

RXPCN: MCAIDADV

RXGRP: RX5492

Meridian is a current Plan Sponsor with CVS Caremark®. As a reminder, when submitting multi-ingredient compound claims, certain ingredients are not covered and are not reimbursable. Provider must, however, include all items used in the creation of the compounded product on the multi-ingredient claim transmission.

CVS Caremark accepts submission clarification code (SCC) "08" (Process Compound for Approved Ingredients) which will result in an adjudicated response on all Covered Items. Non-Covered Item(s) within a compound are not reimbursable.

All ingredients must include the appropriate quantity. SCC "08" will not override a blank quantity. Failure to enter a quantity may cause the claim to reject with the following or similar reject:

Reject E7:<<One or more ingredients is submitted with a blank quantity>>

This update applies to:
All Network Pharmacies

State(s):
Michigan

Line of Business:
Medicaid

Customer Care for Plan Members:
1-888-437-0606

Pharmacy Inquiries:
If you have questions, call the Pharmacy Help Desk number provided in the claim response or **1-866-984-6462** if one is not provided.

Payer Sheets:
For additional claim processing information, refer to the CVS Caremark Payer Sheets at www.caremark.com/p_harminfo

NCPDP Payer Sheets.

Pharmacy network participation varies by plan.

The recipient of this fax may make a request to opt-out of receiving telemarketing fax transmissions from CVS Caremark. There are numerous ways you may opt-out: The recipient may call the toll-free number at 877-265-2711 and/or fax the opt-out request to 401-652-0893, at any time, 24 hours a day/7 days a week. The recipient may also send an opt-out request via email to do_not_call@cvshealth.com. An opt out request is only valid if it (1) identifies the number to which the request relates, and (2) if the person/entity making the request does not, subsequent to the request, provide express invitation or permission to CVS Caremark to send facsimile advertisements to such person/entity at that particular number. CVS Caremark is required by law to honor an opt-out request within thirty days of receipt. **An opt out request will not opt you out of purely informational, non-advertisements, Caremark pharmacy communications such as new implementation notices, formulary changes, point-of sale issues, network enrollment forms, and amendments to the Provider Manual.**

This communication and any attachments may contain confidential information. If you are not the intended recipient, you are hereby notified that you have received this communication in error and that any review, disclosure, dissemination, distribution, or copying of it or its contents, is prohibited. If you have received this communication in error, please notify the sender immediately by telephone and destroy all copies of this communication and any attachments. This communication is a Caremark Document within the meaning of the Provider Manual, and as such is Caremark Confidential Information that must be protected by the Provider and used only as described in the Provider Manual.