

## **DME Point-Of-Sale (POS) Frequently Asked Questions**

### **How do I register to be a User Administration Console (UAC) user?**

Go to Magellan Medicaid Administration's website, <http://southcarolina.fhsc.com>, and click on "UAC" at the top right section of the screen. Click on the option that begins with "I do NOT have a User ID", click "Continue" and follow the directions on the screen to request a PIN.

### **Can we file lancets and other DME supplies through the Pharmacy POS system?**

No. At this time, only diabetic testing meters and strips may be billed through the POS system. However, the addition of other items may be considered in the future.

### **Can I bill diabetic test strips and meters through the Pharmacy POS system for a Beneficiary who is in a skilled nursing facility (SNF)?**

No. SNFs are responsible for providing these items. However, if a Beneficiary is living in a residential group home or assisted living facility, these products should be billed through the Pharmacy POS system.

### **What do the red asterisks mean on the Magellan Medicaid Administration web claims submission tool?**

The red asterisks indicate that the field or segment IS required.

### **What BIN#, PCN# and GROUP# should I use for processing diabetic meters and test strips through the Pharmacy POS system?**

These numbers are the same for DME supplies and Pharmacy claims:

BIN#: 009745  
PCN#: P006009745  
GROUP#: SCMEDICAID

### **What are the requirements for assigning a prescription number for DME POS items?**

Prescription numbers must be assigned on each claim that is processed through Magellan Medicaid Administration. The number must be assigned by the provider and must be unique for each physician request or Certificate of Medical Necessity. A record should be kept of the prescription numbers assigned on DME products.

### **I have a pharmacy NPI and a DME NPI. Which should I use when billing for test strips and meters?**

The provider should use their DME NPI number when billing for diabetic strips and meters.

### **Who is responsible for making the Prior Authorization (PA) request for a non-preferred DME product being processed through the Pharmacy POS system?**

The physician must request a PA for a non-preferred DME product by calling the Clinical Call Center at 1-866-247-1181. PA's will be approved only in unique situations.

## **How do we bill diabetic test strips and meters to Medicaid secondarily to Medicare?**

These claims are billed the same way pharmacy claims are billed when Medicare Part B is the primary payer. Please see the COB reference guide at [http://southcarolina.fhsc.com/Downloads/provider/SCRx\\_Reference\\_Guide\\_Coordination\\_of\\_Benefits.pdf](http://southcarolina.fhsc.com/Downloads/provider/SCRx_Reference_Guide_Coordination_of_Benefits.pdf)

## **What is the 5 digit insurance carrier code for Medicare?**

The insurance carrier code for Medicare is 90798.

## **If Medicare is the Beneficiary's primary payer, will SC Medicaid allow the DME provider to bypass the PA requirements for non-preferred products?**

No. SC Medicaid will not allow a DME provider to bypass the PA requirement for non-preferred brands for meters and test strips based on other coverage.

## **If the Beneficiary has commercial insurance, how should the claim be submitted to Medicaid?**

SC Medicaid is always the payer of last resort. Hence, the commercial insurance company should be billed first with SC Medicaid being billed as secondary.

## **If the Beneficiary has commercial insurance, Medicare and Medicaid how should the claim be filed to Medicaid?**

The commercial insurance company and Medicare should be billed before billing SC Medicaid. Identify Medicare as the payer in the COB fields (ID number 90798) and use the total amount paid by both insurers as the amount paid.

## **How is the pricing determined for test strips and meters?**

Medicaid currently reimburses at 97% of the Medicare payment. With the new system, the reimbursement will be AWP minus 10% (no dispensing fee).