



# Arkansas Department of Human Services

## Division of Medical Services

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**TO:** Health Care Provider - Pharmacy

**DATE:** March 1, 2002

**SUBJECT:** Update Transmittal No. 57

<u>REMOVE</u>		<u>INSERT</u>	
<u>Page</u>	<u>Date</u>	<u>Page</u>	<u>Date</u>
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II-12 through II-14	2-1-02	II-12 through II-14	3-1-02

### Explanation of Updates

Pages II-12 and II-13 have been included to delete policy material that addresses issues which are within the purview of the Office of Long Term Care rather than the Medicaid recipient. Pages II-12 and II-13 are now reserved for future use.

Page II-14, 'Consent Form To Participate In Approved Unit Dose Distribution System', has been deleted because it is not a pharmacy program form. Page II-14 is now reserved for future use.

A change bar in the left margin denotes a revision.

Attached are updated pages to file in your provider manual.

If you need this material in an alternative format, such as large print, please contact our Americans with Disabilities Act Coordinator at (501) 682-1461 (voice) or (501) 682-6789 and 1-877-708-8191 (TDD).

**If you have questions regarding this transmittal, please contact the EDS Provider Assistance Center at 1-800-457-4454 (Toll-Free) within Arkansas or locally and Out-of-State at (501) 376-2211.**

Thank you for your participation in the Arkansas Medicaid Program.

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Ray Hanley, Director  
Division of Medical Services

*Arkansas Medicaid provider manuals (including update transmittals), official notices and remittance advice (RA) messages are available for downloading from the Arkansas Medicaid website: [www.medicaid.state.ar.us](http://www.medicaid.state.ar.us).*

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216.200 Prescription Benefits for Long-Term Care Facility Residents

Prescriptions for Medicaid-eligible LTC facility residents are not subject to a monthly prescription limit, however, the drug product must be covered under the Arkansas Medicaid Pharmacy Program. (Refer to section 210.000 for program coverage, section 212 for exclusions and section 252 for reimbursement to LTC facilities.)

216.201 Prescription Benefits for Hospice Patients in Long-Term Care Facilities

Medicaid recipients who have elected to receive hospice services in LTC facilities may only use their prescription drug benefits to treat conditions not directly related to their terminal illness. These recipients are only allowed three (3) prescriptions per month. If additional prescriptions are needed, an extension of drug benefits may be requested for up to a total of six (6) maintenance medications per month. *Drugs related to the terminal illness must be furnished by the hospice.*

216.202 Regulations Governing Cycle-Fill and Pharmacy Notification for Long-Term Care Facilities

Only oral solid medications may be cycle-filled. However, if an oral solid medication meets one of the categories below, then that oral solid medication **may not** be cycle-filled.

- A. PRN or “as needed” medications;
- B. Controlled drugs (CII – CV);
- C. Refrigerated medications;
- D. Antibiotics; or
- E. Anti-infectives.

When a facility notifies a pharmacy in writing of any change of condition that affects the medication status of a resident, the pharmacy shall immediately amend the filling of the prescription to conform to the changed medication requirement of the resident.

For purposes of this section, *change of condition* includes death, discharge or transfer of a resident, as well as medical changes of condition that necessitate a change to the medication prescribed or the dosage given.

216.300 Pharmacy Drug Distribution Systems for Long-Term Care Facility Residents

Generally, there are two (2) types of drug distribution systems used in long-term care facilities. They are the traditional packaging system and unit dose system. The Pharmacy Program does not utilize a different dispensing fee to calculate reimbursement for various types of drug distribution systems.

Pharmacy providers for long-term care facilities must supply 24-hour service to their patients regardless of the drug distribution system used.

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	<b>Effective Date: 9-1-01</b>
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