



## Important Communication: Unlicensed Interns, Residents & Foreign Physicians in Training Programs are Authorized Prescribers for Medicaid Members

**Unlicensed Interns, Residents and Foreign Physicians in Training Programs are eligible to prescribe for Medicaid members without enrollment as a Medicaid provider.** In accordance with NYS Education Law, unlicensed interns, residents, and foreign physicians participating in training programs, are authorized to prescribe. NYS Medicaid recognizes the authority under which these unlicensed providers may prescribe; however, per federal requirements these physicians are not eligible for enrollment into the NYS Medicaid program without a license.

### **Pharmacy Billing Guidance Exceptions for Non-Enrolled Prescribers in Medicaid**

The New York State (NYS) Medicaid program requires enrollment of all licensed prescribers who serve Medicaid members, including **prescribing practitioners**, as identified on pharmacy prescriptions, per the Centers for Medicare and Medicaid Services (CMS) and federal regulations.

There are **two exceptions** to the provider enrollment requirement:

- 1. Unlicensed Interns, Residents and Foreign Physicians in Training Programs**
- 2. Out-of-State (OOS) Licensed Prescribers that are treating Medicaid Members for a *single instance of emergency care within 180 days.***

Out-of-State prescribers must either be enrolled in Medicare with an “approved” status or are enrolled in their own state’s Medicaid plan for the below override.

Pharmacies will receive a reject code/POS rejection message for prescriptions written by a non-enrolled prescriber. **Please utilize the override guidance provided below for the above exceptions specific to NYRx, the Medicaid Pharmacy Program.**

- In Field 439-E4 (Reason for Service Code): enter **"PN"** (*Prescriber Consultation*)
- In Field 441-E6 (Result of Service Code): enter applicable value ("**1A**", "**1B**", "**1C**", "**1D**", "**1E**", "**1F**", "**1G**", "**1H**", "**1J**", "**1K**", "**2A**", "**2B**", "**3A**", "**3B**", "**3C**", "**3D**", "**3E**", "**3F**", "**3G**", "**3H**", "**3J**", "**3K**", "**3M**", "**3N**", "**4A**")
- In Field 420-DK (Submission Clarification Code): enter **"02"** (*Other Override*)

### **Resources:**

- Medicaid Provider Enrollment Compendium (MPEC):  
<https://www.medicaid.gov/medicaid/program-integrity/affordable-care-act-program-integrity-provisions/index.html>
- Billing assistance is provided by the eMedNY call center at 800-343-9000.
- Questions regarding this communication may be directed to NYRx@health.ny.gov.