

## Attention Pharmacy Providers: Phosphate Binders will be provided to Medicaid Members from the Dialysis Clinic effective January 1, 2026.

Effective January 1, 2026, phosphate binder prescription drugs for Medicaid dialysis patients will no longer be covered as a pharmacy benefit and must be provided by the patient's dialysis clinic. The update aligns with the Centers for Medicare & Medicaid Services (CMS) policy change under the Transitional Drug Add-on Payment Adjustment (TDAPA), as detailed in the CMS End Stage Renal Disease Prospective Payment System final rule, where CMS finalized its policy to include oral-only phosphate binders in the ESRD Prospective Payment System bundled payment (providers should refer to 89 Federal Register 98822). NYS Medicaid will follow CMS's approach by incorporating the cost of these drugs into the APG reimbursement through a standard APG claim submission. The August 2025 Medicaid Update, article titled, NYS Medicaid Ambulatory Patient Group Weight Adjustment for Dialysis Clinics to Account for Phosphate Binder Costs found here:

https://www.health.ny.gov/health\_care/medicaid/program/update/2025/docs/mu\_no08\_aug25\_p r.pdf has additional information.

Pharmacies should direct Medicaid members to their dialysis clinic or facility to obtain phosphate binders on and after January 1, 2026. New prescriptions and refills should not be billed to NYRx on and after this date.

## Questions and Resources:

- CY 2016 ESRD PPS final rule and updated regulations at 42 C.F.R. § 413.174(f)(6)
- CMS Guidance: Including Oral-Only Drugs in the ESRD PPS Bundled Payment
- August 2025 Medicaid Update; Volume 41 Number 8: NYS Medicaid Ambulatory
   Patient Group Weight Adjustment for Dialysis Clinics to Account for Phosphate Binder
   Costs
- eMedNY LISTSERV (October 16, 2025): <u>Updated Implementation Date for APG</u>
   Weight Adjustment for Phosphate Binders
- Questions regarding this policy may be emailed to NYRx@health.ny.gov.