PHARMACY

Updated: Top Edit Resource

NYRx, The Medicaid Pharmacy Program
Updated: Top Edit Resource

The **Top Edit Resource** has been updated with guidance for the following NYRx edits:

NYRx Edit #	NYRx Description	NCPDP reject response
01631	Client Has Other Insurance	13 - M/I Other Coverage Code
02179	Unable To Process a Pharmacy PA. Please Call Magellan	75 – Prior Authorization Required
00551	Item Not Eligible for Payment on Fill Date	8J – Incorrect Product/Service ID for Processor/Payor
02218	Prescribing MMIS Provider ID Cannot Be Derived	889 – Prescriber Not Enrolled in State Medicaid Program
01600	Discontinued NDC Number	77 – Discontinued Product/Service ID Number
00562	Drug Price Not Available on Fill Date	70 – Product/Service Not Covered – Plan/Benefit Exclusion
00547	Recipient Eligible Emergency Services Only	70 – Product/Service Not Covered – Plan/Benefit Exclusion
00218	Provider Not Approved for Service	6Z – Provide Not Eligible To Perform Service/Dispense Product
01172	Patient Is Not Covered	AF – Patient Enrolled Under Managed Care

Additional resources about the transition to NYRx are available at www.emedny.org/nyrx.