



Training Video
For NYS Medicaid Providers

Pharmacy

Key Objectives

Familiarize providers with the
NYS Medicaid Pharmacy Program (NYRx)
Preferred Diabetic Supply Program

NYRx Preferred Diabetic Supply Program

The **Preferred Diabetic Supply Program (PDSP)** - The New York State Medicaid Program participates in a Preferred Diabetic Supply Program (PDSP) to provide New York State Medicaid enrollees access to quality glucose meters and test strips, while at the same time reducing overall program costs.

eMedNY.org Website

eMedNY Home Page

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NEW! For Practitioners ONLY
PROVIDER ENROLLMENT
PORTAL
ENROLL TODAY!

Pharmacy Benefit Transition
NEW YORK STATE Department of Health Medicaid NYRx
LEARN MORE

Are you compliant with NYSDOH EFT Requirement?

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ePACES Information

Login eXchange
eXchange Information

Medicaid NYRx
Member Resource Site

Provider Enrollment Portal

Web Portal
Web Portal Information

Enteral Web Portal

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NEW MEDICARE CARDS

MEDICAID MANAGED CARE NETWORK

PTAR
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REVALIDATION
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welcome to
eMedNY

<https://www.emedny.org/>

Provider Manuals

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Provider Manuals

Welcome! Your Provider Manual to the New York Medicaid Program offers you a wealth of information about Medicaid, as well as specific instructions on how to submit a claim for rendered services.

[Information for All Providers](#) gives you pertinent policy and resource information!

Click on your provider manual below, and read about specific rules governing the provision of your care and service to Medicaid recipients. This section also contains billing instructions, as well as pertinent procedure codes and fee schedules.

Click on the link to the [Department of Health's Medicaid Update website](#). This monthly publication is mailed to active providers, and informs providers of up-to-date changes in the Medicaid Program. This website has an index that makes finding relevant articles an easy task!

Your provider manual, along with recent Medicaid Update articles, will act as an effective guide to your participation in Medicaid.

SELECT A PROVIDER MANUAL



[Ambulatory Patient Groups \(APG\)](#)



[Assisted Living \(ALP\)](#)



[Child \(Foster\) Care Agency](#)



[Chiropractor and Portable X-Ray](#)



[Applied Behavior Analysis \(ABA\)](#)



[Bridges to Health](#)

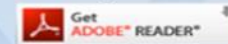


[Child/Teen Health Program \(C/THP\) - Early Periodic Screening Diagnosis and Treatment \(EPSDT\)](#)



[Clinic](#)

Adobe Reader is required to view documents.



[MEVS and Supplemental Documentation](#)

* [Medicaid Eligibility Verification System \(MEVS\) Reference Material](#)

The following information is a list of MEVS resources, including quick reference guides and the full manual.

- [MEVS/DVS Provider Manual](#)
- [MEVS Quick Reference Guides](#)
- [Choosing which MEVS method is right for you](#)

* [Supplemental Documentation](#)

The following information is *not* part of your provider manual. However, it may be useful information, and is placed here for your convenience.

- [FTP Batch Procedure Manual](#)

DME Provider Manual



[Ambulatory Patient Groups \(APG\)](#)



[Assisted Living \(ALP\)](#)



[Child \(Foster\) Care Agency](#)



[Chiropractor and Portable X-Ray](#)



[Clinical Psychology](#)



[Comprehensive Medicaid Case Management](#)



[Dental](#)



[Doula](#)



[Health Homes](#)



[Applied Behavior Analysis \(ABA\)](#)



[Bridges to Health](#)



[Child/Teen Health Program \(C/THP\) - Early Periodic Screening Diagnosis and Treatment \(EPSDT\)](#)



[Clinic](#)



[Day Treatment](#)



[DME](#)



[Free Standing or Hospital Based Ordered Ambulatory](#)



[HCBS/TBI Waiver Services](#)



[Hearing Aid](#)

Medicaid Preferred Diabetic Supply Program – DME Manual

[Provider Manuals](#) > DME



DME Manual



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[Policy Guidelines](#)



[Fee Schedule](#)



[Fee Schedule Column Descriptions](#)



[Preferred Diabetic Supply List \(PDSL\) - Magellan](#)



[Procedure Codes](#)

Pharmacy Provider Manual



Licensed Clinical Social Worker (LCSW)



Limited License Home Care



Managed Care



Nurse Practitioner



Personal Care and Consumer Directed Personal Assistance Program



Pharmacy



Podiatry



Radiology Prior Approval



Residential Health



Transportation



Licensed Mental Health Counselor (LMHC) & Licensed Marriage and Family Therapist (LMFT)



Long Term Home Health Care



Midwife



OMH Certified Rehabilitation Services



Personal Emergency Response System (PERS)



Physician



Private Duty Nursing



Rehabilitation Services



School Supportive Health Services Program (SSHSP)



Vision Care

Medicaid Preferred Diabetic Supply Program – Pharmacy Manual

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Pharmacy Manual



PHARMACY MANUAL CONTENTS


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 **Billing Guidelines**

 [Pharmacy Billing Guidelines](#)

 [General Remittance Guidelines](#)

➤ [Medicaid List of Reimbursable Drugs \(Formulary File\)](#)

➤ [Preferred Diabetic Supply List \(PDSL\) - Magellan](#)

NYRx Magellan Website – Preferred Diabetic Supply Program




NYRx, the Medicaid Pharmacy Program

[Home](#) [Site Map](#) [Contact Us](#)

Preferred Diabetic Supply Program

Programs + Resources +

Preferred Diabetic Supply Program

 You will need Adobe® Reader to view any printable PDF document(s).
Click the button to the left to download a free copy of Adobe® Reader.

Product Information

Title	Date
Preferred Supply List - Effective March 1, 2023	03/01/2023
View the Price List available through eMedNY	

Provider Manuals

Title
DME Provider Manual
Pharmacy Provider Manual

Notifications

Notice Date	Title
02/08/22	Preferred Diabetic Supply Program Update
06/28/21	Preferred Diabetic Supply Program Update

Medicaid Preferred Diabetic Supply Program List Example

NYRx Diabetic Supplies

Manufacturer	Product	NDC	Description
ABBOTT	FREESTYLE FREEDOM LITE	99073070914	Meter
ABBOTT	FREESTYLE INSULINX	99073071143	Meter
ABBOTT	FREESTYLE LITE METER	99073070805	Meter
ABBOTT	FREESTYLE PRECISION NEO METER	57599517501	Meter
ABBOTT	PRECISION XTRA MONITOR	57599881401	Meter
ABBOTT	FREESTYLE INSULINX TEST STRIP	99073071231	Strips
ABBOTT	FREESTYLE INSULINX TEST STRIPS	99073071227	Strips
ABBOTT	FREESTYLE LITE TEST STRIP	99073070822	Strips
ABBOTT	FREESTYLE LITE TEST STRIP	99073070827	Strips
ABBOTT	FREESTYLE PREC NEO TEST STRIPS	57599157701	Strips
ABBOTT	FREESTYLE PREC NEO TEST STRIPS	57599157904	Strips
ABBOTT	FREESTYLE TEST STRIPS	99073012050	Strips
ABBOTT	FREESTYLE TEST STRIPS	99073012101	Strips
ABBOTT	PRECISION XTRA TEST STRIPS	57599972804	Strips
ABBOTT	PRECISION XTRA TEST STRIPS	57599987705	Strips
ABBOTT	FREESTYLE LIBRE 14 DAY READER	57599000200	Reader
ABBOTT	FREESTYLE LIBRE 14 DAY SENSOR	57599000101	Sensor
ABBOTT	FREESTYLE LIBRE 2	57599080000	Sensor
ABBOTT	FREESTYLE LIBRE 2	57599080300	Reader
ABBOTT	FREESTYLE LIBRE 3	57599081800	Sensor
ABBOTT	PRECISION XTR B-KETONE STRIP	57599074501	Ketone Strips

Reference and Contact Information

- 1) Preferred Diabetic Supply Program / Magellan:
newyork.fhsc.com or call 1-877-309-9493
- 2) NYS Medicaid Pharmacy Program (NYRx):
1-518-486-3209 - NYRx@health.ny.gov
https://www.health.ny.gov/health_care/medicaid/program/pharmacy.htm
- 3) eMedNY:
800-343-9000 - www.emedny.org



Conclusion

Preferred Diabetic Supply
Program



www.emedny.org