



Clarification: NYS Medicaid Fee-For-Service (FFS) Retroactive Repricing per prior changes made to Pharmacy Reimbursement

As previously mentioned in the [January 2018 Medicaid Update](#), changes to the Medicaid FFS pharmacy reimbursement methodology were implemented on February 22, 2018. These reimbursement changes were a result of the implementation of the Centers for Medicare and Medicaid Services (CMS) Covered Outpatient Drug Final Rule and the enacted State Fiscal Year (SFY) 2017/18 budget, and were effective April 1, 2017.

The Department will start the process to retroactively adjust pharmacy claims that were adjudicated effective April 1, 2017 through February 21, 2018. The Department expects this repricing to take place over the course of several months and anticipates that it will be completed by the end of December 2019. Adjustments have begun with remittance cycle 2159 and were available to view on January 21, 2019 via the electronic format and January 23, 2019 for mailed.

Adjustments made to affected claims will be found on the remittance statement beginning with claim date April 1, 2017. Adjustments will progress forward from that date with each cycle completion. All remit types (Paper/PDF/835) will show a claim that retracts the initial payment, and then a new claim at the new amount. For Paper and PDF remittance receivers, the edit 01999 will appear on the remit. For electronic remit (835) receivers, only the normal adjudication HIPAA codes will appear. Adjustments can be tracked by the claim dates.