

# PACE

## PROVIDER BULLETIN

March 16, 2016

### PROTON PUMP INHIBITOR (PPI) IMPLEMENTATION

As a reminder, the PPI edit will be implemented on **MONDAY, MARCH 28, 2016**. Beginning with PPI's, PACE will begin to coordinate with Part D primary plan's formularies. The result will be that the cardholder must abide by the primary plan's formulary.

**ALL** Part D primary plans, partner and non-partner, that reject a PPI with NCPDP Error 70, "Product/Service Not Covered—Plan Benefit Exclusions" will also be denied by PACE.

- Claims rejected by the primary plan with NCPDP Error 70 will also be rejected by PACE with the same Error 70. Messaging will indicate the primary plan's formulary is to be followed.
- Cardholders wanting a PPI that is not covered by the primary plan's formulary must appeal the denial to the Part D plan.

The PPI's on the Program's Partner Plan's formularies are listed below.

<b>Silverscript Choice PPI's</b>
DEXILANT CAP 30MG DR , 60MG DR
<i>esomeprazole sodium inj</i> 20MG
<i>esomeprazole sodium inj</i> (generic of NEXIUM I.V.) 40MG
NEXIUM CAP 20MG ; 40MG
NEXIUM GRA 2.5MG DR, 5MG DR, 10 MG DR, 20MG DR, 40 MG DR
<i>omeprazole</i> (generic of PRILOSEC) CPDR 10MG
<i>omeprazole cap</i> 20MG (generic of PRILOSEC)

<b>WellCare Classic Plan PPI's</b>
DEXILANT ORAL CAPSULE DELAYED RELEASE 30 MG, 60 MG
<i>esomeprazole sodium intravenous*</i> solution reconstituted 20 MG, 40 MG
NEXIUM ORAL CAPSULE DELAYED RELEASE 20 MG, 40 MG
NEXIUM ORAL PACKET 2.5 MG, 5 MG, 10 MG, 20 MG, 40 MG
<i>omeprazole oral capsule delayed release</i> 10 MG, 20 MG 40 MG
<i>omeprazole oral capsule delayed release</i> 20 MG
<i>pantoprazole sodium oral tablet delayed release</i> 20 MG, 40 MG

Questions may be directed to Provider Services at 1-800-835-4080.