

# PACE

## PROVIDER BULLETIN

February 24, 2023

### UPDATE: Naloxone Copay Assistance Program

Effective January 23, 2023, the Naloxone Copay Assistance Program began accepting claims for individuals without other coverage.

- These Other Coverage Code(s) (Field 308-C8) may be accepted for payment.
  - 0 = Not Specified by Patient
  - 1 = No Other Coverage
  - 2 = Other Coverage Exists- Payment Collected
    - Other Payer-Patient Responsibility Amount (Field 352-NQ) must be populated for payment to be determined.
  - 3 = Other Coverage Billed- Claim Not Covered
  - 4 = Other Coverage Exists- Payment Not Collected
    - Other Payer-Patient Responsibility Amount (Field 352-NQ) must be populated for payment to be determined.

#### Additional criteria for claims to be eligible for payment by the program includes:

- **Only** naloxone products are eligible for reimbursement.
  - **All naloxone products in the current PA Department of Health's Naloxone Standing Order are eligible for reimbursement.**  
<https://www.health.pa.gov/topics/Documents/Opioids/General%20Public%20Standing%20Order.pdf>
- A claim for **any** patient may be submitted to the program.
  - The patient will not be assigned a Cardholder ID and enrollment in the program is not needed.
- The program will pay **up to** \$75 on each claim.
- Any remaining payment will be the patient's responsibility.
- **Any PACE provider** may bill these claims.
- BIN 002286, PCN 0000682201, and Group ID NALOXONE must be submitted on the claim.
- Cardholder ID field (Field: 302-C2) must be submitted but may be left blank.
  - **Note if populated: MUST have minimum of 2 digits.**
- Patient First Name (Field 310-CA), Patient Last Name (Field: 311-CB), Date of Birth (Field: 304-C4) and Patient Gender (Field: 305-C5) must be submitted.
- Patients are limited to a quantity of 2 doses per claim.

The D.0 Specifications for PACE, SPBP, CRDP and all ancillary programs including the Naloxone Copay Assistance Program have been updated to reflect this change and are

available on the PACE Web Portal at <https://papaceportal.magellanhealth.com> by clicking on the Pharmacist Tab and selecting Documents from the drop down.

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