



Pro-Rated Daily Cost Share

Background

Effective September 1, 2017, AvMed launched the new Commercial “medication Synchronization” program which allowed for the proration of a member’s daily cost share (copayment) in order to support the synchronization of prescription fills. This means that AvMed will apply a daily cost-sharing rate to a prescription presented to a network pharmacy that is dispensed for less than the plan-defined one-month supply.

Definitions and Exceptions

The daily cost sharing rate applies if the drug (brand or generic) is in the form of a solid oral dose and is dispensed for a days supply less than the plan-defined one-month supply under applicable Law. Exceptions will include (but are not limited to) the following types of drugs:

- Solid oral doses of antibiotics
- Solid oral doses that are dispensed in their original packaging to assist patience with compliance
- Drugs dispensed by out-of-network pharmacies

The following or similar new message code will be returned on paid claims in the pharmacy response to advise Provider that a pro-rated copayment was applied:

Approved Message Code 023

<<Prorated copayment applied based on days supply. Plan has prorated the copayment based on days supply>>

Submission Clarification Codes (SCC):

When a claim rejects for refill too soon (e.g., reject 79 or reject 88), Provider will have the ability to override the reject and continue processing when either of the following conditions apply:

- Submitted days supply is less than plan defined one-month supply
- Claims history shows fill for same NDC with less than plan defined one-month supply

Use the appropriate SCC codes defined below to override the Refill too Soon reject: **NCPDP Field 420 DK**

Code	Description
47	Shortened-Days Supply Fill – only used to request an override to plan limitations when a shortened days supply is being dispensed
48	Fill Subsequent to a Shortened Days Supply Fill – only used to request an override to plan limitations when a shortened days supply is being dispensed

Note: If SCC code 47 or 48 is submitted but criteria to bypass the Refill too Soon reject is not met, the claim will continue to reject for Refill too Soon.

Payer Sheets: For additional claim processing information, refer to the CVS/caremark Payer Sheets at <http://www.caremark.com/pharminfo> then select NCPDP Payer Sheets.

Pharmacy Inquiries: If you have questions, call the Pharmacy Help Desk: 1-800-364-3661