



An important message regarding Humana's COVID-19 response: February 2023 update

Humana has no changes to report for this monthly update.

Refill-too-soon edits

Humana has implemented a process to override refill-too-soon (RTS) edits during the COVID-19 public health emergency in all states and U.S. territories. All contracted pharmacies can use this process as needed to ensure Humana members have appropriate access to their medications.

If you receive a denied Humana member claim for an RTS edit, the claim will return the message "USE PAC 911911 for EXTENDED DSTR RELIEF." To override the RTS edit, resubmit the denied claim by providing PAC 911911 in National Council for Prescription Drug Programs (NCPDP) field vD.0 462-EV. Please note that other clinical and safety edits are still in place. If RTS is the only issue with the claim, the claim should adjudicate with the submission of PAC 911911. Please note that the U.S. Department of Health and Human Services' determination that a public health emergency exists is effective through Apr. 11, 2023, and may be renewed.

Humana will continue to monitor federal and state declarations and requirements, and it will continue to make disaster overrides available based on such requirements. As described above, please continue to use PAC 911911 on resubmission of claims that deny for RTS in cases where the messaging described is included on the denied claim response (when appropriate and necessary).

Signature log requirements and mail/delivery restrictions

Humana will waive mail-delivery or home-delivery restrictions for retail-only pharmacies for a limited time so that members can choose to receive medications from a retail-only pharmacy via mail or home delivery. The waiver is for claims with dates of service beginning in March 2020 through Apr. 11, 2023. Humana will notify pharmacies of a decision to end the voluntary relaxation of the standard terms and conditions related to the mailing and delivery of prescription medications. Pharmacies are still required to comply with applicable federal and state laws, including state laws requiring licensure.

We understand that obtaining a physical signature from the member or member's representative may be difficult. If you are unable to obtain a signature in the event of an audit, Humana will accept original documentation verifying receipt of prescriptions without a member or member's representative signature or pharmacy point-of-sale documentation. This documentation includes the prescription number, date of service and date that the prescription was received by the member or delivered to the member for claims with dates beginning in March 2020 and for the duration of an applicable COVID-19 public health emergency declaration. Humana will continue to evaluate the waiver and will notify pharmacies in a pharmacy bulletin when it decides to end the waiver.

Potential drug shortages

If a generic drug is not available and the drug has been removed from the maximum allowable cost (MAC) pricing, dispense-as-written (DAW) code 8 will allow the brand-name drug to process without a reimbursement penalty to the pharmacy.

Pharmacy audits

Humana and its audit vendor, Conduent Payment Integrity Solutions ("Conduent"), will begin scheduling on-site audit visits in 2023. If your pharmacy is selected for an on-site audit, sufficient notice will be provided to allow for scheduling and preparation. Humana and Conduent will follow any communicated and posted safety protocols to ensure the safety of both the pharmacy staff and the auditor. If you have any questions about our on-site audit process, please contact a member of our team at pharmacyvendormanagement@humana.com.

Submission requirements for Paxlovid™ co-pack emergency use authorization (EUA) – COVID-19 and molnupiravir (EUA) antiviral medications

To receive payment of the \$12 dispense fee specific to COVID-19 antiviral medication, pharmacies must submit the claims with the NCPDP fields populated as shown in the following table:

| Field number | NCPDP field name | Required administration information for processing |
|--------------|----------------------------------|--|
| 440-E5 | Professional Service Code Field | MA (Medication Administration) or PE (Patient Education) AS (Patient Assessment) |
| 438-E3 | Incentive Amount Submitted Field | ≥ \$0.00 to receive enhanced dispense fee of \$12 |
| 412-DC | Dispensing Fee Submitted | ≥ \$0.00 (cannot be blank) |
| 426-DQ | Usual and Customary Charge | > \$0.00 |
| 423-DN | Basis of Cost Determination | 15 (free product or no associated cost) |

This medication is covered for the following plans:

- Commercial
- Humana Healthy Horizons® in Florida
- Humana Healthy Horizons® in South Carolina
- Illinois-Humana Gold Plus Integrated (Dual-Demonstration)
- Medicare plans with Part D coverage only

Vaccine claim submission process

To receive payment of administration fees, pharmacies must submit the claims with the NCPDP fields populated as shown in the following table:

| Field number | NCPDP field name | Required administration information for processing |
|--------------|-------------------------------------|---|
| 440-E5 | Professional Service Code Field | MA (Medication Administration) |
| 438-E3 | Incentive Amount Submitted Field | ≥ \$0.00 (submit administration fee indicated below) |
| 412-DC | Dispensing Fee Submitted | ≥ \$0.00 (cannot be blank) |
| 426-DQ | Usual and Customary Charge | > \$0.00 |
| 423-DN | Basis of Cost Determination | 15 (free product or no associated cost) |
| 420-DK | Submission Clarification Code (SCC) | 2 for the first dose of a two-dose vaccine |
| 420-DK | Submission Clarification Code (SCC) | 2 for a single-dose vaccine |
| 420-DK | Submission Clarification Code (SCC) | 6 for the second dose of a two-dose vaccine |
| 420-DK | Submission Clarification Code (SCC) | 7 for additional dose |
| 420-DK | Submission Clarification Code (SCC) | 10 for vaccine booster (first and second dose) |

Humana's Bank Identification Number (BIN) and Processor Control Number (PCN) combinations are the following:

| | BIN | PCN |
|--|------------|------------|
| Non-Medicare | 610649 | 03190000 |
| Medicare PDP and MAPD, IL Dual-Demonstration | 015581 | 03200000 |
| Medicare Advantage (MA only) | 610649 | 03200004 |
| LINET | 015599 | 05440000 |
| CarePlus MAPD | 015581 | 03200008 |
| CarePlus MA-only | 610649 | 03200000 |
| Humana Healthy Horizons® in Florida | 610649 | 03190000 |
| Humana Healthy Horizons® in South Carolina | 610649 | 03191504 |

Thank you for all you do to assist Humana members. If you have questions regarding this information, please call **888-204-8349**.