



New Hampshire

## NEW HAMPSHIRE MEDICAID PHARMACY PROGRAM



---

**TO:** New Hampshire Medicaid Providers  
**FROM:** New Hampshire Department of Health and Human Services/ First Health Services  
**DATE:** May 6, 2009  
**SUBJECT:** Implementation of NCPDP Version 5.1 Compound Segment on June 6, 2009

---

This notice is to inform you of an important enhancement being made to the New Hampshire Medicaid Program. Effective **June 6, 2009** the “Compound Segment” will be required to process multi-ingredient compounds electronically. Claims over \$50 will no longer need to be submitted on a Universal Claim Form.

Pharmacy providers will no longer be paid a separate fee for compounding time when dispensing a compounded medication for a New Hampshire Medicaid recipient. As with other claims, only the dispensing fee of \$1.75 will be paid.

This change is occurring to improve the timely payments of compounding claims and to alleviate the administrative burden of filing manual claims. This change will allow New Hampshire Medicaid to capture accurate claims information for rebate and DUR purposes.

This enhancement will become effective **June 6, 2009**. Some of these changes may require modifications to your software. Please contact your software vendor to ensure that you will be able to submit your multi-ingredient compound claims without interruption.

The updated Payer Specifications may be found at:  
<http://newhampshire.fhsc.com/providers/documents.asp>

**NOTES:**

- The Compound Segment information (Segment 10) must be submitted for Multi-Ingredient Compound claims. The fields that are required for compounds are found in the Payer Specification document.
- Home infusion claims will continue to receive the per diem fee, up to a maximum of ten days per fill. This fee will be automatically paid (no action is required).
- The current co-pays will remain in effect.
- Each ingredient must pass all edits (clinical, rebate, etc) for coverage. If an ingredient is not covered – the reason for the denial/reject will be passed back to the pharmacy using normal NCPDP denial/reject codes.
- Pharmacists may elect to continue processing the prescription if at least one ingredient is covered, by entering a value of “8” in the Submission Clarification Code (NCPDP field #420-DK)

If you have general questions, please contact First Health Services at 603-224-2083. If you have questions about claims processing please contact the First Health Technical Call Center at: 1-866-664-4511.