

TO: NH Medicaid Pharmacy Providers	FROM: Carol Guertin, Program Specialist II SURS Unit
SENDER'S PHONE: (603) 271-7656	SENDER'S FAX: (603) 271-8113
RE: Pharmacy Lock-In Program	DATE: 2/5/2010

New Hampshire Medicaid Pharmacy Providers

This fax communication is intended to remind you of the NH Medicaid Pharmacy Lock-In Program implemented March 1, 2003.

Recipients may be candidates for this program per the requirements of He-W 570.07, Pharmacy Lock-In Program.

The intent is to monitor and identify overuse, and/or unnecessary use, and/or inappropriate use of prescription drugs by New Hampshire Medicaid recipients.

Once a review has been completed and the determination is made that the recipient meets criteria as set forth in CFR 431.54, a letter is sent to the recipient advising them of their enrollment into the Pharmacy Lock-In Program at least 30 days prior to the effective date of their enrollment. The written notification will provide recipients with:

- the date of lock-in enrollment;
- instructions regarding selection from three pharmacies, of which one will be selected as the specific primary pharmacy that will be the recipient's only source for obtaining all prescribed drugs, except in an emergency when the primary pharmacy is unable to fill the prescription; and
- information regarding the recipient's right to appeal pharmacy lock-in and request a fair hearing if he/she disagrees with the decision made by DHHS.

If the recipient selects your pharmacy, you will receive a fax along with a letter identifying the recipient and the time frame for Lock-In to occur. Please reply regarding acceptance/non-acceptance of the recipient by either returning the fax or calling the Pharmacy Lock-In Program.

Please refer any suspected Medicaid prescription abuse by contacting Carol Guertin at 1-800-852-3345, ext. 7656 (in-state Only) or 603-271-7656. You may also fax a referral to Carol Guertin @ 603-271-8113.