

Please find below three important updates from the South Carolina Department of Health and Human Services relating to pharmacy.

I. Proposed Actions for Pharmacy Prescription Limit

SCDHHS proposes to amend the South Carolina Title XIX State Plan to **remove the limitation that adult beneficiaries only receive four prescriptions per month**. The amendment is to apply to dates of service on or after July 1, 2017.

SCDHHS estimates an initial budget impact of approximately \$750,000 annually for the fee-for-service pharmacy benefit. The costs of enhancing prescription coverage will be substantially offset by rebates due from pharmaceutical manufacturers and healthcare costs savings as beneficiaries are avoiding more costly modes of care.

II. Proposed Actions for Pharmacy Benefit Co-Payments

SCDHHS proposes to amend the South Carolina Title XIX State Plan to **allow the flexibility for SCDHHS to remove the co-payment for certain medications and medication classes**. This amendment is to apply to dates of service on or after July 1, 2017 and aims to enhance access and compliance to medication therapy.

SCDHHS does not anticipate the proposed action above to have a direct fiscal impact. However, the subsequent elimination of co-payment requirements will result in a modest increase in prescription costs. SCDHHS intends to eliminate co-payments only for those medications where the medical savings resulting from improved access and compliance are expected to exceed the cost of the co-payment elimination.

III. Adult Immunizations

Effective for dates of service on or after July 1, 2017, SCDHHS will **cover the following vaccinations for Medicaid beneficiaries 19 years of age and older:**

- Serogroup B Meningococcal (MenB)
- Measles, Mumps, and Rubella (MMR)
- Varicella (VAR)
- Measles, Mumps, Rubella, and Varicella (MMRV)

SCDHHS will reimburse providers for the administration of these immunizations in accordance with the Center for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) Adult Immunization Schedule.

When billing for vaccines for beneficiaries 19 years of age and older, the provider should bill for both the vaccine and the immunization administration code. For administration of the vaccine, providers should bill the Common Procedural Terminology (CPT) code 96372.

Federally qualified health centers (FQHCs) should not bill for immunization administration but may bill for the vaccination in addition to an encounter code.

Medicaid recognizes the CPT codes listed below for billing of the vaccination:

Vaccination	CPT Code	Code Description
MenB	90620	Meningococcal recombinant protein and outer membrane vesicle vaccine, serogroup B (MenB), 2 dose schedule, for intramuscular use
	90621	Meningococcal recombinant lipoprotein vaccine, serogroup B (MenB), 3 dose schedule, for intramuscular use
MMR	90707	Measles, mumps, and rubella virus vaccine (MMR), live, for subcutaneous use
VAR	90716	Varicella virus vaccine (VAR), live, for subcutaneous use
MMRV	90710	Measles, mumps, rubella, and varicella vaccine (MMRV), live, for subcutaneous use

Coverage for children through 18 years of age will continue to be provided through the Vaccine for Children (VFC) program. SCDHHS will continue to reimburse for the administration of age appropriate vaccinations provided to children when the vaccine is obtained through the VFC program.