**Med D Senior Team – Med B Transition Fill Override Entry Process**

[Process](#_MB_Override_Entry)  
[Entering Medicare B TF Override in RxClaim](#_Entering_Medicare_B)  
[Related Documents](#_Toc525108445)

**Description**: This document is to determine if medication is covered under Medicare Part B and if member qualifies for MB TF PBO.

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| Process |

Perform the steps below if determined covered under part B and member qualifies for MB TF PBO:

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| **Step** | **Action** | |
| **1** | Determine if the member qualifies for the Med B Transition Fill Override.  **NOTE:** Review CIF to verify plan allows for Medicare B Transition Fill Override. | |
| **If…** | **Then…** |
| **New member and has a history of taking the medication** | Enrollees new to MAPD, MA only, or MMP Coordinated care plan.  **Qualifying scenarios**  PHD/Sr. Team colleague agent finds a previously paid claim for the requested drug in the member’s RxClaim history, they can enter a TF override for the drug once they’ve determined that the member is new to the plan.  **OR**  If there is no RxClaim history at all for the member or if there’s RxClaim history for the member but no paid claims for the requested drug, the PHD/Sr. Team colleague should ask the pharmacist whether the member is just starting the prescription or whether the member has been previously taking it. Once they’ve determined the member is new to the plan, they can enter a TF override for the member if the pharmacist states the member has been previously taking the drug.  [**Proceed to section Entering Medicare B TF Override in RxClaim**](#_Entering_Medicare_B)  **OR**  **\*\*\***If the pharmacist states that the member has not been previously taking the drug, the PHD/Sr. Team colleague **should not** enter the TF override. **\*\*\*See Not a new member and/or No History below**  **NOTE:** Part B drugs are used infrequently (ex. once every 6 months, once a year). The PHD/Sr. Team colleague should look back for the past 12 months to look for evidence of paid claims for the requested drug. |
| **Not a new member and/or No History** | Member does not qualify for the override. Please proceed with educating the member on Prior Authorization requirements and how to proceed with the Prior Authorization process. Refer to the CIF for Part B coverage guidance. |

[Top of the Document](#_top)

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| Entering Medicare B TF Override in RxClaim |

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| **Step** | **Action** | | |
| **1** | On the **Caremark RxClaim Displayed Member Detail** screen, press F10.    **Result: Claims by Fill Date for Member** screen displays. | | |
| **2** | Check claim history for a paid claim for a medication on the [Med B Transition Fill Medication List](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=3420e17a-03c9-404c-8880-00cb25b779f0). Refer to CIF for medication List. | | |
| **3** | Enter a **5** next to the Claim for the Med B medication and press **Enter**.    **Result: RxClaim Claim Transaction Details** screen. | | |
| **4** | On the **Caremark RxClaim Claim Transaction Details** screen, press **Shift + F10** (F22) to enter a GPI override. The Medicare B Transition Fil Override is only entered using the GPI. **Do Not Use NDC!**  **NOTE**:   * If the Shift + F10 function does not work, perform the following: * Double Click F24 = More Keys * Double Click F22 = GPI PA     **Result: Caremark RxClaim Prior Authorization Profile** screen displays. | | |
| **5** |  | | |
| **6** | Enter the Part B Transition Fill Override for **90 days** from the start date of the plan. | | |
| **7** | **Letter** | **Fields** | **Instructions** |
| **A** | **Number** | * Enter **BTF** then the following: * Type **date** the override is being entered in the system in the format of MMDDYY. This should always be today’s date * Type in the **two-digit sequence number** for the number of overrides enter for this beneficiary * The 1st override – sequence number is 01 & the 2nd would be 02.   Example:   * Override entered is BTF. * Today’s Date is June 1. * This is the first override entered.   The Agent would type **BTF06012401** in the Number field. |
| **B** | **Type (G = GPI)** | These fields will auto populate when the screen is accessed from the claim after utilizing **Shift + F10** (F22) for GPI. |
| **C** | **NDC / GPI List ID** | GPI should be entered as a 10-digit wildcard. |
| **D** | **From and Thru** | Enter the Part B Transition Fill Override for **90 days** from the start date of the Plan.  Example: Plan starts 1/1/2024. Enter override from and thru dates 01/01/24-03/31/24 |
| **E** | **Agent** | Type **H**. |
| **F** | **Reason** | Type **MB**. |
| **G** | **Ignore PA Status** | Type **N**. |
| **H** | **Ovr SRx Rej** | Type **N** and press **Enter**. |
|  | **Confirm \_ (Y/N)** | Type **Y** and Press **Enter**.  **Result: RxClaim Prior Authorization Profile** screen will display with all the override information. |
| **8** | On the **RxClaim Prior Authorization Profile** screen, locate the override just entered.   * Page down or type initials where cursor is flashing. * Press **Enter**. * Type **2** (Edit) to the left of the override on the space below the question mark. * Press **Enter**.     **Results: RxClaim Member Prior Authorization Override Details** screen.   * **Press F7** to proceed to the next screen.   **Result: RxClaim Member Prior Auth GPI Detail Page 1 of 3** screen. | | |
| **9** | Change STS Field to reflect a Capital K (MUST BE CAPITAL)     * Press **Enter**.   **Result**: The **STS** field will Save with valid drug status of “**K**”.   * Press **F12** to return to **Prior Authorization Profile** screen. | | |
| **10** | Type **0** to the left of the appropriate override, then press **Enter**.  Type a detailed note – Med B Transition Fill PBO allowed per CIF and press **Enter** to save.  **NOTE**: **EVERY** override **requires** an Override notation. | | |

[Top of the Document](#_top)

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| Related Documents |

[PHD MED D - Copay Adjustment](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/view?docid=3a5eb6ed-7c2e-4d39-bd19-43c7b374acea" \t "_blank)

**Parent SOP:** DOC-013205: [Retail Help Desk Overview](https://policy.corp.cvscaremark.com/pnp/faces/DocRenderer?documentId=DOC-013205)

[Top of the Document](#_top)

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