NUMBER - 0152 SUB BY- PATTY ORTH SUB FOR- GINI EGAN PAGE- 1

ENTERED-01/20/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/20/00 COMPLETE-02/22/00 CLOSE-02/01/01

DESCRIPTION: NEW USER DEFINED MESSAGES

STATUS:

REQUEST CONTROL NUMBER: 0152

DESCRIPTION OF REQUEST:

PLEASE CREATE SIX USER DEFINED MESSAGES FOR THE DUR REJECT CODES THAT FOLLOW:

DUR	DESCRIPTION	USER DEFINED MESSAGE
18	MISS/INV METRIC QUANT	VERIFY METRIC QUANTITY AND INGREDIENT COST
52	NON-MATCHED CARD ID	INVALID PIC, FAX VALID ID TO 360-586-1403
75	PRIOR AUTHORIZATION	AUTHORIZATION REQUIRED, CALL 1-800-848-2842
79	REFILL TOO SOON	REFILL TOO SOON SEE BILLING INST SECTION K
83	DUPLICATE CLAIM	DUPLICATE CLAIM SEE BILLING INST SECTION K
M2	RECIPIENT LOCK-IN	CLIENT IS RESTRICTED TO ONE PHARMACY

SYSTEM SPECIFICATIONS:

01/20/00. ADDED - 179.

NUMBER - 0153 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-01/25/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/25/00 COMPLETE-02/01/00 CLOSE-02/01/01

DESCRIPTION: EXPEDITED AUTH

STATUS:

REQUEST CONTROL NUMBER: 0153

DESCRIPTION OF REQUEST:

THERE IS A NEW 15 MG STRENGTH FOR ZYPREXA. PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM.

GCN SEQ #	DRUG	CRITERIA CODES
041026	ZYPREXA	054, 104

SYSTEM SPECIFICATIONS:

01/27/00. ADDED - 179.

NUMBER - 0154 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-01/27/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/27/00 COMPLETE-02/29/00 CLOSE-02/28/01

DESCRIPTION: LIMIT TIME TO FILE CLAIM

STATUS:

REQUEST CONTROL NUMBER: 0154

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ 81 (MMIS EXCEPTION 125) CLAIM PAST TIMELY FILING LIMITATION. TO BE IN COMPLIANCE WITH DSHS MEMORANDUM 99-62 (COPY ATTACHED), ANY PHARMACY CLAIM (ORIGINAL, REBILL, OR ADJUSTMENT) MUST BE DENIED IF OVER 15 MONTHS FROM FILL DATE.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

01/27/00. ADDED - 179.

NUMBER - 0155 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-01/31/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/31/00 COMPLETE-02/01/00 CLOSE-02/01/01

DESCRIPTION: HIERARCHY OF USER DEF MSGS

STATUS:

REQUEST CONTROL NUMBER: 0155

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ 70 - NDC NOT COVERED. CHANGE THE HIERARCHY TO THE MESSAGE 'DESI DRUG', 'NOT HCFA CONTRACT', OR 'MEDICAL SUPPLY MUST BE BILLED ON THE HCFA 1500' BEFORE THE INIVIDUAL PLAN MASAGES.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

UPDATE RXOC0417 (RETURN MESSAGE FORMATTER) TO CHECK FOR DESI, NON CONTRACT, OR MED SUPPLY BEFORE CHECKING FOR THE PLAN THE INDIVIDUAL IS IN.

01/27/00. ADDED - 179.

NUMBER - 0156 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-02/04/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/07/00 COMPLETE-02/11/00 CLOSE-02/11/01

DESCRIPTION: CREATE TAPE FOR FORMULARY LIST

STATUS:

REQUEST CONTROL NUMBER: 0156

DESCRIPTION OF REQUEST:

TO AID IN THE CREATION OF A NEW FORMULARY LIST, PLEASE CREATE A TAPE OF DRUGS THAT HAVE FORMULARY COVERAGE INDICATOR C OR H. EXCLUDE ANY DRUGS THAT ARE DESI, TERMINATED OR NON-REBATE SIGNED. LIST ALPHABETICALLY BY DRUG NAME WITH DOSAGE FORM DESCRIPTION, EXCLUDING ANY DUPLICATE RECORDS OF SAME DRUG/DOSAGE FORM DESCRIPTION.

DELIVER TAPE TO BIN 12 ATTENTION PATTY ORTH.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

02/09/00. ADDED - 179.

NUMBER - 0157 SUB BY- PATTY ORTH SUB FOR- DIANE STEVENS PAGE- 1

ENTERED-02/22/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/22/00 COMPLETE-09/28/01 CLOSE-

DESCRIPTION: CHANGES TO DRUG AUDIT REPORT

STATUS:

REQUEST CONTROL NUMBER: 0157

DESCRIPTION OF REQUEST:

PLEASE MODIFY THE CRITERIA OF REPORT BWMM3500-R001 'DRUG AUDIT REPORT'. CREATE SEPARATE COLUMS SHOWING NUMBER OF CLAIMS AND DOLLARS PAID FOR MEDICAL CERT CODE 5, 8, AND DUR OUTCOME CODE 1C. CREATE COLUMNS SHOWING TOTAL NUMBER OF PAID CLAIMS AND TOTAL DOLLARS PAID TO EACH PHARMACY. THIS RPEORT IS NEEDED MONTHLY ON FLOPPY DISK. PLEASE DELIVER TO DIANE STEVENS, BIN 6-3.

SYSTEM SPECIFICATIONS:

02/28/00. ADDED - 179.

NUMBER - 0158 SUB BY- PATTY ORTH SUB FOR- GINI EGAN PAGE- 1

ENTERED-02/24/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/24/00 COMPLETE-02/29/00 CLOSE-02/28/01

DESCRIPTION: DO NOT BYPASS RIPERDAL FOR EDIT 7

STATUS:

REQUEST CONTROL NUMBER: 0158

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ 79 - REFILL TOO SOON. DO NOT BYPASS THIS EXCEPTION FOR THE DRUG RISPERDAL, GENERIC CODES 16136 - 16139.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

02/29/00. ADDED - 179.

NUMBER - 0159 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-02/25/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/25/00 COMPLETE-03/06/00 CLOSE-03/06/01

DESCRIPTION: EXPEDITED AUTH

STATUS:

REQUEST CONTROL NUMBER: 0159

DESCRIPTION OF REQUEST:

ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM.

GCN SEQ #	DRUG	CRITERIA CODES
041843	MIRALAX	021

SYSTEM SPECIFICATIONS:

02/25/00. ADDED - 179.

NUMBER - 0160 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-03/06/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/06/00 COMPLETE-03/20/00 CLOSE-03/20/01

DESCRIPTION: NURSING HOME REFILLS

STATUS:

REQUEST CONTROL NUMBER: 0160

DESCRIPTION OF REQUEST:

PLEASE ADD TO THE CRITERIA OF DUR/REJ 73 'REFILLS NOT OVERED'. THIS EXCEPTION SHOULD BE BYPASSED FOR CLIENTS IN PLAN 251 (NURSING HOME).

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

03/06/00. ADDED - 179.

NUMBER - 0161 SUB BY- PATTY ORTH SUB FOR- GINI EGAN PAGE- 1

ENTERED-03/06/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/06/00 COMPLETE-03/06/00 CLOSE-03/06/01

DESCRIPTION: RISPERDAL 3/5 FILL

STATUS:

REQUEST CONTROL NUMBER: 0161

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 76 'PLAN LIMITATIONS EXCEEDED. DO NOT BYPASS THE 3RD OR 5TH FILL FOR RISPERDAL, GENERIC CODES 16136 - 16139.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

03/06/00. ADDED - 179.

NUMBER - 0162 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-03/15/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/15/00 COMPLETE-03/20/00 CLOSE-03/20/01

DESCRIPTION: EXPEDITED AUTH

STATUS:

REQUEST CONTROL NUMBER: 0162

DESCRIPTION OF REQUEST:

ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM.

GCN SEQ #	DRUG	CRITERIA CODES
002922	SENOKOT SYRUP	130, 131, 132, 133

SYSTEM SPECIFICATIONS:

03/15/00. ADDED - 179.

NUMBER - 0163 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-03/15/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/15/00 COMPLETE-03/20/00 CLOSE-03/20/01

DESCRIPTION: EXPEDITED AUTH - VIOXX

STATUS:

REQUEST CONTROL NUMBER: 0163

DESCRIPTION OF REQUEST:

ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM. THERE IS A NEW 50 MG STRENGTH FOR VIOXX.

GCN SEQ #	DRUG	CRITERIA CODES
044758	VIOXX	051, 052

SYSTEM SPECIFICATIONS:

03/15/00. ADDED - 179.

NUMBER - 0164 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-03/23/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/23/00 COMPLETE-03/28/00 CLOSE-03/28/01

DESCRIPTION: EXPEDITED AUTHORIZATION

STATUS:

REQUEST CONTROL NUMBER: 0164

DESCRIPTION OF REQUEST:

ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM. THERE IS A NEW 180 MG STRENGTH FOR ALLEGRA.

GCN SEQ #	DRUG	CRITERIA CODES
033716	ALLEGRA	061

SYSTEM SPECIFICATIONS:

03/23/00. ADDED - 179.

NUMBER - 0165 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-03/23/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/23/00 COMPLETE-03/28/00 CLOSE-03/28/01

DESCRIPTION: EXPEDITED AUTH ADD, DELETES

STATUS:

REQUEST CONTROL NUMBER: 0164

DESCRIPTION OF REQUEST:

ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM.

GCN SEQ #	DRUG	CRITERIA CODES
030788	COPAXONE INJECTION	013
037034	DIFFERIN SOLUTION	055, 097

NOTE: THIS IS A CHANGE FOR COPAXONE, THE FOLLOWING REQUESTS A DELETE OF THE OLD CRITERIA CODE.

DELETE THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EXPEDITED AUTH TABLE. INDICATE 'P' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM.

GCN SEQ #	DRUG	CRITERIA CODES
030788	COPAXONE INJECTION	012
011659	HISAMEL	061, 062
011658	SELDANE	061
013026	SELDANE D	061

SYSTEM SPECIFICATIONS:

03/23/00. ADDED - 179.

NUMBER - 0166 SUB BY- PATTY ORTH SUB FOR- GINI EGAN PAGE- 1

ENTERED-04/01/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-04/01/00 COMPLETE-04/28/00 CLOSE-04/01/01

DESCRIPTION: AUTH NUMBER ON CLAIM

STATUS:

REQUEST CONTROL NUMBER: 0166

DESCRIPTION OF REQUEST:

PLEASE INITIATE A SYSTEM MODIFICATION TO REQUIRE THE AUTHORIZATION NUMBER BE ENTERED ON THE CLAIM FOR ANY DRUG OR CONDITION THAT REQUIRES AUTHORIZATION. THE AUTHORIZATION NUMBER IS REQUIRED ON THE CLAIM EVEN IF THE PROFILE SCREEN MATCHES THE DRUG OR CONDITION BILLED.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

04/01/00. ADDED - 179.

NUMBER - 0167 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-04/17/00 PRIORITY- EST-DAYS-000 REQD-06/05/00

BEGIN-04/17/00 COMPLETE-06/05/00 CLOSE-04/01/01

DESCRIPTION: NSAID EXPEDITED AUTH

STATUS:

REQUEST CONTROL NUMBER: 0167

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS FOR NSAID TO THE EXPEDITED AUTHORIZATION TABLE. THE CORRESPONDING CRITERIA CODE IS 141. INDICATE '3' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM. THIS REQUEST MUST BE IMPLEMENTED THE WEEK OF JUNE 5, 2000.

004285	008352	008363	008378	016575	023190
008336	008353	008364	008379	017204	024157
008337	008354	008365	008380	018435	024158
008338	008355	008366	011933	018436	024166
008340	008356	008367	012080	018455	024966
008341	008357	008368	015960	020175	027068
008347	008358	008370	015961	020279	035737
008348	008359	008371	016404	021373	038259
008349	008360	008372	016405	021380	039499
008350	008361	008373	016406	021980	039500
008351	008362	008374	016574	022518	

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

04/01/00. ADDED - 179.

NUMBER - 0168 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-04/20/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-04/20/00 COMPLETE-04/28/00 CLOSE-04/01/01

DESCRIPTION: BYPASS NURS HOME EDIT

STATUS:

REQUEST CONTROL NUMBER: 0168

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE CRITERIA OF SUR/REJ 63 (DRUG NOT COVERED FOR NURSING HOME PATIENT) TO BYPASS THIS EXCEPTION IF CUSTOMER LOCATION 01 (HOME) IS ON THE CLAIM.

THIS CUSTOMER LOCATION WILL ALLOW PRESCRIPTION DRUG CLAIMS TO BE BILLED FOR CLIENTS THAT HAVE BEEN DISCHARGED FROM THE NURSING HOME, BUT THEIR ELIGIBILITY FILE HAS NOT BEEN UPDATED.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

04/26/00. ADDED - 179.

NUMBER - 0169 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-05/31/00 PRIORITY- EST-DAYS-000 REQD-07/17/00

BEGIN-06/02/00 COMPLETE-11/28/01 CLOSE-11/28/01

DESCRIPTION: DOSING LIMITS FOR CERTAIN DRUGS

STATUS:

REQUEST CONTROL NUMBER: 0169

DESCRIPTION OF REQUEST:

PLEASE ADD TO THE LOGIC OF DUR REJECT 76 (PLAN LIMITATIONS EXCEEDED). THIS EXCEPTION FAILS IF CLAIMS ARE BILLED WITH MORE THAN ONE TABLET/ CAPSULE PER DAY (QUANTITY DIVIDED BY DAYS' SUPPLY) FOR THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES ONLY:

DRUG	GCN SEQ #	CRITERIA CODES
ACIPHEX	040941	082, 083, 114
PREVACID	021852, 023586	082, 083, 085, 114, 115, 126
PRILOSEC	013009, 021222, 022270	082, 083, 085, 114, 126

ALLOW PRIOR AUTHORIZATION TO OVERRIDE THE DUR/REJ 76 FOR MORE THAN ONE TAB/CAP PER DAY. THIS NEEDS TO BE IMPLEMENTED THE WEEK OF JULY 17, 2000.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

ADDENDUM AS OF 11/16/01 -

PLEASE UPDATE THE LOGIC OF DUR REJECT CODE 76 WITH THESE CORRECTED GCN SEQUENCE NUMBERS AS OUTLINED IN THE ORIGINAL CSR:

PREVACID	030106, 030107	082, 083, 085, 114, 115, 126
PRILOSEC	033530, 043136, 043137	082, 083, 085, 114, 126

SYSTEM SPECIFICATIONS:

CODE ADDED TO RXOC0445.

NUMBER - 0169 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 2

ENTERED-05/31/00 PRIORITY- EST-DAYS-000 REQD-07/17/00

BEGIN-06/02/00 COMPLETE-11/28/01 CLOSE-11/28/01

06/02/00. ADDED - 179.

NUMBER - 0170 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-05/31/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/02/00 COMPLETE-06/26/00 CLOSE-04/01/01

DESCRIPTION: EXPEDITED AUTH CHANGE

STATUS:

REQUEST CONTROL NUMBER: 0170

DESCRIPTION OF REQUEST:

THE GCN SEQUENCE NUMBER HAS CHANGED ON THE DRUG FILE FOR SYNAREL.
PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING
CRITERIA CODES TO THE EXPEDITED AUTHORIZATION TABLE. INDICATE 'E'
IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM

DRUG	GCN SEQ #	CRITERIA CODES
SYNAREL	044984	059, 060

PLEASE DELETE THE OLD GCN SEQUENCE NUMBER 013744 FROM THE EXPEDITED
AUTHORZATION TABLE.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

06/02/00. ADDED - 179.

NUMBER - 0171 SUB BY- PATTY ORTH SUB FOR- AYUNI WHIMPEE PAGE- 1

ENTERED-06/09/00 PRIORITY- EST-DAYS-000 REQD-06/30/00

BEGIN-06/09/00 COMPLETE-06/26/00 CLOSE-04/01/01

DESCRIPTION: DISPENSING FEE CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0171

DESCRIPTION OF REQUEST:

PLEASE IMPLEMENT THE FOLLOWING DISPENSING FEE RATE INCREASES TO THE POINT OF SALE SYSTEM EFFECTIVE WITH DATES OF SERVICE JULY 1, 2000:

HIGH-VOLUME PHARMACIES	4.06
MID-VOLUME PHARMACIES	4.35
LOW-VOLUME PHARMACIES	5.02
UNIT DOSE SYSTEMS	5.02

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

06/02/00. ADDED - 179.

NUMBER - 0172 SUB BY- PATTY ORTH SUB FOR- SONJA GLEIZES PAGE- 1

ENTERED-06/09/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/14/00 COMPLETE-06/21/00 CLOSE-04/01/01

DESCRIPTION: TPL EOB FOR RECOUPMENTS

STATUS:

REQUEST CONTROL NUMBER: 0172

DESCRIPTION OF REQUEST:

PLEASE CHANGE EOB 031 OR EOB 032 TO EOB 855 IF CLAIM HAS ADJUSTMENT REASON 5 AND IS EXAM ENTERED (MEDIUM 0).

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

06/14/00. ADDED - 179.

NUMBER - 0173 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-06/14/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/14/00 COMPLETE-06/26/00 CLOSE-04/01/01

DESCRIPTION: EXPEDITED AUTH

STATUS:

REQUEST CONTROL NUMBER: 0173

DESCRIPTION OF REQUEST:

ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM.

GCN SEQ #	DRUG	CRITERIA CODES
040155, 040156, 040157, 040158	EXELON	022
044634	LOTRONEX	014
027462	PROTONIX	081
043952	VANCOCIN	069, 103, 129

SYSTEM SPECIFICATIONS:

06/14/00. ADDED - 179.

NUMBER - 0174 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-06/14/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/14/00 COMPLETE-06/26/00 CLOSE-04/01/01

DESCRIPTION: EXPEDITED AUTH - DELETES

STATUS:

REQUEST CONTROL NUMBER: 0174

DESCRIPTION OF REQUEST:

PLEASE DELETE THE FOLLOWING GCN SEQUENCE NUMBERS AND CRITERIA CODES FROMTO THE EXPEDITED AUTH TABLE. INDICATE 'P' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM.

GCN SEQ #	DRUG	CRITERIA CODES
020982, 020983, 020984, 020985	COGNEX	022

SYSTEM SPECIFICATIONS:

06/14/00. ADDED - 179.

NUMBER - 0175 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-06/14/00 PRIORITY- EST-DAYS-000 REQD-07/17/00

BEGIN-06/14/00 COMPLETE-07/17/00 CLOSE-04/01/01

DESCRIPTION: ADD CODES TO DUAL ELIGIBLES

STATUS:

REQUEST CONTROL NUMBER: 0175

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ 70, PLAN 255
MEDICARE DUAL ELIGIBLES. ADD TEH FOLLOWING GENERIC CODES TO THE LIST
OF DRUGS NOT COVERED ON THE PLAN FILE.

07560 ETOPOSIDE 59 MG CAPSULES
31611 CEPECITABINE 150 MG TABLETS
38360 CYCLOPHOSHAMIDE 25 MG TABLETS
38361 CYCLOPHOSHAMIDE 50 MG TABLETS
38380 MELPHALAN 2 MG TABLETS

PLEASE BYPASS THIS EDIT IF DUR OUTCOME CODE IS EQUAL TO 1B (CLAIM
DENIED BY MEDICARE), OR IF ELIGIBILITY OVERRIDE CODE IS EQUAL TO 2
(BABY ON PARENTS PIC).

THIS NEEDS TO BE IMPLEMENTED THE WEEK OF JULY 17, 2000.

SYSTEM SPECIFICATIONS:

06/14/00. ADDED - 179.

NUMBER - 0176 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-06/14/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/14/00 COMPLETE-06/26/00 CLOSE-04/01/01

DESCRIPTION: EXPEDITED AUTH

STATUS:

REQUEST CONTROL NUMBER: 0176

DESCRIPTION OF REQUEST:

ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM.

GCN SEQ #	DRUG	CRITERIA CODES
040294, 045102	ACTONEL	142, 143, 144, 146

SYSTEM SPECIFICATIONS:

06/14/00. ADDED - 179.

NUMBER - 0177 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-06/23/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/23/00 COMPLETE-06/26/00 CLOSE-04/01/01

DESCRIPTION: EXPEDITED AUTH - REBETRON

STATUS:

REQUEST CONTROL NUMBER: 0177

DESCRIPTION OF REQUEST:

THERE ARE NEW 30 AND 60 MG STRENGTHS FOR ALLEGRA, AND THE GCN SEQ-
UENCE NUMBERS HAVE CHANGED FOR REBETRON. PLEASE ADD THE FOLLOWING
GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE
EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR ON
PAGE 5 OF THE POINT OF SALE SYSTEM.

GCN SEQ #	DRUG	CRITERIA CODES
031689, 045261	ALLEGRA	061
045233 THRU 045238	REBETRON	008, 009

PLEASE DELETE THE OLD REBETRON GCN SEQUENCE NUMBER 039936 FROM THE
EXPEDITED AUTH TABLE.

SYSTEM SPECIFICATIONS:

06/28/00. ADDED - 179.

NUMBER - 0178 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-07/11/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/11/00 COMPLETE-07/24/00 CLOSE-04/01/01

DESCRIPTION: ADD TO LIST OF COMPOUND BYPASS

STATUS:

REQUEST CONTROL NUMBER: 0178

DESCRIPTION OF REQUEST:

PLEASE ADD GCN SEQUENCE NUMBER 045260 (LASTOSE POWDER) TO THE LIST OF GCN SEQUENCE NUMBERS THAT BYPASS DUR/REJ 75 (PA REQUIRED) IF COMPOUND INDICATOR 2 IS ON THE CLAIM.

SYSTEM SPECIFICATIONS:

07/18/00. ADDED - 179.

NUMBER - 0179 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-07/18/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/18/00 COMPLETE-07/24/00 CLOSE-04/01/01

DESCRIPTION: EXPEDITED AUTH IBUPROFEN

STATUS:

REQUEST CONTROL NUMBER: 0179

DESCRIPTION OF REQUEST:

ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM.

GCN SEQ #	DRUG	CRITERIA CODES
022530	IBUPROFEN TAB CHEW	141

SYSTEM SPECIFICATIONS:

07/18/00. ADDED - 179.

NUMBER - 0180 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-08/20/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/20/00 COMPLETE-12/04/00 CLOSE-04/01/01

DESCRIPTION: CHANGE CERTAIN DRUGS TO N

STATUS:

REQUEST CONTROL NUMBER: 0180

DESCRIPTION OF REQUEST:

PLEASE CHANGE THE POS DRUG FILE FORMULARY COVERAGE INDICATOR TO N (NOT COVERED) FOR GCN SEQUENCE NUMBERS 019413 AND 019549, AND FOR THE FOLLOWING ADDITIONAL MISCELLANEOUS DIABETIC SUPPLY ITEMS LISTED BY NDC:

SYSTEM SPECIFICATIONS:

08/20/00. ADDED - 179.

NUMBER - 0181 SUB BY- PATTY ORTH SUB FOR- SIRI CHILDS PAGE- 1

ENTERED-08/20/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/20/00 COMPLETE-09/04/00 CLOSE-04/01/01

DESCRIPTION: ADD NEW VALUE TO BASIS OF REIMB

STATUS:

REQUEST CONTROL NUMBER: 0181

DESCRIPTION OF REQUEST:

PLEASE USE NCPDP BALUE 06 (MAC PRICING INGREDIENT COST PAID) IN THE 'BASIS OF REIMBURSEMENT DETERMINATION' FIELD IF THE CLAIM PAID AT THE MAC PRICE.

THIS ENHANCEMENT WILL RETURN A MESSAGE TO THE PROVIDER THAT CLAIM PAID THE MAC PRICE (IF THEIR SOFTWARE SUPPORTS RETURN MESSAGES)

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

08/20/00. ADDED - 179.

NUMBER - 0182 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-08/20/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/20/00 COMPLETE-09/04/00 CLOSE-04/01/01

DESCRIPTION: ADD TO BYPASS OF REJ 19

STATUS:

REQUEST CONTROL NUMBER: 0182

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTIO LOGIC FOR DUR/REJ 19 MISSING/INVALID DAYS SUPPLY. IN SECTION 'C' ADD 16965 (ACETAMINOPHEN 500 MG) AND 16967 (ACETAMINOPHEN 650 MG) TO THE LIST OF GENERIC CODE NUMBERS THAT BYPASS THE EDIT.

SYSTEM SPECIFICATIONS:

08/20/00. ADDED - 179.

NUMBER - 0183 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-09/01/00 PRIORITY- EST-DAYS-000 REQD-02/01/01

BEGIN-09/01/00 COMPLETE-01/11/01 CLOSE-

DESCRIPTION: ADD TO PLAN 254 CRITERIA

STATUS:

REQUEST CONTROL NUMBER: 0183

DESCRIPTION OF REQUEST:

MAA WILL BE IMPLEMENTING THE TAKE CHARGE FAMILY PLANNING PROGRAM EFFECTIVE FEBRUARY 1, 2001. THIS PROGRAM WILL COVER MALES AND FEMALES TO 200% OF THE FEDERAL POVERTY LEVEL. THE SCOPE OF CARE IS IDENTICAL TO THE EXISTING FAMILY PLANNING PROGRAM IN THE PRESCRIPTION DRUG PROGRAM. THE FOLLOWING MATCH, PROGRAM, AND ELIGIBILITY CODE COMBINATIONS WILL NEED TO REFLECT PLAN 254 (FAMILY PLANNING) IN THE POS SYSTEM:

MATCH	PROGRAM	ELIGIBILITY
M	G	P
T	G	P

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

08/20/00. ADDED - 179.

NUMBER - 0184 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-09/05/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/05/00 COMPLETE-10/02/00 CLOSE-04/01/01

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0184

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE AND CORRESPONDING CRITERIA CODES TO THE EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM.

DRUG	GCN SEQ	CRITERIA CODE
PROTONIX	027462	082, 083, 084, 085, 086, 114, 115, 126

SYSTEM SPECIFICATIONS:

09/28/00. ADDED - 179.

NUMBER - 0185 SUB BY- PATTY ORTH SUB FOR- DIANE STEVENS PAGE- 1

ENTERED-09/11/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/11/00 COMPLETE-11/08/00 CLOSE-04/01/01

DESCRIPTION: PREPARATION FEE QUANTITY LIMITS

STATUS: IN PROCESS

REQUEST CONTROL NUMBER: 0185

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ 18 (MISSING OR INVALID MEDTRIC QUANTITY) TO LIMIT THE ALLOWED QUANTITY FOR THE FOLLOWING STATE ASSIGNED PREPARATION FEES. DENY CLAIMS IN EXCESS OF THE MAXIMUM QUANTITY INDICATED.

NDC	DESCRIPTION	MAX QUANT ALLOWED
00990-1111-04	PAIN COCKTAIL	1
00990-1111-06	TOPICAL LIQUIDS, 60 ML OR LESS	60
00990-1111-08	ASEPTIC TECHNIQUE	1
00990-1111-09	OPTHALMIC, STERILE	1
00990-1111-10	INJECTIBLES, STERIL	2
00990-1111-11	OINMENTS, 60 GM OR LESS	60

THIS HAS BEEN DISCUSSED WITH RANDY STAMP. 60

SYSTEM SPECIFICATIONS:

09/28/00. ADDED - 179.

NUMBER - 0186 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-09/11/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/11/00 COMPLETE-10/02/00 CLOSE-04/01/01

DESCRIPTION: MANAGED CARE BYPASS

STATUS:

REQUEST CONTROL NUMBER: 0186

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ M1 (PATIENT NOT COVERED IN AID CATEGORY - PATIEN IN MANAGED CARE PLAN). BYPASS THIS EXCEPTION IF MEDICAL CERTIFICATION CODE 2 IS BILLED WITH GENERIC CODES 02681, 02682, 02683, FOR THE DRUG NORVAC.

SYSTEM SPECIFICATIONS:

09/28/00. ADDED - 179.

NUMBER - 0187 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-09/11/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/11/00 COMPLETE-10/02/00 CLOSE-04/01/01

DESCRIPTION: EXPEDITED AUTH CHANGES - RENOVA

STATUS:

REQUEST CONTROL NUMBER: 0187

DESCRIPTION OF REQUEST:

THE GCN SEQUENCE NUMBER HAS CHANGED FOR RENOVA 0.05% CREAM. PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA TO THE EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM.

DRUG	GCN SEQ #	CRITERIA CODES
RENOVA 0.05% CREAM	045214	055, 097

PLEASE DELETE THE OLD RENOVA GCN SEQUENCE NUMBER 022495 FROM THE EXPEDITED AUTH TABLE.

SYSTEM SPECIFICATIONS:

09/28/00. ADDED - 179.

NUMBER - 0188 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-12/06/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/11/00 COMPLETE-05/08/01 CLOSE-

DESCRIPTION: LIST OF HARD COPY BILLERS

STATUS:

REQUEST CONTROL NUMBER: 0188

DESCRIPTION OF REQUEST:

PLEASE PROVIDE A LIST OF ACTIVE PHARMACY PROVIDERS WHO BILL ONLY HARD COPY PAPER CLAIMS ON THE PINT OF SALE SYSTEM. A COUNT OF ACTIVE PHARMACY PROVIDERS IS ALSO NEEDED.

THIS WILL ENABLE MMIS SERVICES TO REVIEW THE NEED TO MAKE THE POS SOFTWARE PACKAGES AVAILABLE TO PHARMACY PROVIDERS.

SYSTEM SPECIFICATIONS:

09/28/00. ADDED - 179.

NUMBER - 0189 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-10/06/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/06/00 COMPLETE-02/19/01 CLOSE-

DESCRIPTION: CHANGES TO OTC NOT COVERED

STATUS:

REQUEST CONTROL NUMBER: 0189

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 70 (NOT COVERED). IN SECTION 2 (THE HCFA REBATE INDICATOR IS 'N', EXCEPT FOR); SUBSECTION B (OVER THE COUNTER DRUG CLASS); ADD THE FOLLOWING EXCEPTIONS LISTED BY GENERIC CODE NUMBER:

00161	ASPRIN
09101	DOCUSATE SODIUM
09102	DOCUSATE SODIUM
16720	ASPRIN
92450	CALMOSEPTINE OINTMENT

THE RETURN MESSAGE FOR THESE NON-SIGNED, OVER THE COUNTER PRODUCTS WILL BE 'NOT HCFA CONTRACT'.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

10/06/00. ADDED - 179.

NUMBER - 0190 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-10/10/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/10/00 COMPLETE-12/04/00 CLOSE-04/01/01

DESCRIPTION: CHANGES TO DAYS SUPPLY EDIT

STATUS:

REQUEST CONTROL NUMBER: 0190

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 19 - MISSING/INVALID DAYS SUPPLY. IN SECTION 'C' ADD 94594 (CYANOCOBALAMIN 1000 MCG/ML VIAL) TO THE LIST OF GENERIC CODE NUMBER THAT BYPASS THE EDIT. BY GENERIC CODE NUMBER:

SYSTEM SPECIFICATIONS:

10/16/00. ADDED - 179.

NUMBER - 0191 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-10/13/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/13/00 COMPLETE-11/08/00 CLOSE-04/01/01

DESCRIPTION: MANAGED CARE BYPASS CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0191

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ M1 (PATIENT IN MANAGED CARE PLAN). ADD TO SECTION 4 TO BYPASS IF MEDICAL CERTIFICATION CODE 2 IS BILLED WITH THERAPUETIC CLASS CODE A4B (HYPOTENSIVES).

SYSTEM SPECIFICATIONS:

10/13/00. ADDED - 179.

NUMBER - 0192 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-10/23/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/23/00 COMPLETE-02/19/01 CLOSE-

DESCRIPTION: ADD WAC/ USE FMAC PRICING

STATUS:

REQUEST CONTROL NUMBER: 0192

DESCRIPTION OF REQUEST:

PLEASE MODIFY THE POS SYSTEM ADDING THE WHOLESALE ACQUISITION COST (WAC) TO THE DRUG FILE, WITH DATE SENSITIVE PRICING SEGMENTS. IN ADDITION, PLEASE CHANGE THE FEDERAL MAC (FMAC) PRICING SEGMENTS TO BE DATE SENSITIVE, AND INCORPORATE THE FMAC INTO THE PRICING ALGORITHM EFFECTIVE JANUARY 1, 2001. THE PROCING ALGORITHM WOULD THEN PAY THE LESSOR OF EAC, FMAC, OR MAC. A PRIOR AUTHORIZATION TO WAIVE THE MAC WILL THEN ALSO WAIVE THE FMAC PRICE. A NEW ALLOWED CHARGE SOURCE INDICATOR IS ALSO NECESSARY TO REFLECT CLAIMS PAID AT FMAC.

SYSTEM SPECIFICATIONS:

10/23/00. ADDED - 179.

NUMBER - 0193 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-10/23/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/23/00 COMPLETE-11/08/00 CLOSE-04/01/01

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0193

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE AND CORRESPONDING CRITERIA CODES TO THE EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM.

DRUG	GCN SEQ	CRITERIA CODE
DIFFERIN 0.1% CREAM	031789	055, 097
ZYPREXA ZYDIS	045190, 145191	054, 104

SYSTEM SPECIFICATIONS:

10/23/00. ADDED - 179.

NUMBER - 0194 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-11/01/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/01/00 COMPLETE-11/29/00 CLOSE-04/01/01

DESCRIPTION: MASS ADJSUT CERTIFIED NDC'S

STATUS:

REQUEST CONTROL NUMBER: 0194

DESCRIPTION OF REQUEST:

IN ORDER TO PAY PHARMACIES AT THE CORRECT AWP PRICE, PLEASE INITIATE A MASS ADJUSTMENT FOR DATES OF SERVICE 050100 THROUGH 102400 FOR THE 437 CERTIFIED NDC'S. ADJUST ONLY THOSE JCLAIMS THAT WERE ACTUALLY PAID AN AWP PRICE FROM THE POST SYSTEM, SCREEN THREE AWP FIELD.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

11/01/00. ADDED - 179.

NUMBER - 0195 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-11/14/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/14/00 COMPLETE-12/04/00 CLOSE-04/01/01

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0195

DESCRIPTION OF REQUEST:

THERE IS A NEW 70 MG STRENTH FOR FOSAMAX. PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA TO THE EXPEDITED AUTH TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POINT OF SALE SYSTEM.

DRUG	GCN SEQ #	CRITERIA CODES
FOSAMAX	046941	016, 017, 106, 122, 123

SYSTEM SPECIFICATIONS:

11/01/00. ADDED - 179.

NUMBER - 0196 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-11/18/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/18/00 COMPLETE-12/04/00 CLOSE-04/01/01

DESCRIPTION: MANAGED CARE EDIT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0196

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ M1 (PATIENT IN MANAGED CARE PLAN). ADD D2A (FLOURIDE PREPARATIONS) TO THE LIST OF THERAPEUTIC CLASS CODES IN SECTION 3 THAT BYPASS THIS EXCEPTION.

SYSTEM SPECIFICATIONS:

11/01/00. ADDED - 179.

NUMBER - 0197 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-12/05/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/05/00 COMPLETE-01/04/01 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0197

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ #	CRITERIA CODES
ROFERON-A KIT	040769 - 040771	030,031,032,033,107,135

THE FDA HAS REMOVED LOTORNEX FROM THE MARKET. PLEASE DELETE THE FOLLOWING GCN SEQUENCE AND CORRESPONDING CRITERIA CODE FROM THE EPA TABLE. INDICATE 'P' IN THE FORMUALRY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ #	CRITERIA CODES
LOTRONEX	044634	014

SYSTEM SPECIFICATIONS:

11/01/00. ADDED - 179.

NUMBER - 0198 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-01/04/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/04/00 COMPLETE-01/10/01 CLOSE-

DESCRIPTION: PIP/QRS ADJUSTMENT REASON

STATUS:

REQUEST CONTROL NUMBER: 0198

DESCRIPTION OF REQUEST:

PLEASE IMPLEMENT A SYSTEM MODIFICATION TO VALIDATE ADJUSTMENT REASON CODES 'P' AND 'Q'. THESE WILL BE USED IN PROCESSING PAYMENT INTEGRITY PROGRAM (PIP) ADJUSTMENTS.

SYSTEM SPECIFICATIONS:

01/04/00. ADDED - 179.

NUMBER - 0199 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-01/04/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/04/01 COMPLETE-01/04/01 CLOSE-

DESCRIPTION: EXPEDITED AUTH - ZYPREXA

STATUS:

REQUEST CONTROL NUMBER: 0199

DESCRIPTION OF REQUEST:

THERE IS A NEW 20-MG STRENGTH FOR ZYPREXA. PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMUALRY INDICATOR FIELD ON PAGE 5 OF THE POS.

GCN SEQ #	DRUG	CRITERIA CODE
041027	ZYPREXA	054, 104

SYSTEM SPECIFICATIONS:

01/04/00. ADDED - 179.

NUMBER - 0200 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-12/04/00 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/05/00 COMPLETE-12/15/00 CLOSE-01/01/03

DESCRIPTION: MANAGED CARE EDIT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0200

DESCRIPTION OF REQUEST:

THE THERAPUETIC CLASS CODES HAVE BEEN SUB-DIVIDED FOR ANTI-DEPRESSANT DRUGS. PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ M1 (PATIENT IN MANAGED CARE PLAN.) ADD TO SECTION 4 TO BYPASS THIS EXCEPTION IF MEDICAL CERTIFICATION CODE 2 IS BILLED WITH ANY OF THE FOLLOWING THERAPEUTIC CLASS CODES:

H2N, H2S, H2U, H2W, H2X, H2Y, H71, H7B, H7C, H7D, H7E, H7F, H7G, H7I, H7J, H7K, H7L, H7M.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

11/01/00. ADDED - 179.

NUMBER - 0201 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-01/04/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/04/01 COMPLETE-01/04/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0201

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQUENCE	CRITERIA CODE
NUTROPIN DEPOT KITS	045694,045695,045696	045, 124
SEROQUEL 300 MG	047198	054, 104
VONOFER	047038	028, 029

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

01/04/01. ADDED - 179.

NUMBER - 0202 SUB BY- PATTY ORTH SUB FOR- DIANE STEVENS PAGE- 1

ENTERED-01/04/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/04/01 COMPLETE-02/19/01 CLOSE-01/01/03

DESCRIPTION: DUP CHECK CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0202

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 83 (DUPLICATE CLAIM).
BYPASS THIS EXCEPTION IF THERE IS A '2' IN THE COMPOUND CODE ONLY
WHEN THE THERAPUETIC CLASS CODE IS EQUAL TO ONE OF THE FOLLOWING:

C0B	WATER
C1B	SODIUM/SALINE PREPARATIONS
C5J	IV SOLUTIONS: DEXTROSE-WATER
C5K	IV SOLUTIONS: DEXTROSE-SALINE
C5L	IV SOLUTIONS: DEXTROSE-RINGERS
C5M	IV SOLUTIONS: DEXTROSE/LACTATED RINGERS
C5O	SOLUTIONS MISCELLANEOUS
C5R	IV SOLUTIONS: DEXTROSE WATER (CONTINUED 1)
U6E	OINTMENT/CREAM BASES
U6F	HYDROPHILLIC CREAM/OINTMENT BASES
U6H	SOLVENTS
U6J	SOLVENTS (CONTINUED 1)
U6K	SOLVENTS (CONTINUED 2)
U6L	SOLVENTS (CONTINUED 3)
U6N	VEHICLES
U6P	VEHICLES (CONTINUED)
U6S	PROPELLANTS
U6T	PROPELLANTS (CONTINUED)
U7A	SUSPENDING AGENTS
U7B	SUSPENDING AGENTS (CONTINUED 1)
U7C	SUSPENDING AGENTS (CONTINUED 2)

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0446.

NUMBER - 0202 SUB BY- PATTY ORTH SUB FOR- DIANE STEVENS PAGE- 2

ENTERED-01/04/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/04/01 COMPLETE-02/19/01 CLOSE-01/01/03

01/04/01. ADDED - 179.

NUMBER - 0203 SUB BY- PATTY ORTH SUB FOR- SIRI CHILDS PAGE- 1

ENTERED-01/08/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/08/01 COMPLETE-01/22/01 CLOSE-01/01/03

DESCRIPTION: ADDITIONS TO BID DOSING EDIT

STATUS:

REQUEST CONTROL NUMBER: 0203

DESCRIPTION OF REQUEST:

PLEASE ADD TO THE LOGIC OF DUR REJECT CODE 76 (PLAN LIMITS EXCEEDED.) AS IN POS CSR 169, ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO FAIL THE EXCEPTION IF A CLAIM IS BILLED WITH MORE THAN ONE TABLET/CAPSULE PER DAY (QUANTITY DIVIDED BY DAYS SUPPLY):

DRUG	GCN SEQ	CRITERIA CODES
PROTONIX	027462	081, 082, 083, 085, 114, 115, 126

ALLOW PRIOR AUTHORIZATION TO OVERRIDE THE DUR/REJ 76 FOR MORE THAN ONE TAB/CAP PER DAY.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

01/17/01. ADDED - 179.

NUMBER - 0204 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-01/08/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/08/01 COMPLETE-01/22/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0204

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQUENCE	CRITERIA CODE
CONCERTA	045981,045982	149, 150

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

01/08/01. ADDED - 179.

NUMBER - 0205 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-01/15/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/15/01 COMPLETE-01/22/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES - ADDERALL

STATUS:

REQUEST CONTROL NUMBER: 0205

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.
THESE ARE NEW 12.5 AND 15 MG STRENGTHS FOR ADDERALL.

DRUG	GCN SEQUENCE	CRITERIA CODE
ADDERALL	047132,047133	026, 027, 087

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

01/15/01. ADDED - 179.

NUMBER - 0206 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-01/15/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/15/01 COMPLETE-01/22/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0206

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQUENCE	CRITERIA CODE
HUMATROPE CARTRIDGES	028713,029176,029177	045, 124

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

01/15/01. ADDED - 179.

NUMBER - 0207 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-01/17/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/17/01 COMPLETE-04/01/01 CLOSE-01/01/03

DESCRIPTION: METRIC DECIMAL QUANTITY

STATUS:

REQUEST CONTROL NUMBER: 0207

DESCRIPTION OF REQUEST:

PLEASE IMPLEMENT THE SYSTEM CAPABILITY OF ACCEPTING METRIC DECIMAL PRICING IN THE POS SYSTEM. THIS WILL REQUIRE CONVERTING THE POS HISTORY FILE.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP AND DON BOOGERD.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

01/15/01. ADDED - 179.

NUMBER - 0208 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-01/17/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/17/01 COMPLETE-01/22/01 CLOSE-01/01/03

DESCRIPTION: ADD TO DAYS SUPPLY EDIT

STATUS:

REQUEST CONTROL NUMBER: 0208

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 19 MISSING/INVALID DAYS SUPPLY. IN SECTION 'D' ADD 034731 (HUMALOG PENS) TO THE LIST OF GCN SEQUENCE NUMBERS THAT BYPASS THE EDIT.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

01/17/01. ADDED - 179.

NUMBER - 0209 SUB BY- PATTY ORTH SUB FOR- MARILYN MUELLER PAGE- 1

ENTERED-01/25/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/25/01 COMPLETE-02/16/01 CLOSE-01/01/03

DESCRIPTION: BYPASS MANAGED CARE EDIT

STATUS:

REQUEST CONTROL NUMBER: 0209

DESCRIPTION OF REQUEST:

THERE ARE TWO NEW STRENGTHS OF THE DRUG CRIXIVAN. PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ M1 (PATIENT IN MANAGED CARE PLAN). ADD TO SECTION 5 (PROTEASE INHIBITORS) TO BYPASS THIS EXCEPTION IF GCN SEQUENCE NUMBER IS EQUAL TO 027890 OR 027891.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

03/19/01. ADDED - 179.

NUMBER - 0210 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-01/29/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/29/01 COMPLETE-02/05/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0210

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.
THERE IS A NEW STRENGTH OF CONCERTA AND A NEW CRITERIA CODE FOR ADDERALL.

DRUG	GCN SEQ #'S	CRITERIA CODE
ADDERALL	004999, 005000, 005001, 005005	088
	005006, 005007, 005009, 005011,	
	034359	
CONCERTA	047318	149, 150

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

03/19/01. ADDED - 179.

NUMBER - 0211 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-01/29/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/29/01 COMPLETE-02/05/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0211

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.
THERE IS A NEW STRENGTH OF MOBIC (NSAID).

DRUG	GCN SEQ #'S	CRITERIA CODE
MOBIC	029157	141

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

03/19/01. ADDED - 179.

NUMBER - 0212 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-01/29/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/29/01 COMPLETE-02/05/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0212

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.
THERE IS A NEW 35 MG STRENGTH OF FOSAMAX.

DRUG	GCN SEQ #'S	CRITERIA CODE
FOSAMAX	047381	016, 017, 106, 122, 123

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

03/19/01. ADDED - 179.

NUMBER - 0213 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-02/21/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/21/01 COMPLETE-04/24/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0213

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.
THERE IS A NEW 7.5 MG STRENGTH OF ADDERALL.

DRUG	GCN SEQ #'S	CRITERIA CODE
ADDERALL	047131	026, 027, 087, 088

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

03/19/01. ADDED - 179.

NUMBER - 0214 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-02/21/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/21/01 COMPLETE-04/24/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0214

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.
THE GCN SEQUENCE NUMBER HAS CHANGED FOR SAIZEN 8.8 MG INJECTION.

DRUG	GCN SEQ #'S	CRITERIA CODE
SAIZEN 8.8 MG INJECTION	047131	026, 027, 087, 088

NOTE: THE OLD GCN SEQUENCE NUMBER 006582 IS STILL VALID.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

03/19/01. ADDED - 179.

NUMBER - 0215 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-02/21/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/21/01 COMPLETE-04/24/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0215

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ #'S	CRITERIA CODE
NIFEREX 150 FORTE	039734	096
PEG-INTRON KIT	045876,047704,047705, 047706	030,031,032,033,107,135

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

03/19/01. ADDED - 179.

NUMBER - 0216 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 1

ENTERED-03/19/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/19/01 COMPLETE-04/24/01 CLOSE-01/01/03

DESCRIPTION: CLOZAPINE FROM EAC ONLY

STATUS:

REQUEST CONTROL NUMBER: 0216

DESCRIPTION OF REQUEST:

CURRENTLY SCHEDULE 2 DRUGS AND CLOZAPINE AT EAC PRICE. PLEASE REMOVE CLOZAPINE (GENERIC CODES 18141 & 18142) FROM THE PRICING ALGORTIHM AND PAY THE LESSES OF EAC, MAC, FMAC, OR BILLED CHARGE. PER MEMORANDUM 01-08 (COPY ATTACHED) THIS WILL NEED TO BE EFFECTIVE APRIL 16, 2001.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

03/19/01. ADDED - 179.

NUMBER - 0217 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-05/01/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/01/01 COMPLETE-05/08/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0217

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ #'S	CC
ALLEGRA	027475, 031689, 033716, 045261	062
NEXIUM	047525, 047526	080, 083, 085, 114
PACERONE	047421	010

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

05/09/01. ADDED - 179.

NUMBER - 0218 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-05/09/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/09/01 COMPLETE-05/21/01 CLOSE-01/01/03

DESCRIPTION: CHANGES TO M1 EDIT

STATUS:

REQUEST CONTROL NUMBER: 0218

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ M1 (PATIENT IN MANAGED CARE PLAN). ADD TO SECTION 6 TO BYPASS THIS EXCEPTION IF GCN SEQUENCE NUMBER IS EQUAL TO 046315 AND BILLED WITH MED CERT CODE 2.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

05/09/01. ADDED - 179.

NUMBER - 0219 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-05/01/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/01/01 COMPLETE-05/08/01 CLOSE-01/01/03

DESCRIPTION: BYPASS MAC ON GOLD STD DRUGS

STATUS:

REQUEST CONTROL NUMBER: 0219

DESCRIPTION OF REQUEST:

PLEASE INITIATE A SYSTEM CHANGE TO PAY THE FOLLOWING GOLD STANDARD DRUGS (SEE ATTACHED LIST) AT EAC PRICE. THIS WILL AID THE PHARMACY AUTHORIZATION STAFF BY ELIMINATING THE NEED TO ISSUE AUTHORIZATION TO OVERRIDE MAC PRICES.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

05/09/01. ADDED - 179.

NUMBER - 0220 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-05/09/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/09/01 COMPLETE-06/29/01 CLOSE-01/01/03

DESCRIPTION: TAKE CHARGE TPL BYPASS

STATUS:

REQUEST CONTROL NUMBER: 0220

DESCRIPTION OF REQUEST:

TAKE CHARGE IS A SUBSET OF PLAN 254 'FAMILY PLANNING'. TAKE CHARGE CLIENTS ARE IDENTIFIED BY MATCH CODE M OR T, PROGRAM CODE G, AND ELIGIBILITY CODE P. PLEASE SET AN INDICATOR TO INDENTIFY TAKE CHARGE CLIENTS AND TO SYSTEM BYPASS THIRD PARTY INSURANCE.

SYSTEM SPECIFICATIONS:

THIS CSR IS WANTING AN INDICATOR TO IDENTIFY TAKE CHARGE CLIENTS AND BYPASS TPL.

THE CHANGE WILL USE THE 'CURR-YR-COPAY-IND' WHICH IS A FIELD NOT BEING USED. THE SCREEN IN RXV1101 WILL BE CHANGED TO ADD THE 'TAKE CHRG:' OPTION. PROGRAMS RXMR0131 AND RXMR0132 WILL BE CHANGED TO CHECK THE FIELD FOR THE 'Y' VALUE, AND MOVE THE VALUE TO THE FIELD IN THE RECIPIENT RECORD. ON THE MMIS CLAIMS SIDE, PROGRAMS BWMX3000 AND BWMX3005 WILL BE CHANGED TO CHECK THE PROGRAM, MATCH, AND MEDICAL CODE ON THE RECIPIENT RECORD AND MOVE THE INDICATOR TO THE CURR-YR-COPAY-IND OF THE PLAN FILE. PROGRAM RXOC0443, RECIPIENT ELIGIBILITY, WILL BE CHANGED TO BYPASS POSTING EXCEPTION 41.

05/09/01. ADDED - 179.

06/14/01. UPDATED - 521.

NUMBER - 0221 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-05/01/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/01/01 COMPLETE-05/08/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0221

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ #'S	CC
GEODON	047563, 047564, 047567, 047568	046
REMINYL	046925, 046926, 046927	022

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

05/09/01. ADDED - 179.

NUMBER - 0222 SUB BY- SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-05/18/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/18/01 COMPLETE-05/25/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0222

DESCRIPTION OF REQUEST:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ #'S	CC
ADDERALL	047132,047133	088
METADATE	047782	149,150

PLEASE DELETE THE FOLLOWING GCN SEQUENCE NUMBERS FROM THE EPA TABLE:

AFTER THE REVISIONS HAVE BEEN COMPLETED PLEASE GENERATE 2 COPIES OF A REPORT THAT IDENTIFIES THE FOLLOWING DATA ELEMENTS:

GCN SEQ # NDC DRUG NAME CRITERIA CODE

DELIVER THE REPORTS TO BIN 12, ATTENTION PATTY ORTH.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445. RAN GCNSEQRT.

05/18/01. ADDED - 179.

NUMBER - 0223 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-05/18/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/18/01 COMPLETE-06/04/01 CLOSE-01/01/03

DESCRIPTION: MANAGED CARE BYPASS CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0223

DESCRIPTION OF REQUEST:

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ M1 (PATIENT MANAGED CARE PLAN). ADD TO SECTION 7 TO BYPASS THIS EXCEPTION IF GENERIC CODE IS EQUAL TO 17070 (NALTREXONE HCL), 02881 AND 02882 (DISULFIRAM).

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

PROGRAM CHANGES WERE MADE TO RXOC0445 TO ADD A NEW '88' LEVEL FOR SECTION 7 CODES, AND TO CHECK THIS NEW GROUP OF CODES TO BE BYPASSED.

05/18/01. ADDED - 179.

06/04/01. UPDATED - 521.

NUMBER - 0224 SUB BY- PATTY SUB FOR- MARY PAGE- 1

ENTERED-06/04/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/04/01 COMPLETE-06/12/01 CLOSE-01/01/03

DESCRIPTION: DELETE FAMILY PLANNING CODES

STATUS:

REQUEST CONTROL NUMBER: 0224

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE POINT OF SALE PLAN FILE 254 (FAMILY PLANNING COVERAGE ONLY) AND DELETE THE FOLLOWING ITEMS THAT ARE NO LONGER COVERED:

G1A
W1V
W5B
W5C

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL

SYSTEM SPECIFICATIONS:

ON-LINE CHANGES WERE MADE BY PATTY ORTH

06/04/01. ADDED - 521.

06/11/01. UPDATED - 521.

NUMBER - 0225 SUB BY- PATTY SUB FOR- MMIS PAGE- 1

ENTERED-06/04/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/04/01 COMPLETE-06/11/01 CLOSE-01/01/03

DESCRIPTION: DAYS SUPPLY BYPASS CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0225

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 19 MISSING / INVALID DAYS SUPPLY. IN SECTION 'C' ADD 08250 AND 08251 (CYTOTEC) TO THE LIST OF GENERIC CODE NUMBERS THAT BYPASS THE EDIT. THIS PRODUCT IS AVAILABLE IN UNIT OF USE AND UNIT DOSE PACKAGING ONLY.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL

SYSTEM SPECIFICATIONS:

CODES 08250 AND 02851 WERE ADDED TO THE LIST OF BYPASS CODES CONTAINED IN WH-130-NO-DAYS-SUPPLY IN RXOC0445.

06/04/01. ADDED - 521.

06/11/01. UPDATED - 521.

NUMBER - 0226 SUB BY- PATTY SUB FOR- JOHNA PAGE- 1

ENTERED-06/28/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/28/01 COMPLETE-09/11/01 CLOSE-01/01/03

DESCRIPTION: MODIFY EXCEPTION 70 LOGIC

STATUS:

REQUEST CONTROL NUMBER: 0226

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 70 (NDC NOT COVERED).
IN SECTION 2 (THE HCFA REBATE INDICATOR IS 'N', EXCEPT FOR);
SUBSECTION B (OVER THE COUNTER DRUG CLASS); ADD THE FOLLOWING
EXCEPTIONS LISTED BY GENERIC CODE NUMBER:

16965 ACETAMINOPHEN 500MG
61375 THICK-IT
94327 VITAMIN C
03733 CALCIUM CARBONATE 500MG CHEWABLE
16501 GLUCOSAMINE
94534 VITAMIN E 400IU
27942 SUSTACAL/BOOST
95661 MULTIVITAMINS W/IRON
78283 COSAMIN DS
55790 MG & PROTEIN/AMINO ACID
95500 MULTIVITAMINS
16964 ACETAMINOPHEN 325MG
04091 MAGNESIUM OXIDE
95510 MULTIVITAMINS
16701 ASPRIN 325MG
06400 ENSURE

THE RETURN MESSAGE FOR THESE NON-SIGNED, OVER THE COUNTER PRODUCTS
WILL BE 'NOT HCFA CONTRACT'.
THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

THE GENERIC CODES SPECIFIED WERE ADDED TO PROGRAM RXOC0445 AND
TO THE EXCEPTION TABLE DOCUMENT.

NUMBER - 0226 SUB BY- PATTY SUB FOR- JOHNA PAGE- 2

ENTERED-06/28/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/28/01 COMPLETE-09/11/01 CLOSE-01/01/03

06/28/01. ADDED - 521.

09/11/01. UPDATED - 521.

NUMBER - 0227 SUB BY- PATTY SUB FOR- AYUNI PAGE- 1

ENTERED-06/28/01 PRIORITY- EST-DAYS-000 REQD-07/01/01

BEGIN-06/28/01 COMPLETE-06/29/01 CLOSE-01/01/03

DESCRIPTION: DISPENSING FEE FOR 2001

STATUS:

REQUEST CONTROL NUMBER: 0227

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE IMPLEMENT THE FOLLOWING FEE RATE INCREASES TO THE POINT
OF SALE SYSTEM EFFECTIVE WITH DATE OF SERVICE JULY 1, 2001:

HIGH-VOLUME PHARMACIES	4.14
MID-VOLUME PHARMACIES	4.44
LOW-VOLUME PHARMACIES	5.12
UNIT DOSE SYSTEMS	5.12

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

06/28/01. ADDED - 521.

NUMBER - 0228 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-07/23/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/23/01 COMPLETE-07/23/01 CLOSE-01/01/03

DESCRIPTION: ADD TO M1 MANAGED CARE EXCEP

STATUS:

REQUEST CONTROL NUMBER: 0228

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

07/23/01. ADDED - 179.

NUMBER - 0229 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-07/23/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/23/01 COMPLETE-10/10/01 CLOSE-01/01/03

DESCRIPTION: OXYCONTIN 330 MG/DAY LIMIT

STATUS:

REQUEST CONTROL NUMBER: 0229

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE INVESTIGATE SYSTEM CAPABILITY TO REQUIRE PRIOR AUTHORIZATION IF CLIENT EXCEEDS 300 MG PER DAY (QUANTITY DIVIDED BY DAYS SUPPLY) ON CURRENT CLAIM OR IN HISTORY (34 DAYS BILLED AHEAD/BEHIND LIKE REFILL TOO SOON AUDIT) OF OXYCONTIN SA IDENTIFIED BY THE FOLLOWING GENERIC CODE NUMBERS:

16282
16283
16284
16286
92459

HOSPICE CLIENTS (PLAN 253) WILL BE BYPASSED.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

ADDENDUM AS OF AUGUST 20, 2001:

IF CURRENT CLAIM BILLED IS MORE THAN 2 TABLETS PER DAY (QUANTITY DIVIDED BY DAYS SUPPLY), FAIL DUR/REJ 75 (PRIOR AUTHORIZATION REQUIRED).

ADDENDUM AS OF AUGUST 22, 2001:

PLEASE IMPLEMENT THIS CSR EFFECTIVE OCTOBER 1, 2001.

ADDENDUM AS OF OCTOBER 3, 2001:

PLEASE BYPASS PCCM CLIENTS (PLAN 257).

NUMBER - 0229 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 2

ENTERED-07/23/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/23/01 COMPLETE-10/10/01 CLOSE-01/01/03

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES WERE MADE TO RXOC0445 TO ACCOMMODATE THIS CHANGE.

07/23/01. ADDED - 179.

NUMBER - 0230 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-07/23/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/23/01 COMPLETE-07/23/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0230

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

07/23/01. ADDED - 179.

NUMBER - 0231 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-07/23/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/23/01 COMPLETE-09/11/01 CLOSE-01/01/03

DESCRIPTION: CHANGE EXACT DUP TO GCN SEQ NUM

STATUS:

REQUEST CONTROL NUMBER: 0231

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 83 (DUPLICATE CLAIM). CURRENTLY THE LOGIC LOOKS FOR A MATCH OF THE FIRST FOUR DIGITS OF THE GENERIC CODE. SINCE THIS MATCH NO LONGER ENSURES IT TO BE THE SAME DRUG, PLEASE CHANGE THE LOGIC TO LOOK FOR A MATCH OF THE COMPLETE SIX DIGIT GCN SEQUENCE NUMBER.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

PROGRAM RXOC0446 (DUP CHECK) WAS MODIFIED TO USE THE ENTIRE 5-DIGIT GENERIC CODE INSTEAD OF THE FIRST 4 DIGITS. THE GCN SEQUENCE NUMBER COULD NOT BE USED BECAUSE IT IS NOT CARRIED ON THE POS CLAIM RECORD. THE CLAIM RECORD LAYOUT WAS MODIFIED TO ADD THE GCN SEQUENCE NUMBER AND CODE WAS ADDED TO RXOC0445 TO AUGMENT THE CLAIM FROM THE DRUG RECORD.

07/23/01. ADDED - 179.

08/15/01. UPDATED - 521.

NUMBER - 0232 SUB BY- PATTY ORTH SUB FOR- CONNIE RIDDLE PAGE- 1

ENTERED-07/23/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/23/01 COMPLETE-08/17/01 CLOSE-01/01/03

DESCRIPTION: DRUG REBATE INFO ON DISK

STATUS:

REQUEST CONTROL NUMBER: 0232

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

SYSTEM SPECIFICATIONS:

MODIFY JCL TO COPY TAPES TO DISK

07/23/01. ADDED - 179.

NUMBER - 0233 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-07/23/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/23/01 COMPLETE-07/23/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0233

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

07/23/01. ADDED - 179.

NUMBER - 0234 SUB BY- PATTY ORTH SUB FOR- CONNIE RIDDLE PAGE- 1

ENTERED-08/27/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/27/01 COMPLETE-09/21/01 CLOSE-01/01/03

DESCRIPTION: EXCLUDE NDC'S FROM REBATE

STATUS:

REQUEST CONTROL NUMBER: 0234

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

SYSTEM SPECIFICATIONS:

ADD NEW NDC'S TO 88 LEVEL WH-000-BYPASS-NDC. CREATE A ONE TIME JOB TO REMOVE THESE NDC'S FROM THE PREVIOUS DRUG REBATE CLAIMS FILES.

08/27/01. ADDED - 179.

09/14/01. UPDATE- 550.

NUMBER - 0235 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-08/27/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/27/01 COMPLETE-09/11/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0235

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

SYSTEM SPECIFICATIONS:

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ#	CC
AGGRENOX	040303	037
RENA-VITE	044184	096

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

08/27/01. ADDED - 179.

NUMBER - 0236 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-08/27/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/27/01 COMPLETE-09/11/01 CLOSE-01/01/03

DESCRIPTION: BYPASS EXCEP 18 FOR PHS PROVS

STATUS:

REQUEST CONTROL NUMBER: 0236

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

SYSTEM SPECIFICATIONS:

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ 18 (MISSING OR INVALID METRIC QUANTITY). BYPASS THIS EXCEPTION IF CLAIM BILLED BY ONE OF THE FOLLOWING PHS REBATE EXEMPT PROVIDERS:

4911702	4912463	4913073	4914025	4914493
4915558	4915736	4915849	4915851	4922818
4923618	4924141	4924153	4924280	4925408
4925725	4927123	4927337		

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

08/27/01. ADDED - 179.

NUMBER - 0237 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-08/27/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/27/01 COMPLETE-09/11/01 CLOSE-01/01/03

DESCRIPTION: CHANGES TO MANAGED CARE EDIT

STATUS:

REQUEST CONTROL NUMBER: 0237

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ M1 (PATIENT IN MANAGED CARE PLAN). ADD TO SECTION 5 (PROTEASE INHIBITORS) TO BYPASS THIS EXCEPTION IF GCN SEQUENCE NUMBER IS EQUAL TO 046601.

SYSTEM SPECIFICATIONS:

THE CHANGES WERE MADE TO RXOC0445.

08/27/01. ADDED - 179.

NUMBER - 0238 SUB BY- PATTY ORTH SUB FOR- JOHNNA DODGE PAGE- 1

ENTERED-08/28/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/28/01 COMPLETE-09/11/01 CLOSE-01/01/03

DESCRIPTION: ADD GCN SEQ NUMBER TO EPA TABLE

STATUS:

REQUEST CONTROL NUMBER: 0238

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ#	CC
NORDITROPIN CARTRIDGE	044345	045, 124

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

THE ENTRIES WERE ADDED TO RXOC0445, RXMF6200, AND RXMFFORM.

08/28/01. ADDED - 269.

09/11/01. UPDATED - 521.

NUMBER - 0239 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-09/12/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/12/01 COMPLETE-09/13/01 CLOSE-01/01/03

DESCRIPTION: CAPTURE DEA NUMBER ON POS CLAIM

STATUS:

REQUEST CONTROL NUMBER: 0239

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE NECESSARY SYSTEM CHANGES TO CAPTURE A DEA NUMBER IN THE PRESCRIBING PROVIDER NUMBER FIELD. DO NOT DEFAULT TO THE DUMMY NUMBER, RETAIN THE DEA NUMBER ON THE POS CLAIM. THIS IS NECESSARY TO BEGIN THE THERAPEUTIC CONSULTATION SERVICE (TCS) PROGRAM.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0440 TO CAPTURE DEA NUMBER ON PHARMACY CLAIMS.

09/12/01. ADDED - 179.

NUMBER - 0240 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-09/26/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/26/01 COMPLETE-10/05/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0240

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODE TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ	CC
ZYRTEC - D	048415	061

PLEASE DELETE THE FOLLOWING AREDIA AND VITAMIN D GCN SEQUENCE NUMBERS FROM THE EPA TABLE:

002168
002169
002172
015230
015231
015651
015653
016428
022531
022532

SYSTEM SPECIFICATIONS:

THE NEW GCN/CC WAS ADDED TO RXOC0445, RXMF6200, AND RXMFFORM. THE OLD GCN NUMBERS WERE REMOVED FROM RXOC0445, RXMF6200, AND RXMFFORM.

NUMBER - 0240 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 2

ENTERED-09/26/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/26/01 COMPLETE-10/05/01 CLOSE-01/01/03

09/26/01. ADDED - 179.

10/03/01. UPDATED - 521.

NUMBER - 0241 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-10/10/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/10/01 COMPLETE-10/12/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0241

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ	CC
REMINYL	048437	022
ZYPREXA ZYDIS	047285,047286	054, 104

SYSTEM SPECIFICATIONS:

THESE CODES WERE ADDED TO NEW COPY MEMBERS WT009010 (RXOC0445) AND WH010088 (RXMFFORM AND RXMF6200).

10/10/01. ADDED - 179.

10/10/01. UPDATED - 521.

NUMBER - 0242 SUB BY- PATTY ORTH SUB FOR- JOHNA DODGE PAGE- 1

ENTERED-10/23/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/23/01 COMPLETE-11/02/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0242

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ	CC
AREDIA	016428, 022531, 022532	011
ZOMETA	047262	011

SYSTEM SPECIFICATIONS:

THESE CODES WERE ADDED TO NEW COPY MEMBERS WT009010 (RXOC0445) AND WH010088 (RXMFFORM AND RXMF6200).

10/23/01. ADDED - 179.

10/29/01. UPDATED - 521.

NUMBER - 0243 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-11/15/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/15/01 COMPLETE-12/19/01 CLOSE-01/01/03

DESCRIPTION: POS EXCEPTION TABLE ON COLD

STATUS:

REQUEST CONTROL NUMBER: 0243

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ASSIGN STANDARD REPORT HEADINGS TO THE POINT-OF-SALE EXCEPTION CODE CROSS-REFERENCE AND ADD IT TO THE COLD SYSTEM.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP AND DIANA REITZ.

SYSTEM SPECIFICATIONS:

JOB RXMFDOCC WAS CREATED AND SCHEDULED TO RUN ON THE FIRST DAY OF EACH MONTH TO GENERATE THE POINT-OF-SALE EXCEPTION CODE CROSS-REFERENCE REPORT TO COLD.

11/15/01. ADDED - 179.

12/19/01. UPDATED - 521.

NUMBER - 0244 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-11/19/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/19/01 COMPLETE-11/28/01 CLOSE-01/01/03

DESCRIPTION: ADD GCN TO RXMF6200-R002

STATUS: IN PROCESS

REQUEST CONTROL NUMBER: 0244

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE RXMF6200-R002 'DRUG COVERAGE UPDATE REPORT' AND ADD GENERIC CODE NUMBER.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

PROGRAM RXMF6200 WAS MODIFIED TO INCLUDE THE GENERIC CODE IN REPORT R002. THE FIELD WAS ADDED TO THE REPORT DEFINITION AND CODE ADDED TO MOVE THE FIELD FROM THE RECORD TO THE REPORT.

11/19/01. ADDED - 521.

11/28/01. UPDATED - 521.

NUMBER - 0245 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 1

ENTERED-11/19/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/19/01 COMPLETE-11/28/01 CLOSE-01/01/03

DESCRIPTION: MASS ADJUST RANITIDINE

STATUS:

REQUEST CONTROL NUMBER: 0245

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

IN ORDER TO PAY CLAIMS AT THE CORRECT PRICE, PLEASE INITIATE A MASS ADJUSTMENT FOR DATES OF SERVICE 10/01/01 THROUGH 11/13/01 FOR THE FOLLOWING DRUGS. ADJUST ONLY THOSE CLAIMS PAID AT A MAC PRICE.

DRUG	GCN'S
FAMOTIDINE	46430, 46431
RANITIDINE	19551, 19552

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

IN ORDER TO IMPLEMENT THIS CSR, THE FOLLOWING WILL NEED TO BE DONE:

- O RUN THE UTILITY PROGRAM IN CTEC820.WASH.Y2K(WAAP245P) WHICH SHOULD PULL ALL THE DRUG RECORDS WITH THE GCN'S LISTED IN THE CSR AND CREATE A REPORT OF THE CURRENT PRICES.

- O RUN THE JOB IN CTEC820.WASH.JCL(RX5000IA) LOAD THE SELECTED DRUG RECORDS TO A TEMPORARY VSAM DRUG FILE. USE THE OUTPUT FILE FROM WAAP250P FOR THE INPUT FILE TO LOAD TO THE VSAM FILE.

- O RUN PROGRAM RXMASADJ FROM JCL RXMASADJ IN CTEC820.WASH.Y2K AFTER SETTING THE PARAMETERS FOR FDOS OF 13789 (10/01/01) AND LDOS OF 13832 (11/13/01) AND 'Y' FOR CHRGSRC WHICH WILL ONLY PULL CLAIMS WITH AN ALLOWED CHARGE SOURCE OF 'W'.

NUMBER - 0245 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 2

ENTERED-11/19/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/19/01 COMPLETE-11/28/01 CLOSE-01/01/03

- O RUN JCL BWMX1520 FROM WASH.PTEST.JOBLIB. THIS JOB WILL SUBMIT THE CLAIMS WITH A R490 TRANSACTION TO BE ADJUSTED.

- O VERIFY THAT THE TRANSACTIONS HAVE GONE THRU BY LOOKING AT FILE WARX.PPROD.C4050IA.DATA. IF IT IS EMPTY, THEN THE TRANSACTIONS HAVE ALL BEEN PROCESSED.

- O CHECK THE RESULTS BY BRINGING UP THE CLAIMS ON LINE BY PIC. TO DO THIS, FIND SOME PICS OF CLAIMS THAT SHOULD BE ADJUSTED BY LOOKING IN THE CURRENT GEN OF FILE WASH.PPROD.X1520SA.DATA. SIGN ON TO THE POS SYSTEM AND ENTER THE PIC ALONG WITH THE GROUP NUMBER 7850 AND THE DATE RANGE. LOOK FOR THE REVERSAL AND NEW CLAIM AMOUNTS.

- O ALTER JCL CTEC820.WASH.JCL(WAAPWARX) TO CHECK FOR THE CURRENT DATE OF ADJUDICATION AND RUN IT. LOOK AT TALLY 2 TO DETERMINE THE COST (OR SAVINGS) OF THE MASS ADJUSTMENT. IF THIS IS RUN AFTER PAYMENT IS DONE, THE CURRENT GEN OF WASH.PPROD.X4070SA.DATA CAN BE USED FOR INPUT, OTHERWISE, FILE WARX.PPROD.C4070IA.DATA MUST BE USED.

- O ALTER PROGRAM BWMX5000 IN SECTION S493 AND S498 TO POST THE CORRECT EOB CODE TO THE CLAIMS AND LOOK FOR THE CORRECT DATE OF ADJUDICATION. FOR THESE REQUESTS, EOB CODE 421 IS USED WHEN CLAIM IDENTIFIER IS 1 AND 444 IS USED WHEN CLAIM ISENTIFIER IS 2.

11/19/01. ADDED - 521.

12/17/01. UPDATED - 820.

NUMBER - 0246 SUB BY- SUB FOR- PAGE- 1

ENTERED-11/19/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/19/01 COMPLETE-11/20/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0246

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THE GCN SEQUENCE NUMBER WILL CHANGE FOR PEG-INTRON WITH THE NEXT DRUG FILE UPDATE PER FDB/ACS. PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

GCN SEQ	CC
045877, 045878, 048814, 048815	030, 031, 032, 033, 107, 135

SYSTEM SPECIFICATIONS:

THESE CODES WERE ADDED TO COPY MEMBERS WT009010 (RXOC0445) AND WH010088 (RXMFFORM AND RXMF6200).

11/19/01. ADDED - 521.

11/19/01. UPDATED - 521.

NUMBER - 0247 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-11/23/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/23/01 COMPLETE-11/28/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0247

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ	CC
ADDERALL XR	048701, 048702, 048703	094
CELEBREX	041285, 041286	147
NORDITROPIN	044346	045, 124

SYSTEM SPECIFICATIONS:

THESE CODES WERE ADDED TO COPY MEMBERS WT009010 (RXOC0445) AND WH010088 (RXMFFORM AND RXMF6200).

11/23/01. ADDED - 179.

11/28/01. UPDATED - 521.

NUMBER - 0248 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 1

ENTERED-12/03/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/03/01 COMPLETE-12/03/01 CLOSE-01/01/03

DESCRIPTION: STOP EAC UPDATE - 88 BAYER NDCS

STATUS:

REQUEST CONTROL NUMBER: 0248

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE INITIATE A SYSTEM STOP FOR DRUG FILE UPDATES TO THE EAC/AWP FIELD FOR THE ATTACHED 88 BAYER CORPORATION NDC'S. THIS IS PER BAYER'S AGREEMENT WITH THE DEPARTMENT OF JUSTICE.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

ADD AN 88 LEVEL AND CHECK FOR THE 88 NDCS IN PROGRAM RXMF6200.

12/04/01. ADDED - 179.

NUMBER - 0249 SUB BY- PATTY ORTH SUB FOR- SIRI CHILDS PAGE- 1

ENTERED-12/09/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/09/01 COMPLETE-12/09/01 CLOSE-01/01/03

DESCRIPTION: RETURN TCS MESSAGE ON PAID CLMS

STATUS:

REQUEST CONTROL NUMBER: 0249

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO PROVIDE PHARMACISTS WITH ADVANCE NOTIFICATION REGARDING THE THERAPUETIC CONSULTATION SERVICE (TCS), PLEASE INITIATE A RETURN MESSAGE TO PROVIDERS AS FOLLOWS:

'4-BRAND LIMIT/PREFERRED DRUG LIST WILL BE EFFECTIVE JAN 2002-SEE DSHS MEMO 01-73'.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

NEW MESSAGE ADDED TO RXOC0417.

12/16/01. ADDED - 179.

NUMBER - 0250 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-12/16/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/16/01 COMPLETE-12/19/01 CLOSE-01/01/03

DESCRIPTION: CHANGES TO EXC 19 - DAYS SUPPLY

STATUS:

REQUEST CONTROL NUMBER: 0250

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 19 MISSING/INVALID DAYS SUPPLY. IN SECTION "C" ADD 26812 (NORVIR) AND 84590 (ZOLADEX) TO THE LIST OF GENERIC CODE NUMBERS THAT BYPASS THE EDIT.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CODES 26812 AND 84590 WERE ADDED TO THE LIST OF BYPASS CODES CONTAINED IN WH-130-NO-DAYS-SUPPLY IN RXOC0445.

12/16/01. ADDED - 179.

12/17/01. UPDATED - 521.

NUMBER - 0251 SUB BY- PATTY ORTH SUB FOR- JOHNA ZIEGLER PAGE- 1

ENTERED-12/18/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/18/01 COMPLETE-12/19/01 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0251

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ	CC
PROTONIX 20MG	039545	081,082,083,084,085,086,114,115,126

SYSTEM SPECIFICATIONS:

THESE CODES WERE ADDED TO COPY MEMBERS WT009010 (RXOC0445) AND WH010088 (RXMFFORM AND RXMF6200).

12/18/01. ADDED - 179.

12/18/01. UPDATED - 521.

NUMBER - 0252 SUB BY- SUB FOR- PAGE- 1

ENTERED-12/21/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/21/01 COMPLETE-01/08/02 CLOSE-01/01/03

DESCRIPTION: MODIFY EXCEPTION 70 LOGIC

STATUS:

REQUEST CONTROL NUMBER: XXX

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 70 (NDC NOT COVERED).
IN SECTION 2 (THE HCFA REBATE INDICATOR IS 'N', EXCEPT FOR);
SUBSECTION B (OVER THE COUNTER DRUG CLASS); ADD THE FOLLOWING
EXCEPTIONS LISTED BY GENERIC CODE NUMBER:

03421	03422	03423	03424	03426	03427	03428
03434	03721	03722	03723	04030	04092	04281
04695	06270	07839	07950	08371	08390	09240
10202	11542	11560	11592	16713	16913	20481
22230	23810	24090	28360	28380	28780	28820
29191	30942	32591	33560	35530	35630	35631
35930	36589	46512	53490	53495	57133	57136
59780	60201	63575	63910	66610	80609	87639
93393	94240	94433	94530	94976	95033	95176
95391	95540	95546	95601	95860	96890	

THE RETURN MESSAGE FOR THESE NON-SIGNED, OVER THE COUNTER PRODUCTS
WILL BE 'NOT HCFA CONTRACT'.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL

SYSTEM SPECIFICATIONS:

ADDED TO 88-LEVEL WH-130-OTC-GCN IN PROGRAM RXOC0445. ALSO ADDED
TO EXCEPTION TABLE DOCUMENT.

12/21/01. ADDED - 521.

NUMBER - 0252 SUB BY- SUB FOR- PAGE- 2

ENTERED-12/21/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/21/01 COMPLETE-01/08/02 CLOSE-01/01/03

01/03/02. UPDATED - 521.

NUMBER - 0253 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-12/21/01 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/21/01 COMPLETE-01/08/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0253

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ	CC
DIFFERIN 0.1% PLEDGETS	045146	055,097

SYSTEM SPECIFICATIONS:

THESE CODES WERE ADDED TO COPY MEMBERS WT009010 (RXOC0445) AND WH010088 (RXMFFORM AND RXMF6200).

12/21/01. ADDED - 521.

01/03/02. UPDATED - 521.

NUMBER - 0254 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-02/18/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/18/02 COMPLETE-02/18/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0254

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE DRUG HYDROXOCOBALAMIN TO THE EPA TABLE. THE GCN SEQUENCE NUMBER IS 002347 AND THE CORRESPONDING CRITERIA CODES ARE 075, 076, AND 077. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO WH010088 AND WT009010 COPY MEMBERS AND PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 RECOMPILED.

02/18/02. ADDED - 179.

NUMBER - 0255 SUB BY- PATTY ORTH SUB FOR- SIRI CHILDS PAGE- 1

ENTERED-01/15/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/15/02 COMPLETE-01/31/02 CLOSE-01/01/03

DESCRIPTION: TCS NON-PREFERRED INDICATOR

STATUS:

REQUEST CONTROL NUMBER: 0255

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

IN ORDER TO IMPLEMENT THE THERAPEUTIC CONSULTATION SERVICE (TCS) PREFERRED DRUG LIST, PLEASE UPDATE THE DRUG FILE AND CHANGE THE FOLLOWING ITEMS AS INDICATED TO NON-PREFERRED (INDICATOR = X):

SYSTEM SPECIFICATIONS:

CHANGES MADE TO RXMFFORM.

02/18/02. ADDED - 179.

NUMBER - 0256 SUB BY- PATTY ORTH SUB FOR- CONNIE RIDDLE PAGE- 1

ENTERED-02/18/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/18/02 COMPLETE-03/05/02 CLOSE-01/01/03

DESCRIPTION: PAGE BREAK ON DRUG REBATE RPTS

STATUS:

REQUEST CONTROL NUMBER: 0256

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO FACILITATE RECORD KEEPING IN DRUG REBATE, PLEASE ADD A PAGE BREAK AFTER EACH LABELER ON THE LABELER ONLINE ACTIVITY REPORT (BWMQ5600-R001), AND AFTER EACH NDC ON THE DRUG REBATE FILE ONLINE UPDATE ACTIVITY (BWMQ5100-R001).

SYSTEM SPECIFICATIONS:

ADD CODE IN BWMQ5600 AND BWMQ5100 TO ALLOW FOR PAGE BREAKS FOR THE REQUESTED REPORTS

02/18/02. ADDED - 179.

02/26/02. UPDATED- 516.

NUMBER - 0257 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-01/20/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/20/02 COMPLETE-01/31/02 CLOSE-01/01/03

DESCRIPTION: REMOVE BID DOSING EDITS

STATUS:

REQUEST CONTROL NUMBER: 0257

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO FACILITATE THERAPEUTIC CONSULTATION SERVICE, PLEASE REMOVE FROM DUR REJECT CODE 76 (PLAN LIMITATIONS EXCEEDED) THE 'MORE THAN ONE TABLET/CAPSULE PER DAY' LIMITS OUTLINED IN POS CSR 169 AND 203 FOR ACIPHEX, PREVACID, PRILOSEC, AND PROTINIX.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO RXOC0445.

02/18/02. ADDED - 179.

NUMBER - 0258 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-02/18/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/18/02 COMPLETE-02/18/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0258

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ	CC
CLARINEX	047763	061, 062
MIRALAX PACKET	034313	021

SYSTEM SPECIFICATIONS:

CHANGES MADE TO WH010088 AND WT009010 COPY MEMBERS AND PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 RECOMPILED.

02/18/02. ADDED - 179.

NUMBER - 0259 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-02/18/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/18/02 COMPLETE-02/18/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0259

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ	CC
FOCALIN	048982-4	149, 150

SYSTEM SPECIFICATIONS:

CHANGES MADE TO WH010088 AND WT009010 COPY MEMBERS AND PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 RECOMPILED.

02/18/02. ADDED - 179.

NUMBER - 0260 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-02/18/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/18/02 COMPLETE-02/18/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0260

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ	CC
BEXTRA	049795, 049798	078, 079
CLAINEX	044763	063
METADATE ER	004029, 044072	149, 150

ADDENDUM AS OF FEBRUARY 19, 2002:

PLEASE REMOVE METADATE ER LISTED ABOVE FROM THE EPA TABLE.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO WH010088 AND WT009010 COPY MEMBERS AND PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 RECOMPILED.

02/18/02. ADDED - 179.

NUMBER - 0261 SUB BY- PATTY ORTH SUB FOR- MARY NEUKOM PAGE- 1

ENTERED-02/21/02 PRIORITY- EST-DAYS-000 REQD-03/01/02

BEGIN-02/21/02 COMPLETE-03/01/02 CLOSE-01/01/03

DESCRIPTION: MODIFY EXCEPTION 70 LOGIC

STATUS:

REQUEST CONTROL NUMBER: 0261

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 70 (NDC NOT COVERED).
IN SECTION 2 (THE HCFA REBATE INIDICATOR IS "N", EXCEPT FOR) ADD A
NEW SECTION FOR GENERIC CODE NUMBER 93226. MAA WILL COVER THESE
EMERGENCY CONTRACEPTIVE PILLS WITHOUT A SIGNED REBATE AGREEMENT.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

A NEW 88 LEVEL WAS AND BYPASS ADDED TO RXOC0445.

02/21/02. ADDED - 269.

02/28/02. UPDATED - 521.

NUMBER - 0262 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-03/05/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/05/02 COMPLETE-03/11/02 CLOSE-01/01/03

DESCRIPTION: CHANGES TO DUR/REJ 19

STATUS:

REQUEST CONTROL NUMBER: 0262

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 19 MISSING/INVALID DAYS SUPPLY. IN SECTION 'C' ADD 14978 AND 14979 (TRACLEER) TO THE LIST OF GENERIC CODE NUMBERS THAT BYPASS THE EDIT.

SYSTEM SPECIFICATIONS:

GENERIC CODE NUMBERS 14978 AND 14979 WERE ADDED TO WH-130-NO-DAYS-SUPPLY IN RXOC0445.

03/05/02. ADDED - 179.

03/07/02. UPDATED - 521.

NUMBER - 0263 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-03/05/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/05/02 COMPLETE-03/11/02 CLOSE-01/01/03

DESCRIPTION: CHANGES TO DUR/REJ 79

STATUS:

REQUEST CONTROL NUMBER: 0263

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ 79 - REFILL TOO SOON. BYPAS THIS EXCEPTION IF COMPOUND INDICATOR 2 AND THERAPEUTIC CLASS IS EQUAL TO C0B, C1B, C5J, C5K, C5L, C5M, C5O, C5R, U63, U6F, U6H, U6J, U6K, U6L, U6N, U6S, U6Y, U6W, U6X, U7A, U7B, U7C, OR Z3G.

SYSTEM SPECIFICATIONS:

ADDED CODE IN S170 OF RXOC0446 TO CHECK THE COMPOUND INDICATOR AND THEREPEUTIC CLASS. BYPASS 'REFILL-TOO-SOON' IF CONDITION EXISTS.

03/05/02. ADDED - 179.

03/07/02. UPDATED - 521.

NUMBER - 0264 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-03/05/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/05/02 COMPLETE-03/11/02 CLOSE-01/01/03

DESCRIPTION: CHANGES TO DUR/REJ 83

STATUS:

REQUEST CONTROL NUMBER: 0264

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ 83 - DUPLICATE CLAIM. IN SECTION 3 ADD U6W AND U6X (BULK CHEMICALS) TO THE LIST OF THERAPEUTIC CLASS CODES THAT BYPASS IF COMPOUND INDICATOR EQUALS 2.

SYSTEM SPECIFICATIONS:

ADDED U6W AND U6X TO WW-010-COMP-BYPASS IN RXOC0446.

03/05/02. ADDED - 179.

03/07/02. UPDATED - 521.

NUMBER - 0265 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-03/05/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/05/02 COMPLETE-03/11/02 CLOSE-01/01/03

DESCRIPTION: CHANGES TO DUR/REJ 18

STATUS:

REQUEST CONTROL NUMBER: 0265

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 18 - MISSING/INVALID METRIC QUANTITY. ADD 4925357 PUYALLUP TRIBAL HEALTH TO THE LIST OF PHS REBATE EXEMPT PROVIDERS THAT BYPASS THE VARIANCE.

SYSTEM SPECIFICATIONS:

PROVIDER 4925357 WAS ADDED TO WH-210-PHS-EXEMPT IN RXOC0445.

03/05/02. ADDED - 179.

03/07/02. UPDATED - 521.

NUMBER - 0266 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-03/29/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/29/02 COMPLETE-04/01/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH REQUEST

STATUS:

REQUEST CONTROL NUMBER: 0266

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ	CC
REBIF	050035	12
REBIF	050039	12

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO WH010088 AND WT009010 COPY MEMBERS AND PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 RECOMPILED.

03/29/02. ADDED - 179.

NUMBER - 0267 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 1

ENTERED-03/29/02 PRIORITY- EST-DAYS-000 REQD-05/01/02

BEGIN-03/29/02 COMPLETE-05/01/02 CLOSE-01/01/03

DESCRIPTION: PAY SPACERS/PEAK FLOW METERS

STATUS:

REQUEST CONTROL NUMBER: 0267

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

IN ORDER TO ALLOW PEAK FLOW METERS AND SPACERS TO BE BILLED ON THE POS SYSTEM, PLEASE INITIATE THE FOLLOWING POS SYSTEM CHANGED. CHANGE THE FORMULARY COVERAGE INDICATOR TO 'C' (COVERED) AND APPLY THE ASSOCIATED MAC PRICES TO THE DRUG FILE FOR THE NDC'S ON THE ATTACHED LIST. THESE NDC'S WILL BE REIMBURSED AT THE MAC PRICE OR THE SUBMITTED CHARGE, WHICHEVER IS LESS AND WILL NOT BE REIMBURSED A DISPENSING FEE.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445 TO ONLY LOOK AT MAC PRICES FOR LISTED DRUGS.

03/29/02. ADDED - 179.

NUMBER - 0268 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-04/24/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-04/24/02 COMPLETE-05/01/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0268

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THE GCN SEQUENCE NUMBER HAS CHANGED FOR AVONEX. PLEASE ADD GCN SEQUENCE NUMBER 049812 TO THE EPA TABLE WITH CRITERIA CODE 012. PLEASE DELETE THE OLD GCN SEQUENCE NUMBER 026485 FROM THE EPA TABLE.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445, RXMFFORM, AND RXMF6200.

04/24/02. ADDED - 179.

NUMBER - 0269 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-04/28/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-04/28/02 COMPLETE-04/28/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0269

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THERE IS A NEW STENGTH OF CONCERTA. PLEASE ADD GCN SEQUENCE NUMBER 050172 WITH CRITERIA CODES 149 AND 150 TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445, RXMFFORM, AND RXMF6200.

06/17/02. ADDED - 179.

NUMBER - 0270 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-05/28/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/28/02 COMPLETE-05/28/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0270

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE REMOVE CRITERIA CODE 141 FROM GCN SEQUENCE NUMBER 012080 (IBUPROFEN SUSPENSION) IN THE EPA TABLE. THE REMAINING CRITERIA CODES 038, 073, AND 074 ARE STILL VALID.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445, RXMFFORM, AND RXMF6200.

06/17/02. ADDED - 179.

NUMBER - 0271 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-05/28/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/28/02 COMPLETE-05/28/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES - VIOXX

STATUS:

REQUEST CONTROL NUMBER: 0271

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ	CC
VIOXX	042635 - 042638	12

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445, RXMFFORM, AND RXMF6200.

06/17/02. ADDED - 179.

NUMBER - 0272 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-06/17/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/17/02 COMPLETE-06/18/02 CLOSE-01/01/03

DESCRIPTION: REMOVE FROM EXPEDITED AUTH

STATUS:

REQUEST CONTROL NUMBER: 0272

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE REMOVE THE FOLLOWING GCN SEQUENCE NUMBERS FROM THE EPA TABLE:

DRUG	GCN SEQ
ACIPHEX	040941
PROTONIX	027462, 039545
NEXIUM	047525, 047526
PREVACID	030106, 030107
PRILOSEC	033530, 043136, 043137
NIFEREX	039734

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445, RXMFFORM, AND RXMF6200.

06/17/02. ADDED - 179.

NUMBER - 0273 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-06/17/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/17/02 COMPLETE-06/18/02 CLOSE-01/01/03

DESCRIPTION: UPDATE 3/5 FILL LOGIC

STATUS:

REQUEST CONTROL NUMBER: 0273

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 76 - PLAN LIMITS EXCEEDED. ADD W1W, W1X, W1Y, W1Z TO THE LIST OF THERAPEUTIC CLASS CODES IN SECTION 3 OF THE 5TH RX WITHIN SAME CALENDAR MONTH AND TO SECTION 3 OF THE 3RD RX WITHIN SAME CALENDAR MONTH.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445

06/17/02. ADDED - 179.

NUMBER - 0274 SUB BY- PATTY ORTH SUB FOR- AYUNI WIMPEE PAGE- 1

ENTERED-06/17/02 PRIORITY- EST-DAYS-000 REQD-07/01/02

BEGIN-06/17/02 COMPLETE-06/18/02 CLOSE-01/01/03

DESCRIPTION: DISPENSING FEE CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0274

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE IMPLEMENT THE FOLLOWING DISPENSING FEE RAE INCREASES IN THE POINT OF SALE SYSTEM EFFECTIVE WITH DATE OF SERVICE JULY 1, 2002:

HIGH VOLUME PHARMACIES	4.20
MID VOLUME PHARMACIES	4.51
LOW VOLUME PHARMACIES	5.20
UNIT DOSE SYSTEMS	5.20

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445

06/17/02. ADDED - 179.

NUMBER - 0275 SUB BY- PATTY ORTH SUB FOR- DIANE STEVENS PAGE- 1

ENTERED-06/17/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/17/02 COMPLETE-06/28/02 CLOSE-01/01/03

DESCRIPTION: CHANGES TO NO REBATE EDIT

STATUS:

REQUEST CONTROL NUMBER: 0275

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE INITIATE A SYSTEM STOP TO DENY ALL NON-SIGNED OVER THE COUNTER DRUGS EXCEPT THE SUPPLY GENERIC CODES 94200 AND 25200.

ADDENDUM AS OF JULY 11, 2002 -

PLEASE ADD GENERIC CODE NUMBER 35631 TO THE LIST OF EXCEPTIONS.

ADDENDUM AS OF AUGUST 7, 2002 -

PLEASE ADD GENERIC CODE NUMBERS 35480, 35530, AND 35630 TO THE LIST OF EXCEPTIONS.

SYSTEM SPECIFICATIONS:

CHANGES TO S121 IN RXOC0445.

06/17/02. ADDED - 179.

NUMBER - 0276 SUB BY- PATTY ORTH SUB FOR- GINI EGAN PAGE- 1

ENTERED-06/17/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/17/02 COMPLETE-06/28/02 CLOSE-01/01/03

DESCRIPTION: REQUIRE DEA NUM ON SCHED II'S

STATUS:

REQUEST CONTROL NUMBER: 0276

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE INITIATE A SYSTEM STOP TO DENY SCHEDULE II DRUGS BILLED WITHOUT A DEA NUMBER IN THE PRESCRIBER ID FIELD.

THIS NEEDS TO BE IMPLEMENTED EFFECTIVE JULY 1, 2002.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445 TO EDIT FOR DEA NUM ON SCHED 2 DRUGS. ALSO, CHANGED RXOC0417 TO RETURN NEW MESSAGE.

06/17/02. ADDED - 179.

NUMBER - 0277 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-06/17/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/17/02 COMPLETE-06/18/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0277

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THE GCN SEQUENCE NUMBERS HAVE CHANGED FOR RENA-VITE. PLEASE ADD GCN SEQUENCE NUMBER 047608 TO THE EPA TABLE WITH CRITERIA CODE 096. PLEASE DELETE THE OLD GCN SEQUENCE NUMBERS 044184 AND 044185 FROM THE EPA TABLE.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445, RXMFFORM, AND RXMF6200.

06/17/02. ADDED - 179.

NUMBER - 0278 SUB BY- PATTY ORTH SUB FOR- JONHA ZIEGLER PAGE- 1

ENTERED-06/17/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/17/02 COMPLETE-06/18/02 CLOSE-01/01/03

DESCRIPTION: CHANGES TO DUPLICATE EDIT

STATUS:

REQUEST CONTROL NUMBER: 0278

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

IN ORDER TO PAY PEAK FLOW METERS AND SPACERS ON THE SAME DAY,
PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 83 (DUPLICATE CLAIM).
ADD A NEW SECTION TO BYPASS THERAPEUTIC CLASS Y7A - RESPIRATORY
AIDS, DEVICES, AND EQUIPMENT.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0446.

06/17/02. ADDED - 179.

NUMBER - 0279 SUB BY- PATTY ORTH SUB FOR- JOHNA ZIEGLER PAGE- 1

ENTERED-07/08/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/08/02 COMPLETE-07/08/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0279

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THERE ARE THREE NEW STRENGTHS OF ADDERALL XR. PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODE TO THE EPA TABLE.

DRUG	GCN SEQ	CC
ADDERALL XR	050428 - 050430	094

PLEASE REMOVE THE FOLLOWING GCN SEQUENCE NUMBERS FROM THE EPA TABLE AS THERE ARE NO LACTIVE NDC'S:

002326	CYANOCOBALAMIN	011692	ROFERON-A	021419	VITAMIN - E
002327	CYANOCOBALAMIN	015068	VANCOMYCIN	022531	AREDIA
005832	ACUTANE	018745	ROFERON-A	039374	GEREF
005833	ACUTANE	019526	INTRON A	041443	INFERGEN
005834	ACUTANE	020742	BETASERON	041444	INFERGEN
011691	ROFERON-A	021418	VITAMIN E		

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445, RXMFFORM, AND RXMF6200.

07/08/02. ADDED - 179.

NUMBER - 0280 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-07/24/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/24/02 COMPLETE-07/24/02 CLOSE-01/01/03

DESCRIPTION: ADD CODES FOR THE M1 BYPASS

STATUS:

REQUEST CONTROL NUMBER: 0280

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ M1 (CLIENT IN MANAGED CARE PLAN). ADD G8F (CONTRACEPTIVES, TRANSDERMAL) AND G9B (CONTRACEPTIVES, INTRVAGINAL SYSTEMIC) TO THE LIST OF THERAPEUTIC CLASS CODES IN SECTION 3 THE BYPASS THIS EXCPETION.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445.

07/24/02. ADDED - 179.

NUMBER - 0281 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-07/24/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/24/02 COMPLETE-07/31/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0281

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBER AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQ	CC
ACTONEL	050364	148

PLEASE REMOVE CRITERIA CODE 051 FROM GCN SEQUENCE NUMBER 044758 (VIOXX 50 MG) IN THE EPA TABLE. THE REMAINING CRITERIA CODE 052 IS STILL VALID.

PLEASE REMOVE THE FOLLOWING GCN SEQUENCE NUMBERS FROM THE EPA TABLE:

DRUG	GCN SEQ
CALCIUM GLUBIONATE	001351
BASAJEL	002750, 002752, 002753
ETHMOZINE	015346, 015347, 015348
SKELID	027547
GEREF	039103, 039104

SYSTEM SPECIFICATIONS:

CHANGES TO WT009010 AND WH010088 AND COMPILE RXMFFORM, RXMF6200, AND RXOC0445.

07/24/02. ADDED - 179.

NUMBER - 0282 SUB BY- PATTY SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-08/11/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/11/02 COMPLETE-09/03/02 CLOSE-01/01/03

DESCRIPTION: MEDICARE COVERAGE EXCEPTIONS

STATUS:

REQUEST CONTROL NUMBER: 0282

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ 70, PLAN 225
MEDICARE DUAL ELIGIBLES. THE FOLLOWING THERAPEUTIC CLASS CODES
WILL BE ADDED TO THE LIST OF DRUGS NOT COVERED ON THE PLAN FILE:

M0E ANTIHEMOPHILIC FACTORS
M0F FACTOR IX PREPARATIONS
M0G ANTIPORPHYRIA FACTORS
Y9A DIABETIC SUPPLIES
Z2E IMMUNOSUPPRESSIVES

PLEASE BYPASS THIS EDIT IF DUR OUTCOME CODE IS EQUAL TO 1B (CLAIM
DENIED BY MEDICARE), OR IF ELIGIBILITY OVERRIDE IS EQUAL TO 2 (BABY
ON MOM'S PIC).

THIS REQUEST NEEDS TO BE IMPLEMENTED SEPTEMBER 1, 2002.

SYSTEM SPECIFICATIONS:

PROGRAM CHANGE TO RXOC0445 IN S120-200 TO ADD CHECK FOR THERAPEUTIC
CLASS CODES, WHICH ARE CONTAINED IN WH-130-TXCL-MEDICARE-COVERED.

08/11/02. ADDED - 179.

08/29/02. UPDATED - 521.

NUMBER - 0283 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-08/14/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/14/02 COMPLETE-08/21/02 CLOSE-01/01/03

DESCRIPTION: BYPASS 50 PCT FOR MAC OVERRIDE

STATUS:

REQUEST CONTROL NUMBER: 0283

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

SYSTEM SPECIFICATIONS:

ADDED CHECK FOR PP OVERRIDE AND BYPASS APPLYING THE 50 PCT
REDUCTION IN RXOC0445

08/14/02. ADDED - 179.

NUMBER - 0284 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 1

ENTERED-08/21/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/21/02 COMPLETE- CLOSE-

DESCRIPTION: EXCLUDE DRUGS FROM AWP - 50 PCT

STATUS: COMPLETE THIS WEEK

REQUEST CONTROL NUMBER: 0284

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE EXCLUDE THE FOLLOWING DRUGS (IDENTIFIED BY GENERIC CODE NUMBER) FROM AWP MINUS 50PCT PRICING EFFECTIVE AUGUST 1, 2002.

GCN	DRUG
14693	TIZANIDINE HCL 4MG TABLET
38720	TOMXIFEN CITRATE 10MG TABS
13310	DICLOFENAC SOD 100MG SA
02221	NIFEDIPINE 30MG SA
02227	NIFEDIPINE 60MG TAB SA
47281	CEFUROXIME AXETIL 250MG TAB
11531	LEVONOGESTREL-ETH ESTRA
11474	NORETHINDRONE-ETHINYL ESTRAD

ADDENDUM AS OF AUGUST 9, 2002:

PLEASE EXCLUDE THE FOLLOWING DRUGS (IDENTIFIED BY GENERIC CODE NUMBER) FROM AWP MINUS 50PCT PRICING EFFECTIVE AUGUST 1, 2002:

GCN	DRUG
02226	NIFEDIPINE ER
11500	NORGESTREL-ETHINYL ESTRADIOL
12768	PAPAIN/UREA
28840	ESTRADIOL
41801	ETHAMBUTOL HCL
68811	DESOGESTREL-THINYL ESTRADIOL
62591	CARIDOPA/LEVODOPA

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

ADDENDUM AS OF AUGUST 14, 2002:

NUMBER - 0284 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 2

ENTERED-08/21/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/21/02 COMPLETE- CLOSE-

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50PCT PRICING:

GCN	DRUG
02222	NIFEDIPINE TABLETS
02324	DILTIAZEM HCL SA
08251	MISOPROSTOL
09115	PREDNISOLONE SOD PHOS
11530	LEVONORGESTREL-ETH ESTRA
15710	LITHIUM CARBONATE
17241	PHENYTOIN SODIUM
17322	PRIMIDONE
26081	BROMOCRIPTINE MESYLATE
27690	SPIRONOLACTONE
28841	ESTRADIOL
30160	NYSTATIN
47282	CEFUROXIME
61765	ETODOLAC
70140	CODEINE/APAP/CAFFEIN/BUTALB

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

ADDENDUM AS OF AUGUST 21, 2002:

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50PCT PRICING:

GCN	DRUG
03513	POTASSIUM CHLORIDE
11534	LEVONORGESTREL-ETH ESTRA
15043	PROMETHAZINE
31850	KETOCONAZOLE
34820	HCTZ
47260	LISINOPRIL
47262	LISINOPRIL
50756	ENDOCET
56971	AMPTHETAMINE SALTS 10MG

NUMBER - 0284 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 3

ENTERED-08/21/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/21/02 COMPLETE- CLOSE-

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

ADDENDUM AS OF AUGUST 21, 2002:

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50PCT PRICING:

GCN	DRUG
07221	TRAMADOL HCL
11501	NORGESTREL-ETHINYL ESTRADIOL
14017	ACETIC ACID/HC
14690	TIZANIDINE HCL
16910	ACETAMINOPHEN 650MG
23043	AMMONIUM LACTATE
25796	WARFARIN SODIUM
27452	TRIAMCINOLONE ACETONIDE
32600	VASOPRESIN
33181	PREDISOLONE SODIUM PHOSPHATE
47472	QUININE SULFATE
69500	CODEINE/ASA/CAFF/BUTALBITAL

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

ADDENDUM AS OF SEPEMBER 4, 2002:

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50PCT PRICING:

GCN	DRUG
03512	POTASSIUM CHLORIDE
08250	MISOPROSTOL
11870	LIDOCAINE
17700	PHENYTOIN SODIUM EXT 100MG CAPSULE
22871	TRETINOIN
22982	BENZOYL PEROXIDE
26782	HYDROCORTISONE
28843	ESTRADIOL
41261	RIFAMPIN
44020	P-EPD TAN/CHLOR SUSPENSION

NUMBER - 0284 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 4

ENTERED-08/21/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/21/02 COMPLETE- CLOSE-

44520	PERMETHRIN 1PCT
46790	CROMOLYN SODIUM
50766	OXYCODONE HCL/APAP

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

ADDENDUM AS OF SEPEMBER 16, 2002:

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50PCT PRICING:

GCN	DRUG
02326	DILTIAZEM HCL
12746	PHENYLEPHRINE/CHLOR-TAN
15002	PROMETHAZINE HCL
15960	MEPERIDINE HCL
19881	DEXTROAMPHETAMINE SULFATE
20351	BUTORPHANOL TARTATE
22870	TRETINOIN
31770	CLINDAMYCIN PHOSPHATE
34280	FLUINSOLIDE

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

ADDENDUM AS OF OCTOBER 1, 2002:

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50PCT PRICING:

GCN	DRUG
00312	THEOPHYLLINE ANHYDROUS
02325	DILTIAZEN HCL
06919	CLOTRIMAZOLE/BETHAMET/DIPROP
09440	PSYLLIUM SEED
14140	LORAZEPAM
14540	FLUPHENAZINE DECANOATE
15500	HALOPERIDOL LACTATE
16063	MORPHINE SULPHATE
16384	BUPROPION HCL

NUMBER - 0284 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 5

ENTERED-08/21/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/21/02 COMPLETE- CLOSE-

16385	BUPROPION HCL
22881	TRETINOIN
27692	SPIRONOLACTONE
32961	NABUMETONE
39513	SOTALOL HCL
40832	CLINDAMYCIN HCL
41790	PYRAZINAMIDE
95577	HC/PYRAMOXINE HCL/CHLOROXYLEN

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF OCTOBER 22, 2002:

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50 PCT PRICING:

NDC	DRUG
00501-2053-04	DIPHENHYDRAMINE HCL 12.5MG/5ML
12547-0171-37	DIPHENHYDRAMINE HCL 12.5MG/5ML

GCN	DRUG
01070	URSODIOL 300MG CAPSULE
04281	PEDIATRIC ELECTROLYTE SOLUTION
14232	OXAZEPAM 30MG CAPSULE
14761	PROCHLORPERAZINE 25MG SUPP
15044	PROMETHAZINE 50MG TABLET
16040	MORPHINE SULFATE 10MG/ML VIAL
29723	POVIDONE-IODINE SWAB
31923	SODIUM CHLORIDE 5PCT EYE DROP
33560	CAPSAICIN 0.025PCT
43715	IMMUNE GLOBULIN VIAL
69380	MICRONAZOLE NITRATE 3 COMBO PACK

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF OCTOBER 30, 2002:

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50 PCT PRICING:

NUMBER - 0284 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 6

ENTERED-08/21/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/21/02 COMPLETE- CLOSE-

GCN	DRUG
22882	TRETINOIN CREAM 0.025PCT
04163	MAGNESIUM SULFATE

ADDENDUM AS OF NOVEMBER 19, 2002:

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50 PCT PRICING:

GCN	DRUG
00730	RIMANTADINE HCL 100MG TABLET
02890	SODIUM POLYSTYRENE SULFONATE POWDER
12541	PEMOLINE 37.5MG TABLET
26131	LEVOTHYROXINE SODIUM 200 MCG VIAL
27032	METHYLPREDNISOLONE SOD SUCC 40MG VIAL
31880	SODIUM CHLORIDE 5PCT EYE OINTMENT
45550	SORBITOL 70PCT SOLUTION

ADDENDUM AS OF DECEMBER 23, 2002:

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50 PCT PRICING:

GCN	DRUG
11642	HUMULIN/NOVOLIN R
11660	HUMULIN/NOVOLIN N
50001	HUMULIN/NOVOLIN 70/30

ADDENDUM AS OF JANUARY 13, 2003:

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50 PCT PRICING:

GCN	DRUG
56970	AMPHETAMINE SALTS
67153	AMOXICILLIN TRI/POTASSIUM CLAVUNATE
67154	AMOXICILLIN TRI/POTASSIUM CLAVUNATE

NUMBER - 0284 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 7

ENTERED-08/21/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/21/02 COMPLETE- CLOSE-

67071	AMOXICILLIN TRI/POTASSIUM CLAVUNATE
67076	AMOXICILLIN TRI/POTASSIUM CLAVUNATE
63821	BISAPROLOL FUMARATE

ADDENDUM AS OF FEBRUARY 3, 2003:

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50 PCT PRICING:

GCN	DRUG
11477	NORETHINDRONE - ETHINYL ESTRADIOL
11520	NORETHINDRONE
72701	ACETANIMOPHEN/BUTALBITAL
85400	ERYTHROMYCIN BASE/BENZOYL PER

ADDENDUM AS OF FEBRUARY 12, 2003:

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50 PCT PRICING:

GCN	DRUG
60521	LORATADINE
94422	ERGOCALCIFEROL
71050	PENTAZOCINE HCI/ACETAMINOPHEN

ADDENDUM AS OF MARCH 5, 2003:

PLEASE EXCLUDE THE FOLLOWING DRUGS FROM AWP MINUS 50 PCT PRICING:

GCN	DRUG
11300	NORGESTIMATE-ETHINYL ESTRADIOL
13937	GUAIFENESIN/PHENYLEPHRINE HCL
02792	SODIUM BICARBONATE
02323	DILTIAZEM HCL

SYSTEM SPECIFICATIONS:

ADDED CHECK FOR GENERIC CODE AND BYPASS APPLYING THE 50 PCT

NUMBER - 0284 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 8

ENTERED-08/21/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/21/02 COMPLETE- CLOSE-

REDUCTION IN RXOC0445

08/21/02. ADDED - 179.

NUMBER - 0285 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-08/21/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/21/02 COMPLETE-08/21/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH

STATUS:

REQUEST CONTROL NUMBER: 0285

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

SYSTEM SPECIFICATIONS:

ADDED TO WT009010 AND WH010088 COPY MEMBERS

08/21/02. ADDED - 179.

NUMBER - 0286 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-08/21/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/21/02 COMPLETE-08/21/02 CLOSE-01/01/03

DESCRIPTION: PAY COMP PREP FEES AT 100 PCT

STATUS:

REQUEST CONTROL NUMBER: 0286

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

SYSTEM SPECIFICATIONS:

ADD TWO NEW PROVIDERS TO BYPASS DAYS SUPPLY BYPASS IN RXOC0445

08/21/02. ADDED - 179.

NUMBER - 0287 SUB BY- PATTY ORTH SUB FOR- LES LING PAGE- 1

ENTERED-08/28/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/28/02 COMPLETE-08/28/02 CLOSE-01/01/03

DESCRIPTION: TWO NEW PHS PROVS TO BYPASS 18

STATUS:

REQUEST CONTROL NUMBER: 0287

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

SYSTEM SPECIFICATIONS:

ADD TWO NEW PROVIDERS TO BYPASS DAYS SUPPLY BYPASS IN RXOC0445

08/28/02. ADDED - 179.

NUMBER - 0288 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-08/28/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/28/02 COMPLETE-09/03/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0288

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG:	GCN SEQUENCE NUMBERS:	CRITERIA CODES:
ADEKS	016360, 021006	102
ZOFRAN	015869, 016392, 016393, 023187 028107, 041562, 041563, 043230	127, 128

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO WH010088 AND WT009010 COPY MEMBERS AND PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 RECOMPILED.

08/28/02. ADDED - 179.

08/29/02. UPDATED - 521.

NUMBER - 0289 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-09/06/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/06/02 COMPLETE-09/18/02 CLOSE-01/01/03

DESCRIPTION: CHANGES TO M1 EDIT

STATUS:

REQUEST CONTROL NUMBER: 0289

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ M1 (CLIENT IN MANAGED CARE PLAN). ADD THERAPUETIC CLASS CODES W1W, W1X, W1Y, AND W1Z (CEPHALOSPORINS 1ST THRU 4TH GENERATION) TO THE LIST IN SECTION 4 THAT BYPASSES THIS EXCEPTION WITH MED CERT CODE 2.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445

09/06/02. ADDED - 179.

NUMBER - 0290 SUB BY- PATTY ORTH SUB FOR- MARY NEUKOM PAGE- 1

ENTERED-09/06/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/06/02 COMPLETE-09/18/02 CLOSE-01/01/03

DESCRIPTION: CHANGES TO DAYS SUPPLY EDIT 19

STATUS:

REQUEST CONTROL NUMBER: 0290

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 19 (MISSING/INVALID DAYS SUPPLY). IN SECTION 'A', ADD THE FOLLOWING THERAPUETIC CLASS CODES TO BYPASS IF THE DAYS SUPPLYIS GREATER THAN 90:

G8B CONTRACEPTIVES, IMPLANTABLE
G8F CONTRACEPTIVES, TRANSDERMAL
G9A CONTRACEPTIVES, INTRAVAGINAL
G9B CONTRACEPTIVES, INTRAVAGINAL, SYSTEMIC

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445

09/06/02. ADDED - 179.

NUMBER - 0291 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-09/18/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/18/02 COMPLETE-09/23/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0291

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THERE IS A NEW STRENGTH OF CELEBREX. PLEASE ADD GCN SEQUENCE NUMBER 050832 WITH CRITERIA CODES 140, 145, AND 147 TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO WH010088 AND WT009010 COPY MEMBERS AND PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 RECOMPILED.

09/18/02. ADDED - 179.

09/18/02. UPDATED - 521.

NUMBER - 0292 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-09/23/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/23/02 COMPLETE-09/23/02 CLOSE-01/01/03

DESCRIPTION: BYPASSES FOR 4 BRAND LIMIT

STATUS:

REQUEST CONTROL NUMBER: 0292

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE BYPASS TCS 4-BRAND LIMIT FOR FLU VACCINE TCC W7C AND THE FOLLOWING ALLEGRA GCN'S:

37198
46591
46593
46594
63565

SYSTEM SPECIFICATIONS:

CODING CHANGES MADE TO PROGRAM RXMFFORM. THERAPEUTIC CLASS CODE W7C WAS ADDED TO WS-005-SCRIPT-LIMIT-Y-TCL 88-LEVEL, AND THE GCNS WERE ADDED TO WS-005-SCRIPT-LIMIT-Y-GCN 88-LEVEL.

09/23/02. ADDED - 179.

09/23/02. UPDATED - 521.

NUMBER - 0293 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-09/27/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/27/02 COMPLETE-10/01/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0293

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THE GCN SEQUENCE NUMBERS ARE CHANGING FOR CERTAIN KETOROLAC PRODUCTS.
PLEASE ADD GCN SEQUENCE NUMBER 031613 TO THE EPA TABLE WITH CRITERIA
CODE 141.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO WH010088 AND WT009010 COPY MEMBERS AND PROGRAMS
RXOC0445, RXMFFORM, AND RXMF6200 RECOMPILED.

09/27/02. ADDED - 179.

09/30/02. UPDATED - 521.

NUMBER - 0294 SUB BY- PATTY ORTH SUB FOR- JACQIE IRWIN PAGE- 1

ENTERED-10/07/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/07/02 COMPLETE-11/27/02 CLOSE-01/01/03

DESCRIPTION: MASS ADJUST PROVIDENCE PHARMACY

STATUS:

REQUEST CONTROL NUMBER: 0294

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

IN ORDER TO PAY CLAIMS AT THE CORRECT DISPENSING FEE, PLEASE INITIATE A MASS ADJUSTMENT FOR THE FOLLOWING PROVIDER AND DATE SPAN. THE ADJUSTMENT WILL CORRECT ERRORS MADE WHEN THE VOLUME SURVEY WAS PROCESSED.

NABP	PROVIDER	PHARMACY NAME	DATE SPAN
4916310	6146302	PROVIDENCE-CHEHALIS	05/01/02-10/05/02

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL

SYSTEM SPECIFICATIONS:

1. RUN PROGRAM RXMASADJ

10/07/02. ADDED - 179.

11/27/02. UPDATED - 521.

NUMBER - 0295 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-10/11/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/11/02 COMPLETE-11/04/02 CLOSE-01/01/03

DESCRIPTION: CHANGES TO DUR/REJ 25

STATUS:

REQUEST CONTROL NUMBER: 0295

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

IN ORDER TO PROCESS AND PAY CLAIMS CORRECTLY, PLEASE INITIATE AN UPDATE TO DUR/REJ 25, MISSING/INVALID PRESCIBER ID. PLEASE BYPASS THIS EXCEPTION IF CLAIM IS FOR PLAN 252 (MANAGED CARE); AND IT IS A SCHEDULE II DRUG; AND DENTAL PRESCRIBER ID IS PRESENT.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CODE WAS ADDED TO PROGRAM RXOC0445 TO CHECK FOR PLAN 252/SCHEDULE II DRUG/ AND DENTAL PRESCRIBER. IF ALL THREE CONDITIONS THEN THE EXCEPTION IS BYPASSED.

10/11/02. ADDED - 179.

10/31/02. UPDATED - 521.

NUMBER - 0296 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-10/22/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/22/02 COMPLETE-11/04/02 CLOSE-01/01/03

DESCRIPTION: REMOVE GOLD STANDARD EXEMPTION

STATUS:

REQUEST CONTROL NUMBER: 0296

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE REMOVE THE SYSTEM CODING OUTLINED IN POS CSR 0219 (ATTACHED)
BY PAYING THE LISTED GOLD STANDARD DRUGS AT EAC ONLY. THESE NDC'S
SHOULD ALL GO THRU THE ROUTINE PRICING ALGORITHM.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

THE CODE FOR CSR 0219 WAS REMOVED FROM PROGRAM RXOC0445.

10/22/02. ADDED - 179.

10/31/02. UPDATED - 521.

NUMBER - 0297 SUB BY- PATTY SUB FOR- JOHNA PAGE- 1

ENTERED-11/11/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/11/02 COMPLETE-11/11/02 CLOSE-01/01/03

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0297

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODES TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQUENCE NUMBERS	CRITERIA CODES
ANZEMET	034748,034749,034750,050266,050268	127
KYTRIL	021592,021693	127,128
OXANDRIN 10MG	050953	110,111,112,113
RITALIN LA	050566,050567	149,150

SYSTEM SPECIFICATIONS:

CHANGES MADE TO WH010088 AND WT009010 COPY MEMBERS AND PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 RECOMPILED.

11/11/02. ADDED - 521.

11/11/02. UPDATED - 521.

NUMBER - 0298 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-11/14/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/14/02 COMPLETE-01/13/03 CLOSE-02/01/03

DESCRIPTION: CHANGES TO PRESC PROV EDIT

STATUS:

REQUEST CONTROL NUMBER: 0298

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MODIFY DUR/REJ 25 MISSING OR INVALID PRESCRIBER ID.
EFFECTIVE WITH FILL DATE 1/1/03 AND AFTER THE PRESCRIBER NAME WILL
NOT BE ACCEPTED AS A VALID PRESCRIBER ID. PLEASE REMOVE THE LOGIC
THAT CHANGES ALL ENTRIES THAT ARE NOT SEVEN DIGIT NUMERIC, SPACES,
OR IN THE VALID DEA NUMBER FORMAT TO THE DUMMY NUMBER 8999500.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL

ADDENDUM AS OF DECEMBER 6, 2002:

ACCEPTABLE PRECRIBER ID'S WILL BE A MEDICAID NUMBER OR VALID DEA
NUMBER FORMAT. IT HAS BEEN DETERMINED THAT TWO ALPHA FOLLOWED BY
5555555 IS NOT TO BE ACCEPTED.

ADDENDUM AS OF DECEMBER 3, 2003:

EFFECTIVE WITH FILL DATE 1/1/03 AND AFTER 8999500 IS NOT TO BE
ACCEPTED.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0440 AND RXOC0445.

11/14/02. ADDED - 179.

NUMBER - 0299 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 1

ENTERED-11/20/02 PRIORITY- EST-DAYS-000 REQD-02/01/03

BEGIN-11/20/02 COMPLETE-01/31/03 CLOSE-02/01/03

DESCRIPTION: NEW PEAK FLOW/SPACERS

STATUS:

REQUEST CONTROL NUMBER: 0299

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PEAK FLOW METERS AND SPACERS WERE ORIGINALLY OUTLINED IN POS CSR 0267. PLEASE CHANGE THE FORMULARY COVERAGE INDICATOR TO 'C' (COVERED) AND APPLY THE ASSOCIATED MAC PRICES TO THE DRUG FILE EFFECTIVE JANUARY 1, 2003 FOR THE FOLLOWING NDC'S:

PRODUCT	NDC	MAC
VORTEX HOLDING CHAMBER	83490-0510-01	$23.35
VORTEX HOLDING CHAMBER WITH TODDLER (SM.) MASK	83490-0510-02	$23.35
VORTEX HOLDING CHAMBER WITH CHILD (MED.) MASK	83490-0510-03	$23.35
VORTEX HOLDING CHAMBER WITH ADULT (LG.) MASK	83490-0510-04	$23.35

THESE NDC'S WILL BE REIMBURSED AT THE MAC PRICE OR THE SUBMITTED CHARGE, WHICHEVER IS LESS AND WILL NOT BE REIMBURSED A DISPENSING FEE.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF DECEMBER 23, 2002:

PLEASE CHANGE THE EFFECTIVE DATE TO FEBRUARY 1, 2003.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO RXMFFORM AND RXMF6200

NUMBER - 0299 SUB BY- PATTY ORTH SUB FOR- TOM Z PAGE- 2

ENTERED-11/20/02 PRIORITY- EST-DAYS-000 REQD-02/01/03

BEGIN-11/20/02 COMPLETE-01/31/03 CLOSE-02/01/03

11/20/02. ADDED - 179.

01/31/03. UPDATED - 521.

NUMBER - 0300 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-11/25/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/25/02 COMPLETE-11/25/02 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0300

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODE TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQUENCE NUMBERS	CC
CALCIUM W/VIT D	001307, 001309 - 001313	126
PEGASYS	051151	109

SYSTEM SPECIFICATIONS:

CHANGES MADE TO WH010088 AND WT009010 COPY MEMBERS AND PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 RECOMPILED.

11/25/02. ADDED - 179.

11/25/02. UPDATED - 521.

NUMBER - 0301 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-12/10/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/10/02 COMPLETE-01/13/03 CLOSE-

DESCRIPTION: CHANGES TO M1 EDIT

STATUS:

REQUEST CONTROL NUMBER: 0301

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ M1 (PATIENT IN MANAGED CARE PLAN). ADD TO SECTION 6 TP BYPASS IF GCN SEQUENCE NUMBER IS EQUAL TO 051469 AND BILLED WITH MED CERT CODE 2.

ADDENDUM AS OF JANUARY 2, 2003

PLEASE ADD THE FOLLOWING ADDITIONAL GCN SEQUENCE NUMBERS TO SECTION 6:

009632	017111	026550	040964	047365
013023	017112	027467	040965	048843
014184	017113	030250	043708	049849
016343	021894	031024	043904	049905
016344	021982	034186	046738	
016345	021983	040655	046739	
016843	021985	040656	046740	
016844	024417	040657	046741	
017110	024418	040786	047121	

SYSTEM SPECIFICATIONS:

CHANGES MADE TO RXOC0445 AND RECOMPILED.

11/25/02. ADDED - 179.

11/25/02. UPDATED - 521.

NUMBER - 0302 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-12/10/02 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/10/02 COMPLETE-12/13/02 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0302

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODE TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQUENCE NUMBERS	CC
ABILIFY	051333 051336	015
PAMIDRONATE	047041	011, 016

ADDENDUM AS OF DECEMBER 23, 2002:

PLEASE ADD PAMIDRONATE GCN SEQUENCE NUMBER 047039 WITH CRITERIA 011 AND 016.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO WH010088 AND WT009010 COPY MEMBERS AND PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 RECOMPILED.

11/25/02. ADDED - 179.

11/25/02. UPDATED - 521.

NUMBER - 0303 SUB BY- PATTY ORTH SUB FOR- NICOLE NGUYEN PAGE- 1

ENTERED-01/08/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/08/03 COMPLETE-01/31/03 CLOSE-

DESCRIPTION: MAKE PREVACID A PREFERRED DRUG

STATUS:

REQUEST CONTROL NUMBER: 0303

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PREVACID IS BEING ADDED TO THERAPEUTIC CONSULTATION SERVICE AS A PREFERRED DRUG EFFECTIVE 12/30/02. PLEASE SET GENERIC CODE NUMBERS 01697, 01698, 15032, AND 95045 AS COVERED. PLEASE CHANGE THE RETURN MESSAGE TO PROVIDERS FOR THIS CLASS AND INDICATOE THE PREFERRED DRUGS AS PREVACID AND PROTONIX.

SYSTEM SPECIFICATIONS:

ADDED CODE TO RXMFFORM AND RXOC0417

01/08/03. ADDED - 179.

NUMBER - 0304 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-01/22/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/22/03 COMPLETE-01/22/03 CLOSE-

DESCRIPTION: LIST OF COVERED DRUGS

STATUS:

REQUEST CONTROL NUMBER: 0304

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO AID IN THE CREATION OF A NEW LIST OF DRUGS THAT DO NOT REQUIRE AUTHORIZATION, PLEASE CREATE AN ELECTRONIC LIST OF DEUGS THAT HAVE A FORMULARY COVERAGE INDICATOR OF C OR H. EXCLUDE ANY DRUGS THAT ARE DESI, TERMINATED, OR NON-REBATE SIGNED. LIST ALPHABETICALLY BY DRUG NAME WITH DOSAGE FORM DESCRIPTION, EXCLUDING ANY DUPLICATE RECORDS OF SAME DRUG/DOSAGE FORM DESCRIPTION. THIS LIST WILL BE PUBLISHED WITH THE UPDATED PRESCRIPTION DRUG BILLING INSTRUCTIONS THAT WILL BE EFFECTIVE FEBRUARY 1, 2003.

DELIVER TO EBIN 16, ATTENTION ROBYN PARISH.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

RUN A SYSTEM UTILITY TO EXTRACT ALL DRUGS MEETING THE CRITERIA. SORT THE EXTRACTED FILE BY DRUG NAME AND DOSAGE FORM EXCLUDING DUPLICATES.

01/22/03. ADDED - 179.

NUMBER - 0305 SUB BY- PATTY ORTH SUB FOR- DIANE STEVENS PAGE- 1

ENTERED-01/22/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/22/03 COMPLETE-02/03/03 CLOSE-

DESCRIPTION: NEW MAIL ORDER PROGRAM

STATUS:

REQUEST CONTROL NUMBER: 0305

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

IN ORDER TO ACCOMODATE THE STATE WIDE MAIL ORDER PROGRAM, PLEASE IMPLEMENT A SYSTEM CHANGE TO PAY PROVIDER TYPE 19 (MAIL ORDER) A DISPENSING FEE OF $3.25 EFFECTIVE FEBRUARY 1, 2003.

IN ADDITION, PLEASE UPDATE DUR/REJ 19 (MISSING INVALID DAYS SUPPLY). EFFECTIVE FEBRUARY 1, 2003 UP TO A 90-DAY SUPPLY MAY BE DISPENSED IF BILLED BY PROVIDER TYPE AND DRUG BILLED IS NOT A SCHEDULE II-V, AND DOESN'T REQUIRE PRIOR OR EXPEDITED AUTHORIZATION, AND IS GENERIC OR PREFERRED.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP & BROOKE CAMPBELL.

ADDENDUM AS OF JANURARY 16, 2003 -

DO NOT APPLY AWP MINUS 50% LOGIC TO MAIL ORDER PROVIDERS.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP

ADDEDNUM AS OF JANURARY 27, 2003 -

A 90-DAY SUPPLY IS NOT ALLOWED FOR PROVIDER TYPE 19 IF THE DRUG IS A SCHEDULE II-V, OR REQUIRES PRIOR OR EXPEDITED AUTHORIZATION, OR IS NON-PREFERRED.

SYSTEM SPECIFICATIONS:

CHANGES TO RXOC0445 AND ONLINE GROUP FILE.

01/22/03. ADDED - 179.

NUMBER - 0306 SUB BY- PATTY ORTH SUB FOR- NICOLE NGUYEN PAGE- 1

ENTERED-01/22/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/22/03 COMPLETE-02/03/03 CLOSE-

DESCRIPTION: CHANGES TO M1 EDIT

STATUS:

REQUEST CONTROL NUMBER: 0306

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REF M1 (CLIENT IN MANAGED CARE PLAN). ADD THE FOLLOWING THERAPEUTIC CLASS CODES TO THE LIST IN SECTION 4 THAT BYPASS THIS EXCEPTION WITH MED CERT CODE 2.

TCC	DESCRIPTION
H7V	ANTIPSYCH, DOPAMINE, ANTAGONISTS, IMINODIBENZYL
H7W	ANTI-NARCOLEPSY/ANTI-CATAPLEXY, SEDATIVE-TYPE AGENT
H7X	ANTIPSYCHOTICS, ATYP, D2 PARTIAL AGONIST/5HT MIXED
H7Y	TREATMENT FOR ADHD, NRI-TYPE

SYSTEM SPECIFICATIONS:

CHANGES TO WORKING STORAGE IN RXOC0445.

01/22/03. ADDED - 179.

NUMBER - 0307 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-01/29/03 PRIORITY- EST-DAYS-000 REQD-02/10/03

BEGIN-01/29/03 COMPLETE-02/11/03 CLOSE-

DESCRIPTION: NEW EXPEDITED AUTH LIST

STATUS:

REQUEST CONTROL NUMBER: 0307

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO CORRESPOND WITH THE PUBLICATION OF THE NEW BILLING INSTRUCTIONS
PLEASE REVISE THE EPA TABLE AS FOLLOWS. PLEASE MAKE THE FOLLOWING
CHANGES TO THE EPA TABLE:

DRUG	GCN SEQ	ADD CC	DELETE CC
ADDERALL	004999		088
ADDERALL	005000		088
ADDERALL	005001		088
ADDERALL	034359		088
ADDERALL	047131		088
ADDERALL	047132		088
ADDERALL	047133		088
ALLEGRA D	036868	062	
AMBIEN	019187		007
AMBIEN	019188		007
ARB	023381	092	
ARB	023382	092	
ARB	023465	092	
ARB	029208	092	
ARB	029209	092	
ARB	034468	092	
ARB	034469	092	
ARB	034470	092	
ARB	037015	092	
ARB	037016	092	
ARB	037107	092	
ARB	037029	092	
ARB	037354	092	
ARB	038686	092	
ARB	038925	092	
ARB	040659	092	

NUMBER - 0307 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 2

ENTERED-01/29/03 PRIORITY- EST-DAYS-000 REQD-02/10/03

BEGIN-01/29/03 COMPLETE-02/11/03 CLOSE-

ARB	040910	092	
ARB	040911	092	
ARB	040923	092	
ARB	041234	092	
ARB	041897	092	
ARB	043063	092	
ARB	045425	092	
ARB	046624	092	
ARB	047126	092	
ARB	047324	092	
ARB	047326	092	
ARB	048399	092	
ARB	050256	092	
ARB	050289	092	
ARB	050290	092	
ARB	050805	092	
ARB	051562	092	
ARB	051563	092	
PEGASIS KIT	051601	109	
AREDIA	016428	016	
AREDIA	022532	016	
AVONEX	049812	119	012
CALCIMAR	006681		106,122
CLARINEX	047763		063
CLARITIN-D	017181	062	
CLARITIN-D	027622	062	
CLOZAPINE/CLOZARIL	013648		019,020
CLOZAPINE/CLOZARIL	013649		019,020
CONCERTA	045981		150
CONCERTA	045982		150
CONCERTA	047318		150
CONCERTA	050172		150
CYANOCOBALAMIN	002329		076,077
DANOCRINE	006600		125
DANOCRINE	006601		125
DANOCRINE	006602		125
DEXEDRINE	005005		088
DEXEDRINE	005006		088
DEXEDRINE	005007		088

NUMBER - 0307 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 3

ENTERED-01/29/03 PRIORITY- EST-DAYS-000 REQD-02/10/03

BEGIN-01/29/03 COMPLETE-02/11/03 CLOSE-

DEXEDRINE	005011		088
DEXTROSTAT	005009		088
DIFFERIN	026436		097
DIFFERIN	031789		097
DIFFERIN	045146		097
DIFFERIN	037034		097
FOCALIN	048982		150
FOCALIN	048983		150
FOCALIN	048984		150
FOSAMAX	024053		123
FOSAMAX	024054		123
FOSAMAX	031006		123
FOSAMAX	046941		123
FOSAMAX	047381		123
HYDROXOCOBALAMIN	002347		076,077
INTRON A	011695	109	
INTRON A	011696	109	
INTRON A	011697	109	
INTRON A	011698	109	
INTRON A	011699	109	
INTRON A	016909	109	
INTRON A	022654	109	
INTRON A	030275	109	
INTRON A	030276	109	
INTRON A	030277	109	
INTRON A	030278	109	
INTRON A	030279	109	
INTRON A	030280	109	
INTRON A	040243	109	
INTRON A	040244	109	
INTRON A	040245	109	
MIACALCIN	024138		106,122
OXANDRIN	003180		113
OXANDRIN	050953		113
PEG INTRON	045877	109	030,031,033,107,135
PEG INTRON	045878	109	030,031,033,107,135
PEG INTRON	048814	109	030,031,033,107,135
PEG INTRON	048815	109	030,031,033,107,135
PLAVIX	038164		116

NUMBER - 0307 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 4

ENTERED-01/29/03 PRIORITY- EST-DAYS-000 REQD-02/10/03

BEGIN-01/29/03 COMPLETE-02/11/03 CLOSE-

REVIA/NALTREXONE	004518		168
RISPERDAL	021154		108
RISPERDAL	021155		108
RISPERDAL	021156		108
RISPERDAL	021157		108
RISPERDAL	042922		108
RISPERDAL	042923		108
RISPERDAL ORAL	026177		108
RITALIN LA	047782		150
RITALIN LA	050566		150
RITALIN LA	050567		150
ROFERON-A	011693	080,109	031,033,107,135
ROFERON-A	011694	080,109	031,033,107,135
ROFERON-A	040769	080,109	031,033,107,135
ROFERON-A	040770	080,109	031,033,107,135
ROFERON-A	040771	080,109	031,033,107,135
SEROQUEL	034187		104
SEROQUEL	034188		104
SEROQUEL	034189		104
SEROQUEL	047198		104
TICLID	016375		116
VANCOMYCIN	009326		103,129
VANCOMYCIN	009327		103,129
VANCOMYCIN	009328		069,129
VANCOMYCIN	009329		069,129
VANCOMYCIN	009330		069,129
VANCOMYCIN	009331		069,129
VANCOMYCIN	009333		103,129
VANCOMYCIN	009334		103,129
VANCOMYCIN	020611		069,129
VANCOMYCIN	043952		069,129
ZYRTEC-D	048415	062	

REMOVE THE FOLLOWING GCN SEQUENCE NUMBERS AND ALL ASSOCIATED CRITERIA CODES:

001608	005803	030754
002328	006582	030755
003625	006583	040471

NUMBER - 0307 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 5

ENTERED-01/29/03 PRIORITY- EST-DAYS-000 REQD-02/10/03

BEGIN-01/29/03 COMPLETE-02/11/03 CLOSE-

003626	014147	043027
003627	018100	043028
003628	018102	044345
003629	018106	044346
003842	021444	045214
005797	022655	045694
005798	024494	045695
005799	028713	045696
005800	029176	047675
005801	029177	

PLEASE IMPLEMENT THIS UPDATE WITH THE DRUG FILE UPDATE THE WEEK OF FEBRUARY 10, 2003.

AFTER THE REVISIONS HAVE BEEN COMPLETED, PLEASE GENERATE 2 COPIES OF THE GCN SEQUENCE REPORT AND DELIVER TO BIN 12, ATTENTION PATTY ORTH.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL AND RANDY STAMP.

SYSTEM SPECIFICATIONS:

GCN AND CC CODES WERE ADDED AND/OR DELETED IN COPY MEMBERS WT090010 AND WH010088. PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RE-COMPILED.

01/29/03. ADDED - 179.

02/10/03. UPDATED - 521.

NUMBER - 0308 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-01/29/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/29/03 COMPLETE-02/03/03 CLOSE-

DESCRIPTION: ADD TO SCRIPT LIMIT EXEMPT IND

STATUS:

REQUEST CONTROL NUMBER: 0308

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE CHANGE THE SCRIPT LINIT EXEMPT INDOCATOR TO 'Y' FOR THE
FOLLOWING DRUG CLASSES EXEMPTING THEM FROM THE TCS BRAND COUNT:

G8F CONTRACEPTIVES, TRANSDERMAL
G9B CONTRACEPTIVES, INTRAVAGINAL, SYSTEMIC

SYSTEM SPECIFICATIONS:

CHANGES TO RXMFFORM

01/29/03. ADDED - 179.

NUMBER - 0309 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 1

ENTERED-02/04/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/04/03 COMPLETE-03/12/03 CLOSE-

DESCRIPTION: STATE MAC CAWP MASS ADJUSTMENT

STATUS:

REQUEST CONTROL NUMBER: 0309

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE INITIATE A MASS ADJUSTMENT FOR THE FOLLOWING DRUGS. ADJUST PAID CLAIMS WITH A FILL DATE WITHIN THE RELATED DATE SPAN. THIS WILL CORRECT PAYMENTS FOR THE LISTED CAWP AND SMAC DRUGS.

GCN	NDC	DRUG	DATE SPAN
	00099041701	TESTOSTERONE CYPIONATE	1/1/02-1/28/03
	00099041702	TESTOSTERONE CYPIONATE	1/1/02-1/28/03
25123		ANTIHEMOPHILIC FACTOR	6/1/02-1/28/03
25124		ANTIHEMOPHILIC FACTOR	6/1/02-1/28/03
25125		ANTIHEMOPHILIC FACTOR	6/1/02-1/28/03
13941		HYDROZYZINE	6/1/02-1/28/03
13943		HYDROZYZINE	6/1/02-1/28/03
13944		HYDROZYZINE	6/1/02-1/28/03
41820		NITROFURANTOIN MCR	6/1/02-1/28/03
41822		NITROFURANTOIN MCR	6/1/02-1/28/03
17892		METHOCARBAMOL	8/1/02-1/28/03
17893		METHOCARBAMOL	8/1/02-1/28/03

SYSTEM SPECIFICATIONS:

PROCEDURES ESTABLISHED FOR CSR0245 WERE FOLLOWED. A TEMPORARY DRUG FILE WAS CREATED (WAAPMADJ AND RX5000IA), AND USED TO PULL CLAIMS FOR THE DESIRED DATE RANGES FOR THE NDCS AND GCNS IN QUESTION (RXMASADJ). THEY WERE THEN PROCESSED THROUGH THE POINT-OF-SALE SYSTEM (BWMX1520).

02/04/03. ADDED - 179.

NUMBER - 0309 SUB BY- PATTY ORTH SUB FOR- JOHNNA ZIEGLER PAGE- 2

ENTERED-02/04/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/04/03 COMPLETE-03/12/03 CLOSE-

03/11/03. UPDATED - 521.

NUMBER - 0310 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-02/04/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/04/03 COMPLETE-02/11/03 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0310

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODE TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQUENCE NUMBERS:	CC:
KYTRIL ORAL SOLUTION	030763	127, 128
STRATTERA	051489,051490,051491,051492,051493	007

SYSTEM SPECIFICATIONS:

GCN AND CC CODES WERE ADDED TO COPY MEMBERS WT090010 AND WH010088 AND PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RE-COMPILED.

02/04/03. ADDED - 179.

02/10/03. UPDATED - 521.

NUMBER - 0311 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-02/21/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/21/03 COMPLETE-02/24/03 CLOSE-

DESCRIPTION: SCRIPT LIMIT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0311

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

DRUG	NDC	GCN	TCC	SLE INDICATOR
METHIMAZOLE	00185020501			Y
METHIMAZOLE	00185020510			Y
METHIMAZOLE	00185021001			Y
METHIMAZOLE	49884064001			Y
METHIMAZOLE	49884064101			Y
METHIMAZOLE	49884064174			Y
ABILIFY		18537		Y
ABILIFY		18538		Y
ABILIFY		18539		Y
ABILIFY		18541		Y
CERUMENEX		88010		Y
DEBROX		34401		N (NO)
GROWTH HORMONES			P1A	Y

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL

SYSTEM SPECIFICATIONS:

CHANGES MADE TO RXMFFORM IN CORRESPONDING SCRIPT LIMIT EXEMPT CATEGORIES.

02/21/03. ADDED - 521.

NUMBER - 0311 SUB BY- PATTY SUB FOR- VALERIE PAGE- 2

ENTERED-02/21/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/21/03 COMPLETE-02/24/03 CLOSE-

02/24/03. UPDATED - 521.

NUMBER - 0312 SUB BY- PATTY SUB FOR- CONNIE PAGE- 1

ENTERED-02/21/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/21/03 COMPLETE-02/24/03 CLOSE-

DESCRIPTION: BYPASS EXCEP 18 FOR PHS PROVS

STATUS:

REQUEST CONTROL NUMBER: 0312

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 18 - MISSING/INVALID METRIC QUANTITY. ADD 4915407 AND 4913035 TO THE LIST OF PHS REBATE EXEMPT PROVIDERS THAT BYPASS THE VARIANCE.

SYSTEM SPECIFICATIONS:

ADDED PROVIDERS 004915407 AND 004913035 TO WH-210-PHS-EXEMPT IN PROGRAM RXOC0445.

02/21/03. ADDED - 521.

02/24/03. UPDATED - 521.

NUMBER - 0313 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-03/21/03 PRIORITY- EST-DAYS-000 REQD-05/01/03

BEGIN-03/21/03 COMPLETE-07/28/03 CLOSE-

DESCRIPTION: NEW PREFERRED DRUG - LORATADINE

STATUS:

REQUEST CONTROL NUMBER: 0313

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

OTC LORATADINE IS BEING ADDED TO TCS AS A PREFERRED DRUG. PLEASE START RETURNING THE MESSAGE 'THE PREFERRED NON-SEDATING ANTIHISTAMINE IS OTC LORATADINE' AS SOON AS POSSIBLE ON THE FOLLOWING GCN'S, AND EFFECTIVE MAY 1, 2003 CHANGE THE FORMULARY COVERAGE INDICATOR TO X (NON-PREFERRED)

ALLEGRA	46593
ALLEGRA	46591
ALLEGRA	37198
ALLEGRA	46594
ALLEGRA-D	63565
CLARINEX	12762
CLARITIN	60563 (LEGEND ONLY)
CLARITIN	60521 (LEGEND ONLY)
CLARITIN LIQUID	60562 (LEGEND ONLY)
CLARITIN-D	63577 (LEGEND ONLY)
CLARITIN-D	63570 (LEGEND ONLY)
ZYRTEC	49291
ZYRTEC	49292
ZYRTEC LIQUID	49294
ZYRTEC-D	13866

THE FOLLOWING ARE THE PREFERRED DRUGS AND WILL BE SCRIPT LIMIT EXEMPT YES EFFECTIVE MAY 1, 2003:

60521 (OTC ONLY)
60562 (OTC ONLY)
60563 (OTC ONLY)
63570 (OTC ONLY)
63577 (OTC ONLY)

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

NUMBER - 0313 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 2

ENTERED-03/21/03 PRIORITY- EST-DAYS-000 REQD-05/01/03

BEGIN-03/21/03 COMPLETE-07/28/03 CLOSE-

ADDENDUM AS OF APRIL 10, 2003:

TO CORRESPOND WITH THE ABOVE REQUEST, PLEASE REMOVE THE FOLLOWING GCN SEQUENCE NUMBERS FROM THE EPA TABLE EFFECTIVE WITH THE DRUG FILE UPDATE THE WEEK OF MAY 5, 2003:

017037
017181
018697
018698
024484
027475
027622
028136
030476
031689
033716
036868
045261
047763
048415

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL AND RANDY STAMP.

ADDENDUM AS OF JULY 21, 2003:

PLEASE ADD GCN 19716 (CLARINEX REDI-TABS) TO THE LIST OF NON-PREFERRED, NON-SEDATING ANTIHISTIMINES AND CHANGE THE FORMULARY COVERAGE INDICATOR TO X (NON-PREFERRED).

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

THE MESSAGE BEING RETURNED WAS ADDED ON 4/07/03 TO PROGRAM RXOC0417.

NUMBER - 0313 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 3

ENTERED-03/21/03 PRIORITY- EST-DAYS-000 REQD-05/01/03

BEGIN-03/21/03 COMPLETE-07/28/03 CLOSE-

03/21/03. ADDED - 179.

NUMBER - 0314 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-03/21/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/21/03 COMPLETE-05/06/03 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0314

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODE TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQUENCE NUMBERS:	CRITERIA CODE
WELLBUTRIN	046238, 046239, 050496	014

TO COINCIDE WITH PROVIDER NOTIFICATION, PLEASE IMPLEMENT THIS REQUEST WITH THE DRUG FILE UPDATE THE WEEK OF MAY 5, 2003.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

GCN AND CC CODES WERE ADDED TO COPY MEMBERS WT090010 AND WH010088 AND PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RE-COMPILED.

03/21/03. ADDED - 179.

05/05/03. UPDATED - 521.

NUMBER - 0315 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-04/18/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-04/18/03 COMPLETE-04/21/03 CLOSE-

DESCRIPTION: SCRIPT LIMIT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0315

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

DRUG	NDC	GCN	SLE INDICATOR
ARANESP 150 MCG		17763	NO
ARANESP 300 MCG		17764	NO
AVITA		22882	YES
DICLOXACILLIN	00093312301		YES
DICLOXACILLIN	00093312501		YES
DICLOXACILLIN	00904264760		YES
DICLOXACILLIN	59772604801		YES
ERYTHROMYCIN		33540	YES
METHIMAZOLE	00185021010		YES
METHIMAZOLE	49884064801		YES
METHIMAZOLE	49884068955		YES
MORPHINE SULPHATE	00054458225		YES
MORPHINE SULPHATE	00054458325		YES
MORPHINE SULPHATE	00054858211		YES
MORPHINE SULPHATE	00054858224		YES
MORPHINE SULPHATE	00054858311		YES
MORPHINE SULPHATE	00054858324		YES
MORPHINE SULPHATE	00074113303		YES
MORPHINE SULPHATE	00074113304		YES
MORPHINE SULPHATE	00074113321		YES
MORPHINE SULPHATE	00074113322		YES
MORPHINE SULPHATE	00074113403		YES
MORPHINE SULPHATE	00074113405		YES
MORPHINE SULPHATE	00074113422		YES
MORPHINE SULPHATE	00074617714		YES
MORPHINE SULPHATE	00074617914		YES
MORPHINE SULPHATE	58177031304		YES

NUMBER - 0315 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 2

ENTERED-04/18/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-04/18/03 COMPLETE-04/21/03 CLOSE-

MORPHINE SULPHATE	60793006301	YES
MORPHINE SULPHATE	60793006401	YES
MORPHINE SULPHATE	60793009340	YES
MORPHINE SULPHATE	60793009450	YES
MORPHINE SULPHATE	61703022321	YES
MORPHINE SULPHATE	61703023132	YES
PROPYLTYHIOURACIL	00005460923	YES
PROPYLTYHIOURACIL	00005460934	YES
PROPYLTYHIOURACIL	00143148001	YES
PROPYLTYHIOURACIL	00143148010	YES
PROPYLTYHIOURACIL	00228234810	YES

SYSTEM SPECIFICATIONS:

CHANGES MADE TO RXMFFORM IN CORRESPONDING SCRIPT LIMIT EXEMPT CATEGORIES.

04/18/03. ADDED - 521.

04/21/03. UPDATED - 521.

NUMBER - 0316 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-05/20/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/20/03 COMPLETE-05/27/03 CLOSE-

DESCRIPTION: SCRIPT LIMIT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0316

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

DRUG	GCN	SLE INDICATOR
FUZEON	19346	YES
ALLEGRA	46591	NO
ALLEGRA	46593	NO
ALLEGRA	46594	NO
ALLEGRA	63565	NO

SYSTEM SPECIFICATIONS:

CHANGES MADE TO RXMFFORM IN CORRESPONDING SCRIPT LIMIT EXEMPT CATEGORIES.

05/23/03. ADDED - 521.

05/23/03. UPDATED - 521.

NUMBER - 0317 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-05/23/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/23/03 COMPLETE-05/27/03 CLOSE-

DESCRIPTION: BYPASS EXECP 18 FOR PHS PROVS

STATUS:

REQUEST CONTROL NUMBER: 0317

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 18 - MISSING/INVALID METRIC QUANTITY AND MAKE THE FOLLOWING CHANGES TO THE LIST OF PHS REBATE EXEMPT PROVIDERS THAT BYPASS THE VARIANCE:

DELETE 4915851, 4922818, 4927123

ADD 4925840 AND 4927666.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO RXOC0445 IN WH-210-PHS-EXEMPT-PROVIDER.

05/23/03. ADDED - 521.

05/23/03. UPDATED - 521.

NUMBER - 0318 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-05/30/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/30/03 COMPLETE-06/06/03 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0318

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GCN SEQUENCE NUMBERS AND CORRESPONDING CRITERIA CODE TO THE EPA TABLE. INDICATE 'E' IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GCN SEQUENCE NUMBERS:	CRITERIA CODE
RISPERDAL	051799, 051800, 052049	054, 104

SYSTEM SPECIFICATIONS:

GCN AND CC CODES WERE ADDED TO COPY MEMBERS WT090010 AND WH010088 AND PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RE-COMPILED.

05/30/03. ADDED - 521.

06/02/03. UPDATED - 521.

NUMBER - 0319 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-06/13/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/13/03 COMPLETE-06/16/03 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT INDICATORS

STATUS:

REQUEST CONTROL NUMBER: 0319

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR ON PAGE 5 OF THE DRUG FILE.

DRUG	NDC	SLE INDICATOR
KETOCANAZOLE	00093084092	Y
HYDROCORTIZONE	00093916871	Y
FERROUS SULFATE	00121053005	Y
HYDROCHOLORATHIAZIDE	00172208380	Y
COL-PROBENICID	00172219360	Y
CYPROHEPTADINE	00172292960	Y
THEOPHYLLINE	00258363401	Y
STERILE WATER, IRRIGATION	00338000404	Y
LOPERAMIDE	00378210001	Y
LEXAPRO	00456210108	Y
CHLORHEXIDINE	00472003616	Y
PHENOBARB	00603516821	Y
AMANTADINE	00832101500	Y
CALCITRIOL MCG/ML AMP	63323073101	Y
LOPROX 1% SHAMPOO	99207001010	N

DRUG	GCN	SLE INDICATOR
CALCITRIOL	19225	Y
CALCITRIOL	19225	Y

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

NUMBER - 0319 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 2

ENTERED-06/13/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/13/03 COMPLETE-06/16/03 CLOSE-

CHANGES MADE TO RXMFFORM IN CORRESPONDING SCRIPT LIMIT EXEMPT CATEGORIES.

06/13/03. ADDED - 179.

06/16/03. UPDATED - 521.

NUMBER - 0320 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-06/18/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/18/03 COMPLETE-06/23/03 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT INDICATORS

STATUS:

REQUEST CONTROL NUMBER: 0320

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE CHANGE THE SCRIPT LMIT EXEMPT INDICATOR ON PAGE 5 OF THE DRUG FILE TO N (NO) FOR BRAND NAME DRUGS ONLY IN THE THE FOLLOWING GCNS:

DRUG	GCN
12289	PROTOPIC
12302	PROTOPIC
15348	ELIDEL
22870	TRETINOIN
22871	TRETINOIN
22880	TRETINOIN
22881	TRETINOIN
22882	TRETINOIN
22890	TRETINOIN

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO RXMFFORM IN CORRESPONDING SCRIPT LIMIT EXEMPT CATEGORIES.

06/18/03. ADDED - 179.

06/19/03. UPDATED - 521.

NUMBER - 0321 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-06/30/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-06/30/03 COMPLETE-07/07/03 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0321

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE CHANGE THE SCRIPT LIMIT INDICATOR ON PAGE 5 OF THE DRUG FILE TO N (NO) FOR BRAND NAME AND Y (YES) FOR GENERIC IN THE FOLLOWING GCNS:

GCN	DRUG
14148	CHLORPHENIRAMINE/PHENYLEPHRINE
17775	CARBINOXAMINE/PSEUDOEPHREDINE
18153	CARBINOXAMINE/PSEUDOEPHREDINE
51235	CARBINOXAMINE/PSEUDOEPHREDINE
89541	CARBINOXAMINE/PSEUDOEPHREDINE
95114	BROMPHENIRAMINE/PSEUDOEPHEDRINE
96413	BROMPHENIRAMINE/PSEUDOEPHEDRINE
96444	TRIPOLIDINE/PSUEDOEPHEDRINE

SYSTEM SPECIFICATIONS:

CHANGES MADE TO PROGRAM RXMFFORM TO CHECK GCNS FOR SCRIPT LIMIT EXEMPT AND BRAND NAME OR GENERIC.

06/30/03. ADDED - 179.

07/12/03. UPDATED - 521.

NUMBER - 0322 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-07/15/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/15/03 COMPLETE-07/28/03 CLOSE-

DESCRIPTION: NON-PREFERRED MESAGE - OXYBUT

STATUS:

REQUEST CONTROL NUMBER: 0322

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE RETURN THE SOFT EDIT RETURN MESSAGE 'NON-PREFERRED DRUG, THE PREFERRED DRUG IS OXYBUTYNIN IR' ON THE FOLLOWING:

DRUG	GCN
DETROL LA 4MB TABLET	12263
DETROL LA 2MG TABLET	12264
OXYTROL 3.9 MG/24 HR PATCH	19363
DITROPAN 5MG/ML SYRUP	19370 (BRAND ONLY)
DITROPAN 5MG TABLET	19380 (BRAND ONLY)
DITROPAN XL 5MG TABLET	19388
DITROPAN XL 10MG TABLET	19389
DETROL 1MG TABLET	37061
DETROL 2MG TABLET	37062
DITROPAN XL 15MG TABLET	93557

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

MODIFIED PROGRAM LOGIC IN RXOC0417.

07/15/03. ADDED - 179.

07/28/03. UPDATE - 521.

NUMBER - 0323 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-07/15/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/15/03 COMPLETE-07/28/03 CLOSE-

DESCRIPTION: NON-PREFERRED MESSAGE - ACE

STATUS:

REQUEST CONTROL NUMBER: 0323

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE RETURN THE SOFT EDIT RETURN MESSAGE 'NON-PREFERRED DRUG, PREFERRED DRUGS ARE GENERIC CAPTOPRIL, ENALAPRIL, LISINOPRIL' ON THE FOLLOWING:

DRUG	GCN
VASOTEC 5MG	00960 (BRAND ONLY)
VASOTEC 10MG	00961 (BRAND ONLY)
VASOTEC 20MG	00962 (BRAND ONLY)
VASOTEC 2.5MG	00963 (BRAND ONLY)
CAPOTEN 100MG	01480 (BRAND ONLY)
CAPOTEN 25MG	01481 (BRAND ONLY)
CAPOTEN 50MG	01482 (BRAND ONLY)
CAPOTEN 12.5MG	01483 (BRAND ONLY)
ACEON 2MG	13758
ACEON 4MG	13759
MAVIK 1MG	32191
MAVIC 2MG	32192
MAVIC 4MG	32193
LOTENSIN HCT 5/6.25MG	33191 (BRAND ONLY)
LOTENSIN HCT 10/12.5MG	33192
LOTENSIN HCT 20/12.5MG	33193
LOTENSIN HCT 20/25MG	33194
PRINIVIL/ZESTRIL 5MG	47260 (BRAND ONLY)
PRINIVIL/ZESTRIL 10MG	47261 (BRAND ONLY)
PRINIVIL/ZESTRIL 20MG	47262 (BRAND ONLY)
PRINIVIL/ZESTRIL 40MG	47263 (BRAND ONLY)
PRINIVIL/ZESTRIL 2.5MG	47264 (BRAND ONLY)
ZESTRIL 30MG	47265 (BRAND ONLY)
ALTACE 1.25MG	48541
ALTACE 2.5MG	48542
ALTACE 5MG	48543

NUMBER - 0323 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 2

ENTERED-07/15/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/15/03 COMPLETE-07/28/03 CLOSE-

ALTACE 10MG	48544
UNIVASC 7.5MG	48561
UNIVASC 15MG	48562
MONOPRIL 40MG	48580
MONOPRIL 10MG	48581
MONOPRIL 20MG	48582
LOTENSIN 5MG	48611
LOTENSIN 10MG	48612
LOTENSIN 20MG	48613
LOTENSIN 40MG	48614
ACCUPRIL 5MG	48691
ACCUPRIL 10MG	48692
ACCUPRIL 20MG	48693
ACCUPRIL 40MG	48694
VASERETIC 10-25MG	54860 (BRAND ONLY)
VASERITIC 5-12.5MG	54862 (BRAND ONLY)
CAPOZIDE 25/15MG	54940 (BRAND ONLY)
CAPOZIDE 25/25MG	54941 (BRAND ONLY)
CAPOZIDE 50/15MG	54942 (BRAND ONLY)
CAPOZIDE 50/25MG	54943 (BRAND ONLY)
PRINIZIDE/ZESTORETIC 20/12.5MG	88000 (BRAND ONLY)
PRINIZIDE/ZESTORETIC 20/25MG	88001 (BRAND ONLY)
PRINIZIDE/ZESTORETIC 10/12.5MG	88002 (BRAND ONLY)
ACEON 8MG	93207

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

MODIFIED PROGRAM LOGIC IN RXOC0417.

07/15/03. ADDED - 179.

07/28/03. UPDATED - 521.

NUMBER - 0324 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-07/15/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/15/03 COMPLETE-07/28/03 CLOSE-

DESCRIPTION: NON-PREFERRED MESSAGE - NSAIDS

STATUS:

REQUEST CONTROL NUMBER: 0324

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE RETURN THE SOFT EDIT RETURN MESSAGE "NON-PREFERRED DRUG, PREFERRED DRUGS ARE GENERIC NSAIDS" ON THE BRAND NAME DRUGS ONLY IN THE FOLLOWING GCN'S:

DRUG	GCN
DAYPRO 600MG	01750
VOLTAREN XR 100MG	13310
CATAFLAM 50MG	13960
PONSTEL 250MG	16530
MOBIC 7.5MG	31661
MOBIC 15MG	31662
TORADOL 10MG	32531
RELAFEN 500MG	32961
RELAFEN 750MG	32962
ORUVAIL 150MG	33791
ORUVAIL 200MG	33792
ORUVAIL 100MG	33793
NAPRELAN 375MG	33812
NAPRELAN 500MG	33813
LODINE 200MG	33870
LODINE 300MG	33871
ORUDIS 50MG	34420
ORUDIS 75MG	33421
ORUDIS 25MG	33422
INDOCIN 25MG	35680
INDOCIN 50MG	35681
INDOCIN 75MG	35690
ANSAID 50MG	35710
ANSAID 100MG	35711
MOTRIN 400MG	35741
MOTRIN 600MG	35742

NUMBER - 0324 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 2

ENTERED-07/15/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/15/03 COMPLETE-07/28/03 CLOSE-

MOTRIN 800MG	35744
NALFON 200MG	35750
NALFON 300MG	35751
NALFON 600MG	35760
TOLECTIN DS 400MG	35770
TOLECTIN 200MG	35780
TOLECTIN 600MG	35781
NAPROSYN 250MG	35790
NAPROSYN 375MG	35792
NAPROSYN 500MG	35793
CLINORIL 150MG	35800
CLINORIL 200MG	35801
MECLOMEN 100MG	35810
MECLOMEN 50MG	35811
FELDENE 10MG	35820
FELDENE 20MG	35821
VOLTAREN 25MG	35850
VOLTAREN 50MG	35851
VOLTAREN 75MG	35852
ANAPROX 275MG	47130
ANAPROX DS 550MG	47131
LODINE 400MG	61761
LODINE XL 600MG	61762
LODINE EX 400MG	61765
LODINE 500MG	61766
LODINE EX 500MG	61767
NAPROSYN 375MG EC	61850
NAPROSYN 500MG EC	61851

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

MODIFIED PROGRAM LOGIC IN RXOC0417.

07/15/03. ADDED - 179.

NUMBER - 0324 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 3

ENTERED-07/15/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/15/03 COMPLETE-07/28/03 CLOSE-

07/28/03. UPDATED - 521.

NUMBER - 0325 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-07/16/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/16/03 COMPLETE-07/18/03 CLOSE-

DESCRIPTION: BYPASS EDIT 70 FOR PLAN 255

STATUS:

REQUEST CONTROL NUMBER: 0325

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ 70, PLAN 255, MEDICARE DUAL ELIGIBLES. THE FOLLOWING THERAPEUTIC CLASS CODES HAVE ALREADY BEEN ADDED TO THE LIST OF DRUGS NOT COVERED ON THE PLAN FILE:

M4A BLOOD SUGAR DIAGNOSTICS
Y3A DME, MISCELLANEOUS

PLEASE BYPASS THIS EDIT FOR THESE CLASSES IF DUR OUTCOME CODE IS EQUAL TO 1B (CLAIM DENIED BY MEDICARE), OR IF ELIGIBILITY OVERRIDE CODE IS EQUAL TO 2 (BABY ON PARENTS PIC).

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

ADDED THERAPEUTIC CLASS CODES TO WH-130-TXCL-MEDICARE-COVERED WHICH IS CHECKED IN PROGRAM RXOC0445.

07/16/03. ADDED - 179.

07/28/03. UPDATED - 521.

NUMBER - 0326 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-07/21/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/21/03 COMPLETE-07/28/03 CLOSE-

DESCRIPTION: REMOVE TWO SOFT PDL MESSAGES

STATUS:

REQUEST CONTROL NUMBER: 0326

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE REMOVE THE FOLLOWING TWO RETURN MESSAGES FROM POS:

ENALAPRIL, CAPTOPRIL, AND LISINOPRIL ARE PREFERRED, SEE DSHS MEMO #02-62

ALLEGRA IS THE PREFERRED DRUG, SEE DSHS MEMO #02-62

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

REMOVED POSTING OF MESSAGES WK-030-NON-PREF-ACE AND WK-030-NON-PREF-ANTI FROM PROGRAM RXOC0417.

07/21/03. ADDED - 179.

07/28/03. UPDATED - 521.

NUMBER - 0327 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-07/22/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-07/22/03 COMPLETE-07/28/03 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT INDICATORS

STATUS:

REQUEST CONTROL NUMBER: 0327

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR ON PAGE 5 OF THE DRUG FILE:

DRUG	NDC	SLE INDICATOR
VANCOMYCIN	00002896725	Y
HYDRALAZINE	50111032801	Y
PHENOBARB	00603516732	Y
KETOCONAZOLE	00093084092	Y
CLARINEX REDI-TAB	00085128001	N (NO)
CIPRO	00555081502	Y

SYSTEM SPECIFICATIONS:

NDC CODES ADDED TO SLE TABLE IN RXMFFORM.

07/22/03. ADDED - 179.

07/28/03. UPDATED - 521.

NUMBER - 0328 SUB BY- PATTY ORTH SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-08/04/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/04/03 COMPLETE-08/25/03 CLOSE-

DESCRIPTION: REPORT OF PA TYPES AND COUNTS

STATUS:

REQUEST CONTROL NUMBER: 0328

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE PROVIDE A REPORT LISTING A BREAKDOWN OF AUTHORIZATION TYPES AND THE COUNT OF EACH FOR THE LAST SIX MONTHS.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

REPORT CREATED AS REQUESTED.

08/04/03. ADDED - 179.

NUMBER - 0329 SUB BY- PATTY ORTH SUB FOR- CONNIE RIDDLE PAGE- 1

ENTERED-08/12/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/12/03 COMPLETE-08/25/03 CLOSE-

DESCRIPTION: ADD PHS PROVIDERS TO REJ 18

STATUS:

REQUEST CONTROL NUMBER: 0329

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 18 - MISSING/INVALID METRIC QUANTITY. ADD 4929836, 4930043, AND 4930194 TO THE LIST OF PHS REBATE EXEMPT PROVIDERS THAT BYPASS THE VARIANCE.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CODE ADDED TO WH-210-PHS-EXEMPT-PROVIDER IN RXOC0445.

08/12/03. ADDED - 179.

08/25/03. UPDATED - 521.

NUMBER - 0330 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-08/12/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/12/03 COMPLETE-08/25/03 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0330

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THERE IS A NEW STRENGTH OF ABILIFY, PLEASE ADD THE FOLLOWING TO THE EPA TABLE:

DRUG	GSN'S:	CRITERIA CODE
ABILIFY	052898	015

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CODE ADDED TO COPY MEMBERS WH010088 AND WT009010. PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RECOMPILED.

08/12/03. ADDED - 179.

08/25/03. UPDATED - 521.

NUMBER - 0331 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-08/12/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/12/03 COMPLETE-09/22/03 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES 09/22

STATUS:

REQUEST CONTROL NUMBER: 0331

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO COINCIDE WITH PROVIDER NOTIFICATION, PLEASE ADD THE FOLLOWING
TO THE EPA TABLE WITH THE DRUG FILE UPDATE THE WEEK OF
SEPTEMBER 22, 2002:

DRUG	GSN'S:	CRITERIA CODE:
SUBOXONE	051640, 051641	019

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CODING CHANGES WERE MADE TO COPY MEMBERS WH010088 AND WT009010.
PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RECOMPILED.

08/12/03. ADDED - 179.

09/22/03. UPDATED - 521.

NUMBER - 0332 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-08/12/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/12/03 COMPLETE-10/06/03 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES 10/6

STATUS:

REQUEST CONTROL NUMBER: 0332

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO COINCIDE WITH PROVIDER NOTIFICATION, PLEASE ADD ALL OF THE FOLLOWING TO THE EPA TABLE WITH THE DRUG FILE UPDATE THE WEEK OF OCTOBER 6, 2003:

DRUG:	GSN'S:	ADD CC:	DELETE CC:
ALTACE	015939,015940,015941,016031	020	
REBIF	050035,050039	119	012

PLEASE DELETE CRITERIA CODE 104 ONLY FROM THE FOLLOWING GSN'S FOR RISPERDAL, ZYPREXA, AND ZYPREXA ZYDIS:

021154	027959	041027	047285
021155	027960	042922	047286
021156	027961	042923	051799
021157	029077	045190	051800
026177	041026	045191	052049

SYSTEM SPECIFICATIONS:

CODING CHANGES WERE MADE TO COPY MEMBERS WH010088 AND WT009010. PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RECOMPILED.

08/12/03. ADDED - 179.

10/06/03. UPDATED - 521.

NUMBER - 0333 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-08/12/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/12/03 COMPLETE-08/25/03 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0333

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

NDC	DRUG	SLE
49884000901	ISOSORBIDE	Y
00338070434	KCL	Y
65880000145	AVAR GEL	N
65880000245	GREEN GEL	N

GCN	DRUG	SLE
05700	IMITREX	Y
05701	IMITREX	Y
05702	IMITREX	Y
12805	FLEXERIL	Y
12867	NEXIUM	Y
12868	NEXIUM	Y
13097	ELA MAX	N
19299	RAPAMUNE	Y
19578	GLUCOPHAGE XR	N (BRAND ONLY)
19591	MAXALT 5MG	Y
19592	MAXALT 10MG	Y
19907	GLEEVEC	Y
19908	GLEEVEC	Y
19949	REYATAZ	Y
23021	LACTIC ACID	Y (GENERIC ONLY)
23045	LACTIC ACID	Y (GENERIC ONLY)
25140	FACTOR IX	N (BRAND ONLY)
25142	FACTOR IX	N (BRAND ONLY)
25143	FACTOR IX	N (BRAND ONLY)
25144	FACTOR IX	N (BRAND ONLY)

NUMBER - 0333 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 2

ENTERED-08/12/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/12/03 COMPLETE-08/25/03 CLOSE-

25146	FACTOR IX	N (BRAND ONLY)
25147	FACTOR IX	N (BRAND ONLY)
25220	FEIBA	N (BRAND ONLY)
25221	AUTOPLEX T	N (BRAND ONLY)
37070	SIMPLE SYRUP	Y (GENERIC ONLY)
50740	IMITREX	Y
50741	IMITREX	Y
50744	IMITREX	Y
91671	FACTOR IX	N (BRAND ONLY)
91672	FACTOR IX	N (BRAND ONLY)
91673	FACTOR IX	N (BRAND ONLY)
91674	FACTOR IX	N (BRAND ONLY)
94639	ACIPHEX	Y
95405	ELA MAX	N

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO APPROPRIATE NDC AND GCN EXEMPT TABLES IN PROGRAM RXMFFORM.

08/12/03. ADDED - 179.

08/25/03. UPDATED - 521.

NUMBER - 0334 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-08/12/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/12/03 COMPLETE-08/25/03 CLOSE-

DESCRIPTION: CHANGES TO LORATIDINE MESSAGE

STATUS:

REQUEST CONTROL NUMBER: 0334

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE START RETURNING THE MESSAGE 'THE PREFERRED NON-SEDATING ANTIHISTAMINE IS OTC LORATADINE' ON GCN 19716 (CLARINEX REDI-TAB) AND CHANGE THE FORMULARY COVERAGE INDICATOR TO X (NON-PREFERRED)

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES WERE MADE TO PROGRAM RXOC0417 TO RETURN SOFT EDIT MESSAGE.

08/12/03. ADDED - 179.

08/25/03. UPDATED - 521.

NUMBER - 0335 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-08/27/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/27/03 COMPLETE-09/02/03 CLOSE-

DESCRIPTION: SOFT EDIT FOR MAXALT / IMITREX

STATUS:

REQUEST CONTROL NUMBER: 0335

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE RETURN THE SOFT EDIT RETURN MESSAGE 'NON-PREFERRED DRUG,
THE PREFERRED TRIPTANS ARE MAXALT AND IMITREX' ON THE FOLLOWING:

DRUG	GCN
AXERT	12472
AXERT	13587
ZOMIG ZMT	14324
FROVA	14977
RELPAX	15173
RELPAX	15173
MAXALT MLT	19593
MAXALT MLT	19594
ZOMIG ZMT	42098
ZOMIG	46131
ZOMIG	46132
81111	AMERGE
81112	AMERGE

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CODE WAS ADDED TO PROGRAM RXOC0417 TO CHECK THE GCN AND POST
THE MESSAGE.

08/27/03. ADDED - 179.

NUMBER - 0335 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 2

ENTERED-08/27/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/27/03 COMPLETE-09/02/03 CLOSE-

09/02/03. UPDATED - 521.

NUMBER - 0336 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-08/27/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/27/03 COMPLETE-09/02/03 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0336

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD THE FOLLOWING GSN'S TO THE EPA TABLE. INDICATE 'E'
IN THE FORMULARY INDICATOR FIELD ON PAGE 5 OF THE POS SYSTEM.

DRUG	GSN'S:	CRITERIA CODE
BENICAR HCT	052833, 052834, 052835	092
AVONEX	052822	119

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CODING CHANGES WERE MADE TO COPY MEMBERS WH010088 AND WT009010.
PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RECOMPILED.

08/27/03. ADDED - 179.

09/02/03. UPDATED - 521.

NUMBER - 0337 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-08/27/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/27/03 COMPLETE-09/02/03 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT INDICATORS

STATUS:

REQUEST CONTROL NUMBER: 0337

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

DRUG	NDC	SLE
CYPROHEPTADINE SYRUP	00472075516	Y
PROMETHAZINE VC SYRUP	00472162804	Y
CIPROFLOXACIN HCL	00555081502	Y
CIPROFLOXACIN HCL	00555081610	Y
KETOCONAZONLE CREAM	51672129803	Y
PSEUDOVENT CAPSULE SA	58177004504	Y
METOCLOPRAMIDE	60432062216	Y
METHADONE HCL	64019053825	Y

GCN	DRUG	SLE
17374	OVACE WASH	N (BRAND ONLY)
18803	SINGULAIR	N (BRAND ONLY)
19586	IRESSA	Y
19949	REVATAZ	Y
19967	ARANESP	N (BRAND ONLY)
19968	ARANESP	N (BRAND ONLY)
19971	ARANESP	N (BRAND ONLY)
20074	BENICAR HCT	N (BRAND ONLY)
20075	BENICAR HCT	N (BRAND ONLY)
20076	BENICAR HCT	N (BRAND ONLY)
20147	AVONEX	N (BRAND ONLY)
24774	UREA	N (BRAND ONLY)
31760	ERYTHROMYCIN	Y (GENERIC ONLY)
69500	ANALGESICS	N (BRAND ONLY)
84622	PRAMOSONE	N (BRAND ONLY)
96334	LOVENOX	N (BRAND ONLY)

NUMBER - 0337 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 2

ENTERED-08/27/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-08/27/03 COMPLETE-09/02/03 CLOSE-

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

NDC AND GCN CODES WERE ADDED TO PROGRAM RXMFFORM.

08/27/03. ADDED - 179.

08/29/03. UPDATED - 521.

NUMBER - 0338 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 1

ENTERED-09/15/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/15/03 COMPLETE-09/15/03 CLOSE-

DESCRIPTION: CHANGES TO SCRIPT LIMIT EXEMPT

STATUS:

REQUEST CONTROL NUMBER: 0338

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

NDC	DRUG	SLE
00002103704	PHENOBARBITAL 50MG TAB	Y
00054380563	SPS 15MG/60ML SUSP	Y
00143124801	FOLIC ACID 1MG TAB	Y
00172208360	HYDROCHLOROTHIAZIDE	Y
00172208980	HYDROCHLOROTHIAZIDE	Y
00555038087	CIPROFLOXACIN 10% SUSP	Y
00555081502	CIPROFLOXACIN 500MG TAB	Y
00555081610	CIPROFLOXACIN 750MG TAB	Y
00603278521	CHLORPHENIRAMINE 12MG	Y
00677167701	QUININE SULFATE 325MG CAP	Y
50111031401	CYPHROHEPTADINE 4MG TAB	Y
50383080316	PROMETHAZINE W/DM SYRUP	Y
60432045716	PAREGORIC LIQUID	Y
63304070801	MORPINE SULFATE 30MG TAB	Y

GCN	DRUG	SLE
54941	CAPROPRIL/HCTZ	Y (GENERIC ONLY)
84133	ANALPRAM-HC	N (BRAND ONLY)
84137	ANALPRAM-HC	N (BRAND ONLY)

SYSTEM SPECIFICATIONS:

PROGRAM CHANGES MADE TO RXMFFORM TO ADD THESE NDC AND GCN VALUES.

NUMBER - 0338 SUB BY- PATTY ORTH SUB FOR- VALERIE VERTZ PAGE- 2

ENTERED-09/15/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/15/03 COMPLETE-09/15/03 CLOSE-

09/15/03. ADDED - 179.

09/15/03. UPDATED - 521.

NUMBER - 0339 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-09/24/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/24/03 COMPLETE-10/06/03 CLOSE-

DESCRIPTION: CHANGES TO SCRIPT LIMIT EXEMPT

STATUS:

REQUEST CONTROL NUMBER: 0339

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

NDC	DRUG	SLE
00054380563	SPS	Y
00338102541	PEN GK	Y
00338350341	CEFAZOLIN	Y

GCN	DRUG	SLE
16277	MORPHINE SULFATE	Y
17604	LOTREL	Y
19846	MORPHINE SULFATE	Y
20019	EMTRIVA	Y
20145	STALEVO	N (BRAND ONLY)
20146	STALEVO	N (BRAND ONLY)
20150	STALEVO	N (BRAND ONLY)
32111	TARKA	Y
32112	TARKA	Y
32113	TARKA	Y
32114	TARKA	Y
33090	LOTREL	Y
33092	LOTREL	Y
33093	LOTREL	Y
48230	LABETALOL	Y
89435	HUMATE-P	N (BRAND ONLY)
89436	HUMATE-P	N (BRAND ONLY)

PLEASE CHANGE THE SCRIPT LIMIT EXEMPT INDICATOR TO 'Y' FOR THE FOLLOWING SPECIFIC THERAPEUTIC CLASSES:

NUMBER - 0339 SUB BY- PATTY SUB FOR- VALERIE PAGE- 2

ENTERED-09/24/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/24/03 COMPLETE-10/06/03 CLOSE-

H2G
H2I
H2J
H2J
H2K
H2L
H2N
H2O
H2S
H2U
H2W
H2X
H2Y
H4B
H4C
H7A
H7B
H7C
H7D
H7E
H7F
H7J
H7O
H7P
H7R
H7S
H7T
H7U
H7X

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

PROGRAM CHANGES MADE TO RXMFFORM TO ADD THESE NDC, GCN AND .
THERAPEUTIC CLASS VALUES.

NUMBER - 0339 SUB BY- PATTY SUB FOR- VALERIE PAGE- 3

ENTERED-09/24/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/24/03 COMPLETE-10/06/03 CLOSE-

09/24/03. ADDED - 521.

10/06/03. UPDATED - 521.

NUMBER - 0340 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-09/24/03 PRIORITY- EST-DAYS-000 REQD-10/01/03

BEGIN-09/24/03 COMPLETE-10/01/03 CLOSE-

DESCRIPTION: TCS AND MESSAGE CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0340

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

NEXIUM AND ACIPHEX ARE BEING ADDED TO THERAPEUTIC CONSULTATION SERVICES AS PREFERRED DRUGS EFFECTIVE 10/01/03. PLEASE CHANGE GENERIC CODE NUMBERS 12867, 12868, AND 94639 TO COVERED, AND CHANGE THE RETURN MESSAGE TO 'NON-PREFERRED DRUG, THE PREFERRED DRUGS ARE ACIPHEX, NEXIUM, PREVACID AND PROTONIX'.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CODE ADDED TO RXOC0417 FOR MESSAGE CHANGE AND GCNS ADDED TO RXMFFORM.

09/24/03. ADDED - 521.

10/01/03. UPDATED - 521.

NUMBER - 0341 SUB BY- PATTY SUB FOR- MMIS SVCS PAGE- 1

ENTERED-09/24/03 PRIORITY- EST-DAYS-000 REQD-10/06/03

BEGIN-09/24/03 COMPLETE-10/06/03 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0341

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THERE IS A NEW STRENGTH OF CLOZAINE, PLEASE ADD GSN 053016 WITH CRITERIA CODE 018 TO THE EPA TABLE.

THE GSN'S ARE CHANGING TO METADATE CD AND RITALIN LA EFFECTIVE THE WEEK OF OCTOBER 6, 2003. PLEASE ADD GSN'S 053056, 053058, 053059, 053060 AND 053061 WITH CRITERIA CODE 149 TO THE EPA TABLE. PLEASE DELETE THE OLD GSN'S 047782, 050566, AND 050567 FROM THE EPA TABLE.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CODING CHANGES WERE MADE TO COPY MEMBERS WH010088 AND WT009010. PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RECOMPILED.

09/24/03. ADDED - 521.

10/06/03. UPDATED - 521.

NUMBER - 0342 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-09/24/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/24/03 COMPLETE-10/06/03 CLOSE-

DESCRIPTION: CHANGE FORMULARY COVERAGE AND MSG

STATUS:

REQUEST CONTROL NUMBER: 0343

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THERE IS A NEW PRILOSEC 20MG TABLET. PLEASE CHANGE THE FORMULARY COVERAGE INDICATOR TO X (NON-PREFERRED) FOR GCN 08454 AND RETURN THE MESSAGE 'NON-PREFERRED DRUG, THE PREFERRED DRUGS ARE ACIPHEX, NEXIUM, PREVACID AND PROTONIX'.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGE MADE IN RXMFFORM FOR FORMULARY COVERAGE INDICATOR AND CHANGE MADE IN RXOC0417 FOR RETURN MESSAGE.

09/24/03. ADDED - 521.

10/06/03. UPDATED - 521.

NUMBER - 0343 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-09/24/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-09/24/03 COMPLETE-10/06/03 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0343

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

NDC	DRUG	SLE
00555037987	CIPROFLOXACIN	Y
00555081402	CIPROFLOXACIN	Y

GCN	DRUG	SLE
05280	TIOCONAZOLE 6/5% OINT	N (BRAND ONLY)
08454	PROLOSEC 02MG TABLET	N
28390	MICONAZOLE 7 SUPP	N (BRAND ONLY)
69380	MICONAZOLE-3 COMBO	N (BRAND ONLY)

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

PROGRAM CHANGES MADE TO RXMFFORM TO ADD THESE NDC AND GCN VALUES.

09/24/03. ADDED - 521.

10/06/03. UPDATED - 521.

NUMBER - 0344 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-10/06/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/06/03 COMPLETE-10/29/03 CLOSE-

DESCRIPTION: SOFT EDIT FOR MORPHINE/METHADONE

STATUS:

REQUEST CONTROL NUMBER: 0344

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE RETURN THE MESSAGE 'NON-PREFERRED, PREFERRED ARE GENERIC MORPHINE SULFATE ER AND GENERIC METHADONE' ON THE FOLLOWING:

GCN	DRUG
12938	KADIAN 30MG
12939	KADIAN 60MG
15867	KADIAN 100MG
15868	KADIAN 50MG
15869	KADIAN 20MG
16282	OXYCONTIN 10MG
16283	OXYCONTIN 20MG
16284	OXYCONTIN 40MG
16286	OXYCONTIN 80MG
16350	LEVORPHANOL 2MG
17189	AVINZA 120MG
17191	AVINZA 90MG
17192	AVINZA 60MG
17193	AVINZA 30MG
19200	DURAGESIC 25MCG
19201	DURAGESIC 50MCG
19202	DURAGESIC 75MCG
19203	DURAGESIC 100MCG
92459	OXYCONTIN 160MG

NDC	DRUG
00034-0513-10	MS CONTIN 200MG
00034-0513-12	MS CONTIN 200MG
00034-0514-10	MS CONTIN 15MG
00034-0514-12	MS CONTIN 15MG
00034-0514-90	MS CONTIN 30MG

NUMBER - 0344 SUB BY- PATTY SUB FOR- VALERIE PAGE- 2

ENTERED-10/06/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/06/03 COMPLETE-10/29/03 CLOSE-

00034-0515-10 MS CONTIN 30MG
00034-0515-12 MS CONTIN 30MG
00034-0515-45 MS CONTIN 30MG
00034-0515-50 MS CONTIN 30MG
00034-0515-90 MS CONTIN 30MG
00034-0516-10 MS CONTIN 60MG
00034-0516-12 MS CONTIN 60MG
00034-0516-90 MS CONTIN 60MG
00034-0517-10 MS CONTIN 100MG
00034-0517-12 MS CONTIN 100MG
00034-0517-90 MS CONTIN 100MG
00054-4216-25 DOLOPHINE 5MG
00054-4218-25 DOLOPHINE 5MG
00054-4219-25 DOLOPHINE 10MG

TO CONICIDE WITH PROVIDER NOTIFICATION THIS NEEDS TO BE IMPLEMENTED NOVEMBER 1, 2003.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

THIS CSR WAS CANCELLED PER PATTY ORTH ON 10/29/03.

10/06/03. ADDED - 521.

10/29/03. UPDATED - 521.

NUMBER - 0345 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-10/06/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/06/03 COMPLETE-10/06/03 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0345

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THERE IS A NEW STRENGTH OF ZOMETA, PLEASE ADD GSN 051991 WITH
CRITERIA CODE 011 TO THE EPA TABLE.

SYSTEM SPECIFICATIONS:

CODING CHANGES WERE MADE TO COPY MEMBERS WH010088 AND WT009010.
PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RECOMPILED.

10/06/03. ADDED - 521.

10/06/03. UPDATED - 521.

NUMBER - 0346 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-10/17/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/17/03 COMPLETE-12/01/03 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0346

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO COINCIDE WITH PROVIDER NOTIFICATION, PLEASE ADD THE FOLLOWING TO THE EPA TABLE WITH THE DRUG FILE UPDATE THE WEEK OF DECEMBER 1, 2003:

DRUG	GSN'S:	CRITERIA CODE
PRAVOCHOL	016366,016367,020741,049753	039

ADDENDUM AS OF OCTOBER 28, 2003:

PLEASE ADD THE FOLLOWING TO THE EPA TABLE WITH THE DRUG FILE UPDATE THE WEEK OF DECEMBER 1, 2003:

DRUG	GSN'S:	CRITERIA CODES:
SOTRET	053055	001,002,003,004,005
WELLBUTRIN XL	05306, 053007	014

SYSTEM SPECIFICATIONS:

CODING CHANGES WERE MADE TO COPY MEMBERS WH010088 AND WT009010. PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RECOMPILED.

10/17/03. ADDED - 521.

10/30/03. UPDATED - 521.

NUMBER - 0347 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-10/17/03 PRIORITY- EST-DAYS-000 REQD-11/03/03

BEGIN-10/17/03 COMPLETE-11/03/03 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0347

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO COINCIDE WITH PROVIDER NOFICATION, PLEASE ADD THE FOLLOWING
OPIOD GSN'S TO THE EPA TABLE USING CRITERIA CODE 040 WITH THE
DRUG FILE UPDATE THE WEEK OF NOVEMBER 3, 2003:

004228 027493
015880 027494
015881 045129
015882 047580
015883 047581
024504 050219
024505 050200
024506 050221
024702 020222
027492

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CODING CHANGES WERE MADE TO COPY MEMBERS WH010088 AND WT009010.
PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RECOMPILED.

10/17/03. ADDED - 521.

10/30/03. UPDATED - 521.

NUMBER - 0348 SUB BY- PATTY SUB FOR- CARMEN PAGE- 1

ENTERED-10/16/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/16/03 COMPLETE-10/16/03 CLOSE-

DESCRIPTION: DISABLE COVERAGE CODE 4

STATUS:

REQUEST CONTROL NUMBER: 0348

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE DISABLE THE OTHER COVERAGE CODE 4 (OTHER COVERAGE EXISTS - PAYMENT NOT COLLECTED DUE TO EXCUSIVE NETWORK) FOR ALL DATES OF SERVICE EFFECTIVE OCTOBER 16, 2003. THIS APPLIES TO 3.2 OR 5.1 SUBMITTED CLAIMS.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES MADE AS REQUESTED.

10/16/03. ADDED - 521.

NUMBER - 0349 SUB BY- PATTY SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-10/23/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/23/03 COMPLETE-10/27/03 CLOSE-

DESCRIPTION: UPDATE EXCEPTION LOGIC

STATUS:

REQUEST CONTROL NUMBER: 0349

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 19 MISSING/INVALID DAYS SUPPLY. IN SECTION 'A' CHANGE THE MAXIMUM DAY SUPPLY ALLOWED FOR CONTRACEPTIVES TO 91.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGE MADE TO RXOC0445 TO CHANGE SUPPLY ALLOWED FROM 90 TO 91 DAYS.

10/23/03. ADDED - 521.

10/30/03. UPDATED - 521.

NUMBER - 0350 SUB BY- PATTY SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-10/16/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/16/03 COMPLETE-10/16/03 CLOSE-

DESCRIPTION: CHANGE OTHER COVERAGE CODES

STATUS:

REQUEST CONTROL NUMBER: 0350

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE CHANGE THE OTHER COVERAGE CODES IN THE FOLLOWING EXCEPTIONS EFFECTIVE OCTOBER 16, 2003 TO ACCOMODATE THE HIPAA CHANGES.

DUR/REJ 18 (MISSING/INVALID METRIC QUANTITY) CHANGE IN OTHER-INS CODE 2 TO 8.

DUR/REJ 19 (MISSING/INVALID DAYS SUPPLY) SECTION E CHANGE OTHER-INS INDICATOR 2 TO 8.

DUR/REJ 41 (SUBMIT BILL TO PRIMARY PAYER) SECTION 2, CHANGE OTHER COVERAGE CODE 2 TO 8.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES MADE AS REQUESTED.

10/16/03. ADDED - 521.

NUMBER - 0351 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-10/31/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-10/31/03 COMPLETE-11/01/03 CLOSE-

DESCRIPTION: REMOVE OXYCONTIN LIMITS

STATUS:

REQUEST CONTROL NUMBER: 0351

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE REMOVE THE OXYCONTIN 2 PER DAY LIMITS OUTLINED IN POS CSR 0229 EFFECTIVE NOVEMBER 1, 2003.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES MADE AS REQUESTED.

10/31/03. ADDED - 521.

11/05/03. UPDATED - 521.

NUMBER - 0352 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-11/04/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/04/03 COMPLETE-11/04/03 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0352

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EPA TABLE AND DELETE CRITERIA CODE 078 FROM BEXTRA GSN 049798. CRITERIA CODE 079 WILL STILL BE VALID.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CODING CHANGES WERE MADE TO COPY MEMBERS WH010088 AND WT009010. PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RECOMPILED.

11/04/03. ADDED - 521.

11/05/03. UPDATED - 521.

NUMBER - 0353 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-11/04/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/04/03 COMPLETE-11/10/03 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0353

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

NDC	DRUG	SLE
00054312041	CALCITRIOL	Y
00054368663	ROXICET	Y
00085128001	CLARINEX REDITABS	N
00143124810	FOLIC ACID	Y
00182140089	THEOPHYLLINE	Y
00591532501	PROBEN/COLCHICIEN	Y
00677067501	QUINIDINE GLUCONATE	Y
58177000109	POTASSIUM	Y
59366276205	SODIUM SULFATE	Y
63304070801	MORPHINE SULFATE	Y

GCN	DRUG	SLE
01590	DIHYDROERGOTAMINE	Y (GENERIC ONLY)
08454	PRIOLOSEC	N
14970	PROMETHAZINE	Y (GENERIC ONLY)
15001	PHENADOZ	Y (GENERIC ONLY)
15003	PHENADOZ	Y (GENERIC ONLY)
15412	PRAVACHOL	Y
20174	ADVATE	N (BRAND ONLY)
20188	CIPRODEX	N (BRAND ONLY)
20313	AVANDAMET	N (BRAND ONLY)
20314	AVANDAMET	N (BRAND ONLY)
20353	KEPPRA	Y
20419	EZFE	Y
25127	ADVATE	N (BRAND ONLY)
25130	ADVATE	N (BRAND ONLY)

NUMBER - 0353 SUB BY- PATTY SUB FOR- VALERIE PAGE- 2

ENTERED-11/04/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/04/03 COMPLETE-11/10/03 CLOSE-

25136	ADVATE	N (BRAND ONLY)
28850	PROCTO-KIT	N (BRAND ONLY)
43720	LIPITOR	Y
43721	LIPITOR	Y
43722	LIPITOR	Y
43723	LIPITOR	Y
44621	GANCICLOVIR	Y (GENERIC ONLY)
44622	GANCICLOVIR	Y (GENERIC ONLY)
48671	PRAVACHOL	Y
48672	PRAVACHOL	Y
48673	PRAVACHOL	Y
54860	ELANAPRIL	Y (GENERIC ONLY)
54862	ELANAPRIL	Y (GENERIC ONLY)

SYSTEM SPECIFICATIONS:

PROGRAM CHANGES MADE TO RXMFFORM TO ADD THESE NDC AND GCN VALUES.

11/04/03. ADDED - 521.

11/17/03. UPDATED - 521.

NUMBER - 0354 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-11/04/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/04/03 COMPLETE-12/01/03 CLOSE-

DESCRIPTION: MSG AND FORMULARY COVER IND CHG

STATUS:

REQUEST CONTROL NUMBER: 0354

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

ATORVASTATIN AND GENERIC LOVASTATIN ARE BEING ADDED TO TCS AS PREFERRED DRUGS. PLEASE START RETURNING THE MESSAGE 'NON-PREFERRED DRUG, PREFERRED DRUGSS ARE ATORVASTATIN AND GENERIC LOVASTATIN' AS SOON AS POSSIBLE ON THE FOLLOWING, AND EFFECTIVE DECEMBER 1, 2003, CHANGE THE FORMULARY COVERAGE INDICATOR TO X (NON-PREFERRED):

NDC	DRUG
00006073061	MEVACOR 10MG
00006073161	MEVACOR 20MG
00006073182	MEVACOR 20MG
00006073194	MEVACOR 20MG
00006073261	MEVACOR 40MG
00006073282	MEVACOR 40MG
00006073294	MEVACOR 40MG

GCN	DRUG
00030	LESCOL 20MG
00031	LESCOL 40MG
15165	ADVICOR 20/500
15166	ADVICOR 20/750
15167	ADVICOR 20/1000
17650	ALTOCOR 10MG
17651	ALTOCOR 20MG
17652	ALTOCOR 40MG
17654	ALTOCOR 60MG
19153	CRESTOR 10MG
19154	CRESTOR 20MG
19155	CRESTOR 40MG
20229	CRESTOR 5MG
26531	ZOCOR 5MG

NUMBER - 0354 SUB BY- PATTY SUB FOR- VALERIE PAGE- 2

ENTERED-11/04/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/04/03 COMPLETE-12/01/03 CLOSE-

26532	ZOCOR 10MG
26533	ZOCOR 20MG
26534	ZOCOR 40MG
26535	ZOCOR 80MG
89424	LESCOL XL 80MG

SYSTEM SPECIFICATIONS:

MESSAGE CHANGE MADE IN RXOC0417 AND RXOC0422 FOR WEEK OF 11/10.

11/04/03. ADDED - 521.

NUMBER - 0355 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-11/04/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/04/03 COMPLETE-11/10/03 CLOSE-

DESCRIPTION: MSG CHANGE FOR PREFERRED DRUGS

STATUS:

REQUEST CONTROL NUMBER: 0355

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE RETURN THE MSSAGE 'NON-PREFERRED DRUG, PREFERRED DRUGS ARE GENERIC GLYBURIDE AND GENERIC GLIPIZIDE' ON THE FOLLOWING:

GCN	DRUG
05731	DIABINESE/CHLORPROPAMIDE 100MG
05830	AMARYL 1MG
05832	AMARYL 2MG
05833	AMARYL 4MG
05740	TOLINASE/TOLAZAMIDE
05690	ACETOHEXAMIDE 250MG
05732	DIABINESE/CHLORPROPAMIDE 250MG
05741	TOLINASE/TOLAZAMIDE 250MG
05691	ACETOHEXAMIDE 500MG
05724	TOLBUTAMIDE 500MG
05742	TOLINASE/TOLAZAMIDE 500MG
12277	STARLIZ 60MG
26311	PRANDIN 0.5MG
26312	PRANDIN 1MG
26313	PRANDIN 2MG
34027	STARLIX 120MG

NDC	DRUG
00009-0131-01	MICRONASE 1.25MG
00009-0141-01	MICRONASE 2.5MG
00009-0141-02	MICRONASE 2.5MG
00009-0171-03	MICRONASE 5MG
00009-0171-05	MICRONASE 5MG
00009-0171-06	MICRONASE 5MG
00009-0171-07	MICRONASE 5MG
00009-0171-11	MICRONASE 5MG

NUMBER - 0355 SUB BY- PATTY SUB FOR- VALERIE PAGE- 2

ENTERED-11/04/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/04/03 COMPLETE-11/10/03 CLOSE-

00009-0171-12 MICRONASE 5MG
00009-0341-01 GLYNASE 1.5MG
00009-0341-02 GLYNASE 1.5MG
00009-0352-01 GLYNASE 3MG
00009-0352-02 GLYNASE 3MG
00009-0352-03 GLYNASE 3MG
00009-0352-04 GLYNASE 3MG
00009-3449-01 GLYNASE 6MG
00009-3449-03 GLYNASE 6MG
00039-0051-10 DIABETA 2.5MG
00039-0051-11 DIABETA 2.5MG
00039-0051-50 DIABETA 2.5MG
00039-0052-10 DIABETA 5MG
00039-0052-11 DIABETA 5MG
00039-0052-50 DIABETA 5MG
00039-0052-70 DIABETA 5MG
00039-0053-05 DIABETA 1.25MG
00049-1550-66 GLUCOTROL XL 5MG
00049-1550-73 GLUCOTROL XL 5MG
00049-1560-66 GLUCOTROL XL 10MG
00049-1560-73 GLUCOTROL XL 10MG
00049-1620-30 GLUCOTROL XL 2.5MG
00049-4110-66 GLUCOTROL 5MG
00049-4110-73 GLUCOTROL 5MG
00049-4120-66 GLUCOTROL 10MG
00049-4120-73 GLUCOTROL 10MG

ADDITIONALLY, PLEASE REMOVE THE SOFT EDIT RETURN MESSAGE
'NON-PREFERRED DRUG, THE PREFERRED TRIPTANS ARE MAXALT AND IMITREX'
AS OUTLINED IN POS CSR 0335. THIS IS NO LONGER NEEDED, AS THE
DRUGS NOW REQUIRE PRIOR AUTHORIZATION.

SYSTEM SPECIFICATIONS:

MESSAGE CHANGE MADE IN RXOC0417 AND RXOC0422 FOR WEEK OF 11/10.

NUMBER - 0355 SUB BY- PATTY SUB FOR- VALERIE PAGE- 3

ENTERED-11/04/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/04/03 COMPLETE-11/10/03 CLOSE-

11/04/03. ADDED - 521.

11/17/03. UPDATED - 521.

NUMBER - 0356 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-11/17/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-11/17/03 COMPLETE-11/24/03 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0356

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

GCN	DRUG	SLE
14090	CLORAZEPATE	Y (GENERIC ONLY)
14092	CLORAZEPATE	Y (GENERIC ONLY)
14093	CLORAZEPATE	Y (GENERIC ONLY)
20539	CORAL CALCIUM	Y
20553	LEXIVA	Y

SYSTEM SPECIFICATIONS:

PROGRAM CHANGES MADE TO RXMFFORM TO ADD THESE GCN VALUES.

11/17/03. ADDED - 521.

11/17/03. UPDATED - 521.

NUMBER - 0357 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-12/11/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/11/03 COMPLETE-12/11/03 CLOSE-

DESCRIPTION: REMOVE PRIOR AUTH REQUIREMENT

STATUS:

REQUEST CONTROL NUMBER: 0357

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE REMOVE THE PRIOR AUTHORIZATION REQUIREMENT FROM THE FOLLOWING SINGLE SOURCE ITEMS BY CHANGING THE 'FCI' FIELD FROM 'P' TO 'C' AND THE 'SLE' FIELD FROM 'Y' TO 'N' EFFECTIVE WITH FILL DATES JUNE 1, 2003 AND AFTER:

GCN	DRUG NAME
05690	ACETOHEXAMIDE 250MG
05691	ACETOHEXAMIDE 500MG
05724	TOLBUTAMIDE 500MG
05830	AMARYL 1MG
05832	AMARYL 2MG
05833	AMARYL 4MG
12277	STARLIX 60MG
26311	PRANDIN 0.5MG
26312	PRANDIN 1MG
26313	PRANDIN 2MG
34027	STARLIX 120MG

DOLOPHINE 5MG	00054-4218-25
DOLOPHINE 5MG	00054-4216-25
DOLOPHINE 10MG	00054-4219-25
MS CONTIN 15MG	00034-0514-10
MS CONTIN 15MG	00034-0514-12
MS CONTIN 15MG	00034-0514-90
MS CONTIN 30MG	00034-0515-10
MS CONTIN 30MG	00034-0515-12
MS CONTIN 30MG	00034-0515-45
MS CONTIN 30MG	00034-0515-50
MS CONTIN 30MG	00034-0515-90
MS CONTIN 60MG	00034-0516-06

NUMBER - 0357 SUB BY- PATTY SUB FOR- VALERIE PAGE- 2

ENTERED-12/11/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/11/03 COMPLETE-12/11/03 CLOSE-

MS CONTIN 60MG	00034-0516-12
MS CONTIN 60MG	00034-0516-90
MS CONTIN 100MG	00034-0517-10
MS CONTIN 100MG	00034-0517-12
MS CONTIN 100MG	00034-0517-90
MS CONTIN 200MG	00034-0513-10
MS CONTIN 200MG	00034-0513-12

CHANGE THE FOLLOWING GSN'S FROM EPA TO COVERED BY CHANGING THE 'FCI' FIELD FROM 'E' TO 'C' AND THE 'SLE' FIELD FROM 'Y' TO 'N' EFFECTIVE WITH FILL DATES JUNE 1, 2003 AND AFTER:

DURAGESIC 25MCG	015880
DURAGESIC 50MCG	015881
DURAGESIC 75MCG	015882
DURAGESIC 100MCG	015883
LEVORPHANOL 2MG	004228
KADIAN 20MG	027494
KADIAN 30MG	047580
KADIAN 50MG	027493
KADIAN 60MG	047581
KADIAN 100MG	027492
AVINZA 30MG	050222
AVINZA 60MG	050221
AVINZA 90MG	050220
AVINZA 120MG	050219
OXYCONTIN 10MG	024504
OXYCONTIN 20MG	024505
OXYCONTIN 40MG	024506
OXYCONTIN 80MG	025702
OXYCONTIN 160MG	045129

CHANGE THE 'FCI' FIELD FROM 'P' TO 'C' AND THE 'SLE' FIELD FROM 'Y' TO 'N' EFFECTIVE WITH FILL DATES DECEMBER 1, 2003 AND AFTER (TO OVERRIDE PREVIOUS REQUEST TO CHANGE TO 'P') ON THE FOLLOWING:

00009 0131 01	MICRONASE 1.25MG
00009 0141 01	MICRONASE 2.5MG
00009 0141 02	MICRONASE 2.5MG

NUMBER - 0357 SUB BY- PATTY SUB FOR- VALERIE PAGE- 3

ENTERED-12/11/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/11/03 COMPLETE-12/11/03 CLOSE-

00009 0171 03	MICRONASE 5MG
00009 0171 05	MICRONASE 5MG
00009 0171 06	MICRONASE 5MG
00009 0171 07	MICRONASE 5MG
00009 0171 11	MICRONASE 5 MG
00009 0171 12	MICRONASE 5MG
00009 0341 01	GLYNASE 1.5MG
00009 0341 02	GLYNASE 1.5MG
00009 0352 01	GLYNASE 3MG
00009 0352 02	GLYNASE 3MG
00009 0352 03	GLYNASE 3MG
00009 0352 04	GLYNASE 3MG
00009 3449 01	GLYNASE 6MG
00009 3449 03	GLYNASE 6MG
00039 0051 10	DIABETA 2.5MG
00039 0051 11	DIABETA 2.5MG
00039 0051 50	DIABETA 2.5MG
00039 0052 10	DIABETA 5MG
00039 0052 11	DIABETA 5MG
00039 0052 50	DIABETA 5MG
00039 0052 70	DIABETA 5MG
00039 0053 05	DIABETA 1.25MG
00049 4110 66	GLUCOTROL 5MG
00049 4110 73	GLOCUTROL 5MG
00049 4120 66	GLUCOTROL 10MG
00049 4120 73	GLUCOTROL 10MG
05731	DIABINESE/CHLORPROPAMIDE
05732	DIABINESE/CHLORPROPAMIDE
05740	TOLINASE/TOLAZAMIDE 100MG
05741	TOLINASE/TOLAZAMIDE 250MG
05742	TOLINASE/TOLAZAMIDE 500MG
00049 1550 66	GLUCOTROL XL 5MG
00049 1550 73	GLUCOTROL XL 5MG
00049 1560 66	GLUCOTROL XL 10MG
00049 1560 73	GLUCOTROL SL 10MG
00049 1620 30	GLUCOTROL XL 2.5MG

SYSTEM SPECIFICATIONS:

NUMBER - 0357 SUB BY- PATTY SUB FOR- VALERIE PAGE- 4

ENTERED-12/11/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/11/03 COMPLETE-12/11/03 CLOSE-

12/11/03. ADDED - 521.

NUMBER - 0358 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-12/11/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/11/03 COMPLETE-12/15/03 CLOSE-

DESCRIPTION: UPDATE EXCEPTION LOGIC

STATUS:

REQUEST CONTROL NUMBER: 0358

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION LOGIC FOR DUR/REJ 19 MISSING/INVALID DAYS SUPPLY. IN SECTION C ADD GENERIC CODES 19598 AND 19599 (FEMRING) TO BYPASS THE EXCEPTION.

SYSTEM SPECIFICATIONS:

ADDED CODES IN RXOC0445 TO WH-130-NO-DAYS-SUPPLY WHICH THEN GETS CHECKED IN S120 TO BYPASS THE EXCEPTION.

12/11/03. ADDED - 521.

12/15/03. UPDATED - 521.

NUMBER - 0359 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-12/15/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/15/03 COMPLETE-12/15/03 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0359

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THERE IS A NEW STRENGTH OF PACERONE. PLEASE ADD GSN 017241 TO THE EPA TABLE WITH CRITERIA CODE 010.

PLEASE DELETE CLONAZEPAM GSN'S 004560, 004561, AND 004562 AND ALL ASSOCIATED CRITERIA CODES FROM THE EPA TABLE.

AFTER THE REVISIONS HAVE BEEN COMPLETED, PLEASE GENERATE 1 COPY OF THE GSN REPORT AND DELIVER TO BIN 12, PATTY ORTH.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO COPY MEMBERS WT009010 AND WH010088. PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RECOMPILED.

12/15/03. ADDED - 521.

12/15/03. UPDATED - 521.

NUMBER - 0360 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-12/15/03 PRIORITY- EST-DAYS-000 REQD-

BEGIN-12/15/03 COMPLETE-12/15/03 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0360

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD:

GCN	DRUG	SLE
91711	GUAIFENESIN/CODEINE	Y (GENERIC ONLY)

SYSTEM SPECIFICATIONS:

CODE ADDED TO WS-005-SCRIPT-LIMIT-GCN-GEN IN RXMFFORM.

12/15/03. ADDED - 521.

12/15/03. UPDATED - 521.

NUMBER - 0361 SUB BY- PATTY SUB FOR- ALAN PAGE- 1

ENTERED-01/12/04 PRIORITY- EST-DAYS-000 REQD-02/01/04

BEGIN-01/12/04 COMPLETE-02/01/04 CLOSE-

DESCRIPTION: NON DRUG DISPENSING FEE CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0361

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

EFFECTIVE WITH FILL DATES FEBRUARY 1, 2004 AND AFTER, PLEASE
DISCONTINUE PAYING A DISPENSING FEE FOR NON-DRUG ITEMS ONLY IN
THE FOLLOWING THERAPEUTIC CLASS CODES:

M4A BLOOD SUGAR DIAGNOSTIC
R3U URINE GLUCOSE TEST STRIP
R3V URINE ALBUMIN TEST
R3W URINE ACETONE TEST STRIPS
R3Y URINE MULTIPLE TEST
R3Z URINE GLUC-ACET COMB.TST
W8E ALCOHOL ANTISEPTIC PADS
X0A BLOOD KETONE TEST STRIPS
X1A CONDOMS
X1B DIAPHRAGMS
X1C IUDS
X2A NEEDLES INSULIN DISPOSABLE
X2B SYRING W-NDL DISP INSUL
Y3A LANCETS
Y9A INSULIN ADMIN. SUPPLIES

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF FEBRUARY 6, 2004:

PLEASE RESCIND THIS CSR AND RESUME PAYING DISPENSING FEES FOR
NON-DRUG ITEMS IN THESE THERAPEUTIC CLASSES.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CODE WAS ADDED TO RXOC0445 TO CHECK FOR THE DESIGNATED THERAPEUTIC

NUMBER - 0361 SUB BY- PATTY SUB FOR- ALAN PAGE- 2

ENTERED-01/12/04 PRIORITY- EST-DAYS-000 REQD-02/01/04

BEGIN-01/12/04 COMPLETE-02/01/04 CLOSE-

CLASS CODES AFTER FEBRUARY 1, 2004, AND SET THE DISPENSING FEE TO ZERO.

ADDENDUM OF FEBRUARY 6, 2004 RESCINDED THESE CHANGES.

01/12/04. ADDED - 521.

02/13/04. UPDATED - 521.

NUMBER - 0362 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-01/12/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/12/04 COMPLETE-01/12/04 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0362

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

GCN	DRUG	SLE
20315	CIPRO XR 1000MG	N (BRAND ONLY)

NDC	DRUG	SLE
00006380106	MAXALT MLT 10MG TABLETS	N
00054355663	METHADONE 10MG/5ML SOL	Y
00074125801	MORPHINE 4MG/ML SYRINGE	Y
00168000715	NYSTATIN OINT	Y
00496071704	PRAMASONE 2.5% CREAM	N
00517761003	ACETYLCYSTEINE 20% VIAL	Y
00677181101	GUAFENESIN 1000MG	Y
00904759161	FERROUS SULFATE	Y
59310011810	GUAFENESIN 1000MG	Y
66019010001	FLUMIST NASAL VACCINE	N
66870011001	GUAFENESIN 1000MG	Y
66993032202	GUAFENESIN 1000MG	Y

THIS HAS BEEN DISCUSSED WITH RANDY STAMP.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO PROGRAM RXMFFORM.

01/12/04. ADDED - 521.

NUMBER - 0362 SUB BY- PATTY SUB FOR- VALERIE PAGE- 2

ENTERED-01/12/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/12/04 COMPLETE-01/12/04 CLOSE-

01/26/04. UPDATED - 521.

NUMBER - 0363 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-01/27/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/27/04 COMPLETE-02/02/04 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0363

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT FIELD INDICATOR ON PAGE 5 OF POS:

GCN	DRUG	SLE
50397	SYNAGIS	Y
69191	SYNAGIS	Y

NDC	DRUG	SLE
00074329013	TARKOA 4/240MG TAB SA	N
00169008481	PRANDIN 2MG TAB	N
59075068110	ZONEGRAN 25MG CAP	Y
59075068210	ZONEGRAN 50MG CAP	Y

SYSTEM SPECIFICATIONS:

CODE ADDED TO WS-005-SCRIPT-LIMIT-GCN-GEN IN RXMFFORM.

01/27/04. ADDED - 521.

02/02/04. UPDATED - 521.

NUMBER - 0364 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-01/27/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/27/04 COMPLETE-02/02/04 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0364

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT FIELD INDICATOR ON PAGE 5 OF POS:

GCN	DRUG	SLE
18975	LEXAPRO	N
20217	RISPERDAL CONSTA	Y
20218	RISPERDAL CONSTA	Y
20219	RISPERDAL CONSTA	Y

NDC	DRUG	SLE
00054415725	CODEINE	N
00054465825	ROXICODONE	Y
00054815624	CODEINE SULFATE	Y
00254501428	PHENOBARBITAL	Y
00338001306	STERILE WATER	Y
00603516821	PHENOBARBITAL	Y
00603516832	PHENOBARBITAL	Y
00904198280	MPAP	Y
10019002232	KETOROLAC INJECTION	Y
99207020809	TRIAZ 9% CLEANSER	N
99207020812	TRIAZ CLEANSER	N

SYSTEM SPECIFICATIONS:

CODE ADDED TO WS-005-SCRIPT-LIMIT-GCN-GEN IN RXMFFORM.

01/27/04. ADDED - 521.

NUMBER - 0364 SUB BY- PATTY SUB FOR- VALERIE PAGE- 2

ENTERED-01/27/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-01/27/04 COMPLETE-02/02/04 CLOSE-

02/02/04. UPDATED - 521.

NUMBER - 0365 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-02/13/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/13/04 COMPLETE-02/20/04 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0365

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

GCN	DRUG	SLE
17851	LEXAPRO	Y
17987	LEXAPRO	Y
19035	LEXAPRO	Y

NDC	DRUG	SLE
00074126102	MORPHINE	Y
00172292980	CYPROHEPTADINE	Y
58177091203	PREDNISOLONE	Y

SYSTEM SPECIFICATIONS:

CHANGES MADE TO PROGRAM RXMFFORM.

02/13/04. ADDED - 521.

02/16/04. UPDATED - 521.

NUMBER - 0366 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-02/13/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-02/13/04 COMPLETE-02/20/04 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0366

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD CALCIUM CITRATE WITH VITAMIN D GSN'S 013730 AND 026442 TO THE EPA TABLE WITH CRITERIA CODE 126.

PLEASE DELETE NEMBUTAL SODIUM AND COMPAZINE SPANSULE GSN'S 003619, 003621, 003840 AND 003841 AND ASSOCIATED CRITERIA CODES FROM THE EPA TABLE AS ALL NDC'S ARE TERMINATED.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO MODULES WT009010 AND WH010088. PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 RECOMPILED.

02/13/04. ADDED - 521.

02/16/04. UPDATED - 521.

NUMBER - 0367 SUB BY- PATTY SUB FOR- SIRI PAGE- 1

ENTERED-03/08/04 PRIORITY- EST-DAYS-000 REQD-05/01/04

BEGIN-03/08/04 COMPLETE-05/05/04 CLOSE-

DESCRIPTION: IMPLEMENT TIP PROCESS FOR POS

STATUS:

REQUEST CONTROL NUMBER: 0367

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO IMPLEMENT THE THERAPEUTIC INTERCHANGE PROJECT, PLEASE CHECK IF PRESCRIBER HAS ENDORSING FLAG FOR DATE OF SERVICE ON CLAIM. IF PRESCRIBER IS A VALID ENDORSING PRESCRIBER AND INDICATES DISPENSE AS WRITTEN ON CLAIM, BYPASS THE STATE LIST OF NON-PREFERRED DRUGS.

THIS HAS BEEN DISCUSSED WITH RANDY STAMP AND BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

03/08/04. ADDED - 521.

NUMBER - 0368 SUB BY- PATTY SUB FOR- SIRI PAGE- 1

ENTERED-03/08/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/08/04 COMPLETE-03/08/04 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0368

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD O PAGE 5 OF POS:

NDC	DRUG	SLE
00009002901	XANAX 0.25MG	N
00009005501	XANAX 0.5MG	N
00009005503	XANAX 0.5MG	N
00009009001	XANAX 1MG	N
00009009401	XANAX 2MG	N
00083000330	RITALIN 10MG	N
00083000730	RITALIN SR 20MG	N
00083003430	RITALIN 20MG	N

GCN	DRUG	SLE
17037	GEODON 20MG VIAL	Y
02965	SODIUM CHLORIDE 5% IV	N(BRAND ONLY)
07111	DESFERAL 500MG	N(BRAND ONLY)
07112	DESFERAL 2GM	N(BRAND ONLY)
08860	ADULT GLYCERIN SUPP	N(BRAND ONLY)
08861	PED GLYCERIN SUPP	N(BRAND ONLY)
08870	FLEET BABY ENEMA	N(BRAND ONLY)
10162	KRISTALOSE 10GM	N(BRAND ONLY)
11118	KRISTALOSE 20GM	N(BRAND ONLY)
12466	FOLGARD	N(BRAND ONLY)
12612	CANCIDAS IV 50MG	N(BRAND ONLY)
12613	CANCIDAS IV 70MG	N(BRAND ONLY)
13974	TUSSIONEX SUSP	N(BRAND ONLY)
15381	ZELNORM 6MG	N(BRAND ONLY)
15665	XOPENEX 0.31/3ML	N(BRAND ONLY)
17497	VFEND 50MG TAB	N(BRAND ONLY)

NUMBER - 0368 SUB BY- PATTY SUB FOR- SIRI PAGE- 2

ENTERED-03/08/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/08/04 COMPLETE-03/08/04 CLOSE-

17498	VFEND 200MG TAB	N(BRAND ONLY)
17499	VFEND 200MG IV	N(BRAND ONLY)
17776	ZELNORM 2MG	N(BRAND ONLY)
20224	ROSAC CREAM	N(BRAND ONLY)
21590	VITAMIN A & D OINT	N(BRAND ONLY)
21591	VITAMIN A & D CREAM	N(BRAND ONLY)
24540	XOPENEX 0.63MG/3ML	N(BRAND ONLY)
24541	XOPENEX 1.25MG/3ML	N(BRAND ONLY)
36290	LACTOSE CAP #0	N(BRAND ONLY)
37211	LACTOSE POWDER	N(BRAND ONLY)
37440	GELATIN CAPS EMPTY	N(BRAND ONLY)
39561	STROMECTAL 6MG	N(BRAND ONLY)
40821	CLEOCIN 600MG/D5W	N(BRAND ONLY)
40822	CLEOCIN 900MG/D5W	N(BRAND ONLY)
53290	ALBENZA 200MG	N(BRAND ONLY)
69081	NEUMEGA 5MG VIAL	N(BRAND ONLY)
76470	MOISTUREL CREAM	N(BRAND ONLY)
77350	MOISTUREL LOTION	N(BRAND ONLY)
84620	PRAMOSONE 2.5% CREAM	N(BRAND ONLY)
84622	PRAMOSONE 1% CREAM	N(BRAND ONLY)
84641	PRAMOSONE 2.5% LOTION	N(BRAND ONLY)
84643	PRAMOSONE 1% LOTION	N(BRAND ONLY)
88010	CERUMENEX	N(BRAND ONLY)
89743	OLUX FOAM	N(BRAND ONLY)
92172	FOLTX	N(BRAND ONLY)
93064	STROMECTAL 3MG	N(BRAND ONLY)

SYSTEM SPECIFICATIONS:

GCN AND NDC CODES ADDED TO APPROPRIATE LISTS IN RXMFFORM.

03/08/04. ADDED - 521.

03/08/04. UPDATED - 521.

NUMBER - 0369 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-03/12/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/12/04 COMPLETE-03/22/04 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0369

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

GCN	DRUG	SLE
02820	FLOURIDE	Y (GENERIC ONLY)
07358	FLOURIDE	Y (GENERIC ONLY)
19736	OVACE FOAM	N (BRAND ONLY)
20706	LOCOID LIPOCREAM	N (BRAND ONLY)
20808	RIOMET 500MG/5ML SOLN	N (BRAND ONLY)
20823	ALTAFLUOR 0.7% DROPS	N (BRAND ONLY)
20843	PANAFIL SPRAY	N (BRAND ONLY)
20913	ARANESP 40MCG/0.4 DISP SYR	N (BRAND ONLY)
20916	ARANESP 25MCG/0.42 DISP SYR	N (BRAND ONLY)
21056	RYTHMOL SR 225MG	N (BRAND ONLY)
21058	RYTHMOL SR 325MG	N (BRAND ONLY)
21059	RYTHMOL SR 425MG	N (BRAND ONLY)
21146	HYCET SOLUTION	N (BRAND ONLY)
21175	PEDIATEX-DM	N (BRAND ONLY)
21176	PEDIATEX-D	N (BRAND ONLY)
36549	AQUABASE OINTMENT	Y (GENERIC ONLY)
91883	INSPRA 25MG TAB	N (BRAND ONLY)
91884	INSPRA 50MG TAB	N (BRAND ONLY)
95577	EAR PREPARATIONS	N (BRAND ONLY)

NDC	DRUG	SLE
00378241001	TRIFLUOPERAZINE 10MG	Y
00536474297	CALCIUM ANTACID 500MG	Y
00591505901	PREDNISOLONE 5MG TAB	Y
00603516721	PHENOBARBITAL 64.8MG TAB	Y
49884012101	HYDRALAZINE 100MG TAB	Y

NUMBER - 0369 SUB BY- PATTY SUB FOR- VALERIE PAGE- 2

ENTERED-03/12/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/12/04 COMPLETE-03/22/04 CLOSE-

SYSTEM SPECIFICATIONS:

CHANGES WERE MADE TO PROGRAM RXMFFORM FOR THESE GCNS AND NDCS.

03/12/04. ADDED - 521.

03/17/04. UPDATED - 521.

NUMBER - 0370 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-03/12/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/12/04 COMPLETE-03/22/04 CLOSE-

DESCRIPTION: EXPEDITED AUTH CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0370

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD PEGASYS KIT GSN 053612 TO THE EPA TABLE WITH CRITERIA CODE 109.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO COPY MEMBERS WT009010 AND WH010088. PROGRAMS RXOC0445, RXMFFORM, AND RXMF6200 WERE RE-COMPILED TO PULL IN THESE CHANGES.

03/12/04. ADDED - 521.

03/17/04. UPDATED - 521.

NUMBER - 0371 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-03/15/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/15/04 COMPLETE-03/22/04 CLOSE-

DESCRIPTION: CHG FORMULARY COVERAGE AND MSG

STATUS:

REQUEST CONTROL NUMBER: 0371

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PRILOSEC OTC HAS CHANGED TO A PREFERRED DRUG. PLEASE REMOVE GCN 08454 FROM THE LIST OF TCS NON-PREFERRED DRUGS AS REQUESTED IN POS CSR 0342, AND STOP RETURNING THE ASSOCIATED NON-PREFERRED MESSAGE.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

PROGRAMS RXMFFORM WAS MODIFIED TO REMOVE GCN 08454 FROM THE TCS NON-PREFERRED LIST. PROGRAMS RXOC0417 AND RXOC0422 WERE MODIFIED TO STOP RETURNING THE NON-PREFERRED MESSAGE.

03/15/04. ADDED - 521.

03/17/04. UPDATED - 521.

NUMBER - 0372 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-03/15/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/15/04 COMPLETE-03/22/04 CLOSE-

DESCRIPTION: UPDATE EXCEPTION LOGIC

STATUS:

REQUEST CONTROL NUMBER: 0372

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ M1 (CLIENT IN MANAGED CARE PLAN). ADD THERAPEUTIC CLASS CODE H7Z TO THE LIST IN SECTION 4 THAT BYPASS THIS EXCEPTION WHEN BILLED WITH A MED CERT CODE 2.

SYSTEM SPECIFICATIONS:

MODIFICATIONS MADE TO PROGRAM RXOC0445.

03/15/04. ADDED - 521.

03/17/04. UPDATED - 521.

NUMBER - 0373 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-03/16/04 PRIORITY- EST-DAYS-000 REQD-04/01/04

BEGIN-03/16/04 COMPLETE-04/01/04 CLOSE-

DESCRIPTION: ADD DRUG CLASSES TO PDL

STATUS:

REQUEST CONTROL NUMBER: 0373

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THREE DRUG CLASSES ARE BEING ADDED TO THE PREFERRED DRUG LIST (PDL); TRIPTANS, ACE INHIBITORS AND ORAL INSULIN SECRETING AGENTS.

PLEASE CHANGE THE FORMULARY COVERAGE INDICATOR TO X (NON-PREFERRED) EFFECTIVE APRIL 1, 2004 AND RETURN THE MESSAGE "PREFERRED: MAXALT 10MG (NOT MLT) AND IMITREX. PHARMACY CALLS ACS 1-866-246-8504" FOR THE FOLLOWING TRIPTAN GCNS:

12472 AXERT 12.5MG
13587 AXERT 6.25MG
14324 ZOMIG ZMT 5MG
14977 FROVA 2.5MG
15173 RELPAX 20MG
15174 RELPAX 40MG
18972 ZOMIG 5MG NASAL
19591 MAXALT 5MG
19593 MAXALT MLT 5MG
19594 MAXALT MLT 10MG
42098 ZOMIG ZMT 2.5MG
46131 ZOMIG 2.5MG
46132 ZOMIG 5MG
81111 AMERGE 2.5MG
81112 AMERGE 1MG

PLEASE CHANGE THE FORMULARY COVERAGE INDICATOR TO X (NON-PREFERRED) EFFECTIVE APRIL 1, 2004 AND RETURN THE MESSAGE "PREFER: GEN CAPTOPRIL ENALAPRIL LISINOPRIL;ALTACE EPA.PHARM CALL ACS 18662468504" FOR THE FOLLOWING ACE INHIBITOR GCNS:

00960 (BRAND ONLY) VASOTEC 5MG
00961 (BRAND ONLY) VASOTEC 10MG

NUMBER - 0373 SUB BY- PATTY SUB FOR- NICOLE PAGE- 2

ENTERED-03/16/04 PRIORITY- EST-DAYS-000 REQD-04/01/04

BEGIN-03/16/04 COMPLETE-04/01/04 CLOSE-

00962 (BRAND ONLY) VASOTEC 20MG
00963 (BRAND ONLY) VASOTEC 2.5MG
01480 (BRAND ONLY) CAPOTEN 100MG
01481 (BRAND ONLY) CAPOTEN 25MG
01482 (BRAND ONLY) CAPOTEN 50MG
01483 (BRAND ONLY) CAPOTEN 12.5MG
13758 ACEON 2MG
13759 ACEON 4MG
17604 LOTREL 10/20MG
32111 TARKA 2/180MG
32112 TARKA 1/240MG
32113 TARKA 2/240MG
32114 TARKA 4/240MG
32191 MAVIK 1MG
32192 MAVIK 2MG
32193 MAVIK 4MG
33090 LOTREL 5/20MG
33092 LOTREL 5/10MG
33093 LOTREL 2.5/10MG
33191 LOTENSIN HCT 5/6.25MG
33192 LOTENSIN HCT 10/12.5MG
33193 LOTENSIN HCT 20/12.5MG
33194 LOTENSIN HCT 20/25MG
47260 (BRAND ONLY) PRINIVIL/ZESTRIL 5MG
47261 (BRAND ONLY) PRINIVIL/ZESTRIL 10MG
47262 (BRAND ONLY) PRINIVIL/ZESTRIL 20MG
47263 (BRAND ONLY) PRINIVIL/ZESTRIL 40MG
47264 (BRAND ONLY) PRINIVIL/ZESTRIL 2.5MG
47265 (BRAND ONLY) ZESTRIL 30MG
48561 UNIVASC 7.5MG
48562 UNIVASC 15MG
48580 MONOPRIL 40MG
48581 MONOPRIL 10MG
48582 MONOPRIL 20MG
48611 LOTENSIN 5MG
48612 LOTENSIN 10MG
48613 LOTENSIN 20MG
48614 LOTENSIN 40MG
48691 ACCUPRIL 5MG

NUMBER - 0373 SUB BY- PATTY SUB FOR- NICOLE PAGE- 3

ENTERED-03/16/04 PRIORITY- EST-DAYS-000 REQD-04/01/04

BEGIN-03/16/04 COMPLETE-04/01/04 CLOSE-

48692 ACCUPRIL 10MG
48693 ACCUPRIL 20MG
48694 ACCUPRIL 40MG
54860 (BRAND ONLY) VASERETIC 10-25MG
54862 (BRAND ONLY) VASERETIC 5-12.5MG
54940 (BRAND ONLY) CAPOZIDE 25/15MG
54941 (BRAND ONLY) CAPOZIDE 25/25MG
54942 (BRAND ONLY) CAPOZIDE 50/15MG
54943 (BRAND ONLY) CAPOZIDE 50/25MG
88000 (BRAND ONLY) PRINIZIDE/ZESTORETIC 20/12.5MG
88001 (BRAND ONLY) PRINIZIDE/ZESTORETIC 20/25MG
88002 (BRAND ONLY) PRINIZIDE/ZESTORETIC 10/12.5MG
93207 ACEON 8MG

PLEASE CHANGE THE FORMULARY COVERAGE INDICATOR TO X (NON-PREFERRED) EFFECTIVE APRIL 1, 2004 AND RETURN THE MESSAGE "PREFERRED: GENERIC GLYBURIDE AND GLIPIZIDE. PHARMACY CALLS ACS 1-866-246-8504" FOR THE FOLLOWING ORAL INSULIN SECRETING AGENT GCNS:

05690 ACETOHEXAMIDE 250MG
05691 ACETOHEXAMIDE 500MG
05710 (BRAND ONLY) DIABETA/ MICRONASE 1.25MG
05711 (BRAND ONLY) DIABETA/ MICRONASE 2.5MG
05712 (BRAND ONLY) DIABETA/ MICRONASE 5MG
05713 (BRAND ONLY) GLYNASE 1.5 MG
05714 (BRAND ONLY) GLYNASE 3MG
05715 (BRAND ONLY) GLYNASE 6MG
05724 ORINASE/TOLBUTAMIDE 500MG
05731 DIABINESE/CHLORPROPAMIDE 100MG
05732 DIABINESE/CHLORPROPAMIDE 250MG
05740 TOLINASE/TOLAZAMIDE 100MG
05741 TOLINASE/TOLAZAMIDE 250MG
05742 TOLINASE/TOLAZAMIDE 500MG
05830 AMARYL 1MG
05832 AMARYL 2MG
05833 AMARYL 4MG
10840 (BRAND ONLY) GLUCOTROL 5MG
10841 (BRAND ONLY) GLUCOTROL 10MG
10843 (BRAND ONLY) GLUCOTROL XL 10MG

NUMBER - 0373 SUB BY- PATTY SUB FOR- NICOLE PAGE- 4

ENTERED-03/16/04 PRIORITY- EST-DAYS-000 REQD-04/01/04

BEGIN-03/16/04 COMPLETE-04/01/04 CLOSE-

10844 (BRAND ONLY) GLUCOTROL XL 5MG
12277 STARLIX 60MG
26311 PRANDIN 0.5MG
26312 PRANDIN 1MG
26313 PRANDIN 2MG
34027 STARLIX 120MG
50638 (BRAND ONLY) GLUCOTROL XL 2.5MG

PLEASE REMOVE THE ACE INHIBITOR SOFT EDIT RETURN MESSAGE AS OUTLINED IN CSR 0323 AND THE ORAL INSULIN RETURN MESSAGE OUTLINED IN 0355.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF MARCH 26, 2004:
PLEASE RESCIND THE FOLLOWING PORTIONS OF EMERGENCY POS CSR 0357 RELATING TO ORAL INSULIN SECRETING AGENTS EFFECTIVE APRIL 1, 2004.

PLEASE REMOVE THE PRIOR AUTHORIZATION REQUIREMENT FROM THE FOLLOWING SINGLE SOURCE ITEMS BY CHANGING THE "FCI" FIELD FROM "P" TO "C" AND THE "SLE" FIELD FROM "Y" DATES JUNE 1, 2003 AND AFTER:

GCN DRUG NAME
05690 ACETOHEXAMIDE 250MG
05691 ACETOHEXAMIDE 500MG
05724 TOLBUTAMIDE 500MG
05830 AMARYL 1MG
05832 AMARYL 2MG
05833 AMARYL 4MG
12277 STARLIX 60MG
26311 PRANDIN 0.5MG
26312 PRANDIN 1MG
26313 PRANDIN 2MG
34027 STARLIX 120MG

CHANGE THE "FCI" FIELD FROM "P" TO "C" AND THE "SLE" FIELD FROM "Y" TO "N" EFFECTIVE WITH FILL DATES DECEMBER 1, 2003 AND AFTER (TO OVERRIDE PREVIOUS REQUEST TO CHANGE TO P) ON THE FOLLOWING:

NUMBER - 0373 SUB BY- PATTY SUB FOR- NICOLE PAGE- 5

ENTERED-03/16/04 PRIORITY- EST-DAYS-000 REQD-04/01/04

BEGIN-03/16/04 COMPLETE-04/01/04 CLOSE-

00009 0131 01 MICRONASE 1.25MG
00009 0141 01 MICRONASE 2.5MG
00009 0141 02 MICRONASE 2.5MG
00009 0171 03 MICRONASE 5MG
00009 0171 05 MICRONASE 5MG
00009 0171 06 MICRONASE 5MG
00009 0171 07 MICRONASE 5MG
00009 0171 11 MICRONASE 5 MG
00009 0171 12 MICRONASE 5MG
00009 0341 01 GLYNASE 1.5MG
00009 0341 02 GLYNASE 1.5MG
00009 0352 01 GLYNASE 3MG
00009 0352 02 GLYNASE 3MG
00009 0352 03 GLYNASE 3MG
00009 0352 04 GLYNASE 3MG
00009 3449 01 GLYNASE 6MG
00009 3449 03 GLYNASE 6MG
00039 0051 10 DIABETA 2.5MG
00039 0051 11 DIABETA 2.5MG
00039 0051 50 DIABETA 2.5MG
00039 0052 10 DIABETA 5MG
00039 0052 11 DIABETA 5MG
00039 0052 50 DIABETA 5MG
00039 0052 70 DIABETA 5MG
00039 0053 05 DIABETA 1.25MG
00049 4110 66 GLUCOTROL 5MG
00049 4110 73 GLOCUTROL 5MG
00049 4120 66 GLUCOTROL 10MG
00049 4120 73 GLUCOTROL 10MG
05731 DIABINESE/CHLORPROPAMIDE
05732 DIABINESE/CHLORPROPAMIDE
05740 TOLINASE/TOLAZAMIDE 100MG
05741 TOLINASE/TOLAZAMIDE 250MG
05742 TOLINASE/TOLAZAMIDE 500MG
00049 1550 66 GLUCOTROL XL 5MG
00049 1550 73 GLUCOTROL XL 5MG
00049 1560 66 GLUCOTROL XL 10MG
00049 1560 73 GLUCOTROL SL 10MG
00049 1620 30 GLUCOTROL XL 2.5MG

NUMBER - 0373 SUB BY- PATTY SUB FOR- NICOLE PAGE- 6

ENTERED-03/16/04 PRIORITY- EST-DAYS-000 REQD-04/01/04

BEGIN-03/16/04 COMPLETE-04/01/04 CLOSE-

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF APRIL 2, 2004:
PLEASE CHANGE THE FORMULARY COVERAGE INDICATOR TO X (NON-PREFERRED)
EFFECTIVE APRIL 1, 2004 AND RETURN THE MESSAGE "PREFER: GEN CAPTOPRIL
ENALAPRIL LISINOPRIL;ALTACE EPA.PHARM CALL ACS 18662468504" FOR
THE FOLLOWING ADDITIONAL ACE INHIBITOR GCN'S:

13811 ACCURETIC 20/12.5MG
13812 ACCURETIC 10/12.5MG
13813 ACCURETIC 20/25MG

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL

ADDENDUM AS OF APRIL 27, 2004:
PLEASE CHANGE THE FORMULARY COVERAGE INDICATOR TO X (NON-PREFERRED)
EFFECTIVE APRIL 1, 2004 AND RETURN THE MESSAGE "PREFER: GEN CAPTOPRIL
ENALAPRIL LISINOPRIL;ALTACE EPA.PHARM CALL ACS 18662468504" FOR THE
FOLLOWING ADDITIONAL ACE INHIBITOR GCN'S:

10455 MONOPRIL
15621 MONOPRIL
15777 UNIRETIC
67721 UNIRETIC
67722 UNIRETIC

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

CHANGES WERE MADE TO PROGRAM RXMFFORM TO SET THE FMI TO 'X' AS
SPECIFIED. CHANGES WERE MADE TO PROGRAMS RXOC0417 AND RXOC0422
FOR THE RETURN MESSAGES.

03/16/04. ADDED - 521.

NUMBER - 0373 SUB BY- PATTY SUB FOR- NICOLE PAGE- 7

ENTERED-03/16/04 PRIORITY- EST-DAYS-000 REQD-04/01/04

BEGIN-03/16/04 COMPLETE-04/01/04 CLOSE-

05/05/04. UPDATED - 521.

NUMBER - 0374 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-03/16/04 PRIORITY- EST-DAYS-000 REQD-04/01/04

BEGIN-03/16/04 COMPLETE-04/01/04 CLOSE-

DESCRIPTION: INCLUDE PLAN 251 IN 70X EDIT

STATUS:

REQUEST CONTROL NUMBER: 0374

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

EFFECTIVE APRIL 1, 2004 PLEASE INCLUDE PLAN 251 NURSING HOME CLIENTS IN THE NON-PREFERRED DRUG EDIT 70(X). THEY WILL STILL BE EXEMPT FROM THE TCS FOUR BRAND CAP EDIT 76(T).

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF APRIL 1, 2004:

PLEASE REMOVE THE LOGIC THAT ALLOWS CUSTOMER LOCATION 03 OR 07 TO BYPASS EDIT 70(X).

SYSTEM SPECIFICATIONS:

CHANGES MADE TO PROGRAM RXOC0445.

03/16/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0375 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-03/19/04 PRIORITY- EST-DAYS-000 REQD-04/01/04

BEGIN-03/19/04 COMPLETE-04/01/04 CLOSE-

DESCRIPTION: CHANGE RETURN MESSAGES

STATUS:

REQUEST CONTROL NUMBER: 0375

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE CHANGE THE FOLLOWING RETURN MESSAGES EFFECTIVE APRIL 1, 2004:

OLD: NON-PREFERRED DRUG, PREFERRED IS RANITIDINE, PROVIER MUST
CALL (TCS PHONE NUMBER)
NEW: PREFERRED: GENERIC RANITIDINE. PHARMACY CALLS ACS 1-866-246-8504

OLD: THE PREFERRED NON-SEDATING ANTIHISTAMINE IS OTC LORATADINE
NEW: PREFERRED: OTC LORATADINE. PHARMACY CALLS ACS 1-866-246-8504

OLD: NON-PREFERRED DRUG, THE PREFERRED DRUGS ARE ACIPHEX, NEXIUM,
PREVACID AND PROTONIX.
NEW: PREFERRED: OTC OMEPRAZOLE, ACIPHEX, NEXIUM, PREVACID. PHARMACY
CALLS ACS 18662468504.

OLD: NON-PREFERRED DRUG, PREFERRED DRUGS ARE ATORVASTATIN AND
GENERIC LOVASTATIN.
NEW: PREFERRED:LIPITOR & GENERIC LOVASTATIN. PRAVACHOL EPA. PHARM
CALLS ACS 18662468504

PLEASE REMOVE THE FOLLOWING SOFT EDIT RETURN MESSAGE:
PREFERRED DRUG IS BASED ON DEGREE OF LDL-LOWERING REQUIRED - SEE
DSHS MEMO #02-62.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

CHANGES MADE TO PROGRAMS RXOC0417 AND RXOC0422 FOR MESSAGE
MODIFICATIONS.

NUMBER - 0375 SUB BY- PATTY SUB FOR- NICOLE PAGE- 2

ENTERED-03/19/04 PRIORITY- EST-DAYS-000 REQD-04/01/04

BEGIN-03/19/04 COMPLETE-04/01/04 CLOSE-

03/19/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0376 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-03/23/04 PRIORITY- EST-DAYS-000 REQD-05/03/04

BEGIN-03/23/04 COMPLETE-05/05/04 CLOSE-

DESCRIPTION: IMPLEMENT TIP CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0376

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO FACILITATE THE IMPLEMENTATION OF THE THERAPEUTIC INTERCHANGE PROGRAM (TIP), PLEASE MAKE THE FOLLOWING CHANGES.

EFFECTIVE THE WEEK OF MAY 3, 2004, PLEASE REMOVE THE FOLLOWING GSN'S AND ASSOCIATED CRITERIA CODES FROM THE EPA TABLE:

004228	024504	027493	050219
015880	024505	027494	050220
015881	024506	045129	050221
015882	025702	047580	050222
015883	027492	047581	

PLEASE CHANGE THE FORMULARY COVERAGE INDICATOR TO X (NON-PREFERRED) EFFECTIVE APRIL 1, 2004 AND RETURN THE MESSAGE "PREFERRED: LA MORPHINE, METHADONE. SEE EPA CRITERIA, PHARM CALLS ACS 18662648504" FOR THE SAME GSNS LISTED ABOVE PLUS THE FOLLOWING NDCS;

00054-4216-25
00054-4218-25
00054-4219-25
00034-0514-10
00034-0514-12
00034-0514-90
00034-0515-10
00034-0515-12
00034-0515-45
00034-0515-50
00034-0515-90
00034-0516-10
00034-0516-12
00034-0516-90
00034-0517-10

NUMBER - 0376 SUB BY- PATTY SUB FOR- NICOLE PAGE- 2

ENTERED-03/23/04 PRIORITY- EST-DAYS-000 REQD-05/03/04

BEGIN-03/23/04 COMPLETE-05/05/04 CLOSE-

00034-0517-12
00034-0517-90
00034-0513-10
00034-0513-12

WHEN THESE GSNS OR NDCS ARE BILLED WITH AUTHORIZATION NUMBER 850000040 ON THE CLAIM, PLEASE BYPASS EDITS 70(X) AND 71.

THE EDIT 71 DENIAL MESSAGE FOR THESE DRUGS WILL BE "PREFERRED DRUGS: LONG ACTING MORPHINE OR METHADONE. SEE EPA CODE FOR CANCER PAIN."

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF MARCH 26, 2004:
THE EFFECTIVE DATE OF THE FORMULARY COVERAGE INDICATOR CHANGES TO X IS THE TIP IMPLEMENTATION DATE OF MAY 5, 2004.

THE FOLLOWING PIECE OF EMERGENCY POS CSR 0357 RELATING TO LONG ACTING OPIOIDS NEEDS TO BE RESCINDED EFFECTIVE MAY 5, 2004:

PLEASE REMOVE THE PRIOR AUTHORIZATION REQUIREMENT FROM THE FOLLOWING SINGLE SOURCE ITEMS BY CHANGING THE "FCI" FIELD FROM "P" TO "C" AND THE "SLE" FIELD FROM "Y" TO "N" EFFECTIVE WITH FILL DATES JUNE 1, 2003 AND AFTER:

DOLOPHINE 5MG 00054-4218-25
DOLOPHINE 5MG 00054-4216-25
DOLOPHINE 10MG 00054-4219-25
MS CONTIN 15MG 00034-0514-10
MS CONTIN 15MG 00034-0514-12
MS CONTIN 15MG 00034-0514-90
MS CONTIN 30MG 00034-0515-10
MS CONTIN 30MG 00034-0515-12
MS CONTIN 30MG 00034-0515-45
MS CONTIN 30MG 00034-0515-50
MS CONTIN 30MG 00034-0515-90
MS CONTIN 60MG 00034-0516-06
MS CONTIN 60MG 00034-0516-12

NUMBER - 0376 SUB BY- PATTY SUB FOR- NICOLE PAGE- 3

ENTERED-03/23/04 PRIORITY- EST-DAYS-000 REQD-05/03/04

BEGIN-03/23/04 COMPLETE-05/05/04 CLOSE-

MS CONTIN 60MG 00034-0516-90
MS CONTIN 100MG 00034-0517-10
MS CONTIN 100MG 00034-0517-12
MS CONTIN 100MG 00034-0517-90
MS CONTIN 200MG 00034-0513-10
MS CONTIN 200MG 00034-0513-12

CHANGE THE FOLLOWING GSNS FROM EPA TO COVERED BY CHANGING
THE "FCI" FIELD FROM "E" TO "C" AND THE "SLE" FIELD FROM
"Y" TO "N" EFFECTIVE WITH FILL DATES JUNE 1, 2003 AND AFTER:

DURAGESIC 25MCG 015880
DURAGESIC 50MCG 015881
DURAGESIC 75MCG 015882
DURAGESIC 100MCG 015883
LEVORPHANOL 2MG 004228
KADIAN 20MG 027494
KADIAN 30MG 047580
KADIAN 50MG 027493
KADIAN 60MG 047581
KADIAN 100MG 027492
AVINZA 30MG 050222
AVINZA 60MG 050221
AVINZA 90MG 050220
AVINZA 120MG 050219
OXYCONTIN 10MG 024504
OXYCONTIN 20MG 024505
OXYCONTIN 40MG 024506
OXYCONTIN 80MG 025702
OXYCONTIN 160MG 045129

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF APRIL 19, 2004:
WHEN THESE GSN'S OR NDC'S ARE BILLED WITH AUTHORIZATION
NUMBER 850000040 OR 85000000040 ON THE CLAIM, PLEASE BYPASS EDITS
70(X) AND 71.

THIS HAS BEEN DISCUSSES WITH BROOKE CAMPBELL

NUMBER - 0376 SUB BY- PATTY SUB FOR- NICOLE PAGE- 4

ENTERED-03/23/04 PRIORITY- EST-DAYS-000 REQD-05/03/04

BEGIN-03/23/04 COMPLETE-05/05/04 CLOSE-

SYSTEM SPECIFICATIONS:

COPY MEMBERS WT009010 AND WH001088 WILL BE MODIFIED FOR THE EPA CHANGES. PROGRAMS RXMFFORM, RXMF6200, AND RXOC0445 WILL BE RE-COMPILED TO PICK UP THESE CHANGES. CHANGES FOR THE RETURN MESSAGES WILL BE MADE TO PROGRAM RXOC0417 AND RXOC0422, AND THE CODE TO BYPASS THE EDITS WILL BE MADE TO RXOC0445. PROGRAM RXMFFORM WILL BE CHANGED TO SET THE FCI INDICATORS TO 'X'.

03/23/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0377 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-03/23/04 PRIORITY- EST-DAYS-000 REQD-04/01/04

BEGIN-03/23/04 COMPLETE-05/05/04 CLOSE-

DESCRIPTION: PDL EPA AND FCI CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0377

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO FACILITATE THE PDL AND TIP, PLEASE MAKE THE FOLLOWING CHANGES.

EFFECTIVE THE WEEK OF MARCH 29, 2004, PLEASE REMOVE THE FOLLOWING GSN'S AND ASSOCIATED CRITERIA CODES FROM THE EPA TABLE:

015939
015940
015941
016031
016366
016367
020741
049758

CHANGE THE FORMULARY COVERAGE INDICATOR FOR THE ALTACE AND PRAVACHOL (SAME LIST OF GSN'S ABOVE) TO X (NON-PREFERRED) EFFECTIVE APRIL 1, 2004 AND RETURN THE MESSAGE 'SEE EPA CRITERIA/CODE,IF PT DOESN'T MEET CRITERIA PHARMACY CALLS ACS 18662458504'.

WHEN ALTACE GSN'S 015939, 015940, 015941 OR 016031 ARE BILLED WITH AUTHORIZATION NUMBER 850000020 ON THE CLAIM, PLEASE BYPASS EDIT 70(X) AND ALSO EDIT 71 WHEN IT BECOMES EFFECTIVE IN MAY.

WHEN PRAVACHOL GSN'S 016366, 016367, 020741 OR 049758 ARE BILLED WITH AUTHORIZATION NUMBER 850000039 ON THE CLAIM, PLEASE BYPASS EDIT 70(X) AND ALSO EDIT 71 WHEN IT BECOMES EFFECTIVE IN MAY.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF APRIL 19, 2004:

NUMBER - 0377 SUB BY- PATTY SUB FOR- NICOLE PAGE- 2

ENTERED-03/23/04 PRIORITY- EST-DAYS-000 REQD-04/01/04

BEGIN-03/23/04 COMPLETE-05/05/04 CLOSE-

WHEN ALTACE GSN'S 015939, 015940, 015941 OR 016031
ARE BILLED WITH AUTHORIZATION NUMBER 850000020 OR 85000000020 ON THE
CLAIM, PLEASE BYPASS EDIT 70(X) AND ALSO EDIT 71 WHEN IT BECOMES
EFFECTIVE IN MAY.

WHEN PRAVACHOL GSN'S 016366, 016367, 020741 OR 049758 ARE BILLED
WITH AUTHORIZATION NUMBER 850000039 OR 85000000039 ON THE CLAIM,
PLEASE BYPASS EDIT 70(X) AND ALSO EDIT 71 WHEN IT BECOMES EFFECTIVE
IN MAY.

SYSTEM SPECIFICATIONS:

COPY MEMBERS WT009010 AND WH010088 WERE MODIFIED FOR THE EPA
CHANGES. PROGRAMS RXOC0417 AND RXOC0422 WERE MODIFIED FOR THE
RETURN MESSAGES, AND PROGRAM RXOC0445 WAS MODIFIED FOR BYPASSING
THE 70(X) AND 71 EDITS.

03/23/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0378 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-03/26/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-03/26/04 COMPLETE-04/05/04 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0378

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

GCN	DRUG	SLE
08454	PRILOSEC OTC	Y

SYSTEM SPECIFICATIONS:

PROGRAM RXMFFORM MODIFIED FOR THESE CHANGES.

03/26/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0379 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-03/29/04 PRIORITY- EST-DAYS-000 REQD-04/01/04

BEGIN-03/29/04 COMPLETE-04/01/04 CLOSE-

DESCRIPTION: UPDATE 76 MESSAGES

STATUS:

REQUEST CONTROL NUMBER: 0379

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE RETURN MESSAGES FOR EDIT 76 PLAN LIMITS
EXCEEDED AS FOLLOWS:

76-3: 3RD RX WITHIN SAME CALENDAR MONTH. PHARMACY CALL 1-800-848-2842.
76-5: 5TH RX WITHIN SAME CALENDAR MONTH. PHARMACY CALL 1-800-848-2842.

PLEASE ADD A RETURN MESSAGE FOR 76-C AS FOLLOWS:

PLAN LIMITS EXCEEDED. PHARMACY CALL 1-800-848-2842.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

PROGRAMS RXOC0417 AND RXOC0422 WERE MODIFIED FOR THE CHANGES TO
THE EXISTING MESSAGES, PLUS ADDING THE NEW MESSAGE FOR 76C.
PROGRAM RXOC0446 AND COPY MEMBER WH306050 WERE MODIFIED FOR
THE NEW 76C MESSAGE.

03/29/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0380 SUB BY- PATTY SUB FOR- SIRI PAGE- 1

ENTERED-04/14/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-04/14/04 COMPLETE-05/05/04 CLOSE-

DESCRIPTION: BYPASS EXCP FOR COPAY

STATUS:

REQUEST CONTROL NUMBER: 0380

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE BYPASS EXCEPTIONS 70X (NON-PREFERRED DRUG), 71 (ENDORSING PRACTITIONER) AND 76T (TCS FOUR BRAND LIMIT) FOR COPAY CLAIMS (OTHER COVERAGE CODE EQUALS 8 AND ZERO IN OTHER PAYER AMOUNT FIELD) AND FOR BALANCE BILLING CLAIMS (OTHER COVERAGE CODE 2 AND AMOUNT GREATER THAN ZERO IN THE OTHER PAYER AMOUNT FIELD).

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

PROGRAMS RXOC0445 (70X AND 71 EDITS) AND RXOC0446 (76T EDIT) WERE MODIFIED TO CHECK THE COPAY AND BALANCED BILLING CRITERIA.

04/14/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0381 SUB BY- PATTY SUB FOR- AIMEE PAGE- 1

ENTERED-04/14/04 PRIORITY-2 EST-DAYS-000 REQD-

BEGIN-04/14/04 COMPLETE- CLOSE-

DESCRIPTION: UPDATE PRIOR AUTH SCREEN

STATUS: AWAITING ANALYSIS

REQUEST CONTROL NUMBER: 0381

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE PRIOR AUTHORIZATON SCREEN 15 AND ADD FUNCTIONALITY
TO THE MAXIMUM REIMBURSEMENT PER CLAIM FIELD. THIS WILL ALLOW
RATES STAFF TO LIMIT REIMBURSEMENT WHEN ISSUING AN AUTHORIZATION
TO WAIVE THE MAC PRICE.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL AND STEVEN M. SMITH

SYSTEM SPECIFICATIONS:

04/14/04. ADDED - 521.

NUMBER - 0382 SUB BY- PATTY SUB FOR- MMIS SERVICES PAGE- 1

ENTERED-04/14/04 PRIORITY- EST-DAYS-000 REQD-05/05/04

BEGIN-04/14/04 COMPLETE-05/05/04 CLOSE-

DESCRIPTION: ALLOW EXAM ENTRY DAW ACCESS

STATUS:

REQUEST CONTROL NUMBER: 0382

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ALLOW EXAM ENTRY ACCESS TO DISPENSE AS WRITTEN (DAW) FIELD.
EFFECTIVE MAY 5, 2004 THE THERAPEUTIC INTERCHANGE PROGRAM CLAIMS
WILL BE SUBMITTED USING THE DAW FIELD AND EXAM ENTRY AND
ADJUSTMENTS NEEDS TO HAVE ACCESS TO THIS FIELD.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

SCREEN RXV4351 WAS MODIFIED TO REMOVE THE ASKIP WHICH WILL ALLOW
THE DAW TO BE ENTERED ON THE SCREEN. PROGRAM RXOC0439 AND COPY
MEMBER WH306050 WERE MODIFED TO ALLOW AN INTERNAL SWITCH FOR
WAIVE THE MAC INSTEAD OF USING THE DAW FIELD.

04/14/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0383 SUB BY- PATTY SUB FOR- SIRI PAGE- 1

ENTERED-04/14/04 PRIORITY-3 EST-DAYS-000 REQD-

BEGIN-04/14/04 COMPLETE- CLOSE-

DESCRIPTION: ADD IND ON PLAN FILE LIMITS

STATUS: AWAITING ANALYSIS

REQUEST CONTROL NUMBER: 0383

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD STATUS INDICATOR AS AN OPTION ON ALL PLAN FILE LIMITS THAT DO NOT CURRENTLY SUPPORT THIS OPTION (EXAMPLES: MIN/MAX AGE, SEX, MIN/MAX DAILY DOSE). THERE ARE CURRENTLY TWO VALID STATUS INDICATORS: D FOR EDIT 76C (PLAN FILE LIMITS EXCEEDED) AND P FOR EDIT 75C (PRIOR AUTH SET BY PLAN FILE). ADDITIONAL STATUS INDICATORS ALLOWING THE LIMIT TO BE SET TO OTHER AUDITS MAY ALSO BE BENEFICIAL. THIS WOULD ENABLE THE PLAN FILE LIMITS ON PDL DRUGS TO BE SEPARATELY IDENTIFIED AND THE APPROPRIATE RETURN MESSAGES SET DIRECTING PRIOR AUTHORIZATION REQUESTS TO ACS OR MAA AS APPROPRIATE.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

04/14/04. ADDED - 521.

NUMBER - 0384 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-04/22/04 PRIORITY- EST-DAYS-000 REQD-05/05/04

BEGIN-04/22/04 COMPLETE-05/05/04 CLOSE-

DESCRIPTION: TIP CHANGES FOR DUR/REJ 71

STATUS:

REQUEST CONTROL NUMBER: 0384

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO FACILITATE TIP, PLEASE ADD THE FOLLOWING TO DUR/REJ 71 (PRESCRIBER NOT COVERED) EFFECTIVE MAY 5, 2004.

RETURN THE MESSAGE "TIP PREFERRED: MAXALT (NOT MLT) AND IMITREX."
FOR TRIPTAN GCN'S:

12472	AXERT
13587	AXERT
14324	ZOMIG ZMT
14977	FROVA
15173	RELPAX
15174	RELPAX
18972	ZOMIG
19593	MAXALT MLT
19594	MAXALT MLT
42098	ZOMIG ZMT
46131	ZOMIG
46132	ZOMIG
81111	AMERGE
81112	AMERGE

RETURN THE MESSAGE "TIP PREFERRED: GENERIC GLYBURIDE AND GLIPIZIDE."
FOR INSULIN RELEASE TYPE ORAL HYPOGLYCEMIC GCN'S:

05690	ACETOHEXAMIDE
05691	ACETOHEXAMIDE
05710 (BRAND ONLY)	DIABETA/ MICRONASE
05711 (BRAND ONLY)	DIABETA/ MICRONASE
05712 (BRAND ONLY)	DIABETA/ MICRONASE
05713 (BRAND ONLY)	GLYNASE
05714 (BRAND ONLY)	GLYNASE
05715 (BRAND ONLY)	GLYNASE
05724	ORINASE/TOLBUTAMIDE
05731	DIABINESE/CHLORPROPAMIDE

NUMBER - 0384 SUB BY- PATTY SUB FOR- NICOLE PAGE- 2

ENTERED-04/22/04 PRIORITY- EST-DAYS-000 REQD-05/05/04

BEGIN-04/22/04 COMPLETE-05/05/04 CLOSE-

05732	DIABINESE/CHLORPROPAMIDE
05740	TOLINASE/TOLAZAMIDE
05741	TOLINASE/TOLAZAMIDE
05742	TOLINASE/TOLAZAMIDE
05830	AMARYL
05832	AMARYL
05833	AMARYL
10840 (BRAND ONLY)	GLUCOTROL

RETURN THE MESSAGE "TIP PREFERRED: LIPITOR & GENERIC LOVASTATIN. PRAVACHOL ON EPA." FOR STATIN GCN'S:

00030	LESCOL
00031	LESCOL
15165	ADVICOR
15166	ADVICOR
15167	ADVICOR
17650	ALTOCOR
17651	ALTOCOR
17652	ALTOCOR
17654	ALTOCOR
19153	CRESTOR
19154	CRESTOR
19155	CRESTOR
20229	CRESTOR
26531	ZOCOR
26532	ZOCOR
26533	ZOCOR
26534	ZOCOR
26535	ZOCOR
47040 (BRAND ONLY)	MEVACOR
47041 (BRAND ONLY)	MEVACOR
47042 (BRAND ONLY)	MEVACOR
89424	LESCOL XL

RETURN THE MESSAGE "TIP PREFERRED: PRILOSEC OTC, ACIPHEX, NEXIUM, PREVACID." FOR PROTON PUMP INHIBITOR GCN'S:

04348	PRILOSEC
40120	PROTONIX

NUMBER - 0384 SUB BY- PATTY SUB FOR- NICOLE PAGE- 3

ENTERED-04/22/04 PRIORITY- EST-DAYS-000 REQD-05/05/04

BEGIN-04/22/04 COMPLETE-05/05/04 CLOSE-

92989 PRILOSEC
92999 PRILOSEC
95976 PROTONIX

RETURN THE MESSAGE "TIP PREFERRED: GENERIC CAPTOPRIL ENALAPRIL ENALAPRIL LISINOPRIL; ALTACE ON EPA." FOR ACE INHIBITOR GCN'S:

00960	(BRAND ONLY)	VASOTEC
00961	(BRAND ONLY)	VASOTEC
00962	(BRAND ONLY)	VASOTEC
00963	(BRAND ONLY)	VASOTEC
01480	(BRAND ONLY)	CAPOTEN
01481	(BRAND ONLY)	CAPOTEN
01482	(BRAND ONLY)	CAPOTEN
01483	(BRAND ONLY)	CAPOTEN
13758		ACEON
13759		ACEON
13811		ACCURETIC
13812		ACCURETIC
13813		ACCURETIC
17604		LOTREL
32111		TARKA
32112		TARKA
32113		TARKA
32114		TARKA
32191		MAVIK
32192		MAVIK
32193		MAVIK
33090		LOTREL
33092		LOTREL
33093		LOTREL
33191	(BRAND ONLY)	LOTENSIN HCT
33192		LOTENSIN HCT
33193		LOTENSIN HCT
33194		LOTENSIN HCT
47260	(BRAND ONLY)	PRINIVIL/ZESTRIL
47261	(BRAND ONLY)	PRINIVIL/ZESTRIL
47262	(BRAND ONLY)	PRINIVIL/ZESTRIL
47263	(BRAND ONLY)	PRINIVIL/ZESTRIL

NUMBER - 0384 SUB BY- PATTY SUB FOR- NICOLE PAGE- 4

ENTERED-04/22/04 PRIORITY- EST-DAYS-000 REQD-05/05/04

BEGIN-04/22/04 COMPLETE-05/05/04 CLOSE-

47264 (BRAND ONLY)	PRINIVIL/ZESTRIL
47265 (BRAND ONLY)	ZESTRIL
48561	UNIVASC
48562	UNIVASC
48580	MONOPRIL
48581	MONOPRIL
48582	MONOPRIL
48611	LOTENSIN
48612	LOTENSIN
48613	LOTENSIN
48614	LOTENSIN
48691	ACCUPRIL
48692	ACCUPRIL
48693	ACCUPRIL
48694	ACCUPRIL
54860 (BRAND ONLY)	VASERETIC
54862 (BRAND ONLY)	VASERETIC
54940 (BRAND ONLY)	CAPOZIDE
54941 (BRAND ONLY)	CAPOZIDE
54942 (BRAND ONLY)	CAPOZIDE
54943 (BRAND ONLY)	CAPOZIDE
88000 (BRAND ONLY)	PRINIZIDE/ZESTORETIC
88001 (BRAND ONLY)	PRINIZIDE/ZESTORETIC
88002 (BRAND ONLY)	PRINIZIDE/ZESTORETIC
93207	ACEON

DUR/REJ 71 IS BYPASSED IF PRESCRIBER IS AN ENDORSING PRACTITIONER
AND DAW 1 IS INDICATED.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF APRIL 27, 2004:
PLEASE RETURN THE MESSAGE "TIP PREFERRED: GENERIC CAPTOPRIL
ENALAPRIL LISINOPRIL; ALTACE ON EPA." FOR THE FOLLOWING ADDITIONAL ACE
INHIBITOR GCN'S:

10455	MONOPRIL
15621	MONOPRIL
15777	UNIRETIC

NUMBER - 0384 SUB BY- PATTY SUB FOR- NICOLE PAGE- 5

ENTERED-04/22/04 PRIORITY- EST-DAYS-000 REQD-05/05/04

BEGIN-04/22/04 COMPLETE-05/05/04 CLOSE-

67721 UNIRETIC
67722 UNIRETIC

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF APRIL 30, 2004:

PLEASE REMOVE THE FOLLOWING GCN'S FROM DUR/REJ 71:
STATINS:

15165 ADVICOR
15166 ADVICOR
15167 ADVICOR

ACE INHIBITORS:

10455 MONOPRIL
13811 ACCURETIC
13812 ACCURETIC
13813 ACCURETIC
15621 MONOPRIL
15777 UNIRETIC
17604 LOTREL
32111 TARKA
32112 TARKA
32113 TARKA
32114 TARKA
33090 LOTREL
33092 LOTREL
33093 LOTREL
33191 (BRAND ONLY) LOTENSIN HCT
33192 LOTENSIN HCT
33193 LOTENSIN HCT
33194 LOTENSIN HCT
54860 (BRAND ONLY) VASERETIC
54862 (BRAND ONLY) VASERETIC
54940 (BRAND ONLY) CAPOZIDE
54941 (BRAND ONLY) CAPOZIDE
54942 (BRAND ONLY) CAPOZIDE

NUMBER - 0384 SUB BY- PATTY SUB FOR- NICOLE PAGE- 6

ENTERED-04/22/04 PRIORITY- EST-DAYS-000 REQD-05/05/04

BEGIN-04/22/04 COMPLETE-05/05/04 CLOSE-

54943 (BRAND ONLY) CAPOZIDE
67721 UNIRETIC
67722 UNIRETIC
88000 (BRAND ONLY) PRINIZIDE/ZESTORETIC
88001 (BRAND ONLY) PRINIZIDE/ZESTORETIC
88002 (BRAND ONLY) PRINIZIDE/ZESTORETIC

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL

ADDENDUM AS OF MAY 7, 2004:

PLEASE CHANGE THE FOLLOWING RETURN MESSAGES:

TRIPTANS: 'TIP PREFERRED: MAXALT (NOT MLT).'

PROTON PUMP INHIBITORS: 'TIP PREFERRED: PRILOSEC OTC'

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL

SYSTEM SPECIFICATIONS:

LOGIC WAS ADDED TO PROGRAM RXOC0445 FOR ALL OF THE TIP LOGIC AND THE POSTING OF EDIT 71. PROGRAMS RXOC0417 AND RXOC0422 WERE MODIFIED TO SEND THE APPROPRIATE RESPONSE MESSAGES.

04/22/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0385 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-04/22/04 PRIORITY- EST-DAYS-000 REQD-05/01/04

BEGIN-04/22/04 COMPLETE-05/01/04 CLOSE-

DESCRIPTION: CHANGE FORMULARY COVERAGE IND

STATUS:

REQUEST CONTROL NUMBER: 0385

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

EFFECTIVE MAY 1, 2004 PROTONIX WILL BE A NON-PREFERRED DRUG. PLEASE CHANGE THE FORMULARY COVERAGE INDICATOR TO X NON-PREFERRED FOR GCN 40120 AND 95976 AND RETURN THE MESSAGE "PREFERRED:PRILOSEC OTC,ACIPHEX,NEXIUM,PREVACID. PHARMACY CALLS ACS 18662468504".

SYSTEM SPECIFICATIONS:

PROGRAM RXMFFORM WAS MODIFED TO SET THE FCI TO 'X', AND PROGRAMS RXOC0417 AND RXOC0422 WERE MODIFIED FOR THE RETURN MESSAGE.'

04/22/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0386 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-04/22/04 PRIORITY- EST-DAYS-000 REQD-05/05/04

BEGIN-04/22/04 COMPLETE-05/05/04 CLOSE-

DESCRIPTION: BYPASS 76C FOR OXYCONTIN GSNS

STATUS:

REQUEST CONTROL NUMBER: 0386

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

EFFECTIVE MAY 5, 2004, BYPASS DUR/REJ 76C (PLAN LIMITS EXCEEDED)
WHEN THE FOLLOWING OXYCONTIN GSN'S ARE BILLED WITH AUTHORIZATION
NUMBER 850000040:

024504
024505
024506
025702
045129

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF APRIL 19, 2004:
EFFECTIVE MAY 5, 2004, BYPASS DUR/REJ 76C (PLAN LIMITS EXCEEDED)
WHEN THE INDICATED OXYCONTIN GSN'S ARE BILLED WITH AUTHORIZATION
NUMBER 850000040 OR 85000000040.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

PROGRAM RXOC0445 AND RXOC0446 WERE MODIFIED TO BYPASS 76C USING
THE SPECIFIED CRITERIA.

04/22/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0387 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-04/28/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-04/28/04 COMPLETE-05/05/04 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0387

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

GCN	DRUG	SLE
16286	OXYCODONE ER	Y (GENERIC ONLY)
19646	MYFORTIC	Y
19647	MYFORTIC	Y
21443	MAXIFED-G	N (BRAND ONLY)
21466	GRANULEX SPRAY	N (BRAND ONLY)
21513	VFEND	N (BRAND ONLY)

NDC	DRUG	SLE
00054453825	METHADONE	Y
00172409660	BACLOFEN	Y
00172409760	BACLOFEN	Y
49348000910	SM PAIN RELIEVER	Y

SYSTEM SPECIFICATIONS:

PROGRAM RXMFFORM WAS MODIFIED TO SET THE SCRIPT LIMIT EXEMPT INDICATORS.

04/28/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0388 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-04/30/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-04/30/04 COMPLETE-05/05/04 CLOSE-

DESCRIPTION: PA REQUIRED FOR PROV ON REVIEW

STATUS:

REQUEST CONTROL NUMBER: 0388

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE REJECT CLAIMS WITH DUR/REJ 75 (PRIOR AUTHORIZATION REQUIRED)
IF THEY ARE FOR SCHEDULE 2 DRUGS (DEA CODE = 2) AND THE PRESCRIBER
ID IS EQUAL TO BA0122096 OR BM3851210.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

ADDENDUM AS OF APRIL 30, 2004:

PLEASE REJECT CLAIMS WITH DUR/REJ 75 (PRIOR AUTHORIZATION REQUIRED)
IF THEY ARE FOR SCHEDULE 2 DRUGS (DEA CODE = 2) AND THE PRESCRIBER
ID IS EQUAL TO BM3851210 ONLY.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

PROGRAM RXOC0445 WAS MODIFIED TO POST 75 (PA REQUIRED) FOR
SCHEDULE 2 DRUGS FOR THE SPECIFIC PRESCRIBER.

04/30/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0389 SUB BY- PATTY SUB FOR- VALERIE PAGE- 1

ENTERED-05/04/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/04/04 COMPLETE-05/05/04 CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS:

REQUEST CONTROL NUMBER: 0389

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

GCN	DRUG	SLE
08454	PRILOSEC OTC	Y
48541	ALTACE 1.2MG	Y
48542	ALTACE 2.5MG	Y
48543	ALTACE 5MG	Y
48544	ALTACE 10MG	Y

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

PROGRAM RXMFFORM WAS MODIFIED TO SET THE SCRIPT LIMIT EXEMPT INDICATORS.

05/04/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0390 SUB BY- PATTY SUB FOR- SIRI PAGE- 1

ENTERED-05/04/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/04/04 COMPLETE-05/05/04 CLOSE-

DESCRIPTION: BYPASS 70X AND 71 FOR COMPOUNDS

STATUS:

REQUEST CONTROL NUMBER: 0390

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE BYPASS EDITS 70X (NON-PREFERRED DRUG) AND 71 (ENDORSING
PRESCRIBER) FOR COMPOUND CLAIMS (FIELD 406-36 COMPOUND CODE = 2)
AND FOR ANY CLAIM BILLED BY THE FOLLOWING PROVIDERS:

4915849 UNIVERSITY OF WASHINGTON MEDICAL CENTER
4912463 HARBORVIEW MEDICAL CENTER
4929634 COMMUNITY HEALTH CARE PHARMACY

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL

SYSTEM SPECIFICATIONS:

PROGRAM RXOC0445 WAS MODIFIED TO BYPASS EDITS 70X AND 71 FOR
COMPOUND CLAIMS AND FOR ANY CLAIMS BILLED BY THE SPECIFIC PROVIDERS.

05/04/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0391 SUB BY- PATTY SUB FOR- SIRI PAGE- 1

ENTERED-05/04/04 PRIORITY- EST-DAYS-000 REQD-05/05/04

BEGIN-05/04/04 COMPLETE-05/05/04 CLOSE-

DESCRIPTION: BYPASS 70X FOR LA OPIOIDS

STATUS:

REQUEST CONTROL NUMBER: 0391

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

EFFECTIVE FOR FILL DATE MAY 5, 2004 AND AFTER WHEN THE FOLLOWING LONG ACTING OPIOID GSNS AND NDCS ARE BILLED BY A PRESCRIBER WHO IS AN ENDORSING PRACTITIONER FOR FILL DATE AND DAW IS EQUAL TO 1, BYPASS EDIT 70X (NON-PREFERRED DRUG):

004228	024504	027493	050219
015880	024505	027494	050220
015881	024506	045129	050221
015882	025702	047580	050222
015883	027492	047581	

00034-0513-10	00034-0516-10
00034-0513-12	00034-0516-12
00034-0514-10	00034-0516-90
00034-0514-12	00034-0517-10
00034-0514-90	00034-0517-12
00034-0515-10	00034-0517-90
00034-0515-12	00054-4216-25
00034-0515-45	00054-4218-25
00034-0515-50	00054-4219-25
00034-0515-90	

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

MODIFICATIONS WERE MADE TO RXOC0445 TO BYPASS 70X FOR THE GSNS AND NDCS AS SPECIFIED, PLUS THE REQUIREMENTS OF BEING ENDORSING PRACTITIONERS AND A DAW OF 1.

NUMBER - 0391 SUB BY- PATTY SUB FOR- SIRI PAGE- 2

ENTERED-05/04/04 PRIORITY- EST-DAYS-000 REQD-05/05/04

BEGIN-05/04/04 COMPLETE-05/05/04 CLOSE-

05/04/04. ADDED - 521.

05/05/04. UPDATED - 521.

NUMBER - 0392 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-05/17/04 PRIORITY-2 EST-DAYS-000 REQD-05/31/04

BEGIN-05/17/04 COMPLETE- CLOSE-

DESCRIPTION: EPA AND CRITERIA CODE CHANGES

STATUS: COMPLETE THIS WEEK

REQUEST CONTROL NUMBER: 0392

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE REMOVE THE FOLLOWING GSNS AND ALL ASSOCIATED CRITERIA CODES FROM THE EPA TABLE:

000243	003840	009329	017196	026436	040157	046927
000244	003841	009330	018229	029334	040158	046941
000263	003842	009331	019751	029335	040294	047038
000264	006584	012080	020611	030788	040386	047323
000265	006585	013497	022531	031006	041007	047381
000266	006586	013646	022532	031789	041008	048437
001609	006600	013647	023855	037022	043952	049812
002329	006601	016375	024053	037030	044984	050035
003002	006602	016428	024054	037034	045102	050039
003015	006681	016587	024097	039483	045146	050364
003623	007670	016588	024138	040155	046925	052882
003630	009328	017195	024508	040156	046926	

PLEASE IMPLEMENT WITH THE DRUG FILE UPDATE THE WEEK OF MAY 31, 2004. AFTER THE REVISIONS HAVE BEEN COMPLETED, PLEASE GENERATE 1 COPY OF THE GSN REPORT AND DELIVER IT TO BIN 12, ATTENTION PATTY ORTH.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

05/17/04. ADDED - 521.

NUMBER - 0393 SUB BY- PATTY SUB FOR- RENEE PAGE- 1

ENTERED-05/17/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/17/04 COMPLETE- CLOSE-

DESCRIPTION: MONTHLY RANDOM PA NUMBER REPORT

STATUS: IN PROCESS

REQUEST CONTROL NUMBER: 0393

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE CREATE A NEW MONTHLY REPORT LISTING EACH OF THE FOLLOWING USER NUMBERS AND TEN RANDOM PRIOR AUTHORIZATION NUMBERS CREATED BY THE USER:

009	521
035	633
043	636
092	694
106	766
214	776
323	912
458	

PLEASE DELIVER THIS MONTHLY REPORT TO BIN 6-4, ATTENTION RENEE MORGAN.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

05/17/04. ADDED - 521.

NUMBER - 0394 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-05/17/04 PRIORITY-1 EST-DAYS-000 REQD-06/01/04

BEGIN-05/17/04 COMPLETE- CLOSE-

DESCRIPTION: EPA AND CRITERIA CODE CHANGES

STATUS: COMPLETE THIS WEEK

REQUEST CONTROL NUMBER: 0394

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

EFFECTIVE THE WEEK OF JUNE 1, 2004, PLEASE MAKE THE FOLLOWING CHANGES TO THE EPA TABLE.

ADDITIONS:

GSN	DRUG	CRITERIA CODE(S)
016949	SPORANOX	042,043,044,045,047
018638	LAMISIL	042,043,044,045
053400	SYMBYAX	048
053401	SYMBYAX	048
053402	SYMBYAX	048
053403	SYMBYAX	048

PLEASE REMOVE GSN'S 002347 (HYDROXOCOBALAMIN), 017241, 047421 (PACERONE) AND ALL ASSOCIATED CRITERIA CODES.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

05/17/04. ADDED - 521.

NUMBER - 0395 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-05/17/04 PRIORITY-1 EST-DAYS-000 REQD-06/01/04

BEGIN-05/17/04 COMPLETE- CLOSE-

DESCRIPTION: FCI AND MESSAGE CHANGES

STATUS: COMPLETE THIS WEEK

REQUEST CONTROL NUMBER: 0395

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE CHANGE TOPROL XL GSN'S 016599, 016600 AND 047586 TO FORMULARY COVERAGE INDICATOR TO X (NON-PREFERRED) EFFECTIVE JUNE 1, 2004,M AND RETURN MESSAGE "SEE EPA CRITERIA CODE.IF PT DOESN'T MEET CRITERIA PHARMACY CALLS ACS 18662468504".

ALSO ADD THE SAME GSN'S TO DUR/REJ 71 (PRESCRIBER NOT COVERED) EFFECTIVE JUNE 1, 2004, AND RETURN THE MESSAGE "TIP:SEE EPA CRITERIA.IF DOESN'T MEET CRITERIA,PREFERRED=GENERIC BETA BLOCKERS."

WHEN THESE GSN'S ARE BILLED WITH AUTHORIZATION NUMBER 850000041 OR 85000000041 ON THE CLAIM, BYPASS EDITS 70(X) AND 71.

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

05/17/04. ADDED - 521.

NUMBER - 0396 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-05/17/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/17/04 COMPLETE-05/17/04 CLOSE-

DESCRIPTION: ADD GCNS FOR TIP

STATUS:

REQUEST CONTROL NUMBER: 0396

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

TO FACILITATE TIP, PLEASE ADD THE FOLLOWING ADDITIONAL INSULIN RELEASE TYP ORAL HYPOGLYCEMIC GCN'S TO DUR/REJ 71 (PRESCRIBER NOT COVERED) AND RETURN THE MESSAGE "TIP PREFERRED: GENERIC GLYBURIDE AND GLIPIZIDE."

12277 STARLIX
26311 PRANDIN
26312 PRANDIN
26313 PRANDIN
34027 STARLIX

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

THESE CODES HAVE BEEN ADDED TO PROGRAMS RXOC0445, RXOC0417, AND RXOC0422 TO POST EXCEPTION 71 AND THE CORRESPONDING MESSAGE.

05/17/04. ADDED - 521.

NUMBER - 0397 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-05/25/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/25/04 COMPLETE- CLOSE-

DESCRIPTION: SCRIPT LIMIT EXEMPT CHANGES

STATUS: COMPLETE THIS WEEK

REQUEST CONTROL NUMBER: 0397

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE MAKE THE FOLLOWING CHANGES TO THE SCRIPT LIMIT EXEMPT INDICATOR FIELD ON PAGE 5 OF POS:

GCN	DRUG	SLE
18992	PREVACID 15MG SOLUTAB	N (BRAND ONLY)
18993	PREVACID 30MG SOLUTAB	N (BRAND ONLY)
21774	CENESTIN 0.45MG	N (BRAND ONLY)
21829	FLOXIN OTIC SINGLES	N (BRAND ONLY)
27614	ARISTOCORT	N (BRAND ONLY)
89297	CALCIUM CARB 500MG	N (BRAND ONLY)

NDC	DRUG	SLE
00054412125	CALCIUM GLUCONATE	Y
00066057760	BENZAMYCINPAK GEL	N
24385065271	REAGENT STRIPS	Y
49884002810	HYDRALAZINE 50MG TAB	Y

SYSTEM SPECIFICATIONS:

05/25/04. ADDED - 521.

NUMBER - 0398 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-05/25/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/25/04 COMPLETE- CLOSE-

DESCRIPTION: EPA TABLE CHANGES

STATUS: COMPLETE THIS WEEK

REQUEST CONTROL NUMBER: 0398

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

THERE IS A NEW STRENGTH OF RITALIN LA. PLEASE ADD GSN 053974 TO THE EPA TABLE WITH CRITERIA CODE 149.

SYSTEM SPECIFICATIONS:

05/25/04. ADDED - 521.

NUMBER - 0399 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-05/25/04 PRIORITY-2 EST-DAYS-000 REQD-

BEGIN-05/25/04 COMPLETE- CLOSE-

DESCRIPTION: CHANGE FORMULARY COVERAGE IND

STATUS: COMPLETE THIS WEEK

REQUEST CONTROL NUMBER: 0399

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE CHANGE ZYRTEC CHEW TAB GCNS 21769 AND 21771 TO FORMULARY COVERAGE INDICATOR TO X (NON-PREFERRED) EFFECTIVE MAY 10, 2004, AND RETURN THE MESSAGE "PREFERRED: OTC LORATADINE. PHARMACY CALLS ACS 1-866-246-8504."

SYSTEM SPECIFICATIONS:

05/25/04. ADDED - 521.

NUMBER - 0400 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-05/25/04 PRIORITY-1 EST-DAYS-000 REQD-06/01/04

BEGIN-05/25/04 COMPLETE- CLOSE-

DESCRIPTION: CALCIUM CHANNEL BLOCKERS (TIP)

STATUS: COMPLETE THIS WEEK

REQUEST CONTROL NUMBER: 0400

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

CALCIUM CHANNEL BLOCKERS ARE BEING ADDED TO TIP EFFECTIVE JUNE 1,2004.
PLEASE CHANGE THE FOLLOWING LIST OF GCNS TO FORMULARY COVERAGE
INDICATOR TO X (NON-PREFERRED) EFFECTIVE JUNE 1, 2004, AND RETURN
MESSAGE "PREFER=NORVASC,GENERIC NIFEDIPINE ER,DILTIAZEM,VERAPAMIL.
PHARM CALL 18662468504".

ALSO ADD THE SAME GCNS TO DUR/REJ 71 (PRESCRIBER NOT COVERED)
EFFECTIVE JUNE 1, 2004, AND RETURN THE MESSAGE "TIP: PREFFERED=
NORVASC & GENERIC NIFEDIPINE ER,DILTIAZEM,VERAPAMIL".

01881 CARDENE SR
01882 CARDENE SR
01883 CARDENE SR
02221 PROCARDIA XL (BRAND ONLY)
02222 PROCARDIA XL (BRAND ONLY)
02223 PROCARDIA XL (BRAND ONLY)
02226 ADALAT CC (BRAND ONLY)
02227 ADALAT CC (BRAND ONLY)
02228 ADALAT CC (BRAND ONLY)
02302 VASCOR
02315 DYNACIRC CR
02320 CARDIZEM SR (BRAND ONLY)
02321 CARDIZEM SR (BRAND ONLY)
02322 CARDIZEM SR (BRAND ONLY)
02323 CARDIZEM CD (BRAND ONLY)
02324 CARDIZEM CD (BRAND ONLY)
02325 CARDIZEM CD (BRAND ONLY)
02326 CARDIZEM CD (BRAND ONLY)
02328 TIAZAC (BRAND ONLY)
02329 TIAZAC (BRAND ONLY)
02330 TIAZAC (BRAND ONLY)
02332 TIAZAC (BRAND ONLY)

NUMBER - 0400 SUB BY- PATTY SUB FOR- NICOLE PAGE- 2

ENTERED-05/25/04 PRIORITY-1 EST-DAYS-000 REQD-06/01/04

BEGIN-05/25/04 COMPLETE- CLOSE-

02333	TIAZAC	(BRAND ONLY)
02341	CALAN	(BRAND ONLY)
02342	CALAN	(BRAND ONLY)
02350	PROCARDIA	
02351	PROCARDIA	
02360	CARDIZEM	(BRAND ONLY)
02361	CARDIZEM	(BRAND ONLY)
02362	CARDIZEM	(BRAND ONLY)
02363	CARDIZEM	(BRAND ONLY)
02390	CARDENE	
02391	CARDENE	
02601	VASCOR	
02611	DYNACIRC	
02612	DYNACIRC	
02614	DYNACIRC CR	
02620	PLENDIL	
02621	PLENDIL	
02622	PLENDIL	
02643	CARDIZEM	(BRAND ONLY)
03001	VERELAN	(BRAND ONLY)
03002	VERELAN	(BRAND ONLY)
03003	VERELAN	(BRAND ONLY)
03004	VERELAN	(BRAND ONLY)
07460	CARDIZEM CD	(BRAND ONLY)
07461	DILACOR XR	(BRAND ONLY)
07462	DILACOR XR	(BRAND ONLY)
07463	DILACOR XR	(BRAND ONLY)
14701	SULAR	
14702	SULAR	
14703	SULAR	
14704	SULAR	
19180	CARDIZEM LA	
19183	CARDIZEM LA	
19184	CARDIZEM LA	
19185	CARDIZEM LA	
19186	CARDIZEM LA	
19187	CARDIZEM LA	
32470	ISOPTIN SR	(BRAND ONLY)
32470	CALAN SR	(BRAND ONLY)

NUMBER - 0400 SUB BY- PATTY SUB FOR- NICOLE PAGE- 3

ENTERED-05/25/04 PRIORITY-1 EST-DAYS-000 REQD-06/01/04

BEGIN-05/25/04 COMPLETE- CLOSE-

32471	CALAN SR	(BRAND ONLY)
32471	ISOPTIN SR	(BRAND ONLY)
32472	CALAN SR	(BRAND ONLY)
32472	ISOPTIN SR	(BRAND ONLY)
32473	COVERA-HS	(BRAND ONLY)
32474	COVERA-HS	(BRAND ONLY)
47110	CALAN	(BRAND ONLY)
94122	VERELAN PM	(BRAND ONLY)
94123	VERELAN PM	(BRAND ONLY)
94124	VERELAN PM	(BRAND ONLY)
94691	TIAZAC	(BRAND ONLY)

SYSTEM SPECIFICATIONS:

05/25/04. ADDED - 521.

NUMBER - 0401 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-05/25/04 PRIORITY- EST-DAYS-000 REQD-

BEGIN-05/25/04 COMPLETE- CLOSE-

DESCRIPTION: EXCEPTION CHANGES FOR M1

STATUS: COMPLETE THIS WEEK

REQUEST CONTROL NUMBER: 0401

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE UPDATE THE EXCEPTION CODE LOGIC FOR DUR/REJ M1 (CLIENT IN MANAGED CARE PLAN). REMOVE W4A FROM THE LIST IN SECTION 4 THAT BYPASS THIS EXCEPTION WHEN BILLED WITH A MED CERT CODE 2.

SYSTEM SPECIFICATIONS:

05/25/04. ADDED - 521.

NUMBER - 0402 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-05/25/04 PRIORITY-1 EST-DAYS-000 REQD-

BEGIN-05/25/04 COMPLETE- CLOSE-

DESCRIPTION: BETA BLOCKERS (TIP)

STATUS: COMPLETE THIS WEEK

REQUEST CONTROL NUMBER: 0402

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

BETA BLOCKERS ARE BEING ADDED TO TIP EFFECTIVE JUNE 1, 2004. PLEASE CHANGE THE FOLLOWING LIST OF GCNS TO FORMULARY COVERAGE INDICATOR X (NON-PREFERRED) EFFECTIVE JUNE 1, 2004, AND RETURN THE MESSAGE "PREFERRED=GENERICS;TOPROL XL BY EPA. PHARMACY CALLS 1-866-246-8504".

ALSO ADD THE SAME GCNS TO DUR/REJ 71 (PRESCRIBER NOT COVERED) EFFECTIVE JUNE 1, 2004, AND RETURN THE MESSAGE "TIP:PREFFERED GENERIC ATEN/BISOPR/LABET/METOPR/NAD/PIND/PROPRAN; TOPROL XL BY EPA".

01551	COREG	
01552	COREG	
01553	COREG	
01554	COREG	
03230	INDERAL LA	(BRAND ONLY)
03231	INDERAL LA	(BRAND ONLY)
03232	INDERAL LA	(BRAND ONLY)
03233	INDERAL LA	(BRAND ONLY)
10340	NORMODYNE	(BRAND ONLY)
10341	NORMODYNE	(BRAND ONLY)
10342	NORMODYNE	(BRAND ONLY)
19359	INNOPRAN XL	(BRAND ONLY)
20621	INNOPRAN XL	(BRAND ONLY)
20630	INDERAL	(BRAND ONLY)
20631	INDERAL	(BRAND ONLY)
20632	INDERAL	(BRAND ONLY)
20633	INDERAL	(BRAND ONLY)
20634	INDERAL	(BRAND ONLY)
20641	LOPRESSOR	(BRAND ONLY)
20642	LOPRESSOR	(BRAND ONLY)
20642	METOPROLOL TART	(BRAND ONLY)
20650	CORGARD	(BRAND ONLY)
20651	CORGARD	(BRAND ONLY)

NUMBER - 0402 SUB BY- PATTY SUB FOR- NICOLE PAGE- 2

ENTERED-05/25/04 PRIORITY-1 EST-DAYS-000 REQD-

BEGIN-05/25/04 COMPLETE- CLOSE-

20652	CORGARD	(BRAND ONLY)
20653	CORGARD	(BRAND ONLY)
20654	CORGARD	(BRAND ONLY)
20660	TENORMIN	(BRAND ONLY)
20661	TENORMIN	(BRAND ONLY)
20662	TENORMIN	(BRAND ONLY)
20680	VISKEN	(BRAND ONLY)
20681	VISKEN	(BRAND ONLY)
29241	CARTROL	
39350	LEVATOL	
63820	ZEBETA	(BRAND ONLY)
63821	ZEBETA	(BRAND ONLY)

THIS HAS BEEN DISCUSSED WITH BROOKE CAMPBELL.

SYSTEM SPECIFICATIONS:

05/25/04. ADDED - 521.

NUMBER - 0403 SUB BY- PATTY SUB FOR- NICOLE PAGE- 1

ENTERED-05/25/04 PRIORITY-1 EST-DAYS-000 REQD-

BEGIN-05/25/04 COMPLETE- CLOSE-

DESCRIPTION: ADD ALTACE AND PRAVACHOL GCNS

STATUS: COMPLETE THIS WEEK

REQUEST CONTROL NUMBER: 0403

DESCRIPTION OF REQUEST: Y2K IMPACT: MAA: NO CONSULTEC: NO

PLEASE ADD ALTACE GSNS 015939, 015940, 015941 AND 016031 TO
DUR/REJ 71 (PRESCRIBER NOT COVERED) EFFECTIVE MAY 5, 2004, AND
RETURN THE MESSAGE "TIP:SEE EPA CRITERIA & IF NOT MET, PREFERRED:
CAPTOPRIL,ENALAPRIL,LISINOPRIL".

ALSO ADD PRAVACHOL GSNS 016366, 016367, 020741 AND 049758 TO
DUR/REJ 71 (PRESCRIBER NOT COVERED) EFFECTIVE MAY 5, 2004, AND
RETURN THE MESSAGE "TIP:SEE EPA CRITERIA.IF CRITERIA NOT MET,
PERFERRED: LIPITOR,GENERIC LOVASTATIN".

SYSTEM SPECIFICATIONS:

05/25/04. ADDED - 521.