



## NOTICE: Pharmacy Billing Changes

The **PASSE Model of Care** is a State health plan created to meet the needs of approximately **40,000** Medicaid recipients with complex behavioral health, developmental, or intellectual disabilities. **Three PASSEs** have formed to manage care for these clients.

**On March 1, 2019, you will no longer bill Medicaid for these clients. You will bill the individual PASSEs.** Pharmacy claims submitting Fee-For-Service for PASSE recipients on or after 3/1/19 will reject at point of sale.

### What do you need to do?

We encourage you to **ENROLL IN ALL THREE PASSEs** to ensure that you can continue to provide services for your affected clients in 2019.

Each PASSE member will receive a new ID card with the PASSE logo prior to March 1, 2019 that identifies which PASSE they are in.

### Who are the PASSEs? Who are the PASSEs' PBM?

Arkansas Total Care	855-266-2596	<b>Envolve Pharmacy Solutions</b>
Empower Healthcare Solutions	800-364-6331	<b>CVS Caremark</b>
APC or Summit Community Care	833-263-2870	<b>Express Scripts Inc.</b>

### How can you confirm client eligibility?

Providers can log into the DXC Provider Portal as of Feb. 15, 2019 to verify Medicaid eligibility and to find out which PASSE the recipient has been assigned to.

For more information on how to log into the DXC Provider Portal click the link below:

<https://portal.mmis.arkansas.gov/armedicaid/provider/Home/tabid/135/Default.aspx>

You may be contacted by a **CARE COORDINATOR** - a PASSE team member that helps coordinate your client's services. They can provide HIPPA release forms if requested.

### Resources available to you:

- DMS website link: <https://www.passe.arkansas.gov>
- Cynthia Neuhofer, Pharm. D. Pharmacy Program Administrator DMS (501) 683-4120
- Additional PASSE information: Tanya Giles Division of Medical Services 501-320-6189
- Pharmacy Webinar: information will be provided at a later date.