



DATE: December 5, 2023
TO: Commonwealth of Kentucky Medicaid Prescriber Network
FROM: Department for Medicaid Services

Subject: Effective 1/1/2024: Fee-For-Service Medicaid Pharmacy Benefit Manager Transition

Effective **January 1, 2024**, the Kentucky Fee-For-Service (FFS) Medicaid Pharmacy Benefit Manager (PBM) will transition from Magellan Rx to MedImpact. MedImpact is also the single PBM for Kentucky's Medicaid Managed Care Organizations (MCO). Information on the changes that may impact your practice is below, including prior authorization (PA) operations and preferred drug list (PDL) management. Please contact MedImpact or Department for Medicaid Services (DMS) for any questions. We appreciate your care for our Kentucky FFS Medicaid members.

PA Requests

Submitting a request: Prescribers may submit a PA request electronically (ePA), by fax, or by telephone. For the fastest response, we encourage prescribers to submit requests electronically.

ePA services: Automated prior authorization services allow prescribers to securely initiate PAs in the patient's electronic medical record (EMR/EHR) or through vendor connectivity portals. These solutions integrate seamlessly into the prescriber workflow, reducing the need for paper, fax, or telephonic solutions. Electronic prior authorization (ePA) simplifies PA initiation, increases first-time approval of prior authorizations, and improves patient access to needed medications.

How to submit an ePA request: Conveniently submit requests at the point of care through the patient's electronic health record. If the EMR/EHR does not support ePA, then one of the following vendors can be used: CenterX, CoverMyMeds, or Surescripts.

How to submit a request by fax: Complete and fax the Kentucky Medicaid Universal PA Form to the MedImpact Clinical PA Department at 858-357-2612. The form can be found on the MedImpact's Kentucky Provider Portal under the Resources section on the Forms page (<https://kyportal.medimpact.com/provider-forms/provider-forms>).

How to submit a request by telephone: Call MedImpact's Clinical PA Department at 877-403-6034. Some requests may require supporting clinical documentation to be submitted through ePA or fax.



Decision: A decision will be made within 24 hours upon receipt. If the decision made is unfavorable to your patient, then you may request a reconsideration, a peer-to-peer review, or submit a first-level appeal. Please see below for additional information.

Reconsideration: If your initial request was denied, then you may request a reconsideration. Reconsideration requests will be reviewed within 24 hours.

Peer-to-peer review: If your initial request was denied and you would like to speak with a clinician, then you may request a peer-to-peer review. Peer-to-peer reviews will be conducted within 24 hours.

First-level appeal: If your initial request was denied, then you may request a first-level appeal. The first-level appeal must be requested within 60 days of initial PA denial. For urgent requests, the appeal will be reviewed within 72 hours. For standard requests, the appeal will be reviewed within 30 calendar days.

Drug Information & Resources

PDL, PA criteria, and other drug information documents: Documents are posted on MedImpact's Kentucky Provider Portal under the Resources section on the Drug Information page (<https://kyportal.medimpact.com/provider-documents/drug-information>).

Prior Authorization forms: Prior Authorization request forms are posted on MedImpact's Kentucky Provider Portal under the Resources section (<https://kyportal.medimpact.com/provider-forms/provider-forms>).

Drug lookup tool: Drug lookup tool is available on the MedImpact's Kentucky Provider Portal under the Tools section (<https://kyportal.medimpact.com/medicaid-member-portal/formulary-search>).

MedImpact Contact Information:

Program Questions	KYMFFS@MedImpact.com
Provider Portal	https://kyportal.medimpact.com/
Prior Authorizations	Phone (877) 403-6034 Fax (858) 357-2612 Hours: 8:00AM – 7:00PM EST, 7 days a week.