

# Administrative Policy Statement KENTUCKY MARKETPLACE PLANS

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Policy Name		Policy Number	Date Effective			
Lost, Stolen, Damaged, Vacation and School Supply of Medication		PAD-0094-KY-MPP	01-22-2022			
Policy Type						
Medical	ADMINISTRATI\	/E Pharmacy	Reimbursement			

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PAD-0094-KY-MPP Effective Date: 01-22-2022

A. Subject

Early refills override requests due to reports of additional medication needed beyond initial dispensing.

### B. Background

This policy serves as guidance for CareSource operations team member processing of member and pharmacy requests for an override for an early refill resulting from:

- Lost medication
- Stolen medication
- Damage
- Vacation
- Separate supply for school or daycare

## C. Definitions

- Early Refill Additional medication that is requested following an earlierdispensed medication request but sooner than allowed by the member's coverage benefits.
- II. Override Authorization for early refill

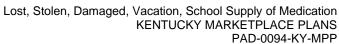
#### D. Policy

- I. CareSource will provide a one-time early refill override, per medication and strength per rolling year for members presenting with these situations: (a) Lost medication (b) Stolen medication (c) Damage (d) Vacation.
- II. The Pharmacy Clinical Team will review all additional early refill override requests if claims history shows that one early refill has already been authorized in the previous 12 months.
- III. Children needing additional medication supply for school or daycare will be permitted more than one early fill per medication for medications such as inhalers and epinephrine injectors if needed.
- IV. This policy encompasses all Medicaid covered medications and products including controlled substances, when accompanied by a prior authorization request form.

#### E. Conditions of Coverage

I. Early refill requests pertaining to damaged or lost medication shall not be covered for damage or loss that occurred to the medication while in transit from the dispensing pharmacy. For these situations, it becomes the dispensing pharmacy's responsibility to provide the replacement.





Effective Date: 01-22-2022



## G. Review/Revision History

	DATES	ACTION
Date Issued		
Date Revised		
Date Effective	01-22-2022	
Date Archived		

## H. References

The Administrative Policy Statement detailed above has received due consideration as defined in the Administrative Policy Statement Policy and is approved.

