

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Myers</i>	DATE <i>6-18-08</i>
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DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER <i>000663</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____ <input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>6-27-08</i> <input type="checkbox"/> Necessary Action DATE DUE _____		
2. DATE SIGNED BY DIRECTOR <i>cc: Ms. Forkner</i> <i>Claudia 6/22/08, letter</i> <i>attached.</i>		<input type="checkbox"/> FOIA	

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			



THOMAS Drug Store

Prescription & Medical Equipment Specialists

203 W. Marion Street • Kershaw, SC 29720
803-475-9665 • Fax 803-475-0669

FAX

TO: Emma Forkner

FROM: Chuck Spencer, RPh

Fax #: 803-255-8235

DATE: 6-18-08

No. of Pages: 12
(Including cover sheet)

RE: Rx Processing Problems

After 2 months of complete and total frustration, I thought it time to make sure that the top of administration knew that there was a tremendous problem with the Medicaid HMO Prescription Drug Plan.

FYI- Fred Williams does not know I am sending you this, as it was an after thought after sending him the attached FAX. He has been very helpful during this process.

Pharmacists frustration is high. We have to work MUCH HARDER and WASTE MUCH TIME trying to find out how to help people. My and other pharmacists expectation is first of all never to have to put up with this type mess. Secondly we are expecting a successful July, after two months of disaster.

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Prescription & Medical Equipment Specialists

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FAX

TO: Fred Williams

FROM: Chuck Spencer

Fax #: 803-255-8353

DATE: 6-18-08

No. of Pages: 11
(including cover sheet)

RE: Documentation of Problems

Fred, here are some examples of some of the problems that I am having. Hope this helps to show everyone some of the situations we as Pharmacists get FORCED INTO without our approval.

At this point I will also say that I do not think that RFP's were properly done up front and really question whether a Pharmacist was involved at all. It is very obvious that nobody involved properly planned ahead. It seems to be the normal governmental operations of, "let's just do it and then we'll fix it as we go".

FRUSTRATION LEVELS ARE VERY HIGH!

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THOMAS DRUG STORE

06/18/2008 15:41
vs/1 19620
Rel 18.1

(R X)
THOMAS DRUG STORE

Date: 06/18/08
(Wednesday)

Function... E L E C T R I C C L A I M S S T A T U S
ECs#...15D6

Who RxNumb .:Date.. Code Customer..... Auth# 00010162585901
M 06344354 06/18/08 TMRDB TERRY, HENRY DAVID Status
Rejected

CD Description..... CD Description.....
70 Product/Service Not Covered
Recipient Enrolled in Medicaid HMO plan

① no card

First Choice (Robert Watts)

06/18/2008 15:41
 W/L 15620
 Rel 18.1

8034750669

THOMAS DRUG STORE

(R X)

THOMAS DRUG STORE

Date: 06/10/08
 (Tuesday)

Function... E L E C T R O N I C C L A I M S S T A T U S
 BCS#...0D01

Who RxNumb

.Date.

Code

Customer

Auth# 00010140384901

M 02016598 06/10/08

STEMN

STEWART, NATHANIEL

Status
 Rejected

CD Description.....

CD Description.....

70 Product/Service No: Covered
 Recipient enrolled in Medicaid HMO

① not card

Thomas

06/18/2008 15:41 8034750669
W/L 18.1
Rel 18.1

(R X)
THOMAS DRUG STORE

Date: 06/10/08
(Tuesday)

Function... ECS#...0CFA E L E C T R O N I C C L A I M S S T A T U S

Who RxNumb

..Date..

Code

Customer

Auth# 00010140370301

M 06343651 06/10/08

STACD

STACKY, DASHIA

Status
Rejected

CD Description

70 Product/Service Not Covered

CD Description

Recipient enrolled in Medicaid HMO

① not card

Wmason

06/18/2008 15:41

8034750669

THOMAS DRUG STORE

PAGE 06/12

06/11/19620

13.1

(R X)

Date: 06/10/08
(Tuesday)

THOMAS DRUG STORE
SELECTRONIC CLAIMS STATUS
FCS4...0C2

Secondary

Who RxNumb

.Dat...

Code

Customer

Status
Rejected

SH 06332401 06/05/08

AMERR

AMERSON, RENEE E

CD Description.....
6C M/I Other Payer Id Qualifier
85 Claim Not Processed

CD Description.....
7C M/I Other Payer Id

FIELD EDIT ERROR
FIELD EDIT ERROR

① Mr Card

Select Health

06/18/2008 03:50PM

06/18/2008 15:41 8034750669
Rel 18.1

(R X)
THOMAS DRUG STORE

Function... ECS#...0AFA

Date: 06/09/08
(Monday)

Who RxNumb . . . Date . . . Code Customer . . . Auth# 30000281620528
U5 06338557 06/09/08 DANZMB DANZY, MILDRED Status
Rejected

CD Description CD Description
88 DUR Reject Error
USE AGE BEFORE ARB Drug Is Non-Compliant with Step Therapy.

- ① No card put in Machine
- ② PA is different - patient not but no transaction allowed

pm

pm

David Smith 2639

4614

803-898-2616

Frank Williams
803-898-2616
803-835-8353 (for)

06/18/2008 15:41

8034750669

THOMAS DRUG STORE

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QS/2 19620
Rel 18.1

(R X)
THOMAS DRUG STORE

Date: 06/09/08
(Monday)

Function... ECS#...0BAA E L E C T R O N I C C L A I M S S T A T U S

Who RxNumb . . . Date . . . Code Customer . . . Auth# 00010137088501
M 06343504 06/09/08 MORGA MORGAN, KATIE Status Rejected

CD Description CD Description
70 Product/Service Not Covered
Recipient enrolled in Medicaid HMO

9-12-98

9293165802

① Mr Carl

Noted Caroline Carl

06/18/2008 15:41

8034750669

THOMAS DRUG STORE

PAGE 09/12

OS/1 19620
Rel 18.1

(R A)
THOMAS DRUG STORE

Function... ECS#...0B79

R E C T R O N I C C L A I M S S T A T U S

Date: 06/09/08
(Monday)

Who RxNumb ..Date..
M 04052045 06/09/08

Code Customer.....
IMSTI SIMS, TONI

Auth# 00010136408601

Status
Rejected

CD Description.....
70 Product/Service Not Covered
Recipient enrolled in Medicaid HMO

CD Description.....

① Mr card

Not at Customer Care

06/18/2008 15:41

8034750669

THOMAS DRUG STORE

PAGE 10/12

us/l 19620
Rel 18.1

(R X)
THOMAS DRUG STORE

Function... E L E C T R O N I C C L A I M S S T A T U S
EQS#...0B38

Date: 06/09/08
(Monday)

Who RoomNumb .Date.. Bed Customer.....
SH 06341429 05/14/08 HUGHES HUGHES, RAHEM

Status
Rejected

CD Description..... CD Description.....
65 Patient Not Covered
ELIGIBILITY ON FILE:06-01-06 TO 08-31-58HUGHES RAHEM-M

① Mr Carl

Do meet??

② 3 minutes to find out what HMO
plan he was on

③ 4 minutes to get his account
working

06/18/2008 15:41

8034750669

THOMAS DRUG STORE

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P A T I E N T R E C O R D Pat Code: FRALS

Funct..		Last Name: FRALIX		First: SAVANNAH	MI, D Title:	PrvB:
		In Care...			PC>SH FULLN.N	Chgs: .00
		Street... 7443 SUNCREST DRIVE				Pays: .00
		City... KERSHAW		St. SC Zip: 29067-		CBal: .00
		Home... 803-288-0691		Work... 000-000-0000		PYDt: 00/00/00
		DriverLic.		SSN #...		LtRx: 6343358
		Email...>		Pat ID...>N		Alt Address...>N

Birth Dte. 04/13/2007		Sex.. F	Allergy..>Y	ADJUMENTIN		
Med Rod #.		Wght.	Med Conds>			
A-Acct #..>		Preg.N	Misc.....	Msg Codes>		
Doctor...>		Lang.E	HIC ID...			

Group..	Room#..	Level..	Locat.. 00	Adm Dte.. 00/00/00		
C-Acct.	\$LmIt.. 00	Frozen.	AutoAR.N	YTD Rxs... 00		
Ded \$. .00	Ded \$. .00	Disc..>00	Tax Cd>00	Interfces>		
DMgt.. Y	RefRem.	MES....	Delete.	HMG Pat.. N		
HIPAA..>N	Safecapy	Addtl>				

6.8.08 no card for Subject Health

06/18/2008 03:50PM

SH = Street Health
EC = Con Line Agent

6-2-08 ^{DO# 15799} Stephen K. Hansen ID# 1293302201
SH now state got some papers on HMO but no
insurance card yet

6-3-08 ^{DO# 401199} Donald Nelson, Jr ID# 6132887201
EC know going to HMO plan but no insurance
card yet, agent about 90 minutes trying
to fill it

663



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

June 27, 2008


Chuck Spencer, RPh
Thomas Drug Store
203 W. Marion Street
Kershaw, South Carolina 29720

Dear Mr. Spencer:

Thank you for your recent correspondence regarding the experiences you have had with several managed care plans when attempting to fill prescriptions. Agency staff has researched the examples you submitted. In some cases, the plan cards were provided to the members and the beneficiaries failed to bring them to your pharmacy. In other cases, due to difficulties with exchange of needed information by the agency, the plans did not have what they needed in order to send cards out in a timely fashion. We are taking necessary steps to ensure that the plans have this information so that this scenario will not continue.

The issues you have identified are frustrating and do take away time from your business. We are working hard to rectify these problems and have created a workgroup comprised of South Carolina Department of Health and Human Services (DHHS) staff (both managed care and pharmacy) and representatives from each of the managed care plans. They are specifically working to address all of the issues you and other pharmacists have highlighted to us. First and foremost, the system is being updated to allow you to identify the specific managed care plan in which each member is enrolled. We will also be issuing a bulletin that will provide specific information such as BIN, PCN and Group numbers, pharmacy help desk contact numbers, over-ride policies and processes and other helpful information for all plans. We also are developing an education initiative for members and physicians regarding prior approval and over-ride policies.

I am sure these and other initiatives will be established in the coming weeks. In the interim, we appreciate your willingness to serve the Medicaid beneficiaries and will do all we can to minimize the difficulties you encounter. Please contact Roy Hess, Division Director for Care Management, at (803) 898-4614 should you need additional information.

Sincerely,

Emma Forkner
Director

EF/mhc