

TEXAS MEDICAID PHARMACISTS' GUIDE TO DISPENSING 72-HOUR EMERGENCY PRESCRIPTIONS

WHEN PRIOR AUTHORIZATION IS NOT AVAILABLE

Federal and Texas law **require** that a 72-hour emergency supply of a prescribed drug be provided when a medication is needed without delay and prior authorization (PA) is not available. This rule applies to non-preferred drugs on the Preferred Drug List and any drug that is affected by a clinical or therapeutic PA edit and would need prescriber prior approval.

The 72-hour emergency supply should be dispensed any time a PA is not available and a prescription must be filled for any medication on the Texas Vendor Drug formulary or medical condition. If the prescribing provider cannot be reached or is unable to request a PA, the pharmacy should submit an emergency 72-hour prescription. The 72-hour emergency procedure should not be used for routine and continuous overrides.

A pharmacy can dispense a product that is packaged in a dosage form that is fixed and unbreakable, e.g., an albuterol inhaler, as a 72-hour emergency supply. Follow the same directions for the 72-hour emergency supply, including the submittal of a '3' in the "Days Supply" field, and enter the full quantity dispensed.

PHARMACIES SHOULD SUBMIT:

- '8' in "Prior Authorization Type Code" (Field 461-EU)
- '801' in "Prior Authorization Number Submitted" (Field 462-EV)
- '3' in "Days Supply" in the claim segment of the billing transaction (Field 405-D5)
- The quantity submitted in "Quantity Dispensed" (Field 442-E7) should not exceed the quantity necessary for a three-day supply according to the directions for administration given by the prescriber. If the medication is a dosage form that prevents a three-day supply from being dispensed, e.g., an inhaler, it is still permissible to indicate that the emergency prescription is a three-day supply, and enter the full quantity dispensed.



VENDOR DRUG PHARMACY RESOLUTION HELP DESK: 1.800.435.4165

FOR PHARMACY PROVIDERS ONLY - PLEASE DO NOT GIVE THIS NUMBER TO MEDICAID OR CHIP CLIENTS

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