



Pharmacy Claim Submission

Commercial Insurance

Pharmacies must follow the Coordination of Benefits process when submitting claims to Medicaid. The pharmacy must submit the claim to commercial or third-party insurance before submitting it to Medicaid for payment. Medicaid is always the payer of last resort.

For clients with commercial/third-party insurance and Medicaid, complete the following process:

Is Coordination of Benefits information on the submitted claim?

Yes

No

When rejected by other payer, check for an acceptable reject code

Reject claim and refer to commercial or third-party plan

Acceptable Code

Non-Acceptable Code

Pay in full up to Medicaid allowable amount

Reject and refer to commercial or third-party plan

When plan pays more than \$0:

When plan pays \$0:

Medicaid pays difference (up to Medicaid allowable amount)

Medicaid pays (up to Medicaid allowable amount)

Texas Vendor Drug Program
Pharmacy Benefits Access Help Desk
800-435-4165

FOR PHARMACY PROVIDER USE ONLY —
Do not give this number to Medicaid and CHIP clients.