



# Pharmacy Claim Submission

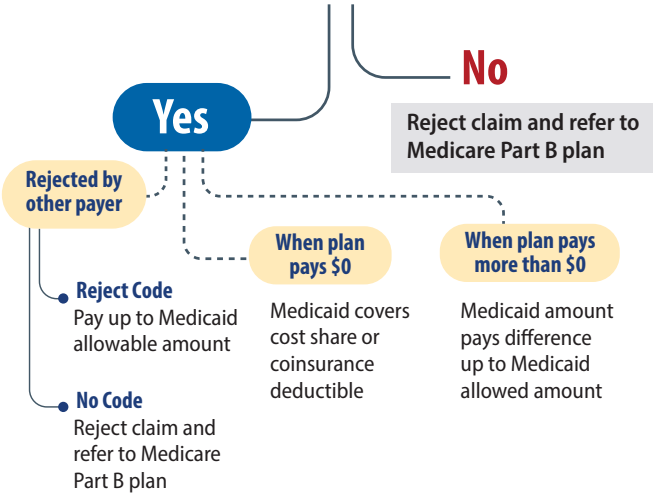
## Medicare Part B

Pharmacies must follow the Coordination of Benefits process when submitting claims to Medicaid. The pharmacy must submit the claim to Medicare before submitting it to Medicaid for payment consideration. This includes claims for Part B-covered drugs for people with qualified Medicaid beneficiary (QMB) benefits. Medicaid is always the payer of last resort.

For fee-for-service clients, Medicaid will only pay if Medicare Part B pays. Pharmacies should refer the claim to Medicare if Medicaid rejects it.

For clients enrolled in a STAR+PLUS dual-eligible plan with Medicare Part B, the pharmacy should complete the following process:

### Is Coordination of Benefits information on the submitted claim?



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.