



**DATE:** March 18, 2024

**TO:** Commonwealth of Kentucky Medicaid Pharmacy Network

**FROM:** MedImpact Healthcare Systems

**Subject: KFS01 Pre 1-1-2024 Claims – Reversals** BIN: 026309 / PCN: KYPROD1 / GROUP: KYF01

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**Status:** : The purpose of this communication is to update providers on the status of claims processing for Medicaid Fee-for-Service members. Effective January 1, 2024, MedImpact assumed the role of Pharmacy Benefit Manager (PBM) for Kentucky Medicaid Fee-for-Service members. Unfortunately, the transition did not address the processing of runout claims with dates of service prior to 1/1/2024. MedImpact has since been working with the Kentucky Department for Medicaid Services (DMS) and the prior PBM, Magellan, to enable runout claim processing, and are pleased to provide the following updates.

#### **New Claims with Dates of Service Prior to 1/1/2024**

Please refer to our prior communication dated 2/7/2024 outlining the procedure for new claim submission. This can be found at [https://kyportal.medimpact.com/sites/default/files/2024-02/kyffs\\_prior\\_1.1.24\\_claims\\_processing\\_final.pdf](https://kyportal.medimpact.com/sites/default/files/2024-02/kyffs_prior_1.1.24_claims_processing_final.pdf)

#### **Rebills and Reversals of Claims Processed by Magellan Prior to 1/1/2024**

MedImpact, along with DMS and Magellan, have established a process for rebills and reversals of claims processed by Magellan prior to 1/1/2024. Effective 3/21/2024, all switch vendors will enable routing of transactions to MedImpact using the Magellan claim routing information (BIN/PCN/Group) that was in effect until 12/31/2023:

BIN: 011529

PCN: P022011529

Group: KYMEDICAID

This routing information should only be used for reversals (B2) of claim transactions originally processed by Magellan. MedImpact will not accept any new claim transactions (B1) where the Magellan routing information is submitted, regardless of the Date of Service. If a rebill is required, use the Magellan routing information for the reversal (B2), and then the MedImpact routing information (see below) for the replacement claim (B1).

This window for reversals will be available for 60 days, or through 5/20/2024, at which time the switches have been instructed to terminate routing of transactions submitted with the Magellan routing information.



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**KY FFS Contact Information**

Program Questions	KYMFFS@MedImpact.com
Pharmacy Help Desk	(877) 403-6034 [24 hours per day/ 7 days per week]
Prior Authorizations	Phone (877) 403-6034 [8:00AM - 7:00PM EST/ 7 days per week] Fax (858) 357-2612
Pharmacy Portal	<a href="https://kyportal.medimpact.com/">https://kyportal.medimpact.com/</a>
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