



DATE: December 2, 2024

TO: Commonwealth of Kentucky Medicaid Pharmacy Network

FROM: MedImpact Healthcare Systems

Subject: Clarification on Automatic Refill Programs

Status: MedImpact would like to provide further clarification on Automatic Refill Programs and its definition.

The Commonwealth of Kentucky Department for Medicaid Services (DMS) defines an Automatic Refill Program as a service provided by pharmacies where they automatically refill a patient's prescriptions without the patient having to request the refill each time. This is typically done for chronic medications that are taken regularly and can help ensure that patients do not run out of essential medications.

The policy for Automatic Refill Programs is available in the updated Provider Billing Manuals on the Kentucky Medicaid Provider Portal: https://kyportal.medimpact.com/provider-information/provider-information/

KY MCO Contact Information

Program Questions	KYMCOPBM@MedImpact.com
Pharmacy Help Desk	(800) 210-7628 [24 hours per day/ 7 days per week]
Prior Authorizations	Phone (844) 336-2676 [8:00AM - 7:00PM EST/ 7 days per week];Fax (858) 357-2612
Pharmacy Portal	https://kyportal.medimpact.com/
BIN: 023880 / PCN: KYPROD1 / GROUP: KYM01	

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	https://kyportal.medimpact.com/
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