



PRE- AND POST- EDITING SERVICES

Minimize Claim Submission Errors and Maximize Reimbursement

Managing pharmacy prescription claims is a complex process. With numerous variables to monitor and dispensing system limitations, failure to effectively manage prescription claims may result in suboptimal decisions, processing delays and inadequate reimbursement. Yet manually managing the clinical and financial variables in claims adjudication requires tremendous resources.

OUR SOLUTION

Pre and Post Editing (PPE) Services from CoverMyMeds automates the critical elements of pharmacy claim adjudication. By providing actionable messages specific to each claim, PPE enables staff to make faster, more informed decisions that can increase revenue and productivity.





POWERFUL EDITS TO REFINE CLAIMS MANAGEMENT

Edits from PPE empower your staff to make faster, more informed decisions. PPE automatically assesses each claim against dozens of parameters and delivers meaningful and actionable messages. This enables smoother processing and helps ensure optimal reimbursement.

COMPREHENSIVE REPORTING FOR ADDITIONAL BENEFITS

PPE reporting offers a web-based suite of reports regarding your use of pre and post edits. By enhancing the impact and value of PPE, you can make strategic decisions to refine your results even further.

Benefits of PPE

-  Achieves maximum reimbursement
-  Reduces claim submission errors
-  Improves staff productivity
-  Enables better strategic decisions for improved results

Features of PPE

- » Provides automatic validation on each prescription claim
- » Delivers meaningful and actionable messages to staff
- » Enables real-time claims validation
- » Provides continual updates and new edits based on changing payer and industry requirements
- » Web-based reporting for comprehensive analysis

To learn more, visit covermymeds.com or email pharmacy.connections@relayhealth.com

About CoverMyMeds

CoverMyMeds, a part of McKesson Corporation, is a fast-growing healthcare technology company that has been recognized as a "Best Place to Work" by Glassdoor and a "Best Company to Work For" by FORTUNE. Through innovation and collaboration, CoverMyMeds' solutions help people get the medicine they need to live healthier lives by seamlessly connecting the healthcare network to improve medication access; thereby increasing speed to therapy and reducing prescription abandonment. CoverMyMeds' network includes 75 percent of electronic health record systems (EHRs), 50,000+ pharmacies, 750,000 providers and most health plans and PBMs. **Visit covermymeds.com for more information.**

Additional Standard Features

AWP COMPARISON

Compares the submitted ingredient cost (typically AWP) to the most current AWP available. In cases where the submitted ingredient cost (typically AWP) is lower, PPE automatically substitutes the current AWP in the claim so that the new (higher) AWP is submitted to the payer for reimbursement.

CASH PRICING

Supports submission of cash transactions through the RelayHealth Intelligent Network.

DAW APPROPRIATENESS FOR MULTISOURCE BRANDS

Validates the appropriateness of a submitted DAW code for a multisource brand. If the submitted DAW is NOT equal to 1, 2, or 5, PPE will return a rejected message recommending that pharmacy substitutes a generic or change to the appropriate DAW code.

DEA VALIDATION

Validates the presence and format of a submitted physician DEA number (when the prescriber qualifier is equal to 12) on claims for controlled substances. Also compares the DEA number against the federal National Technical Information Service (NTIS) file, which is updated daily.

ENHANCED MIN/MAX

Compares daily dose using the quantity dispensed and day supply against Maximum Allowable Daily Dose (MADD) to help prevent third-party audits, rejects, or inappropriate payments caused by an atypical dispensed daily dose. Also verifies that a submitted quantity is an appropriate multiple of the package size for a unit-of-use package.

NDC VALIDATION

Identifies when a submitted NDC has been discontinued or obsolete. If the NDC has been replaced, we will provide the New NDC that should be used.

NPI PRESCRIBER ID VALIDATION

Notifies that an invalid, inaccurate, inappropriate, canceled, or facility NPI is used instead of a prescriber's Individual National Provider Identifier (NPI) number (When the prescriber qualifier is equal to 01).

PAID AT U&C CAPTURE REPORT

Identifies if a transaction's submitted U&C is equal to a third party's total reimbursement amount, which typically indicates the cash price is lower than the contracted rate.

USUAL AND CUSTOMARY (U&C) MARKET COMPARE CAPTURE REPORT

Compares the submitted U&C price to the average market U&C based upon the NDC number, quantity dispensed and pharmacy geographic location.

NY MEDICAID – CAPTURE TO PAID

Reformats a captured response from NY Medicaid to a paid response.