IHCP *bulletin*

IHCP informs pharmacy providers of the billing specifications for prescription origin codes

The Indiana Health Coverage Programs (IHCP) is reminding pharmacy providers to accurately submit the prescription origin code (POC) to reflect how the prescription was originally presented to the pharmacy. The POC field (419-DJ) is required to be accurately populated per the National Council for Prescription Drug Programs (NCPDP) guidelines.

While 0 (not known) is considered a valid submission code, it should be used only in rare circumstances where the origin code is truly unknown. In addition, with the new state regulation requiring submission of all Schedule II–V controlled substances in an electronic manner starting January 1, 2021 (*Indiana Code IC 25-1-9.3-7*), populating the POC field correctly would ensure compliance with this regulation. Any claim submitted with an incorrect POC is subject to audit and recovery.

The following are the values used for the POC field:

- 0 = Not known

- 1 = Written

- 2 = Telephone

- 3= Electronic

- 4 = Facsimile (fax)

- 5 = Pharmacy

The *Indiana Medicaid Fee-for-Service Payer Sheet* (*NCPDP Version D.0 Transaction Payer Sheet) can* be found on the OptumRx Indiana Medicaid website, accessible via the *Pharmacy Services* page at in.gov/medicaid/providers. Information regarding the POC can be located on pages 1-4 of the Payer Sheet.

For more information, direct fee-for-service (FFS) questions to the OptumRx Pharmacy Audit Department by email at RxAudit.INM@Optum.com. Questions regarding pharmacy benefits for members in the Healthy Indiana Plan (HIP), Hoosier Healthwise and Hoosier Care Connect should be referred to the managed care entity (MCE) with which the member is enrolled.

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