



September 26, 2013

****ATTENTION REQUIRED****

Important Information for 10/01/2013

New Hampshire AIDS Drug Assistance Program Pharmacy Program Transition to Magellan

Dear Provider:

On **October 1, 2013, 8:00 a.m.** Eastern Daylight Time (EDT), Magellan Health Services, Inc. ("Magellan") will assume administrative operation of the Pharmacy Benefit Management (PBM) program for the New Hampshire AIDS Drug Assistance Program. All potential claims from 12:00 a.m. to 7:59 a.m. should be retained until 8:00 a.m. for submission. ALL future claims transactions should be sent to Magellan after 8:00 a.m., and no longer sent as a paper claim submission.

High-level Transition Timeline on 10/01/2013 (all times EDT)

- 6:45 a.m. – 7:59 a.m.: Test claims processing with select pharmacies (typically 24-hour locations).
- 8:00 a.m. (Go-Live): The Pharmacy Help Desk number is 1-800-424-7901.

Magellan will have dedicated personnel through the transition, monitoring claims activity, identifying pharmacies that appear to be having reject issues, and contacting them directly to assist with resolution and training. If you have issues in the meantime, please contact the Pharmacy Help Desk. This enhanced monitoring will continue until issues are within typical tolerance levels.

Important Information

For additional information and to download the payer sheet, visit the New Hampshire AIDS Drug Assistance Program website at <http://nhadap.magellanmedicaid.com>.

Claim Submission

In preparation for the transition of the New Hampshire AIDS Drug Assistance Program to Magellan, the following claim submission fields and requirements are being highlighted to assist in your claim filing success. All claims must be submitted under the NCPDP Telecommunication Standard Version/Release D.0.

Transaction Header Segment		Claim Billing/Claim Re-bill		
Field #	NCPDP Field Name	Value	Payer Usage	Payer Situation
101-A1	BIN NUMBER	009513	M	
104-A4	PROCESSOR CONTROL NUMBER	P079009513	M	
302-C2	CARDHOLDER ID	<i>Soundex number/code</i>	M	Soundex number/code <patient specific>
301-C1	GROUP ID	ADAP	R	

Additional Reminders

- Effective October 1, 2013, all claims must be submitted to Magellan Health Services, Inc.**
- BIN, PCN, Cardholder ID, and Group numbers are provided above.
- Pharmacies must submit claims to Magellan Health Service, Inc. using the **member's Soundex ID**

We truly look forward to this transition and will ensure a smooth transition with the expected appropriate preparations. Please contact us with any questions as they arise.

Contact Information

If you have additional questions, please contact the Vendor Support Line at 1-804-548-0130.

Sincerely,

Anita Martin

Director, PBM Implementations

Magellan Medicaid Administration
Magellan Health Services

11013 West Broad Street
Suite 500
Glen Allen, VA 23060

Phone: 1-804-548-0479