



North Carolina Department of Health and Human Services
Division of Medical Assistance

2501 Mail Service Center • Raleigh, N. C. 27699-2501 • Tel 919-855-4100 • Fax 919-733-6608
Beverly Eaves Perdue, Governor
Lanier M. Cansler, Secretary
Craig L. Gray, MD, MBA, JD, Director

May 12, 2010

**Re: Recipient Notice: North
Carolina Medicaid Preferred Drug
List/Medicaid Fraud and Abuse**

Dear County Director of Social Services:

The purpose of this letter is to notify the counties of a mass mailing of a recipient notice regarding upcoming changes to the Preferred Drug List (PDL) and the Governor's initiative to crack down on Medicaid Fraud and Abuse. This notice is being mailed beginning May 17, 2010 to most current Medicaid recipients. One notice is mailed to each case head/payee, regardless of how many cases are in EIS. The language of the notice (English or Spanish) is determined by the language preference in EIS for the case head. An English version of the notice is attached. A Spanish version of the notice is being translated and will be posted upon completion.

If you have any questions regarding this information, please contact your Medicaid Program Representative.

Sincerely,

Craig L Gray, MD, MBA, JD, Director

CLG/gl
Attachments



Location: 1985 Umstead Drive • Dorothea Dix Hospital Campus • Raleigh, N.C. 27603
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NOTICE TO MEDICAID RECIPIENTS

North Carolina Medicaid Preferred Drug List Changes

This notice is to inform you of upcoming changes to the Preferred Drug List (PDL). The PDL will be changing in the middle to end of June 2010. Some of the drugs you get with a prescription today will require approval before you are able to get them once the PDL is changed.

The PDL contains many “preferred” drugs that your healthcare prescriber (doctor) can give you a prescription for and you can easily get from the pharmacy. However some of the “preferred” drugs may require prior approval. This means that your doctor will have to complete a form explaining why you need this specific drug. The “preferred” drugs that require prior approval will be noted on the PDL.

Drugs that are listed as “non-preferred” on the PDL will require prior approval. This means you may have to try other similar drugs before you can get the “non-preferred” drug unless there are medical reasons why you cannot take the other similar drugs. Your doctor will have to complete a form explaining this.

In addition to the “preferred” drugs, you will also be able to get some drugs without prior approval. For example:

- Certain drugs to control your seizures—this comment is on the PDL with the names of the drugs this applies to
- Accuneb or its generic version if under 2 years of age
- Insulin pens or cartridges if under 21 years of age

The prior approval process will not change. Your healthcare prescriber (doctor) will have to complete a form to get the drugs that require prior approval.

If you have access to a computer, you can refer to the Division of Medical Assistance outpatient pharmacy program’s website for a list of the drugs on the PDL and for updates (<http://www.dhhs.state.nc.us/dma/pharmacy>).

Regardless of the PDL, children under age 21 are entitled to prescription drugs that are needed to “correct or ameliorate defects and physical and mental illnesses and conditions” under the Early Periodic Screening, Diagnosis and Treatment (EPSDT) Program. For more information about EPSDT, please refer to: <http://www.dhhs.state.nc.us/dma/epsdt/>.

Drugs That NC Medicaid Can No Longer Pay For

On July 1, 2010, some of the drugs used to treat Exocrine Pancreatic Insufficiency can no longer be paid by N.C. Medicaid because they have not been approved by the Food and Drug Administration (FDA). Exocrine Pancreatic Insufficiency is when your body does not make enough enzymes to break down food so it can be absorbed by the body. The drugs that will be affected by this change are:

Creon 5, 10 or 20 capsules	Ultrase
Kutrase capsules	Viokase
Some of the Pancrelipase and Pangestyme tablets and capsules	Pancrecarb
Plaretase	

If you are taking a drug for Exocrine Pancreatic Insufficiency, call your doctor to make sure you are taking an appropriate drug that can be paid for by Medicaid.

Who to Contact With Questions About This Information: You may call the **CARE-LINE** at 1-800-662-7030 (English/Spanish) or 1-877-452-2514 (This is a TTY number and only those with TTY equipment can talk to a person when this number is dialed). The CARE-LINE is open from 7:00 a.m. until 11:00 p.m., 7 days a week.

Medicaid fraud and abuse cost YOU!

Gov. Bev Perdue, as part of her campaign to set government straight in North Carolina, has ordered the state Department of Health and Human Services to crack down on fraud and abuse of Medicaid. The state will be far more aggressive in finding and prosecuting recipients and health care providers who cheat Medicaid.

Besides being illegal, Medicaid fraud and abuse are simply wrong. Every Medicaid dollar wasted or stolen is a dollar that could have provided health care to someone who needs it. Medicaid funds are becoming scarce. It could be you or your family that suffers because of fraud and abuse.

Medicaid fraud and abuse cost YOU ... and you can do something about it. If you know of someone committing fraud or abuse of Medicaid, report it—the box below tells you how. If you are not sure what fraud and abuse of Medicaid are, here are examples.

FRAUD and ABUSE by Medicaid recipients:

- Giving false information or altered documents to Department of Social Services.
- Not reporting all types of income.
- Receiving Medicaid in a state in which you do not reside.
- Not reporting resources such as bank accounts, property, life insurance, etc.
- Not reporting all changes in your situation.
- Allowing a health care provider to bill Medicaid for a service you did not receive.
- Not reporting medical, dental or vision insurance.
- Loaning your Medicaid card to others.
- Obtaining unnecessary medical treatment, prescription drugs or medical equipment.
- Getting equipment, supplies or prescriptions for the purpose of selling them.

FRAUD and ABUSE by Medicaid health care providers:

- Having inaccurate credentials or qualifications.
- Altering claim forms and recipient records.
- Sending in a bill for office visits that did not occur or a service not performed.
- Ordering services not needed like x-rays, blood work, ultrasounds, etc.
- Adding other family members to bills when they did not receive a service.
- Billing for the same service more than once.

How to Report Suspected Medicaid Fraud or Abuse:

- ❖ Call your County Department of Social Services (DSS) office; or
- ❖ Call the CARE-LINE Information and Referral Service at 1-800-662-7030 (English or Spanish) and ask for the DMA Program Integrity Section; or
- ❖ Call the Program Integrity Section directly at 1-877-DMA-TIP1 (1-877-362-8471); or
- ❖ Complete and submit a Medicaid fraud and abuse confidential online complaint form via this link <http://www.ncdhhs.gov/dma/fraud/reportfraudform.htm>

Information that will help us:

- ❖ The name of the Medicaid recipient.
- ❖ The recipient's Medicaid card number or Social Security Number.
- ❖ The name of the doctor, hospital, or other health care provider.
- ❖ The date of medical service.
- ❖ The amount of money that Medicaid approved and/or paid.
- ❖ A description of the acts that you suspect involves fraud or abuse.