## interChange Provider Important Message

## Attention: All Prescribing Providers and Pharmacies

The Department of Social Services (DSS) has temporarily suspended the diagnosis code requirement for all opioid medication prescriptions. This requirement became effective on October 16, 2019 as communicated via Provider Bulletin 2019-67 and caused pharmacy claims submitted for opioid medications without a valid and documented ICD-10 diagnosis code to deny with National Council for Prescription Drug Program (NCPDP) Reject code 39 – Missing/Invalid Diagnosis Code.

The edit will be reimposed by DSS after sixty (60) days. During the suspension period the edit will appear on claims in a post and pay status which means that the edit will be posted to the claim, but the claim will not be denied for that reason. On December 16, 2019, all opioid prescriptions submitted without an ICD-10 diagnosis code supporting medical necessity from the prescriber will begin to **deny** again. This grace period is intended to allow prescribers to update their Electronic Medical Records (EMR) systems to comply with the new requirement.

