

Connecticut Department of Social Services Medical Assistance Program

www.ctdssmap.com

Provider Bulletin 2020-76 October 2020

TO: Pharmacy Providers

RE: New Billing Instructions for Sevenfact

Effective immediately, pharmacy providers who submit claims for Sevenfact (coagulation factor VIIa recombinant-jncw) using National Drug Code (NDC) 71127-1000-01, 71127-1100-01, 71127-5000-01 or 71127-5100-01 must submit claims with the units billed in vials. For example, a prescription for Sevenfact 5mg, where a 5 mg vial was dispensed, should be billed with a dispensed quantity of 1.

The claims will continue to be priced by taking the actual acquisition cost from the submitted manufacturer's invoice plus an 8% markup.

Please note that the instructions provided apply only to Sevenfact and no other antihemophilic factors which, with the exception of Hemlibra, continue to be billed so that each unit is billed as an "Each" in Field 12 (Quantity Dispensed) of the National Council for Prescription Drug Programs (NCPDP) Universal Pharmacy paper claim form.

As a reminder, during the Temporary Effective Period, electronic claim submission of coagulation factor drugs will be required until the Department of Social Services (DSS) has notified providers in writing that the state has deemed COVID-19 to no longer be a public health emergency. Additional information regarding temporary changes to claim submission for coagulation factor drugs can be found in Provider Bulletin 2020-30.

