



TO: Pharmacy Providers, Physicians, Nurse Practitioners, Physician Assistants, Clinics, Long Term Care Providers and Hospitals

RE: An Act Concerning Diabetes and High Deductible Health Plans

Public Act 20-4, An Act Concerning Diabetes and High Deductible Health Plans, allows pharmacists to prescribe insulin, glucagon, and diabetic devices under certain conditions and requires these prescriptions to be submitted to the Connecticut Prescriptions Monitoring and Reporting System (CPMRS).

Effective for dates of service on or after April 1, 2021, pharmacists may prescribe and dispense to a HUSKY (A, B, C, or D) patient a one-time **maximum of a 30-day supply of 1) An insulin drug 2) A glucagon drug 3) Any diabetes device necessary to administer such supply or such insulin drug or glucagon drug, or diabetic ketoacidosis device if the following conditions exist:**

- A. The patient informs the pharmacist that the patient has less than a 7-day supply of insulin drug, glucagon drug, diabetes device or diabetic ketoacidosis device
- B. The pharmacist determines that the patient will likely suffer significant physical harm within seven (7) days if the patient does not obtain an additional supply

If the above conditions are met:

- A. The pharmacist shall review the electronic prescription drug monitoring program and determine that no other pharmacist prescribed and dispensed a supply of an insulin drug, glucagon drug, diabetes device or diabetic ketoacidosis device within the past one (1) year.

- B. The pharmacist shall contact the pharmacy that filled the most recent prescription for such insulin drug, glucagon drug, diabetes device or diabetic ketoacidosis device, if such information is available.
- C. If provided or available, the pharmacist will review the most recent prescription label for the insulin drug or glucagon drug, or diabetic ketoacidosis device.
- D. Not later than seventy-two (72) hours after the pharmacist dispenses an insulin drug, glucagon drug, diabetes device, or diabetic ketoacidosis device, the pharmacist or their representative must provide notice to the practitioner who most recently prescribed such drugs/products. If a claim is selected for audit, please supply a copy of the documentation of the communication with the Prescriber and the other pharmacy, if needed. This documentation should be consistent with audit standards including being concurrent with the claim, dated, include the pharmacist's initials, who the pharmacist spoke with and a brief note of what was discussed. Electronic documentation should include the same content and include a computer generated, unalterable date and time stamp with an audit trail.
- E. The pharmacist may submit their National Provider Identifier (NPI) as the prescribing provider's NPI on claims submitted to the Connecticut Medical Assistance Program (CMAP). If the pharmacist has not registered with the National Plan and Provider Enumeration System (NPPES) for an

individual NPI, the dispensing pharmacy may submit the NPI of the pharmacy on the submitted claim. In that instance, **the name of the pharmacist must be clearly documented on the insulin drug, glucagon drug, diabetes device or diabetic ketoacidosis device prescription.**

If a pharmacy claim for an insulin drug, glucagon drug, diabetes device or diabetic ketoacidosis device prescribed by the pharmacy is submitted for a day supply greater than thirty (30), the claim will deny with Explanation of Benefit (EOB) code 0341 - DAY SUPPLY EXCEEDED. The pharmacy must reduce the dispensed quantity to equal a 30-day supply.

Pharmacy claims for a one-time diabetic 30-day supply prescribed by a pharmacy will be subject to a three hundred and sixty-five (365) day look back. If there is a paid pharmacy claim for a one-time 30-day supply of an insulin drug, glucagon drug, diabetes device or diabetic ketoacidosis device prescribed by a pharmacy within three hundred and sixty-four (364) days of the dispense date, the claim will deny with EOB code 3320 - PHARMACY ONE TIME 30 DAY DIABETES SUPPLY HAS BEEN UTILIZED.