

Title 23: Division of Medicaid

Part 214: Pharmacy Services

Chapter 1: General Pharmacy

Rule 1.7: Refills/Renewals of Prescription Drugs

- A. A written, faxed, e-prescribed, or telephoned prescription may be refilled, in compliance with the prescriber's order, up to a limit of eleven (11) times per year, if compliant with state and/or federal regulations and guidelines. Additionally, the following are applicable:
1. The absence of an indication to refill by the prescribing provider renders the prescription non-refillable.
 2. Refills are reimbursable only if specifically authorized by the prescribing provider.
 3. The Division of Medicaid does not reimburse prescription refills:
 - a) Exceeding the specific number authorized by the prescribing provider.
 - b) Dispensed after one (1) year from the date of the original prescription.
 - c) With greater frequency than the approximate interval of time that the dosage regimen of the prescription would indicate, unless extenuating circumstances are documented which would justify the shorter interval of time before the refilling of the prescription.
 - d) With quantities in excess of the prescribing provider's authorization.
 - e) Without an explicit request from a beneficiary or the beneficiary's responsible party, such as a caregiver, for each filling event. The possession, by a provider, of a prescription with remaining refills authorized does not in itself constitute a request to refill the prescription.
 - f) Until seventy-five percent (75%) of the day's supply of the non-controlled substance has elapsed as indicated on the prescription.
 - g) For any controlled substance (Schedule III, IV, and V) until eighty-five percent (85%) of the day's supply of the drug has elapsed as indicated on the prescription. Any attempt to refill a prescription through the Point-of-Sale system before the twenty-sixth (26th) day will be automatically denied.
 - h) For Schedule II controlled substances.
- B. Beneficiaries or providers cannot waive the explicit refill request and enroll beneficiaries in an electronic automatic refill in pharmacies.

C. The Division of Medicaid allows pharmacy providers to make prescription refill reminders including, but not limited to, person-to-person phone calls, e-mail messages, and text messages when the pharmacy provider:

1. Obtains written authorization from the beneficiary or the beneficiary's responsible party to receive prescription refill reminders,
2. Informs the beneficiary or the beneficiary's responsible party of their freedom of choice of pharmacy providers with each prescription refill reminder,
3. Offers the beneficiary or the beneficiary's responsible party the opportunity to choose whether or not to proceed with each prescription refill, and
4. Documents the following:
 - a) Date and time of each prescription refill reminder,
 - b) Pharmacy provider staff that initiated the prescription refill reminder,
 - c) Name of the beneficiary or the beneficiary's responsible party that authorized the prescription refill, and
 - d) The beneficiary or the beneficiary's responsible party was given freedom of choice of pharmacy providers and the opportunity to choose whether or not to proceed with the prescription refill(s).

D. The Division of Medicaid does not:

1. Reimburse pharmacy providers for prescription refill reminders, or
2. Allow automated prescription refill reminders including, but not limited to, robocalls or pre-recorded messages.

E. The Division of Medicaid may permit an early refill of an original claim as long as the monthly service limits have not been exhausted under one (1) of the following circumstances:

1. The beneficiary's life is at risk,
2. When an acute clinical condition is occurring, which would require extra medication to stop or mitigate further morbidity, or
3. The prescribing provider either increases the dosing frequency or the amount per dose.

- a) The prescribing provider must document the change in dosage or frequency by writing or calling in a new prescription.
 - b) The prescriber(s) who wrote the original prescription or the pharmacist filling the new order may request for an early refill authorization.
4. If a beneficiary requires an early refill, the prescribing provider must request an exception override of this requirement by seeking approval from Division of Medicaid's Pharmacy Prior Authorization (PA) Unit.
- F. The Division of Medicaid does not reimburse for replacement of prescription medications unless the beneficiary can show good cause, which must include documentation such as a police report or insurance claim, that the prescription medications were lost, stolen or otherwise destroyed beyond the beneficiary's control. A replacement may be approved only if the monthly service limit, if applicable, has not been exhausted.

Source: Miss. Code Ann. § 43-13-121.

History: Added Rule 1.7.C.-D. eff. 08/01/2016; Revised eff. 11/01/2014.