



DID YOU KNOW?

Beginning February 1, 2017, all Part D prescribers must either be enrolled in Medicare in an approved status or have a valid opt-out affidavit on file. This requirement ensures that only valid, approved prescribers are able to prescribe Part D covered drugs.

Your customers cannot obtain Part D coverage for medication prescribed by a prescriber who has not enrolled in or validly opted-out of Medicare. However, to ensure patients have access to necessary drugs, Part D plans will cover up to one 3-month provisional supply of a medication. Part D plans will not cover additional prescriptions or refills of the same drug after the 90 day time period has expired, so you may see more rejected claims at the point of sale than in the past.

For additional information about the new prescriber enrollment requirement, visit:

go.cms.gov/PrescriberEnrollment



DO YOUR PART

Tell your customers the facts about the prescriber enrollment requirement.

- Prescriber enrollment protects beneficiaries from potential patient harm, as well as fraud, waste and abuse, by screening out illegitimate or unqualified prescribers.
- If a prescriber has not met enrollment requirements, Part D plans can only cover up to one 3-month provisional supply of a drug, and future prescriptions or refills of the same drug from that prescriber will be rejected at the point of sale.*
- Customers who receive a provisional supply will get a written notice from their Part D plan informing them that their provider is not an approved Part D prescriber.
- Part D plans can answer additional questions about coverage and claims.

* Pharmacists who are permitted to prescribe medications under state law or other applicable law do **not** need to enroll in or opt-out of Medicare to prescribe Part D drugs.

If you have questions about provider enrollment, contact CMS:
providerenrollment@cms.hhs.gov

Or contact customer service: