

**DEPARTMENT OF SOCIAL SERVICES**

DIVISION OF MEDICAL SERVICES

700 GOVERNORS DRIVE

PIERRE, SD 57501-2291

**PHONE:** 605-773-3495**FAX:** 605-773-5246**WEB:** [dss.sd.gov](http://dss.sd.gov)**Strong Families - South Dakota's Foundation and Our Future**

November 3, 2017

**ATTENTION: South Dakota Medicaid Pharmacy Providers**  
**FROM: South Dakota Medicaid**  
**RE: Point-of-Sale Transition**

## EFFECTIVE NOVEMBER 13, 2017 OPTUMRX WILL PROVIDE POINT-OF-SALE (POS) PHARMACY SERVICES FOR THE SOUTH DAKOTA MEDICAID PROGRAM.

Effective November 13, 2017, all South Dakota Medicaid pharmacy claims will be processed online by an OptumRx POS utilizing existing South Dakota Medicaid coverage and benefit rules. The state will continue to pay pharmacies, distribute remittance advices, and manage the pharmacy benefit.

All pharmacy related calls will be handled by OptumRx. Member and eligibility questions will continue to be answered by South Dakota Medicaid. The contact information for OptumRx is listed below:

- Help Desk: **(855) 401-4262** Optum Rx
- FFS Pharmacy Prior Authorization support: **(855) 401-4262** Optum Rx
- FFS Pharmacy Prior Auth. Fax Number: **(800) 527-0531** Optum Rx

This POS change does not affect how claims are submitted and the BIN remains the same. Pharmacy claims will continue to be processed under the rules outlined in the South Dakota Medicaid Pharmacy Billing Manual.

Payer Name: <b>South Dakota Medicaid</b>	Date: November 13, 2017
BIN: <b>6Ø1574</b>	PCN:
Processor: OptumRx	
Effective as of: <b>November 13, 2017</b>	NCPDP Telecommunication Standard Version/Release #: D.Ø
NCPDP Data Dictionary Version Date: June 2Ø1Ø	NCPDP External Code List Version Date: October 2Ø15

Additional processing and submission information can be found on the pharmacy payer sheet at: [https://prdgov.rxportal.mycatamaranrx.com/rxclaim/SDM/SDM\\_Payer\\_Sheet\\_MinSz\\_20170510.pdf](https://prdgov.rxportal.mycatamaranrx.com/rxclaim/SDM/SDM_Payer_Sheet_MinSz_20170510.pdf)

Additional information regarding fee-for-service pharmacy prior authorizations, prior authorization forms, and maximum allowable cost appeals can be found at the following website.

<https://prdgov.rxportal.mycatamaranrx.com/rxclaim/SDM/welcome.html>

The Department of Social Services does not exclude, deny benefits to, or otherwise discriminate against any person on the basis of actual or perceived race, color, religion, national origin, sex, age, gender identity, sexual orientation or disability in admission or access to, or treatment or employment in its programs, activities, or services. For more information about this policy or to file a Discrimination Complaint you may contact: Discrimination Coordinator, Director of DSS Division of Legal Services, 700 Governor's Drive, Pierre SD 57501, 605-773-3305.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-305-9673 (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-305-9673 (TTY: 711).