



Office of the
Medicaid Inspector
General

Post Pharmacy Benefit Transition

April 2023

Recipient Restriction Regulations

Regulations (NYCRR Title 18 § 360-6.4) & Appendix Q- MMC Model Contract

- ❑ Medicaid members who have been assigned to a designated healthcare provider (i.e., physician or clinic, pharmacy, hospital) are **REQUIRED** to receive care only from the designated healthcare provider.
- ❑ A primary physician or primary clinic is responsible for providing all medical care to the restricted recipient, **either directly or through referral** of such recipient to another medical provider for appropriate services.

Regulations (NYCRR Title 18 § 360-6.4) & Appendix Q- MMC Model Contract

The primary care provider, whether a physician or clinic, is responsible for the provision of most health care services for the enrollee. A referral will be needed from the primary care provider for any non-emergency medical services rendered by similar providers, including the ordering of transportation or prescriptions. Claims submitted for a restricted recipient will be denied if the primary care provider's information is not included in the claim as the referring provider.

Responsibilities

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- ❑ **Medical provider changes** (physician or clinic, and hospital)
 - Performed by the plan and sent to OMIG
 - For enrollees that fail to establish a relationship with a PCP
 - Contact the enrollee and discuss the benefits of having an established PCP
 - Discuss the rules of the restriction program with the enrollee
 - Help the enrollee select a PCP

Responsibilities

- ❑ Educate the restricted enrollee population
 - Benefits of the restriction program
 - Use only the providers that have been selected
 - How to seek treatment from a specialist (if needed)
 - Know who their restricted providers are
 - Inform other restricted providers of any changes to current providers

Responsibilities

❑ Educate providers

- On the rules of the recipient restriction program
 - “When providing services to a member who is restricted to a primary physician or facility, the NPI of the referring professional must be entered. If a member is restricted to a facility, the NPI of the facility’s referring professional must be entered. The ID of the facility cannot be used.” (NYS Medicaid General Professional Billing Guidelines - pg.17)
- How to bill for referral services

Responsibilities

- ❑ **Educate all involved Managed Care Plan employees**
 - On the rules of the recipient restriction program
 - Handling provider changes
 - Referrals
 - Process
 - Billing

Miscellaneous

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Referrals

- When basing a restriction on pharmacy claims only, send the case to OMIG (with explanation); OMIG will review for restriction to appropriate providers.

Contact Information

Contact Information

OMIG RRP Hotline: 518-474-6866

OMIG email: omig.sm.RRP@omig.ny.gov

Human Resource Administration (HRA): 888-692-6116

NY State Of Health (DOH health benefit exchange):
855-355-5777

Local county directory:

https://www.health.ny.gov/health_care/medicaid/ldss.htm

