

Arkansas User Administration Console (UAC) and Web Claims Submission (WCS) Training for DME Provider Frequently Asked Questions (FAQ)

This document will provide information on the questions generated from the UAC and WCS for DME Providers training in preparation for the new billing processes to a pharmacy claim type submission for diabetic supplies including Continuous Glucose Monitors (CGMs).

Questions	Answers
Will the diabetic supply claims be processed through both the pharmacy software and the web claims submission tool?	If you have a dual dispensing type (i.e., pharmacy and DME provider), you can submit these claims through your pharmacy software. You do not need to submit them via the WCS tool. Only the DME providers who are not pharmacies are the ones required to use the WCS tool to submit the diabetic supply claims.
Is this change to DME providers for all prosthetics and orthotics	No, change is only for certain diabetic supplies*, including blood glucose meters and supplies, CGM and supplies, and patch-type pumps.
How will the quantity for test strips/lancets be entered in the WCS tool?	You will need to enter the quantity as per test strips/lancets, not per the number of boxes being dispensed (e.g., 1 box of 100 test strips/lancets will be entered as 100 test strips/lancets in the WCS tool).
What should be selected for the DAW code when submitting a diabetic supply claim?	More than likely, you will always select "0 – No Product Selection Indicated" as a DME provider.
Can the diabetic supply claim (i.e., test strips/lancets) be submitted for 90 days' supply?	At this time, you can only submit a maximum days' supply of 30 for test strips/lancets. We are currently in the process of updating this, so you can submit up to a maximum of 90 days in the future.
Is there a software vendor that we can use to submit for a batch fill?	No, we are not aware of any software vendor that the State is connected with to be able to submit for a batch fill.

Who do we contact if we have any billing questions?	Please contact the Prime Therapeutics Call Center** at 1-800-424-7895 for any question regarding billing or prior authorization information.
What is the prescription reference number?	It is a unique number, also called the prescription number, assigned by the pharmacy or DME provider at the time the prescription is filled.
What is the maximum character for a prescription reference number (or prescription number) when entering it on the WCS tool?	A prescription reference number (or prescription number) has a maximum of 12 characters when entering it on the designated field within the WCS tool.
How long will the prescription for diabetic supplies be good for?	The prescription for diabetic supplies is good for as long as there are any refills or up to 1 year.
Would the new billing update for diabetic supplies apply for the members with dual coverage (i.e., Medicare, Blue Cross, etc.)?	No, this change would only apply for the traditional Fee-For-Service (FFS) members.
Is there a Lancets pricing list that the DME providers can refer to?	Because of the numerous manufacturers on the market, there is not a list posted. If there are questions around pricing of a particular lancet box, call the Prime Therapeutics Call Center at 1-800-424-7895.
Would the Dispensing Fee field in the WCS tool be the same value that is on the DME fee schedule?	The professional dispensing fee field used in the WCS is set by the pharmacy claims submission rate, as approved by CMS and in State policy. It is not the DME fee schedule price/fee.
Will the clinical criteria for approving diabetic supplies be changing as part of the new billing change?	Clinical criteria is regularly reviewed, especially with considerations to national treatment guidelines, or the Medicare Local Coverage Determinations. The current criteria is actually less stringent than the previous billing. It will be posted on the website and any changes are communicated to providers.
Is the UAC and WCS tool training recorded for future reference?	Yes, there is a video recording that will be available on the web portal for future reference.

*The AR HCPCS codes included in this change are A4238, A4239, A4250, A4253, A4256, A4259, A4772, A9276, A9277, A9278, E0607, E2102, and E2103.

**The Prime Therapeutics Call Center is the new name for the formal Magellan Call Center.