

This update applies to:
All Network Pharmacies

States:
Maryland

Line of Business:
Commercial

Customer Care for Plan
Members:
1-844-460-8767

Pharmacy Inquiries:
If you have questions, call the
Pharmacy Help Desk number
provided in the claim
response or 1-800-364-6331
if one is not provided.

Payer Sheets: For additional
claim processing information,
refer to the CVS Caremark
Payer Sheets at
caremark.com/pharminfo >
NCPDP Payer Sheets.

OTC Emergency Contraceptive Billing

State of Maryland

RXBIN: 004336
RXPCN: ADV
RXGRP: RX0613

State of Maryland is an existing client with CVS Caremark®.

In response to House Bill 1024, effective October 1, 2018, OTC emergency contraceptives, Plan B and its generic alternatives, are covered as part of a member's prescription benefit at a \$0 copay and do not require a prescription.

To adjudicate an OTC emergency contraceptive claim without a prescription, Providers should submit their pharmacy NPI as the Prescriber ID (NCPDP Field 411-DB). Please contact the Pharmacy Help Desk for any additional questions related to claims processing.

The recipient of this fax may make a request to opt out of receiving telemarketing fax transmissions from CVS Caremark. There are numerous ways you may opt out: The recipient may call the toll-free number at 877-265-2711 and/or fax the opt-out request to 401-652-0893, at any time, 24 hours a day/7 days a week. The recipient may also send an opt-out request via email to do_not_call@cvscaremark.com. An opt-out request is only valid if it (1) identifies the number to which the request relates, and (2) if the person/entity making the request does not, subsequent to the request, provide express invitation or permission to CVS Caremark to send facsimile advertisements to such person/entity at that particular number. CVS Caremark is required by law to honor an opt-out request within thirty (30) days of receipt. An opt-out request will not opt you out of purely informational, non-advertisements, Caremark pharmacy communications such as new implementation notices, formulary changes, point-of-sale issues, network enrollment forms, and amendments to the Provider Manual.

This communication and any attachments may contain confidential information. If you are not the intended recipient, you are hereby notified that you have received this communication in error and that any review, disclosure, dissemination, distribution, or copying of it or its contents, is prohibited. If you have received this communication in error, please notify the sender immediately by telephone and destroy all copies of this communication and any attachments. This communication is a Caremark Document within the meaning of the Provider Manual.