

MARCH 2022

KMAP GENERAL BULLETIN 22022

Reimbursement for Dispense as Written Approved Pharmacy Claims

Effective July 1, 2022, Fee-For-Service (FFS) Dispense as Written 1 (DAW1) approved pharmacy claims will have a lesser of reimbursement using the lesser of criterion of Wholesale Acquisition Cost (WAC) + 0%, rather than WAC + 4.6%. This reimbursement change will align with the 2016 Centers for Medicare and Medicaid Services (CMS) Coverage Outpatient Drug (COD) Rule, which requires an Actual Acquisition Cost methodology. The new FFS Pharmacy claim allowable for approved DAW1 claims will be the lesser of the following:

- Usual and Customer (U&C)
- Provider submitted ingredient cost + \$10.50
- WAC + \$10.50

Other related pricing and reimbursement information currently in policy still applies.

Note: The effective date of the policy is July 1, 2022. The implementation of State policy by the KanCare managed care organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The **KanCare Open Claims Resolution Log** on the KMAP [Bulletins](#) page documents the MCO system status for policy implementation and any associated reprocessing completion dates once the policy is implemented.

KMAP

[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday