

Administrative Policy Statement Mississippi Medicaid			
Policy Name		Policy Number	Date Effective
Lost, Stolen, Damaged, Vacation and School Supply of Medication		PAD-0091-MS-MCD	07/01/2025
Policy Type			
Medical	ADMINISTRATIVE	Pharmacy	Reimbursement

Administrative Policy Statements are derived from literature based on and supported by clinical guidelines, nationally recognized utilization and technology assessment guidelines, other medical management industry standards, and published MCO clinical policy guidelines. Medically necessary services include, but are not limited to, those health care services or supplies that are proper and necessary for the diagnosis or treatment of disease, illness, or injury and without which the patient can be expected to suffer prolonged, increased or new morbidity, impairment of function, dysfunction of a body organ or part, or significant pain and discomfort. These services meet the standards of good medical practice in the local area, are the lowest cost alternative, and are not provided mainly for the convenience of the member or provider. Medically necessary services also include those services defined in any Medical Policy Statements, Provider Manuals, Member Handbooks, and/or other policies and procedures.

Administrative Policy Statements do not ensure an authorization or payment of services. Please refer to the plan contract (often referred to as the Evidence of Coverage) for the service(s) referenced in the Administrative Policy Statement. If there is a conflict between the Administrative Policy Statement and the plan contract (i.e., Evidence of Coverage), then the plan contract (i.e., Evidence of Coverage) will be the controlling document used to make the determination.

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## A. Subject

Early refill override requests due to reports of additional medication needed beyond initial dispensing.

## B. Background

The TrueCare pharmacy benefit design places limits on how early a member can refill a prescription. This limit is intended to ensure appropriate and cost-effective use of medications.

A pharmacy may request an exception to the refill-too-soon threshold on behalf of a member by calling the pharmacy help desk.

This policy serves as guidance for the Pharmacy Help Desk and TrueCare operations team member processing of member and pharmacy requests for an override for an early refill resulting from:

- Lost medication
- Stolen medication
- Damaged medication
- Out of state or out of country travel
- Separate supply for separated households, school or daycare

## C. Definitions

- Refill-Too-Soon – An early refill; additional medication that is requested following an earlier-dispensed medication request but sooner than allowed by the member's coverage benefits.
- Override – Authorization for early refill that allows the claim to process at the point of sale (at the pharmacy).
- Refill-Too-Soon Threshold – The date before which a claim for a medication refill will reject at the point-of-sale. When a pharmacy attempts to fill a medication refill before this threshold, the rejection message at the point of sale will provide the refill-too-soon threshold date.

## D. Policy

- I. The pharmacy help desk will provide a refill-too-soon override in the following circumstances:
  - A. For a lost medication override, the pharmacy help desk will place a single refill-too-soon override per medication (including strength) per rolling twelve (12) months. The days' supply allowed by the refill-too-soon override will be subject to standard days'



supply coverage restrictions (30- or 90-days, depending on the medication and the plan).

- B. For a stolen medication override, the pharmacy help desk will place a single refill-too-soon override per medication (including strength) per rolling twelve (12) months when member attests that the theft has been reported to the police.

**Note:** Attestation can be relayed through the pharmacy. Documentation is not required.

- C. For a refill-too-soon override related to damaged medication, the pharmacy help desk will place a single refill-too-soon override per medication (including strength) per rolling twelve (12) months when the medication was not damaged as a result of pharmacy action or in the process of shipment to the member.
  - a. If the request is for a blood glucose or continuous glucose monitor that is malfunctioning, the member should confirm the manufacturer has been contacted for assistance and was unable to resolve the issue.
  - b. If medication damage occurs as a result of pharmacy action or in the process of shipment to the member, the pharmacy is responsible for replacing the damaged medication.
- D. For a refill-too-soon override related to member travel, the pharmacy help desk will place a single refill-too-soon override per medication (including strength) per rolling twelve (12) months when ALL of the following are met:
  - a. The member is traveling to a location where a network, rostered pharmacy is not available, AND
  - b. The days' supply of the refill-too-soon request is subject to the plan's benefit limits.
- E. For a refill-too-soon override related to additional medication supply to be provided to a separate household, school or daycare, the pharmacy help desk may place refill-too-soon overrides for medications that are in unbreakable packaging (such as inhalers or epinephrine injectors) when needed.
- F. For members requesting a refill-too-soon supply due to permanent relocation to a new address out-of-state, the pharmacy help desk will place a single refill-too-soon override per medication (including strength) for up to a 30-day supply.

- II. The pharmacy help desk will NOT provide a refill-too-soon override when ANY of the following circumstances is true:

- A. The requested medication is an opioid,
- B. The total cost of the damaged medication is greater than \$8,000,
- C. The loss or damage is a result of an action on the part of the pharmacy or shipping company,
- D. The member has already received a refill-too-soon override for the requested medication for any reason in the previous rolling twelve (12) months,
- E. The requested days' supply of the medication exceeds plan benefit limits (30- or 90-



days supply, depending on the medication and plan), OR

F. The requested medication is not a Covered product under the plan (including products that are not CMS rebateable).

III. All requests for refill-too-soon overrides not permitted by the pharmacy help desk are subject to review and approval or denial by the TrueCare Pharmacy Operations team. Any overrides not permitted by the pharmacy help desk will be considered at the discretion of the TrueCare Pharmacy Operations team in consultation with the Markets when appropriate

#### E. Related Policies/Rules

Medical Necessity – Off Label

Medicaid Drug Rebate Program (MCRP) Coverage Rules – AC Reject

#### F. Review/Revision History

DATES		ACTION
Date Issued	07/01/2025	Initial Release to P&P Committee
Date Revised	08/01/2016	2016 Annual Review with No Changes
	06/01/2017	2017 Annual Review with No Changes
	02/01/2018	Updated criteria to limit compounds to having one ingredient per drug class and 30 day trial of preferred medications
Date Archived		
	06/11/2020	Policy moved to the new template. No changes.
	11/30/2021	Updated criteria to include requirement of 2 published studies for off-label requests, reauth criteria, approval durations. Added separate criteria set for pain compounds. Revised trial requirement to be 3 preferred medications. Changed MediSpan to First Data Bank. Removed “not medically necessary” section under Additional notes.
	11/16/2022	Added individual ingredieents must be FDA Approved via indication, age and ROA; Added MDRP Coverage Rules – AC Reject policy reference.
	5/21/2024	Annual review, no changes.
Date Effective	07/01/2025	



## G. References

**The Administrative Policy Statement detailed above has received due consideration as defined in the Administrative Policy Statement Policy and is approved.**

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