

## **P-210 Recipient Restriction Program**

Complete information regarding the Recipient Restriction Program is available in [Chapter 100, Handbook for Providers of Medical Services](#). This section refers to pharmacy-specific information regarding the Recipient Restriction Program (RRP).

The Department identifies participants who misuse medical services. When the Department determines that a participant has received pharmacy services and/or medical services in excess of need or in such a manner as to constitute an abuse and/or quality of care issue of the program, the Department restricts the participant to a Primary Care Pharmacy and/or a Primary Care Physician.

When a participant is restricted, the recipient is initially assigned a Primary Care Physician and/or a Primary Care Pharmacy. The participant will be notified in writing of the assignment and given the opportunity to select a different Primary Care Pharmacy and/or a different Primary Care Physician. The participant can contact the RRP staff and select a different Primary Care Physician and/or Primary Care Pharmacy. The option to select a different Primary Care provider is offered once during a twelve-month calendar year period.

If the participant is restricted to a Primary Care Physician and the Primary Care Physician refers the client to another physician/specialist who prescribes medications to the participant, then the referring physician (physician to whom the participant is restricted) or the pharmacy must either download the HFS 1662 from [HFS Medical Programs Numerical Listing of Forms webpage](#) or call the RRP unit at 800-325-8823 and request a HFS 1662 form (Primary Care Provider Authorization form). The completed HFS 1662 is then given to the dispensing pharmacy which is required to retain the HFS 1662 form (paper or electronic copy), for auditing purposes, for a period of 7 years.

The pharmacy can then bill electronically NCPDP D.O standard as follows-

The referred physician/specialist should be identified on the claim as the prescribing physician in the Prescriber ID field (411-DB) and the referring physician (physician to whom the participant is restricted) should be identified on the claim as the primary care physician in the Primary Care Provider ID field (421-DL). If a problem occurs with the submission of the claim, the pharmacy should contact a department Pharmacy Billing Advisor at 877-782-5565, option 7 for assistance.

Providers who have questions about a participant's RRP status may call the Department's toll-free RRP hotline at 1-800-325-8823.

The Department will not pay for restricted services that are provided on a non-emergency basis without prior written authorization of the designated Primary Care Physician. This authorization will be in the form of a completed Form HFS 1662.