



Obtaining Physician-Administered Drugs through a Specialty Pharmacy—following the “White Bagging” Process for Healthfirst Medicaid Patients

What is White Bagging?

White Bagging refers to the distribution of patient-specific medication from a pharmacy, typically a specialty pharmacy, to the physician’s office, hospital, or clinic for patient administration.

As a Healthfirst provider, you can get **Physician-Administered Drugs** (PADs) delivered to your office at no cost through White Bagging when the medication is obtained from a Healthfirst in-network specialty pharmacy provider. This economical process improves efficiency by delivering requested medication directly to your practice.

Important Process Information

Providers must still adhere to Healthfirst’s Prior Authorization policies and ensure that approvals are obtained before requesting medications from the specialty pharmacy provider. Additionally, providers can only get reimbursed for the *administration* of the medication and will be reimbursed according to contracted rates. Providers may **not** submit a claim to Healthfirst for medication reimbursement, as it was obtained at no cost. Details on Medicaid PADs can be found on [New York State’s Department of Health website](#).

How to Request Physician-Administered Drugs (PADs) through White Bagging

Step 1: Review the list of eligible PADs

- The list of PADs can be found on the [eMedNY website](#).

Step 2: Submit a Prior Authorization through the Provider Portal, Provider Services, or by fax

- **Healthfirst Provider Portal:**
 - Log in to the Provider Portal at [HFproviderportal.org](https://hfproviderportal.org)
 - Navigate to “Online Authorization”
 - Choose “Authorization Request” from the dropdown menu
 - Select “Outpatient” in the Request Type field

IMPORTANT: Please ensure that you select one of the in-network **Specialty Pharmacy Providers** listed in Table 1 below.

Provider Alert

- **Provider Services:**

- Call Provider Services at **1-888-801-1660**, Monday to Friday, 8:30am–5:30pm.

IMPORTANT: Please tell Provider Services that the medication(s) will be obtained by White Bagging and specify the in-network **Specialty Pharmacy Provider** listed in Table 1 below.

- **Fax:**

- Fax the Prior Authorization request and cover sheet to **1-212-801-3223**.

IMPORTANT: Please specify on the fax cover sheet which in-network **Specialty Pharmacy Provider** listed in Table 1 will be supplying the medication(s). Additionally, please ensure the patient's demographics, Current Procedural Terminology (CPT) codes with associated units, and patient's clinical information is also included on the prior authorization request.

Step 3: Billing for Physician-Administered Drugs (PADs)

- Since providers can only bill for the administration of PADs, providers will need to use the following methodology found on the [NYSDOH website](#) and outlined below:
 - **Indicate in Line 1 that the medication was supplied at no cost:**
 - Add the Healthcare Common Procedure Coding System (HCPCS) code of the selected medication.
 - Indicate a charged amount of \$0.01.
 - Add the "FB" modifier. This indicates that the medication was supplied at no cost.
 - **Bill for the administration of the medication in Line 2:**
 - Add the CPT code of the selected medication.
 - Indicate the contracted rate for the administration of the medication.
- **Note:** See Table 2 for an example.

Provider Alert

Table 1. Healthfirst In-Network Infusion and Specialty Pharmacy Providers:

Provider	Telephone
Accredo	1-888-608-9010
American Outcome Management	1-800-556-4246
Americare Pharmaceutical Services	1-516-292-2092
Amerita	1-516-725-5944
Basic Home Infusions	1-888-822-7428
CVS Coram	1-952-250-2037
NuFactor	1-800-323-6832
OptionCare	1-973-597-0444
Orsini Pharmaceuticals	1-800-410-8575
PromptCare	1-732-692-2777
QuickRX	1-718-819-5249

Provider Alert

Table 2. Billing Example

	24. A. Date(s) of service						B. Place of Service	C. EMG	D. Procedures, Services, or Supplies (Explain Unusual Circumstances)				E. Diagnosis Pointer
	From			To					CPT/HCPCS	Modifier			
	MM	DD	YY	MM	DD	YY							
1													
	08	01	23				11		J0585	FB			1, 2, 3
2													
							11		64612				1, 2, 3

	F. \$ Charges		G. Days or Units		H. EPSDT Family Plan	I. ID. Qual.	J. Rendering Provider ID. #		ER INFORMATION
	MM	DD	MM	DD					
1									
	0	01		12		NPI			
2									
	16	00		1		NPI			

Line 1 represents how to bill when obtaining the medication at **no cost** using the FB modifier.

Line 2 represents how to bill for the medication administration reimbursement.

Questions?

If you have questions, please contact your Network Account Manager, or call Provider Services at **1-888-801-1660**, Monday to Friday, 8:30am–5:30pm.