

Tips for a Safe Summer

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Recreational Water Illness

- Recreational water illness (RWI) outbreaks have increased greatly in recent years. Although RWIs can be respiratory and dermatological, most are primarily gastrointestinal. Even one diarrheal incident in water may release millions of diarrhea-causing germs, such as *Cryptosporidium*, *Giardia*, *Shigella*, norovirus, and *E. coli*.
- It is important for healthcare providers to educate their patients about RWI and prevent misconceptions that may lead to illness. Studies have shown that people who swim in public places believe chlorine instantly kills all pathogens and do not consider recreational swimming to be a shared water experience. These misconceptions cause people to exhibit risky behaviors, such as swimming during diarrheal illness and swallowing recreational water which may lead to transmission of pathogens that cause RWIs. Cryptosporidiosis and giardiasis are responsible for more than 50% of all reported RWIs.
- *Cryptosporidium*, one of the leading causes of swimming pool-related outbreaks of diarrheal illness, can stay alive for days, even in well-maintained pools. The primary symptom is diarrhea, but may also include abdominal pain, fever, nausea, vomiting, and weight loss. These symptoms usually present approximately one to two weeks after exposure. Management is primarily symptomatic, with the mainstay of therapy being fluid and electrolyte replacement. Nitazoxanide may be used in patients with healthy immune systems with prolonged symptoms. However, the effectiveness of nitazoxanide in immunosuppressed individuals is unclear.
- *Giardia intestinalis* is one of the most common fresh water-related illnesses. Symptoms include, but are not limited to, abdominal cramps, arthralgias, diarrhea, and nausea. Some treatment options include metronidazole, tinidazole, and nitazoxanide. Different factors may shape how effective a drug regimen will be, including medical history, nutritional status, and condition of the immune system. Therefore, it is important for patients to discuss treatment options with their healthcare provider.
- Although some RWIs may result in significant morbidity and mortality, most are self-limited and require only supportive therapy.
- Prevention is always the best approach. Healthcare providers should share the following RWI prevention tips with their patients:
 - Don't swim while ill with diarrhea.
 - Don't swim for an additional 2 weeks after diarrhea has resolved if diagnosed with cryptosporidiosis.
 - Don't swallow the water.
 - Don't swim when you have open wounds.

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Otitis Externa

- Acute otitis externa (AOE) is also known as “swimmer’s ear” and results in around 2.4 million health care visits and almost half a billion dollars in health care costs each year in the United States. AOE can occur when water stays in the ear canal for long periods of time. This enables a perfect environment for the growth of germs. The infection is located in the outer ear canal and can be painful for swimmers of all ages.
- Otitis externa is commonly caused by water in pools and other recreational water venues. Symptoms include: itchiness inside the ear, redness and swelling of the ear, pain when touching the ear, and pus draining from the ear.
- Healthcare providers should instruct their patients on tips to prevent otitis externa. These tips include:
 - Keep ears as dry as possible by using ear plugs when swimming.
 - Dry the ears thoroughly after swimming or bathing.
 - Instruct patients to tilt their head while holding their ear facing down to allow water to escape the ear canal.
- Recommendations for treatment of otitis externa include the following:
 - Assess the patient’s pain and recommend analgesic treatment as determined by the pain severity.
 - Do not prescribe systemic antimicrobials as initial therapy for uncomplicated AOE unless there is an extension outside the ear canal or there are other factors present that would indicate a need for systemic therapy.
 - Distinguish diffuse AOE from other causes of earaches, discharge from the ear, and inflammation of the external ear canal.
 - Assess the patient with diffuse AOE for issues that modify management of the patient’s condition, such as nonintact tympanic membrane, diabetes, immunocompromised state, etc.
 - Prescribe topical agents for initial therapy of diffuse, uncomplicated AOE.
 - Ensure appropriate administration of topical agents by clearing the ear canal and teaching the patient how to correctly administer eardrops.
 - Prescribe a non-ototoxic preparation when the patient has a suspected or known perforation of the eardrum, which includes ear tubes.
 - Reassess patients who fail to respond to the initial therapy within 48 to 72 hours in order to confirm the diagnosis of diffuse AOE and exclude other causes of illness.

Sunburn

- Sunburn is another common summer-related injury. The sun’s ultraviolet (UV) rays can burn unprotected skin in as little as 15 minutes.
- Unlike a thermal burn, sunburn is not immediately apparent. Symptoms usually start about 4 hours after sun exposure, worsen in 24-36 hours, and resolve in 3-5 days.
- Symptoms may include red, warm, and tender skin, swollen skin, blistering, headache, fever, and fatigue.

- Healthcare providers should educate their patients about first-aid tips for home management of sunburn:
 - Treat symptoms with aspirin, acetaminophen, or ibuprofen to relieve pain and headache and reduce fever.
 - Drink plenty of water to help replace fluid losses.
 - Gently apply cool wet cloths on the burned area to provide additional comfort.
 - Avoid further exposure until the burn has resolved.
 - Apply a topical moisturizing cream, aloe, or a 1% hydrocortisone cream for additional symptomatic relief.
- Healthcare providers should also ensure that patients know what to do if blistering occurs:
 - Bandage or cover the area lightly with gauze to prevent infection.
 - DO NOT break the blisters, as this will slow the healing process and increase the risk of infection.
 - Remove dried fragments and apply an antiseptic ointment or hydrocortisone cream when the blisters break and the skin peels.
 - Seek medical attention immediately if any of the following occurs: severe sunburns covering more than 15% of the body, dehydration, high fever (>101°F), or extreme pain that persists for longer than 48 hours.
- To prevent sunburn, the CDC recommends the following:
 - Stay out of the sun between 10am and 4pm; this is when the UV rays are at their highest level.
 - Wear long-sleeved shirts and long pants, when possible, to provide protection from UV rays when working or playing outside.
 - Wear sunglasses to protect eyes.
 - Put on a thick layer of broad-spectrum sunscreen with at least SPF 15 on all parts of exposed skin before you go outside, even on slightly cloudy or cool days.
 - Reapply sunscreen if you stay out in the sun for more than two hours and after swimming, sweating, or toweling off.



Drug-Induced Photosensitivity

- Drug-induced photosensitivity is defined as the development of a skin reaction due to exposure to a chemical agent and sunlight. This agent may be a topical or systemic medication.
- Drug-induced photosensitivity is common, representing almost 8% of dermatological adverse events due to drugs.
- Some of the most common photosensitizers include antibiotics, NSAIDs, and amiodarone.
- More than 300 drugs have been reported as photosensitizers. However, the relationship between sun exposure and medications is not always clear and many cases are underreported and underdiagnosed. Therefore, although some therapeutic drug classes are not usually associated with photosensitive reactions, it is important for healthcare providers to consider that almost any medication may produce a photosensitive reaction.

- The following table lists some common examples of photosensitive medications. Please refer to the individual medication’s prescribing information for further details.

Medication Category	Some Examples*
Antiarrhythmics	amiodarone, dronedarone
Antidepressants	escitalopram, protriptyline
Antihypertensives	amlodipine, captopril, enalapril, nifedipine, ramipril
Antimicrobials	cefotaxime, ciprofloxacin, doxycycline, griseofulvin, ketoconazole, levofloxacin, ofloxacin, quinine, tetracycline, voriconazole
Antineoplastic	vandetanib, vemurafenib
Anxiolytics	alprazolam, chlordiazepoxide
Cholesterol Lowering Drugs	atorvastatin, pravastatin, simvastatin
Diuretics	furosemide, hydrochlorothiazide
Non-Steroidal Anti-Inflammatory Drugs	celecoxib, ibuprofen, ketoprofen, naproxen
Oral Contraceptives	ethinyl estradiol
Phenothiazines	chlorpromazine, thioridazine
Retinoids	etretinate, isotretinoin
Sulfonamides	sulfamethoxazole, sulfasalazine

*This list is comprised of examples and is not all-inclusive.

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New Medicaid Eligibility Group Covers COVID-19 Testing for Uninsured Patients

Per the Families First Coronavirus Response Act and the Coronavirus Aid, Relief, and Economic Security Act, Louisiana Medicaid has expanded coverage to include COVID-19 testing for uninsured individuals for the duration of the federally declared public health emergency. Coverage is limited to COVID-19 testing and related office visits for uninsured Louisiana residents. No treatment costs are covered under this program.

The new benefit is provided through Medicaid fee-for-service and not Healthy Louisiana through a managed care organization. Providers must be a Medicaid enrolled provider and must be enrolled before services are provided. Providers not enrolled as a Medicaid provider with DXC will need to complete a [temporary emergency application](#) with Medicaid’s fiscal intermediary, DXC, to be paid for testing and testing related services for the uninsured. Providers will

be required to self-attest on the uninsured individual’s application to Medicaid that they are not also [billing the Department of Health and Human Services \(HHS\) or the Health Resources and Services Administration \(HRSA\)](#) for the same services. You also may not bill on any contract with the Louisiana Department of Health to provide COVID-19 testing for these patients. If Medicaid identifies other third party coverage is available (e.g., Medicare, private insurance), Medicaid will not cover the services.

For additional guidance, visit [Medicaid’s provider web page for COVID-19 testing coverage for uninsured individuals](#). The site contains billing information, a [detailed provider guide](#), frequently asked questions for providers, and the [simplified application](#) patients can fill out to determine if they are eligible for coverage.

PHARMACY FACTS

Program Updates from Louisiana Medicaid

Pharmacy Facts can also be found online at: <http://ldh.la.gov/index.cfm/page/3036>.

May 18, 2020

Brand Over Generic List

The Louisiana Department of Health (LDH) scheduled a Pharmaceutical & Therapeutics (P&T) meeting in April 2020. Due to the COVID-19 crisis, the P&T meeting was cancelled. The LDH pharmacy staff reviewed the potential financial and clinical impact provided by Magellan to determine which recommendations are in the best interest of the medical assistance program for brand over generic list. There are times when brand products are preferred over generics because it is beneficial for the state in collecting of rebates.

NOTE: Preferred brands removed from list are on page two for inventory adjustment purposes.

Brand Over Generic List for Spring 2020 Effective July 1, 2020		
	Preferred	Require Prior Authorization / Non-Preferred
1	REVATIO® SUSPENSION (ORAL)*	SILDENAFIL SUSPENSION
2	FOCALIN XR® (ORAL)	
3	COPAXONE® 20 MG/ML (SUBCUTANE.)	
4	NATROBA® (TOPICAL)	
5	TRANSDERM-SCOP® (TRANSDERM)*	SCOPOLAMINE TRANSDERMAL
6	TOBRADEX® SUSPENSION (OPHTHALMIC)	
7	PROCENTRA® (ORAL)	
8	CATAPRES-TTS® (TRANSDERM)	
9	ALPHAGAN P® 0.15% (OPHTHALMIC)	
10	HUMALOG® VIAL/PEN (SUBCUTANE.)*	AUTHORIZED GENERIC OF INSULIN LISPRO VIAL/PEN AND ADMELOG® VIAL/SOLOSTAR® PEN
11	NOVOLOG® MIX VIAL/ PEN (SUBCUTANE.)*	AUTHORIZED GENERIC OF INSULIN ASPART/INSULIN ASPART PROTAMINE VIAL/PEN
12	NOVOLOG® PEN/VIAL/CARTRIDGE (SUBCUTANE.)*	AUTHORIZED GENERIC OF INSULIN ASPART PEN/VIAL/CARTRIDGE
13	SUBOXONE® FILM (SUBLINGUAL)	

*Yellow highlight denotes a new addition to the brand over generic list

Brand Over Generic Products Removed for Spring 2020 Effective July 1, 2020		
	Preferred	Require Prior Authorization / Non-Preferred
1	OSELTAMIVIR CAPSULE (ORAL)	TAMIFLU® CAPSULE (ORAL)
2	CAPECITABINE	XELODA® (ORAL)
3		RENAGEL® (ORAL) AND SELVELAMER HCL
4	IMATINIB MESYLATE	GLEEVEC® (ORAL)
5		DERMA-SMOOTH-FS® (TOPICAL) AND FLUOCINOLONE
6	ALBUTEROL HFA	PROVENTIL HFA®
7	AMBRISENTAN TAB	LETAIRIS®
8	SOLIFENACIN TAB	VESICARE®



May 15, 2020

Generic Albuterol

As of Wednesday, May 20, 2020 all the generic albuterol HFA inhalers will be preferred products along with the current preferred brands (ProAir HFA® and Proventil HFA®).

At a recent meeting, our pharmacy providers brought up an easier way for physicians to write for albuterol inhalers. When writing a script for an albuterol inhaler, it is recommended to write “1 inhaler” versus how many grams per inhaler. This will allow the pharmacist to be able to substitute with whatever generic product they are able to get versus calling the physician to ask if it is OK to switch to another product due to different grams.

If the physician writes for generic albuterol, the pharmacist will now be able to dispense brand or generic depending on their stock as of May 20, 2020. This allowance was made in response to supply shortages being brought to our attention by wholesalers and providers during COVID-19 pandemic.

Early Refill Edit

As of Monday, May 18, 2020 the early refill edit will be turned back on for Fee-for-Service (FFS) and the Managed Care Organizations (MCO).

Naloxone Standing Order

We want to clarify any confusion surrounding the naloxone standing order. For calendar year 2020, the order has been signed by Dr. James Hussey, Medical Director of the Office of Behavioral Health. Here is the link to the current standing order: <http://ldh.la.gov/assets/opioid/NaloxoneStandingOrder2020.pdf>.

Adult Vaccines

On July 1, 2020, the Louisiana Department of Health (LDH) and the MCOs will begin covering adult vaccines as seen below in the chart. The chart has been updated to include pharmacy and medical benefit where appropriate in RED to denote a new change.

*** For all plans <19 years old is included in the Vaccines for Children Program ***

Immunization	FFS	Aetna	ACLA	HB	LHCC	UHC
MMR	Medical & Pharmacy	Medical & Pharmacy	Medical & Pharmacy Benefit	Medical & Pharmacy Benefit	Medical & Pharmacy	Medical & Pharmacy
Varicella	Medical & Pharmacy	Medical & Pharmacy	Medical & Pharmacy Benefit	Medical & Pharmacy Benefit	Medical & Pharmacy	Medical & Pharmacy
HPV	Medical & Pharmacy	Medical & Pharmacy	Medical & Pharmacy Benefit	Medical & Pharmacy Benefit	Medical & Pharmacy	Medical & Pharmacy
MenACWY	Medical & Pharmacy	Medical & Pharmacy	Medical & Pharmacy Benefit	Medical & Pharmacy Benefit	Medical & Pharmacy	Medical & Pharmacy
Pneumovax 23	Medical & Pharmacy	Medical & Pharmacy	Medical & Pharmacy Benefit	Medical & Pharmacy Benefit	Medical & Pharmacy	Medical & Pharmacy
Prenar 13	Medical & Pharmacy	Medical & Pharmacy	Medical & Pharmacy Benefit	Medical & Pharmacy Benefit	Medical & Pharmacy	Medical & Pharmacy
Hep A	Medical & Pharmacy	Medical & Pharmacy	Medical & Pharmacy Benefit	Medical & Pharmacy Benefit	Medical & Pharmacy	Medical & Pharmacy
Hep B	Medical & Pharmacy	Medical & Pharmacy	Medical & Pharmacy Benefit	Medical & Pharmacy Benefit	Medical & Pharmacy	Medical & Pharmacy
Shingrix and Zostavax	Medical & Pharmacy	Medical & Pharmacy	Medical & Pharmacy Benefit	Medical & Pharmacy Benefit	Medical & Pharmacy	Medical & Pharmacy
Flu	Medical & Pharmacy	Medical & Pharmacy	Medical & Pharmacy Benefit	Medical & Pharmacy Benefit	Medical & Pharmacy	Medical & Pharmacy
MenB	Medical & Pharmacy	Medical & Pharmacy	Medical & Pharmacy Benefit	Medical & Pharmacy Benefit	Medical & Pharmacy	Medical & Pharmacy
Hib	Medical & Pharmacy	Medical & Pharmacy	Medical & Pharmacy Benefit	Medical & Pharmacy Benefit	Medical & Pharmacy	Medical & Pharmacy
Tetanus & Diphtheria	Medical & Pharmacy	Medical & Pharmacy	Medical & Pharmacy Benefit	Medical & Pharmacy Benefit	Medical & Pharmacy	Medical & Pharmacy
Tetanus, diphtheria Toxioids &	Medical & Pharmacy Benefit					
Typhoid	N/A	Medical Benefit	N/A	N/A	N/A	Vivotif for Pharmacy

Eligibility and Enrollment System Provider Bulletins

Louisiana Medicaid is publishing bi-weekly provider bulletins to address provider questions and concerns around the new eligibility and enrollment system. The information in these bulletins covers a wide range of provider issues and provider types. This and other news can be found on the web site dedicated to the new system, found here:

<http://ldh.la.gov/index.cfm/page/3497>.

If there are topics you feel need to be covered in these public communications, please let us know by sending an email to Healthy@la.gov.

PAYMENT ERROR RATE MEASUREMENT (PERM) Reporting Year (RY) 2021 Cycle Currently Underway

Louisiana Medicaid is mandated to participate in the Centers for Medicare and Medicaid (CMS) **Payment Error Rate Measurement (PERM)** program which will assess our payment accuracy rate for the Medicaid and CHIP programs. If chosen in a random sample, your organization will soon receive a *Medical Records Request* from the CMS review contractor, AdvanceMed. This cycle measurement will review Medicaid and CHIP payments made in Reporting Year (RY) 2021: July 1, 2019 through June 30, 2020.

Please be advised that sampled providers who fail to cooperate with the CMS Review Contractor by established deadlines may be subject to sanctioning by Louisiana Medicaid Program Integrity section through the imposition of a payment recovery by means of a withholding of payment until the overpayment is satisfied, and/or a fine.

Please be reminded that providers who are no longer doing business with Louisiana Medicaid are obligated to retain recipient records for 5 years, under the terms of the Provider Enrollment Agreement.

For more information about PERM and your role as a provider, please visit the [Provider link](#) on the CMS PERM website:

<http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/PERM/Providers.html>

If you have any questions, please call Program Integrity at 225-219-4149.

Remittance Advice Corner

Attention Physicians and Independent Laboratories 2020 Clinical Laboratory Services - Reimbursement Changes

Federal regulations prohibit state Medicaid agencies from reimbursing providers of clinical laboratory services at a higher rate than the Medicare allowable rate. In accordance with this regulation, clinical laboratory reimbursement rates have been updated on the fee-for-service Medicaid file effective for dates of service January 1, 2020 and forward. The Laboratory and Radiology fee schedule has been updated to reflect those changes.

Clinical laboratory claims for dates of service on or after January 1, 2020, where the previous reimbursement exceeded the Louisiana Medicare allowable rate will be systematically recycled on the remittance of May 19, 2020 without any action required by the provider.

Please contact DXC Technology Provider Relations at (800) 473-2783 or (225) 924-5040 if there are questions related to this matter for fee-for-service claims.

Manual Chapter Revision Log

Manual Chapter	Section(s)	Date of Revision(s)
Dental Services https://www.lamedicaid.com/prov/web1/ProviderManuals/manuals/Dental_New/Dental_New.pdf	Table of Contents 16.0 - Overview 16.1 - Provider Requirements 16.2 - Claims Related Information 16.3 - EPSDT – Beneficiary Eligibility 16.4 - EPSDT – Securing Services 16.7 - EPSDT Prior Authorization 16.8 - Adult Denture – Beneficiary Eligibility 16.9 - Adult Denture Covered Services 16.10 - Adult Denture Non-Covered Services 16.11 - Adult Denture Prior Authorization Appendix D - Adjustment-Void Forms and Instructions Appendix E- Dental Periodicity Schedule Appendix H - PA Sample Letter Appendix J - Contact Referral Information	05/15/20
New Opportunities Waiver https://www.lamedicaid.com/prov/web1/providermanuals/manuals/NOW/NOW.pdf	Appendix E - Billing Codes	05/27/20
Pediatric Day Health Care https://www.lamedicaid.com/prov/web1/providermanuals/manuals/PDHC/PDHC.pdf	45.6 – Reimbursement	05/19/20
Rural Health Clinics https://www.lamedicaid.com/prov/web1/providermanuals/manuals/RHC/RHC.pdf	Appendix E – RHC Services Facility Survey Appendix F – RHC Behavioral Health Services	05/01/20
Residential Options Waiver https://www.lamedicaid.com/prov/web1/providermanuals/manuals/ROW/ROW.pdf	Appendix E - Billing Codes	05/11/20

Archived Manual Chapter Revision Log

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Dental Services https://www.lamedicaid.com/provweb1/ProviderManuals/manuals/Dental_New/Dental_New.pdf	Table of Contents 16.0 - Overview 16.1 - Provider Requirements 16.2 - Claims Related Information 16.3 - EPSDT – Beneficiary Eligibility 16.4 - EPSDT – Securing Services 16.7 - EPSDT Prior Authorization 16.8 - Adult Denture – Beneficiary Eligibility 16.9 - Adult Denture Covered Services 16.10 - Adult Denture Non-Covered Services 16.11 - Adult Denture Prior Authorization Appendix D - Adjustment-Void Forms and Instructions Appendix E- Dental Periodicity Schedule Appendix H - PA Sample Letter Appendix J - Contact Referral Information	05/15/20
New Opportunities Waiver https://www.lamedicaid.com/provweb1/providermanuals/manuals/NOW/NOW.pdf	Appendix E - Billing Codes	05/27/20
Pediatric Day Health Care https://www.lamedicaid.com/provweb1/providermanuals/manuals/PDHC/PDHC.pdf	45.6 – Reimbursement	05/19/20
Rural Health Clinics https://www.lamedicaid.com/provweb1/providermanuals/manuals/RHC/RHC.pdf	Appendix E – RHC Services Facility Survey Appendix F – RHC Behavioral Health Services	05/01/20
Residential Options Waiver https://www.lamedicaid.com/provweb1/providermanuals/manuals/ROW/ROW.pdf	Appendix E - Billing Codes	05/11/20

For Information or Assistance, Call Us!

Provider Enrollment	(225)216-6370	General Medicaid Eligibility Hotline	1-888-342-6207
Prior Authorization:			
Home Health/EPSTD – PCS	1-800-807-1320	MMIS Claims Processing Resolution Unit	(225) 342-3855
Dental	1-866-263-6534 1-504-941-8206		
DME & All Other	1-800-488-6334 (225) 928-5263	MMIS/Recipient Retroactive Reimbursement	(225) 342-1739 1-866-640-3905
Hospital Pre-Certification	1-800-877-0666		
Provider Relations	1-800-473-2783 (225) 924-5040	Medicare Savings Program and Medicaid Purchase Hotline	1-888-544-7996
REVS Line	1-800-776-6323 (225) 216-(REVS)7387		
Point of Sale Help Desk	1-800-648-0790 (225) 216-6381	For Hearing Impaired Pharmacy Hotline Medicaid Fraud Hotline	1-877-544-9544 1-800-437-9101 1-800-488-2917

