

## Medicaid Will Deny Claims For Providers Who Have Not Completed Enrollment

Medicaid will begin denying claims on December 31, 2022 for providers who have not completed enrollment through the Medicaid Provider Enrollment Portal.

The deadline to submit an enrollment application is September 30. Providers must allow several weeks from the time of the application submission to the time that enrollment is considered complete. Claims will be denied beginning December 31, 2022 for providers who have not completed the enrollment process.

This enrollment deadline applies to providers who received an invitation letter from Gainwell. Providers should visit [www.lamedicaid.com](http://www.lamedicaid.com) to enroll. Providers will need several data points to complete enrollment, including Louisiana Provider ID, NPI, city, state and zip code. This information is included in a letter from Gainwell Technologies.

CMS has mandated enrollment and it applies to any provider that provides care to Medicaid members, which includes current managed care organization (MCO) only providers, Dental Benefits Program Manager (DBPM) providers, Coordinated System of Care (CSoc) providers, existing fee-for-service providers, and any new providers enrolling for the first time.

If providers are unsure of their enrollment status, a Provider Portal Enrollment Lookup Tool is available at [lamedicaid.com](http://lamedicaid.com). Providers will need one of the following data points to use the lookup tool: NPI, provider name, provider type, specialty, address, city and state, or zip code. Results given will show providers whose enrollments are 100% complete. Providers, who have submitted their applications but do not see their names listed, must allow at least 15 business days for the update to be processed. If your information has not been processed within 15 business days, please contact Gainwell Technologies by emailing [louisianaprovenroll@gainwelltechnologies.com](mailto:louisianaprovenroll@gainwelltechnologies.com) or contacting 833-641-2140 for a status update on enrollment and any next steps needed to complete the process.

Additional guidance is located at [www.ldh.la.gov/medicaidproviderenrollment](http://www.ldh.la.gov/medicaidproviderenrollment). Providers can also email questions to [LouisianaProvEnroll@gainwelltechnologies.com](mailto:LouisianaProvEnroll@gainwelltechnologies.com) or call 833-641-2140, Monday – Friday between the hours of 8 a.m. and 5 p.m. CST.

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## LDH Pink Letter Campaign

In early May, Louisiana Medicaid, in collaboration with Medicaid's five health plans, launched the Pink Letter Campaign. This one-time, direct-to-member mail campaign includes mailing a pink-colored letter to all Medicaid members to ensure accurate contact information ahead of the end of federal COVID-19 Public Health Emergency (PHE).

When the federal PHE ends, **ALL** Medicaid members must complete the renewal process. Members must ensure their contact information is up to date and respond to requests for information. If members do not respond to renewal letters or requests for information, they will lose their coverage when the public health emergency ends, even if they are still eligible.

Providers can help by encouraging the Medicaid members they serve to ensure their contact information is up-to-date by logging on to [MyMedicaid.la.gov](http://MyMedicaid.la.gov), emailing [MyMedicaid@la.gov](mailto:MyMedicaid@la.gov), calling the Medicaid health plan (the phone number on the back of the members' insurance cards), or calling Medicaid Customer Service at 1-888-342-6207.

There is also a Pink Letter Campaign Communications Toolkit available to providers online at [www.healthy.la.gov](http://www.healthy.la.gov), under the "Resources" tab. It includes communications materials like a printable flyer that can be posted in offices or shared with patients.

## LDH Pink Letter Campaign Flyer

# MEDICAID MEMBERS DON'T RISK LOSING YOUR HEALTH COVERAGE.

Keep your address and phone number up to date.  
You can do this:



- Online at [mymedicaid.la.gov](http://mymedicaid.la.gov)
- By email at [mymedicaid@la.gov](mailto:mymedicaid@la.gov)
- Toll-free at 1-888-342-6207



Don't miss important updates about your health insurance. If you do get a letter in the mail, follow the instructions and respond to Medicaid.



## Vaccine Incentive Program Expanded To Include Members 6 Months Or Older

Louisiana Medicaid's "Shot per 100,000" COVID vaccine incentive program is an ongoing effort to increase COVID vaccination rates in the state of Louisiana. The goal is to increase vaccination rates by offering \$200 gift cards to the first 100,000 eligible Medicaid enrollees for a limited time, if they receive the first or second dose of the vaccine or the single-dose vaccine.

This program has been expanded to include Medicaid members who are six months of age or older. Individuals must receive their first or second dose of the COVID vaccine or the single-dose COVID vaccine on or after April 5, 2022. Booster shots are not included in the program. Medicaid members already fully vaccinated or those who already received a gift card from LDH for receiving the COVID vaccine are not eligible.

Members can choose where to receive their vaccination from any vaccine administration location. Gift card distribution will be handled by the five Medicaid MCOs. Cards are limited to one per member. Please post or share the attached flyer with the Medicaid members you serve. Information is also available at the web site at [www.ldh.la.gov/vaccinegiftcard](http://www.ldh.la.gov/vaccinegiftcard).

## The COVID-19 Vaccine is Now Recommended to Children Ages 6 Months and Older

Based on the rigorous scientific review of the latest data by the U.S. Food and Drug Administration (FDA), the Louisiana Department of Health and Centers for Disease Control and Prevention (CDC) recommend all children ages 6 months and up are now eligible for free vaccination against COVID-19. The COVID-19 vaccine will help to protect the children and their families.

Providers may find helpful information at <https://ldh.la.gov/covidvaccine-for-providers> and share information with their patients from the resources below:

[TOOLKIT: Digital Media Toolkit for Parents](#)

[TOOLKIT: Digital Media Toolkit for Partners](#)

[NEW POSTER for Healthcare Providers](#)

[NEW Q&A ONE PAGER: LDH Guidance for Children Ages 6 months and up](#)

Louisiana's COVID-19 Support Hotline is available at 855-453-0774.

## Expanded Dental Services for Adults Enrolled in NOW, ROW, and Supports Waivers

Beginning July 1st, adult beneficiaries enrolled in the New Opportunities, Residential Options and Supports Waivers will be eligible for additional dental services. These services include: diagnostic services, preventive services, restorative services, endodontics, periodontics, prosthodontics, oral and maxillofacial surgery, orthodontics, and emergency care. Benefits will be provided through a beneficiary's existing dental plan, DentaQuest or MCNA. Beneficiaries may reach DentaQuest at 1-800-685-0143 and MCNA at 1-855-702-6262. Please send questions to Kevin Guillory ([kevin.guillory@la.gov](mailto:kevin.guillory@la.gov)).

## I/DD Dental Coverage Expansion

Beginning July 1, 2022, individuals ages 21 and older with Intellectual/Developmental Disabilities (I/DD) who are enrolled in the New Opportunities Waiver, Residential Options Waiver or the Supports Waiver are eligible for comprehensive Medicaid coverage for dental care.

Many states have found that investing in preventive dental care for Medicaid enrollees saves public dollars on a net cost basis by preventing emergency department visits and expensive, complicated treatments and hospitalizations arising from neglect of oral health.

Comprehensive Medicaid coverage for dental care includes coverage for dental and oral health services like diagnostic services, preventive services, restorative services, endodontics, periodontics, prosthodontics, oral and maxillofacial surgery, orthodontics, and emergency care.

Act 450 of the 2021 Regular Session was signed into law by Governor John Bel Edwards on June 23, 2021. The Act provides for the coverage of comprehensive dental care for adults 21 years of age and older with developmental or intellectual disabilities who are enrolled in the New Opportunities Waiver, Residential Options Waiver or the Supports Waiver. Over 12,000 people are expected to gain access to the new dental coverage.

## Louisiana Public University Partnership Program (PUPP)

Louisiana Medicaid is pleased to announce continuation of **Public University Partnership Program (PUPP)** for Louisiana public colleges and universities for State Fiscal Year 23.

The Louisiana Public University Partnership Program (PUPP) involves cost-sharing between the public college/university and LDH for research opportunities that will advance Louisiana Medicaid priorities. Research can consist of a new project or an expansion of existing efforts. Successful proposals will demonstrate how the findings of the project will promote the delivery of evidence-based, high-quality, accessible, and cost-effective care to Louisiana Medicaid members.

**PUPP's** next Notice of Funding Opportunity opened on May 20, 2022, with an application deadline of August 15, 2022. For more information, visit <https://ldh.la.gov/page/4201>. Any public institution of postsecondary education in Louisiana governed by the Board of Regents, the Board of Supervisors of Louisiana State University and Agricultural and Mechanical College, the Board of Supervisors of Southern University and Agricultural and Mechanical College, the Board of Supervisors for the University of Louisiana System, or the Board of Supervisors of Community and Technical Colleges that is engaged in health sciences research is eligible to apply for this funding. Private non-profit and private for-profit colleges and universities are **not** eligible for this opportunity.

## Asthma Inhaler Technique and Device Maintenance

*Jessica Dotson, PharmD, MBA*

Asthma is one of the most common chronic non-communicable diseases, affecting over 24.8 million people in the United States in 2018.<sup>1</sup> It is characterized by variable respiratory symptoms such as wheeze, shortness of breath, chest tightness and cough, and variable expiratory airflow limitations. Typically, it is associated with airway inflammation. People with asthma often have periods of worsening symptoms and worsening airway obstructions, called exacerbations, that can be fatal.<sup>2</sup> According to the Centers for Disease Control and Prevention (CDC), asthma resulted in an estimated 1.6 million emergency department (ED)

visits and 183,000 hospitalizations in the United States in 2017.<sup>1</sup> Though there are many factors associated with asthma exacerbations, one common reason is improper inhaler technique.

It is important for patients, particularly those with a chronic disease such as asthma, to be provided with education and skills training in order to appropriately manage their disease. This is most effectively achieved through a partnership between the patient and their health care providers. The Global Initiative for Asthma (GINA) guidelines list the following essential components for achieving effective disease management with asthma patients:

- Skills training to use inhaler devices effectively
- Encouraging adherence with medications, appointments and other advice, within an agreed management strategy
- Asthma information
- Training in guided self-management, with self-monitoring of symptoms or peak flow; a written asthma action plan to show how to recognize and respond to worsening asthma; and regular review by a health care provider or trained health care worker<sup>2</sup>

Several studies over the years have shown that inhaler technique errors made by patients are common, with some estimating that up to 90% of patients, irrespective of the device type used, are making some kind of technique error when using their inhaler.<sup>3</sup> Incorrect inhaler technique is associated with poor asthma control, increased risk of exacerbations and increased adverse effects. Thus, training to improve inhaler technique should be a vital component of asthma education. Checking and correcting inhaler technique with the use of a standardized checklist leads to improved asthma control in adults and older children and only takes 2-3 minutes to perform. This education should include verbal instruction, physical demonstration, and written information, with physical demonstration being an essential component for improving technique. This training is much easier when the health care provider has placebo inhalers and spacers, which can commonly be obtained by contacting the inhaler manufacturers.<sup>2</sup>

With proper training, most patients can achieve correct inhaler technique; however, studies have shown that this training falls away rapidly within a few weeks or months. This emphasizes the importance of reinforcing good inhaler technique at every opportunity, particularly for patients with poor symptom control or a history of exacerbations. In addition to physical demonstrations, multiple studies show that attaching a pictogram or a list of inhaler technique steps directly to the inhaler device can substantially increase the retention of correct technique at follow-up.<sup>2</sup>

One study by Basheti et al., randomized study participants into two groups (active and control); both groups received a “Show-and-Tell” inhaler technique counseling service while the active group also received inhaler labels highlighting their initial errors. Following the training, all patients had correct inhaler technique, but at the 3-month follow-up there was significantly less decline in inhaler technique scores for the active group than the control group. Symptom control improved significantly in both groups, but active patients were found to use less reliever medication. The authors concluded that after inhaler training, novel inhaler technique labels improve retention of correct inhaler technique skills.<sup>4</sup>

There were several proposed explanations for why this training fades so quickly:

- Patients forget with time
- Inhaler devices can be difficult to use
- Patients quickly revert back to long-standing habits after education
- Some patients with chronic conditions may choose not to follow medical advice<sup>4</sup>

### **Considerations for selecting an inhaler device**

There are various types of inhaler devices available, and, although this does provide more options for patients, it can also cause quite a lot of confusion for patients and health care providers alike. The two most frequently used inhaler types are dry powder inhalers (DPIs) and metered dose inhalers (MDIs), but within these two categories there are many different types of devices that may have slight differences in how they should be handled and used. The best

way to find the specific instructions for each individual device is to access the package insert or other resources provided by the manufacturer. Table 1 provides some of the key differences between MDIs and DPIs.

When selecting an inhaler for a patient, it is important to not only choose the optimal medication but also to consider the type of inhaler device that is used to deliver the medication. Some key factors to consider when choosing MDIs are the patient’s hand-breath coordination and grip strength/dexterity. Hand-breath coordination is required in order to simultaneously activate the device while breathing in, but this is a challenge for many patients. Grip strength and dexterity are needed to fire the inhaler, which is a major challenge for many elderly patients and those with osteoarthritis. DPIs are breath-activated and do not require the same coordination as MDIs but actuating the DPI device can be problematic for children, the elderly, and extremely breathless patients because it requires an inhalation that is fast and forceful enough to pull the medication into the lungs.<sup>5</sup>

**Table 1: Key Differences Between MDIs and DPIs<sup>6</sup> \***

Features	MDIs	DPIs
Dose Delivery	Aerosolized liquid	Fine powder
Propellant	Some use a propellant (HFA)	No propellant
Administration	Slow, deep inhalation while pressing the canister (hand-breath coordination required)	Quick, forceful inhalation (breath activated dose delivery; requires ability to inhale forcefully)
Spacer	Helpful in patients incapable of hand-breath coordination and decreases risk of thrush with inhaled corticosteroid	Cannot be used
Shake Before Use	Required for <u>most</u> products before each spray (there are exceptions)	Do not shake
Priming	Before first use and if dropped or if not used for a certain period of time	Not needed for <u>most</u> (there are exceptions)

\* Refer to individual package insert for specific information, regarding use of the device.

**Cleaning instructions for select inhaler devices**

A critical step often omitted during patient training is appropriate care and cleaning of the device. When not properly cleaned, some devices may have medication buildup leading to a blockage and, in turn, the patient may not be getting the full dose or any medication at all. Cleaning instructions and frequency can vary for each device. Cleaning for HFA inhalers should be done on a regular basis due to medication build-up around the medication spray nozzle that would affect the dose of medication that is delivered with each spray. Instruct patients to look for residue around the spray nozzle of the device. If a patient reports the inhaler is not working, assess inhaler technique first – then troubleshoot common issues, including device cleanliness. For cleaning instructions of a specific device, it is always best to refer to the current manufacturer’s instructions.

**Priming inhaler devices**

Because of the importance of accurate dosing, an essential part of inhaler use instruction includes making patients aware of priming information for the device. With rare exceptions, DPIs do not typically require priming of the device prior to use (see Table 1). In comparison, most MDIs require priming with a specific number of sprays before the first use as well as in cases where the device has been dropped or has not been used for a period of time (specific details vary depending on the device). For example, patient information for one inhaler states that four (4) sprays are required to prime the device before the first use, and one (1) priming spray is required if the device is dropped or if it is unused for more than seven (7) days. Comparatively, patient information for a different device states that three (3) priming sprays are required before the first use and again if not used for more than ten (10) days.<sup>6</sup> Just as with the cleaning instructions, specific instructions (if any) regarding priming will be found in the manufacturer information for use that is provided with each device.

In conclusion, poor inhaler technique and lack of attention to important aspects of inhaler use, such as cleaning and priming, may adversely impact asthma control. Patients should be educated by their health care providers about the importance of learning to use their inhaler properly. It is also imperative that health care professionals work together to teach patients about the specifics of their inhaler and instruct them to always ask their pharmacists if they have questions.

#### References

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2. Global Initiative for Asthma. Global strategy for asthma management and prevention, 2022. Available from: [www.ginasthma.org](http://www.ginasthma.org)
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## Louisiana Medicaid Launches Phone Campaign To Encourage Members To Update Contact Information

Louisiana Medicaid has launched a phone campaign to encourage its members to update their contact information. Automated calls will go out to members between the hours of 3 p.m. and 8 p.m. Monday through Saturday. The calls will remind members to update their phone number, mailing address and email address.

When the federal COVID-19 public health emergency ends, Medicaid will be reaching out to our members through the mail to complete renewals and to verify eligibility. In an effort to ensure we have the most current information possible for these critical communications, the Department of Health is preparing now by using multiple means to verify member contact information. It's critical that Medicaid has accurate information to be sure that members receive important notices related to their healthcare coverage.

We are alerting you to these calls so you know they are legitimate and not a scam. We anticipate that patients may ask you about these calls to verify the legitimacy. The calls are recorded messages only. There will not be a Medicaid representative on the phone and we will not be asking for any personal information. The calls will be spread out over the next four to eight weeks.

For members who receive a call, the caller ID will show Louisiana Department of Health.

Members can update their contact information anytime by visiting [mymedicaid.la.gov](http://mymedicaid.la.gov) or by emailing [mymedicaid@la.gov](mailto:mymedicaid@la.gov).

## Louisiana Developmental Screening Toolkit

As of January 1, 2021, Louisiana Medicaid providers can receive reimbursement for developmental screening, autism screening, and perinatal depression screening. [The Louisiana Department of Health's Developmental Screening Toolkit](#) was created to help clinics integrate these screening into their day-to-day practice. The toolkit consists of step-by-step information contained in webpages, instructional videos, and downloadable worksheets. It is designed to house all of the information and tools you will need to put the Louisiana Developmental Screening Guidelines into practice in one, convenient spot.



The toolkit uses a quality improvement framework, which allows providers to systematically improve the way health care is delivered to the families they serve. The information and QI framework for this toolkit is based on clinical guidelines from the American Academy of Pediatrics (AAP), other national toolkits, and lessons learned from the field. It is designed to improve efficiency, patient safety, and clinical outcomes. It can be used as an [American Board of Pediatrics MOC-4](#) project for providers who are leading the QI efforts.

Check out the Developmental Screening Toolkit at [ldh.la.gov/DevScreenToolkit](http://ldh.la.gov/DevScreenToolkit) to learn more.

## 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 Gainwell Technologies will need to complete a [temporary emergency application](#) with Medicaid's fiscal intermediary, Gainwell Technologies, 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>.

*June 28, 2022*

### **Preferred Drug List (PDL) Update**

The new PDL will be implemented July 1, 2022 and will be posted at

<https://ldh.la.gov/assets/HealthyLa/Pharmacy/PDL.pdf>.

There were no new therapeutic classes added to the PDL during the spring 2022 Pharmaceutical & Therapeutics (P&T) Committee review.

**Brand Over Generic List: PHARMACISTS – adjust your inventory accordingly**

On May 6, 2022, LDH held a virtual Pharmaceutical & Therapeutics Committee review via Zoom. The Louisiana Department of Health’s legal department authorized Pharmacy staff to host a review in lieu of an actual meeting due to the constraints of COVID-19 and the current public meeting laws. Since this was a virtual review, it was conducted without the P&T members voting. However, feedback from committee members, the public and drug manufacturers was allowed and taken into consideration.

In addition, the Pharmacy Advisory Council (PAC) members reviewed the Brand over Generic list and provided feedback as well. There are times when brand products are preferred over generics because the net price to the state is less expensive after rebate. After considering the financial and clinical impacts, as well as the feedback on the proposed recommendations, the Brand over Generic List will be as follows effective July 1, 2022:

Brand Over Generic — Spring Review 2022 Effective July 1, 2022 (highlighted drugs are new to the list)	Spring/Fall
AMITIZA (ORAL)	Spring
APRISO (ORAL)	Spring
BETHKIS (INHALATION)	Spring
COPAXONE 20 MG/ML (SUBCUTANE.) – 40mg/ml new Brand Over Generic	Spring – New strength
NATROBA (TOPICAL)	Spring
NEXIUM SUSPENSION (ORAL)	Spring
PROTONIX SUSPENSION (ORAL)	Spring
RAPAMUNE SOLUTION and TABLET (ORAL)	Spring
REVELA TABLET (ORAL)	Spring
RETIN-A CREAM (TOPICAL)	Spring
REVATIO SUSPENSION (ORAL)	Spring – New
SUBOXONE FILM (SUBLINGUAL)	Spring
ADDERALL XR	Fall
ADVAIR DISKUS (INHALATION)	Fall
AFINITOR (ORAL)	Fall
ALPHAGAN P 0.15% (OPHTHALMIC)	Fall
BANZEL TABLET AND SUSPENSION	Fall
CARBATROL (ORAL)	Fall
CIPRODEX (OTIC)	Fall
DEPAKOTE SPRINKLE (ORAL)	Fall
DIASTAT RECTAL	Fall
ELIDEL (TOPICAL)	Fall
SABRIL TABLET and POWDER PACK (ORAL)	Fall
SYMBICORT (INHALATION)	Fall
TEGRETOL XR (ORAL)	Fall
TOBRADEX SUSPENSION (OPHTHALMIC)	Fall
TRAVATAN Z (OPHTHALMIC)	Fall
TRILEPTAL SUSPENSION (ORAL)	Fall

<b>Remove Brand Over Generic Products – Spring 2022</b>	<b>Spring/Fall</b>	<b>Notes</b>
CATAPRES-TTS (TRANSDERM)	Fall	Brand and generic preferred
CHANTIX	Fall	Brand and generic preferred
FELBATOL TABLET (ORAL)	Fall	Brand and generic preferred
GEODON (INTRAMUSC)	Fall	Brand and generic preferred
IMITREX (NASAL)	Spring	Brand and generic preferred
LIALDA (ORAL)—considered but not adding	Spring	Brand and generic NP
SAPHRIS	Fall	Brand and generic NP
SUTENT	Fall	Brand and generic preferred
TECFIDERA and TECFIDERA STARTER PACK (ORAL)	Spring	Generic preferred, brand NP
ZAVESCA	Fall	Brand and generic NP

**Synagis (palivizumab) Season**

Effective July 1, 2022, the Louisiana Medicaid Fee for Service (FFS) Pharmacy Program and Managed Care Organizations (MCO) will expand palivizumab (Synagis®) coverage. For Louisiana, the typical respiratory syncytial virus (RSV) season begins November 1 and lasts through March 31. Based on expert opinion and Centers for Disease Control (CDC) National Respiratory and Enteric Virus Surveillance System (NREVSS) data, a decision was made to allow palivizumab dosing outside the usual RSV season beginning July 1, 2022. The expanded coverage will include pharmacy claims for palivizumab (Synagis®) submitted at Point of Sale (POS) during the off-season (July 2022 - October 2022) as well as the RSV Season (November 2022 - March 2023). The coverage applies to pharmacy claims submitted to FFS and Louisiana Medicaid MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Louisiana Healthcare Connections and United Healthcare).

**COVID-19 Vaccine Update**

Implementing on or before July 5, 2022 with an effective date of June 20, 2022, COVID-19 vaccine coverage as a pharmacy benefit will be updated to include recipients 3 years and older for the Pfizer and Moderna vaccines. The Food and Drug Administration (FDA) and Centers for Disease Control and Prevention (CDC) have authorized these vaccines down to 6 months of age, but due to the Public Readiness and Emergency Preparedness (PREP) Act restrictions on pharmacist administration pharmacy claims will only be reimbursed for recipients 3 years and older.

Effective July 1, 2022, the Louisiana Medicaid Fee for Service Pharmacy Program and Managed Care Organizations will update the COVID-19 vaccine administration fee. The current administration fee per injection of the COVID-19 vaccine will be changed from \$37.08 to \$36.78 to align with the Medicare rate and Louisiana Medicaid Professional Services. No dispensing fee shall be reimbursed, only an administration fee. At home, administration of the COVID-19 vaccine for any dose will be changed from \$32.60 to \$32.98 for a total reimbursement of \$69.76 (\$32.98 + \$36.78) or billed charges, whichever is the lesser amount.

**Provider Enrollment Portal**

**Deadline to submit an application to Medicaid Provider Portal – June 30, 2022. Enroll Now!**

This message serves as a reminder for all Medicaid providers including pharmacies, immunizing pharmacists and prescribing providers. All providers that file claims with Louisiana Medicaid must enroll in Medicaid’s new web-based provider enrollment portal. Federal laws enforced by CMS, including the Affordable Care Act and the 21<sup>st</sup> Century Cures Act, require states to screen and enroll all providers.

The enrollment portal **must be used by all Medicaid providers**. This includes Fee for Service, managed care organization only, Dental Benefits Program Manager (DBPM), Coordinated System of Care (CSoc) providers, pharmacies, immunizing pharmacists and prescribing providers.

**The deadline for providers to submit an application to the enrollment portal is June 30, 2022.** Any existing Medicaid providers that does not submit an application to initiate the screening process through the new portal will have their claims denied.

Providers can check their enrollment status with the new [Portal Provider Enrollment Lookup Tool](#), available at [www.lamedicaid.com](http://www.lamedicaid.com). Providers can search for completed enrollments using at least one of several data points – NPI, provider name, provider type, specialty, address, city and state or zip code. Information is updated daily. Results will list which providers have a 100% completed and fully processed enrollment. If a provider has submitted their enrollment but does not see their name listed, their enrollment may still be in process. Providers should allow 15 business days from their submission for their enrollment to be completed. For any enrollment not completed in that time, the provider should reach out to Gainwell Technologies at [louisianaprovenroll@gainwelltechnologies.com](mailto:louisianaprovenroll@gainwelltechnologies.com) or by calling 1-833-641-2140 for a status update and any next steps needed to complete the process.

The enrollment portal is accessible through Medicaid’s fiscal intermediary website at [www.lamedicaid.com](http://www.lamedicaid.com). Additional guidance to help providers navigate enrollment can be found at [www.ldh.la.gov/medicaidproviderenrollment](http://www.ldh.la.gov/medicaidproviderenrollment). The site includes links to FAQs, manuals and training webinars, as well as contact information for providers with questions about enrollment.

If you have further questions, please email [LouisianaProvEnroll@gainwelltechnologies.com](mailto:LouisianaProvEnroll@gainwelltechnologies.com) or call 1- 833-641-2140, Monday – Friday between the hours of 8 a.m. and 5 p.m. Central time.

## Remittance Advice Corner

### Attention Louisiana Medicaid Providers:

It has been determined that certain paid FFS pharmacy claims (Flu vaccinations and Prevnar 20) in 2021-2022 were incorrectly reimbursed by Louisiana Medicaid. Therefore Manual Adjustments are being processed and will appear on the 5/10 RA. The ICN range is 2121288000001 thru 2121288000140.

### 2022 HCPCS and Physician-Administered Drug Reimbursement Updates

The Louisiana Medicaid fee-for-service (FFS) professional services files have been updated to reflect the new and deleted Healthcare Common Procedure Coding System (HCPCS) codes effective for dates of service beginning on January 1, 2022. Providers will begin to see these changes on the remittance advice of April 19, 2022. Claims that have been denied due to use of the new 2022 codes prior to their addition to the claims processing system will be systematically recycled with no action required by providers.

Effective for dates of service beginning on January 1, 2022, Louisiana Medicaid updated the reimbursement rates on the FFS file for physician-administered drugs and payable vaccines for professional services. Claims previously submitted for these drugs or vaccines with dates of service on or after January 1, 2022 will be systematically adjusted to ensure proper payment. No action is required by the provider.

For questions related to this information as it pertains to fee-for-service Medicaid claims processing, please contact Gainwell Technologies Provider Services at (800) 473-2783 or (225) 924-5040.

Questions regarding managed care claims should be directed to the appropriate managed care organization.



## Medicaid Public Notice and Comment Procedure

As of Aug. 1, 2019, a public notice and comment period is required before certain policies and procedures are adopted. Drafts will be published on LDH's website to allow for public comment, as per HB 434 of the 2019 Regular Legislative Session. This requirement applies to managed care policies and procedures, systems guidance impacting edits and payment, and Medicaid provider manuals.

In compliance with R.S. 46:460.51(15), 460.53, and 460.54, this procedure provides for a defined term, a public notice requirement, implementation of a policy for the adoption of policies and procedures, and for related matters. Public Comments for the listed policies and procedures can be left at the link below.

- Louisiana Medicaid (Title XIX) State Plan and Amendments;
- Louisiana Medicaid Administrative Rulemaking Activity;
- Medicaid Provider Manuals;
- Contract Amendments;
- Managed Care Policies & Procedures; and
- Demonstrations and Waivers.

<http://www.ldh.la.gov/index.cfm/page/3616>

### Manual Chapter Revision Log

Manual Chapter	Section(s)	Date of Revision(s)
Adult Day Health Care (ADHC) <a href="#">Adult Day Health Care (ADHC)</a>	<ul style="list-style-type: none"> <li>• Section 9.0 – Overview</li> <li>• Section 9.1 – Covered Services</li> <li>• Section 9.2 – Beneficiary Requirements</li> <li>• Section 9.3 – Beneficiary Rights and Responsibilities</li> <li>• Section 9.4 – Service Access and Authorization</li> <li>• Section 9.5 – Provider Requirements</li> <li>• Section 9.6 – Record Keeping</li> <li>• Section 9.7 – Reimbursement</li> <li>• Section 9.8 – Program Oversight and Review</li> <li>• Section 9.9 – Incidents, Accidents, and Complaints</li> <li>• Section 9.10 – Support Coordination</li> <li>• Appendix B – Forms/Links</li> <li>• Appendix C – Billing Codes</li> <li>• Appendix E – Claims Related Information</li> </ul> Appendix F – Concurrent Services	06/22/22
Behavioral Health Services <a href="#">Behavioral Health Services</a>	<ul style="list-style-type: none"> <li>• Section 2.3 – Outpatient Services – Crisis Response Services for Adults</li> </ul> Appendix D – Approved Curriculum and Approved Equivalency Standards	06/27/22
Hospice <a href="#">Hospice</a>	<ul style="list-style-type: none"> <li>• Section 24.3 – Covered Services</li> <li>• Section 24.5 – Provider Requirements</li> </ul> Section 24.10 – Claims Related Information	06/27/22

## Manual Chapter Revision Log, cont.

Manual Chapter	Section(s)	Date of Revision(s)
Pharmacy Benefits Management Services  <a href="#">Pharmacy Benefits Management Services</a>	Section 37.1 – Covered Services, Limitations, and Exclusions	06/27/22
Professional Services  <a href="#">Professional Services</a>	<ul style="list-style-type: none"> <li style="text-align: center;">• Section 5.1 – Covered Services – Allergy Testing and Immunotherapy</li> </ul> Section 5.1 – Covered Services – Telemedicine/Telehealth	06/06/22  06/27/22

### For Information or Assistance, Call Us!

Provider Relations	1-800-473-2783 (225) 294-5040 <a href="#">Medicaid Provider Website</a>	General Medicaid Eligibility Hotline	1-888-342-6207
<b>Prior Authorization:</b> Home Health/EPSDT – PCS Dental	1-800-807-1320 1-855-702-6262 <a href="#">MCNA Provider Portal</a>	MMIS Claims Processing Resolution Unit	(225) 342-3855  <a href="#">MMIS Claims Reimbursement</a>
DME & All Other	1-800-488-6334 (225) 928-5263	MMIS/Recipient Retroactive Reimbursement	(225) 342-1739 1-866-640-3905  <a href="#">MMIS Claims Reimbursement</a>
Hospital Pre-Certification	1-800-877-0666		
REVS Line	1-800-776-6323 (225) 216-(REVS)7387 <a href="#">REVS Website</a>	Medicare Savings	1-888-544-7996  <a href="#">Medicare Provider Website</a>
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 <a href="#">Medicaid Pharmacy Benefits</a>  1-800-488-2917  <a href="#">Report Medicaid Fraud</a>