

Sexually Transmitted Infections Treatment Guidelines, 2021

Compiled by:
Office of Outcomes Research and Evaluation
College of Pharmacy
University of Louisiana at Monroe

The Centers for Disease Control and Prevention (CDC) recently released *Sexually Transmitted Infections Treatment Guidelines, 2021*. This document provides current evidence-based diagnostic, management, and treatment recommendations, and serves as a source of clinical guidance for managing sexually transmitted infections (STIs). Physicians and other healthcare providers have a crucial role in preventing and treating STIs. These guidelines are intended to assist with that effort. Although the guidelines emphasize treatment, prevention strategies and diagnostic recommendations are also discussed. The 2021 report updates CDC's *Sexually Transmitted Diseases Treatment Guidelines, 2015* and should be regarded as a source of clinical guidance rather than prescriptive standards. Healthcare providers should always consider the clinical circumstances of each person in the context of local disease prevalence.

Table of Contents

Sexually Transmitted Infections Treatment Guidelines, 2021	1
New Medicaid Eligibility Group Covers COVID-19 Testing for Uninsured Patients	4
Louisiana Medicaid Provider Enrollment Portal Update	4
Pharmacy Facts	5
Remittance Advice Corner	6
Medicaid Public Notice and Comment Procedure	6
Manual Chapter Revision Log	7
For Information or Assistance	10

Sexually transmitted infections (STIs) are a significant public health problem in the United States, even though they are largely preventable. STIs cause many harmful, often irreversible, clinical complications. Some of these include reproductive health problems, fetal and perinatal health problems, cancer, and facilitation of the sexual transmission of HIV infections.

The CDC's latest estimates indicate that 20% of Americans had an STI on any given day in 2018, totaling nearly 68 million infections and resulting in nearly \$16 billion in medical costs. The CDC also stated that youth ages 15 to 24 account for almost half of all new sexually transmitted infections occurring in the U.S. Recently published data from the CDC show that reported annual cases of STIs in the U.S. continued to climb in 2019, reaching an all-time high for the sixth consecutive year. In Louisiana in 2019, there was a combined total of 49,631 reported cases of chlamydia, gonorrhea, and primary / secondary syphilis. This number ranks Louisiana as third in the U.S. for chlamydia, fifth for gonorrhea, and ninth for primary / secondary syphilis.

Many cases of STIs are undiagnosed and, some, such as HPV and genital herpes, are not reported to the CDC. For this reason, the reported cases most likely represent only a fraction of the true burden of STIs in the U.S. Untreated STIs can result in serious long-term health consequences, especially for adolescent girls and young women. CDC estimates that undiagnosed and untreated STIs cause at least 24,000 women in the U.S. each year to become infertile. Evidence-based prevention, diagnostic, and treatment recommendations are critical to STI control efforts now more than ever.



Five Major Strategies for Prevention and Control of STIs for Providers

- *Perform an accurate behavioral and biologic risk assessment, followed by educating / counseling any patient who is at risk about ways to avoid STIs through changes in sexual behaviors and use of recommended prevention services.*
 - One of the components of the primary prevention of STIs includes assessment of behavioral risk (i.e., assessing the sexual behaviors that can place persons at risk for infection). During the clinical encounter with a patient, the healthcare provider should routinely obtain sexual history and address risk reduction. Healthcare providers should exhibit respect, compassion, and a nonjudgmental attitude toward patients during this process. The “Five P’s” approach is one method that can be used to obtain a sexual history. Five areas that should be openly discussed with patients include partners, practices, protection from STIs, past history of STIs, and pregnancy intention. Guidance for obtaining a sexual history is available at [A Guide to Taking a Sexual History \(cdc.gov\)](#).
 - Primary prevention of STIs also includes assessment of biologic risk (i.e., testing for risk markers for STI and HIV acquisition or transmission). A comprehensive STI and HIV risk assessment should include STI screening as recommended because STIs are biologic markers of risk, particularly for HIV acquisition and transmission among certain patient groups.
 - After assessing risk, healthcare providers should encourage risk reduction by offering prevention counseling. More information on effective interventions for prevention counseling is available at [Effective STD Interventions \(cdc.gov\)](#).
- *Recommend pre-exposure vaccination for vaccine preventable STIs.*
 - Pre-exposure vaccination is one of the most effective methods for preventing transmission of human papillomavirus (HPV), hepatitis A virus (HAV), and hepatitis B virus (HBV), all of which can be sexually transmitted.
 - HPV vaccination is recommended routinely for males and females aged 11 or 12 years and can be administered beginning at age 9 years.
 - Hepatitis B vaccination is recommended for all unvaccinated, uninfected persons who are sexually active with more than one partner or are being evaluated or treated for an STI.
 - Hepatitis A and B vaccines are recommended for selected patients, such as patients with chronic liver disease, those who inject drugs, and other specified patient groups.
 - The CDC Advisory Committee on Immunization Practices [ACIP Vaccine-Specific Recommendations | CDC](#) offers additional information about these vaccines.
- *Identify asymptotically infected persons and persons with symptoms associated with STIs.*
 - In most clinical settings, STI screening is an essential and underused component of an STI and HIV risk assessment.
 - Persons seeking treatment or evaluation for a particular STI should be screened for HIV and other STIs as indicated by community prevalence and individual risk factors.
 - Persons should be informed about all the tests for STIs they are receiving and notified about tests for common STIs (e.g. genital herpes, trichomoniasis, *Mycoplasma genitalium*, and HPV) that are available but not being performed and reasons why they are not always indicated.
 - Patients should be informed of their test results and recommendations for future testing.
 - Screening recommendations for STIs vary according to the specific infection and patient characteristics. For screening recommendations, visit [STI Screening Recommendations \(cdc.gov\)](#).
- *Diagnose, treat, counsel, and follow up with infected persons.*
 - Treatment of STIs is specific to the infections identified and the extent of the disease. For more information regarding treatment of STIs, visit [Summary of CDC STI Treatment Guidelines, 2021 \(cdc.gov\)](#).
 - Reinfection is common and healthcare providers should encourage their patients to return for follow-up testing as directed by the CDC treatment guidelines.

- Evaluate, treat, and counsel sex partners of persons who are infected with an STI.
 - “Partner services” refers to the continuity of clinical evaluation, counseling, diagnostic testing, and treatment designed to increase treatment for partners of the infected patient and to reduce transmission among sexual networks.
 - Partner services must be comprehensive, including health departments, medical providers, and patients themselves.
 - The term “public health partner services” refers to efforts by public health departments to identify the sex partners of infected persons to ensure their medical evaluation and treatment.
 - The types and comprehensiveness of public health partner services and the specific STIs for which they are offered vary by public health agency, their resources, and the geographic prevalence of STIs.

Provider Resources for STIs

- *CDC Sexually Transmitted Infections Treatment Guidelines, 2021* Resources
 - Full-text print version of the treatment guidelines is available at [STI Treatment Guidelines, 2021](#).
 - To browse the guidelines online, visit [STI Treatment Guidelines, 2021 - Table of Contents](#).
 - High-quality printable copies of an at-a-glance summary wall chart of recommended STI regimens and a healthcare provider pocket guide are available at [Provider Resources - CDC Sexually Transmitted Infections Treatment Guidelines, 2021](#).
 - Recommendations for providing quality STD clinical services (STD QCS), which complement the STI treatment guidelines, focusing on managing clinical operations are available on the [CDC STD QCS website](#).
 - An updated STI treatment guidelines mobile app will soon be available at [CDC STI Mobile App](#).
- Training and technical assistance are available through the [National Network of STD Clinical Prevention Training Centers](#).
- STD clinical consultation services are available through the [STD Clinical Consultation Network](#).
- Free continuing education credits (CME and CNE) are available through the [National STD Curriculum](#).

Patient Education Resources for STIs

[Sexually Transmitted Diseases - Tools & Materials \(cdc.gov\)](#)
[Medline Plus - Sexually Transmitted Diseases](#)
[Office on Women's Health - Sexually Transmitted Infections](#)

References

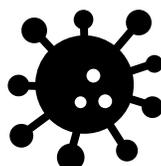
Centers for Disease Control and Prevention. (2021). *Sexually Transmitted Infections, Prevalence, Incidence, and Cost Estimates in the United States*. [Incidence, Prevalence, and Cost of Sexually Transmitted Infections in the United States \(cdc.gov\)](#)

Centers for Disease Control and Prevention. (2019). *Tables – Sexually Transmitted Disease Surveillance, 2019*. <https://www.cdc.gov/std/statistics/2019/tables.htm>

Centers for Disease Control and Prevention. (2019). *The State of STDs in the United States, 2019*. <https://www.cdc.gov/std/statistics/2019/TheStateOfSTDs-2019-national.pdf>

U.S. Office of Disease Prevention and Health Promotion. (2021). *Healthy People 2020*. <https://www.healthypeople.gov/2020/topics-objectives/topic/sexually-transmitted-diseases>

Workowski K, Bachmann L, Chan P, et al. *Sexually Transmitted Infections Treatment Guidelines, 2021*. MMWR Recomm Rep 2021;70 (4). Available from [Sexually Transmitted Infections Treatment Guidelines, 2021 \(cdc.gov\)](#)



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.

Louisiana Medicaid Provider Enrollment Portal Update

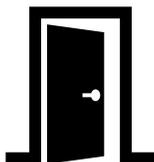
Louisiana Medicaid Provider Enrollment Portal Launched July 26, 2021

Louisiana Medicaid launched the new Provider Enrollment Portal on July 26, 2021. The enrollment portal was designed to meet a Centers for Medicare and Medicaid Services (CMS) requirement and must be used by all Medicaid providers. This includes current managed care organization (MCO) providers, Dental Benefits Program Manager (DBPM) providers, Coordinated System of Care (CSoc) providers and fee-for-service providers.

The state's fiscal intermediary and current provider enrollment vendor, Gainwell Technologies, will send providers an invitation to the mailing address on file when it is time for them to visit the portal and complete the enrollment process. Not all invitations will be mailed at the same time. MCO-only providers should receive their invitation to use the portal between August 2, 2021 and September 6, 2021. Providers that only participate in fee-for-service should receive their invitation between September 1, 2021 and September 30, 2021. Providers should wait until they receive their invitation to access the portal.

If providers encounter any issues or do not receive their portal invitation within the specified timeframe, they should contact the call center at (833) 641-2140, Monday – Friday between the hours of 8 a.m. and 5 p.m. CST.

Providers can find additional information in [Informational Bulletin 21-5: New Louisiana Provider Enrollment Portal](#) and on the [provider enrollment web page](#). Providers can also submit questions through the web page.



PHARMACY FACTS

Program Updates from Louisiana Medicaid

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

August 20, 2021

COVID-19 Update

In response to the COVID-19 pandemic and Public Health Emergency (PHE), and more recently the COVID-19 delta variant spread, the Louisiana Medicaid pharmacy program has updated coverage for COVID-19 vaccines. Currently, the Pfizer, Moderna, and Johnson & Johnson (Janssen) COVID-19 vaccines are covered by the Louisiana Medicaid pharmacy program at no cost to the beneficiary. COVID vaccine coverage is updated to include coverage of a third dose of the Pfizer and Moderna vaccines for immunocompromised individuals (Medical benefit implemented August 12, 2021; Pharmacy benefit implementation planned for September 1, 2021). Also, COVID19 vaccine coverage is expanded to include reimbursement for pharmacy claims submitted for at-home administration of the COVID-19 vaccine (Medical benefit implemented June 8, 2021; Pharmacy benefit implementation planned for September 1, 2021). An updated provider notice with detailed billing instructions will be posted soon.

Respiratory Syncytial Virus (RSV) and Palivizumab (Synagis®) Coverage

Based on expert opinion and Centers for Disease Control (CDC) National Respiratory and Enteric Virus Surveillance System (NREVSS) data, on July 15, 2021, the Louisiana Medicaid pharmacy program continued coverage of palivizumab (Synagis®) outside the usual respiratory syncytial virus (RSV) season. Palivizumab is indicated for the prevention of serious lower respiratory tract infection caused by RSV in selected infants and young children at high risk of RSV disease. All prescriptions for palivizumab require clinical authorization. The updated Palivizumab Clinical Authorization Form and criteria are posted on the Single Preferred Drug List (PDL). The Single PDL can be found at the following link: <https://ldh.la.gov/assets/HealthyLa/Pharmacy/PDL.pdf>.

Influenza Vaccines

Effective September 15, 2021, the Louisiana Medicaid pharmacy program will reimburse for the influenza vaccine (2021-2022 Flu Season) when administered by a vaccinating pharmacist.



Remittance Advice Corner

Attention Louisiana Medicaid Providers

Due to a Pharmacy POS systems space failure, it has been determined that certain pharmacy claims submitted on 9/9/2020 were duplicate paid. Systems created manual voids to correct this condition and these manual claims can be identified by EOB 999 (Administrative Correction).

All Providers on Medicare Crossover Claims Receiving 444 Invalid Service Provider Denials

For a portion of claims receiving error code 444, the denial was erroneous due to the system evaluating the provider type and specialty on the crossover claim instead of just the enrollment status. Additionally, claims that were submitted with a blank provider field were also denied with error code 444 on Medicare crossovers in error. Gainwell has adjusted the application of the 444 error code and all claims originally erroneously denying will be systematically recycled and paid the week of July 12, 2021. Providers with denied claims for error code 444 do not need to resubmit the claim for payment, payment will be automatically issued for those eligible. Medicare crossover claims will continue to be denied if any of the providers listed on the claim, including the attending provider, are not enrolled. Further information can be found at LAMEDICAID.COM.

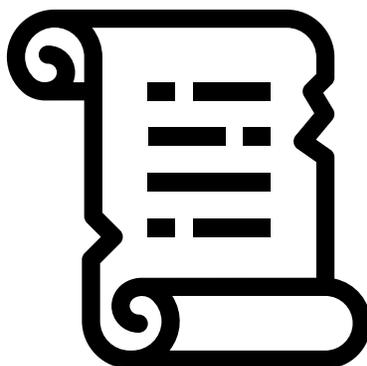
Medicaid Public Notice and Comment Procedure

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)
Behavioral Health Services Behavioral Health Services	2.3 – Outpatient Services – Outpatient Therapy by Licensed Practitioners	08/23/21
Children’s Choice Waiver Children’s Choice	<ul style="list-style-type: none"> • 14. Table of Contents • 14.0 - Overview • 14.1 - Covered Services • 14.2 - Beneficiary Requirements • 14.3 - Rights and Responsibilities • 14.4 - Service Access and Authorization • 14.5 - Provider Requirements • 14.6 - Staffing Requirements • 14.7 - Record Keeping • 14.8 - Reimbursement • 14.10 - Incidents, Accidents, and Complaints • 14.11 - Support Coordination • 14.12 - Self-Direction Option • Appendix A - Developmental Disability Law • Appendix B - Glossary • Appendix C - Contact Information • Appendix D - Forms • Appendix F - Claims Filing 	07/28/2
Community Choice Waiver Community Choice Waiver	Appendix E - Glossary	08/11/21
Home Health Home Health	<ul style="list-style-type: none"> • Table of Contents • Section 23.0 - Overview • Section 23.1 - Description of Services • Appendix D - Contact/Referral Information 	08/18/21

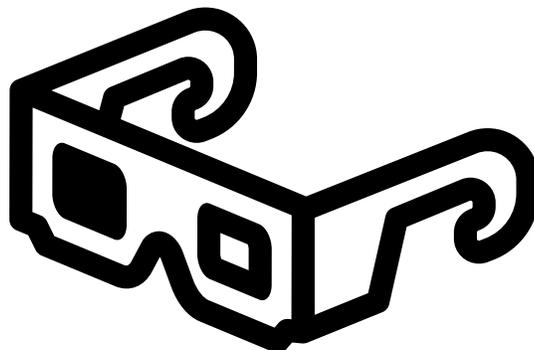


Manual Chapter Revision Log, cont.

Manual Chapter	Section(s)	Date of Revision(s)
Hospice Hospice	<ul style="list-style-type: none"> • 24. - Table of Contents • 24.0 - Overview • 24.1 - Beneficiary Requirements • 24.2 - Election of Hospice • 24.3 - Covered Services • 24.5 - Provider Requirements • 24.6 - Prior Authorization • 24.7 - Hospice Revocation and Discharge • 24.8 - Record Keeping • 24.9 - Reimbursement • 24.10 - Claims Related Information • 24.11 - Program Monitoring • 24.14 - Acronyms/Definition/Terms • Appendix A - Beneficiary Notice of Election/Revocation/Discharge/Transfer • Appendix B - Certificate of Terminal Illness • Appendix D - Contact/Referral Information 	08/25/21
Pediatric Day Health Care Pediatric Day Health Care	<ul style="list-style-type: none"> • 45. - Physician's Order • 45.2 - Beneficiary Criteria • 45.3 - Provider Requirements • 45.4 - Staffing Requirements • 45.6 - Reimbursement • 45.7 - Plan of Care • Appendix D - Contact/Referral Information 	07/29/21
Personal Care Services Personal Care Services	<ul style="list-style-type: none"> • 30.7 - Service Delivery • 30.8 - Record Keeping 	08/24/21 07/27/21
Pharmacy Benefits Management Services Pharmacy Benefits Management Services	<ul style="list-style-type: none"> • 37. - Table of Contents • 37.1 - Covered Services • 37.0 - Overview • 37.2 - Provider Requirements and Participation Guidelines • 37.3 - Reimbursement for Pharmacy Services • 37.4 - Managed Care Applicability • 37.5.2 - Claims Related Information • 37.5.3 - Glossary • 37.5.6 - Prescribers • 37.5.7 - Medicare Prescription Drug Coverage • 37.5.8 - Claims Submission and Processing Payments • 37.5.10 - Total Parental Nutrition • 37.5.12 - Patient Counseling and Drug Utilization Review • 37.5.13 - Lock-In Program 	08/12/21

Manual Chapter Revision Log, cont.

Manual Chapter	Section(s)	Date of Revision(s)
Portable X-Ray Portable X-Ray	<ul style="list-style-type: none"> • 36. Table of Contents • 36.0 Overview • 36.1 Covered Services • 36.2 Beneficiary Requirements • 36.3 Provider Requirements 	08/26/21
Program of All-Inclusive Care for the Elderly PACE	<ul style="list-style-type: none"> • Table of Contents • 35.1 - Services • 35.2 - Beneficiary Requirements • 35.3 - Beneficiary Rights and Responsibilities • 35.4 - Service Access and Authorization • 35.5 - Provider Requirements • 35.8 - Reimbursement • Appendix A - Glossary 	08/11/21
Professional Services Professional Services	<ul style="list-style-type: none"> • 5.1 – Covered Services – Hospice 	08/25/21
Vision/Eyewear Services Vision Eyewear Services	<ul style="list-style-type: none"> • 46. -Table of Contents • 46.0 - Overview • 46.1 - Covered Services • 46.2 - Beneficiary Requirements • 46.3 - Provider Requirements • 46.4 - Prior Authorization • 46.5 - Reimbursement • 46.6 - Record Keeping • Appendix C - Claims Filing • Appendix D - Contact/Referral Information 	08/06/21



For Information or Assistance, Call Us!

Provider Relations	1-800-473-2783 (225) 294-5040 Medicaid Provider Website	General Medicaid Eligibility Hotline	1-888-342-6207
Prior Authorization: Home Health/EPSDT – PCS Dental	1-800-807-1320 1-855-702-6262 MCNA Provider Portal	MMIS Claims Processing Resolution Unit MMIS Claims Reimbursement	(225) 342-3855
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		MMIS Claims Reimbursement
REVS Line	1-800-776-6323 (225) 216-(REVS)7387 REVS Website	Medicare Savings	1-888-544-7996 Medicare Provider Website
Point of Sale Help Desk	1-800-648-0790 (225) 216-6381	For Hearing Impaired Pharmacy Hotline	1-877-544-9544 1-800-437-9101 Medicaid Pharmacy Benefits
		Medicaid Fraud Hotline	1-800-488-2917 Report Medicaid Fraud

