

Respiratory Syncytial Virus (RSV) Fast Facts

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Each year respiratory syncytial virus (RSV) in the United States leads to approximately¹:

- 2.1 million outpatient visits for children less than 5 years of age.
- 58,000 hospitalizations for children less than 5 years of age.
- 177,000 hospitalizations for adults 65 years of age and older.
- 14,000 deaths for adults 65 years of age and older.

RSV Season²

- Louisiana (LA) RSV season begins on November 1st and lasts through March 31st.
- The Centers for Disease Control and Prevention (CDC) defines the RSV season onset as the first of 2 consecutive weeks during which the weekly percentage of all specimens testing positive for RSV antigen is $\geq 10\%$. According to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS) RSV antigen testing for Louisiana, the onset of the 2020-2021 RSV season in LA was delayed until April with a peak in early July.
- Louisiana is prepared for a typical 2021-2022 RSV season from November 1st through March 31st; however, no data can predict if last season's shift in onset is going to change current RSV season timing.

Table of Contents

Respiratory Syncytial Virus (RSV) Fast Facts	1
New Medicaid Eligibility Group Covers COVID-19 Testing for Uninsured Patients	3
Enrollment in New Provider Portal Required for All Medicaid Providers	4
Pharmacy Facts	4
Remittance Advice Corner	5
Medicaid Public Notice and Comment Procedure	6
Manual Chapter Revision Log	7
For Information or Assistance	10

Clinical Description and Diagnosis³

	Infants and Young Children	Adults
Most Common Respiratory Illness Caused by RSV Infection	Cold-like illness	Cold-like illness
Other Respiratory Illness Caused by RSV Infection	Lower respiratory infection like bronchiolitis or pneumonia	Lower respiratory infection like pneumonia

	Infants and Young Children	Adults
Patients Considered High Risk for Severe Illness	<ul style="list-style-type: none"> • Premature infants • Very young infants, especially those ≤ 6 months old • Children < 2 years old with chronic lung disease or congenital heart disease • Children with suppressed immune systems • Children with neuromuscular disorders, including those who have difficulty swallowing or clearing mucus secretions 	<p>≥ 65 years old Chronic lung or heart disease Weakened immune system</p>
Symptoms	<p><i>Infants and young children:</i> Initial symptoms – rhinorrhea and decreased appetite One to three days later – cough soon followed by sneezing, fever, and wheezing</p> <p><i>Very young infants:</i> Irritability, decreased activity, and/or apnea [These may be the only symptoms of RSV infection in this age group.]</p>	<p>Usually mild symptoms or no symptoms Rhinorrhea, pharyngitis, cough, headache, fatigue, and fever Duration usually less than 5 days</p>

Transmission⁴

- RSV can spread from the following:
 - Person-to-person contact when virus droplets from a cough or sneeze enter the eyes, nose, or mouth
 - Person-to-person direct contact with the virus through things like kissing
 - Contact with a hard surface containing the virus, which can survive on hard surfaces for many hours.
- Infected patients are contagious for 3-8 days in most cases. However, infants and patients with weakened immune systems can be contagious for up to 4 weeks even after symptoms have resolved.
- Counseling information for preventing the spread includes:
 - Cover cough/sneeze with tissue or upper shirt sleeve, not hands.
 - Wash hands with soap and water for at least 20 seconds.
 - Avoid close contact, such as shaking hands and kissing.
 - Continually disinfect frequently touched surfaces, like doorknobs and mobile devices.

Clinical Lab Testing³

- Testing is required due to non-specific symptoms overlapping with other respiratory infections.
- Use the following test with upper or lower respiratory specimens to confirm RSV infection:
 - Real-time reverse transcriptase-polymerase chain reaction (rRT-PCR)
 - More sensitive than culture and antigen tests.
 - Antigen testing
 - Highly sensitive in infants and young children (80-90%), but NOT sensitive in older children to adults.

Prophylaxis³

- Palivizumab is a monoclonal antibody given as an intramuscular injection and is indicated for the prevention of serious lower respiratory tract disease caused by RSV in certain pediatric patients.
- The American Academy of Pediatrics (AAP) recommends that palivizumab be administered monthly during the RSV season to those who would be likely to benefit from immunoprophylaxis based on certain factors, such as gestational age, certain underlying medical conditions, current medication requirements, and chronological age at the beginning of the RSV season.
- Inform patient caregivers of the signs and symptoms of potential hypersensitivity reactions to palivizumab and advise the caregiver to seek medical attention immediately if the patient experiences a severe hypersensitivity reaction to palivizumab treatment.
- LA Medicaid reimbursement criteria for palivizumab can be found at <https://www.lamedicaid.com/Provweb1/Pharmacy/Palivizumab.htm>.

Treatment⁶

- Treatment consists of primarily supportive care.
- Healthcare professionals should counsel patients to do the following:
 - Treat fever/pain with over-the-counter acetaminophen or ibuprofen.
 - Drink plenty of fluids.
 - Control cough with age-appropriate cough suppressants.

References:

Centers for Disease Control and Prevention (CDC). Respiratory Syncytial Virus Infection (RSV): Trends and Surveillance. <https://www.cdc.gov/rsv/research/us-surveillance.html>. Accessed August 26, 2021.¹

Centers for Disease Control and Prevention. The National Respiratory and Enteric Virus Surveillance System (NREVSS): State Trends. <https://www.cdc.gov/surveillance/nrevss/rsv/state.html#LA> Accessed September 16, 2021.²

Centers for Disease Control and Prevention (CDC). Respiratory Syncytial Virus Infection (RSV): For Healthcare Providers. <https://www.cdc.gov/rsv/clinical/index.html>. Accessed August 26, 2021.³

Centers for Disease Control and Prevention (CDC). Transmission. <https://www.cdc.gov/rsv/about/transmission.html>. Accessed August 27, 2021.⁴

Synagis (palivizumab) [package insert]. Gaithersburg, MD: MedImmune, LLC; November 2020 [synagis.pdf](#).⁵

Centers for Disease Control and Prevention (CDC). Symptoms and Care. <https://www.cdc.gov/rsv/about/symptoms.html>. Accessed August 26, 2021.⁶

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.

Enrollment in New Provider Portal Required for All Medicaid Providers

Louisiana Medicaid recently launched its Provider Enrollment Portal. Enrollment through the portal **is required for all Medicaid providers**. Failure to do so prior to a March 31, 2022, deadline could result in **claims denial**.

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.

Any existing Medicaid provider that does not complete the enrollment and screening process through the new Louisiana Medicaid Provider Enrollment Portal by March 31, 2022 will have their claims denied. Providers whose claims are denied must complete the state's enrollment process for claims to be approved by fee-for-service Medicaid, the MCOs, the DBPMs, and/or Magellan.

All MCO-only providers and fee-for service providers should have received their invitation to use the portal by September 30, 2021. Providers who did not receive their portal invitation or encounter any issues can email LouisianaProvEnroll@gainwelltechnologies.com or call (833) 641-2140, Monday – Friday between the hours of 8 a.m. and 5 p.m. central time.

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 Medicaid Provider Enrollment Portal webpage](#).

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

Changes to Durable Medical Equipment, Home Health, Pediatric Day Health Care, Rehabilitation And Personal Care Services, Pharmacy And Other Services Requiring Prior Authorization Due To Hurricane Ida – August 2021

On August 26, 2021, Governor John Bel Edwards declared a state of emergency ahead of Hurricane Ida as significant impact to the state of Louisiana was expected. The policy changes included in this bulletin are effective August 27, 2021 and shall only be applicable for the following Parishes: Ascension, Assumption, East Baton Rouge, East Feliciana, Iberia, Iberville, Jefferson, Lafourche, Livingston, Orleans, Plaquemines, Pointe Coupee, St. Bernard, St. Charles, St. Helena, St. James, St. John the Baptist, St. Martin, St. Mary, St. Tammany, Tangipahoa, Terrebonne, Washington, West Baton Rouge and West Feliciana. 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).

Medicaid beneficiaries who live in one of the parishes under mandatory evacuation, and who are in need of replacement equipment or supplies previously approved by Medicaid, may contact a Medicaid-enrolled durable medical equipment (DME) provider of their choice. Medicaid-enrolled providers must make a request to Gainwell Technologies' Prior Authorization Unit; however, a new prescription and medical documentation are not required. The provider shall submit the required Prior Authorization Form (PA-01) along with a signed letter from the recipient, giving a current place of residence and stating that the original equipment or supplies were lost due to Hurricane Ida.

Beneficiaries who were approved to receive medical equipment, supplies, home health services, rehabilitation, pediatric day health care or personal care services from a provider that is no longer in business or unable to provide the approved equipment, supplies or services may obtain the approved items or services from a new provider of their choice. The provider must be enrolled in Medicaid. Gainwell Technologies shall provide any guidance to the provider on the cancelation of the original authorization and issuance of a new authorization, if applicable.

All existing prior authorizations for the services listed below should be extended through October 31, 2021:

- Any necessary medical and surgical procedures
- Applied Behavior Analysis (ABA)
- Assertive Community Treatment (ACT)
- Community Psychiatric Support and Treatment (CPST)
- EPSDT personal care services (PCS)
- Functional Family Therapy – Child Welfare (FFT-CW)
- Functional Family Therapy (FFT)
- Home Health Services (EHH)
- Homebuilders
- Hospice Services
- Multi-Systemic Therapy (MST)
- Pediatric Day Health Care
- Permanent Supportive Housing (PSH)
- Pharmacy (for non- controlled, non-specialty drugs)
- Psychiatric Outpatient by Licensed Mental Health Professionals (LMHPs)
- Psychosocial Rehabilitation (PSR)
- Substance Use Outpatient and Intensive Outpatient
- Therapies (PT/OT/SLT)

Questions concerning Healthy Louisiana managed care organization processes are to be directed to the appropriate MCO. Those questions related to Medicaid fee-for-service claims should be directed to Gainwell Technologies Provider Relations at (800) 473-2783 or (225) 924-5040.

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)
Ambulatory Surgical Centers Ambulatory Surgical Centers	<ul style="list-style-type: none"> • Section 29.0 – Overview • Section 29.1 – Covered Services • Section 29.2 – Provider Requirements • Section 29.3 – Reimbursement • Appendix A – Contact Information • Appendix B – Claims Filing 	09/21/21
American Indian 638 Clinics American Indian 638 Clinics	<ul style="list-style-type: none"> • Table of Contents • Section 39.1 – Covered Services • Section 39.2 – Beneficiary Requirements • Section 39.2 – Provider Requirements • Appendix A – Message for EPSDT Eligibles and their Parents 	09/14/21
Applied Behavioral Analysis (ABA) Applied Behavioral Analysis (ABA)	<ul style="list-style-type: none"> • Section 4.4 – Provider Requirements 	10/25/21
Community Choices Waiver (CCW) Community Choices Waiver (CCW)	<ul style="list-style-type: none"> • Table of Contents • Section 7.1 – Covered Services • Appendix B – Forms/Links 	10/14/21
Durable Medical Equipment (DME) Durable Medical Equipment (DME)	<ul style="list-style-type: none"> • Section 18.2 – Specific Coverage Criteria 	10/25/21
End Stage Renal Disease (ESRD) End Stage Renal Disease (ESRD)	<ul style="list-style-type: none"> • Table of Contents • Section 17.0 – Overview • Section 17.1 – Covered Services • Section 17.2 – Provider Requirements • Section 17.3 – Reimbursement • Appendix B – Claims Filing 	09/20/21
EPSDT Health and IDEA - Related Services EPSDT Health and IDEA – Related Services	<ul style="list-style-type: none"> • Section 20.0 – Overview • Section 20.1 – Covered Services • Section 20.2 – Eligibility Criteria • Section 20.3 – Provider Requirements • Section 20.4 – Program Requirements • Section 20.5 – Record Keeping • Section 20.6 – Reimbursement • Appendix B – Definitions • Appendix C – Claims Filing 	09/22/21
	<ul style="list-style-type: none"> • Table of Contents • Appendix D – Reserved 	09/30/21

Manual Chapter Revision Log, cont.

Manual Chapter	Section(s)	Date of Revision(s)
Family Planning – Take Charge Plus (FPEO) Family Planning – Take Charge Plus (FPEO)	<ul style="list-style-type: none"> • Section 48.2 – Beneficiary Requirements • Section 48.5 – Record Keeping • Appendix B – Contact/Referral Information 	10/22/21
	<ul style="list-style-type: none"> • Section 48.1 – Covered Services • Section 48.4 – Reimbursement 	10/29/21
Federally Qualified Health Centers (FQHC) Federally Qualified Health Centers (FQHC)	<ul style="list-style-type: none"> • Section 22.4 – Reimbursement 	09/24/21
	<ul style="list-style-type: none"> • Appendix F – Behavioral Health Services Examples 	10/04/21
	<ul style="list-style-type: none"> • Section 22.1 – Covered Services 	10/05/21
Hospice Hospice	<ul style="list-style-type: none"> • Section 24.2 – Election of Hospice • Section 24.12 – Acronyms/Definitions/Terms 	10/08/21
Hospital Services Hospital Services	<ul style="list-style-type: none"> • Table of Contents • Section 25.0 – Overview • Section 25.1 – Provider Requirements • Section 25.2 – Inpatient Services • Section 25.3 – Outpatient Services • Section 25.7 – Reimbursement • Section 25.8 – Claims Related Information • Appendix B – Contact/Referral Information 	09/28/21
	<ul style="list-style-type: none"> • Section 25.6 – Prior Authorization 	10/26/21
Medical Transportation Medical Transportation	<ul style="list-style-type: none"> • Section 10.5 – Record Keeping • Section 10.13 – Ambulance – Claims and Encounters • Section 10.14 – Record Retention • Section 10.15.1 – Contact Information 	09/17/21
	<ul style="list-style-type: none"> • Section 10.7 – Ambulance Overview • Section 10.9 – Ambulance – Non-Emergency Ambulance • Section 10.10 – Ambulance – Air Ambulance • Section 10.12 – Ambulance – Return Trips and Transfers 	10/15/21
	<ul style="list-style-type: none"> • Section 10.14 – Record Retention 	10/25/21

Manual Chapter Revision Log, cont.

Manual Chapter	Section(s)	Date of Revision(s)
Professional Services Professional Services	<ul style="list-style-type: none"> • Section 5.1 – Covered Services – Genetic Testing • Section 5.1 – Covered Services – Skin Substitutes • Section 5.1 – Covered Services – EPSDT • Section 5.1 – Covered Services – Anesthesia • Section 5.1 – Covered Services – Cochlear Implant 	09/13/21 09/20/21 10/05/21 10/25/21
Program of All-Inclusive Care for the Elderly (PACE) PACE	<ul style="list-style-type: none"> • Section 35.0 – Overview • Section 35.1 – Services • Section 35.4 – Service Access and Authorization • Section 35.6 – Staffing and Training • Section 35.7 – Record Keeping • Section 35.8 – Reimbursement • Section 35.9 – Claims Filing • Section 35.10 – Grievances/Complaints • Section 35.12 – Administrative Sanctions 	10/26/21
Residential Options Waiver (ROW) Residential Options Waiver (ROW)	<ul style="list-style-type: none"> • Section 38.1 – Covered Services • Section 38.6 – Provider Requirements • Section 38.0 – Overview • Section 38.2 – Self-Direction Option 	10/01/21 10/07/21 10/12/21
Rural Health Clinics (RHC) Rural Health Clinics (RHC)	<ul style="list-style-type: none"> • Section 40.4 - Reimbursement • Appendix F – Behavioral Health • Section 40.1 – Covered Services 	09/23/21 10/04/21 10/05/21



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 MMIS Claims Reimbursement
Hospital Pre-Certification	1-800-877-0666		
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 Medicaid Fraud Hotline	1-877-544-9544 1-800-437-9101 Medicaid Pharmacy Benefits 1-800-488-2917 Report Medicaid Fraud

