

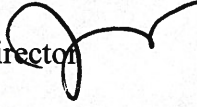


**State of Louisiana**  
Louisiana Department of Health  
Bureau of Health Services Financing

**MEMORANDUM**

**DATE:** May 17, 2018

**TO:** All Louisiana Medicaid Providers

**FROM:** Jen Steele, Medicaid Director 

**SUBJECT:** Louisiana Medicaid Fee for Service (FFS) Pharmacy and Managed Care Organizations (MCOs) Point of Sale (POS) Diagnosis Code Requirements for Tadalafil (Cialis®, Adcirca®), and Sildenafil (Revatio®)

Effective June 1, 2018, the Louisiana Medicaid Drug Utilization Review (LADUR) Program will implement POS edits for diagnosis code requirements for select phosphodiesterase-5 enzyme inhibitors. As a reminder, the LADUR Program includes Fee for Service and MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Louisiana Healthcare Connections, and United Healthcare.)

**Phosphodiesterase-5 Enzyme Inhibitors**

Pharmacy claims for select phosphodiesterase-5 enzyme inhibitors require submission of a diagnosis code at POS. Acceptable diagnosis codes are listed in the chart below.

<b>Generic</b>	<b>Brand</b>	<b>Diagnosis Description</b>	<b>ICD-10-CM Diagnosis Code(s)</b>
Tadalafil 2.5mg and 5mg	Cialis®	Benign Prostatic Hyperplasia (BPH)	N40*
Tadalafil 20mg	Adcirca®	Pulmonary Arterial Hypertension (PAH)	I27.0, I27.2, I27.89, P29.3
Sildenafil 20mg	Revatio®	Pulmonary Arterial Hypertension	I27.0, I27.2, I27.89, P29.3

\* -- any number or letter or combination of UP TO FOUR numbers and letters of an assigned ICD-10-CM diagnosis code

FFS and MCO Diagnosis Code Requirements for Tadalafil (Cialis®), Adcirca®, and Sildenafil (Revatio®)

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**Note:** Louisiana Medicaid currently does not pay for a diagnosis of erectile dysfunction (ED).

Pharmacy claims for select phosphodiesterase-5 enzyme inhibitors billed without an acceptable diagnosis code will deny with:

**NCPDP reject code 39** (Missing or Invalid Diagnosis Code).

When the prescribing practitioner does not indicate a diagnosis code on the prescription and when the prescriber cannot be reached, a denial for a missing diagnosis code may be overridden if the pharmacist determines that the recipient cannot wait to receive the medication. The pharmacist may override the denial by:

entering “03” in **NCPDP field 418-DI** (Level of Service) specifying an emergency.

If you have questions about the content of this memo, you may contact the FFS pharmacy help desk by phone at (800) 437-9101.

If you have questions about pharmacy claims billing, you may contact the appropriate plan at their pharmacy help desk listed in the chart below.

<b>Healthcare Provider</b>	<b>Pharmacy Help Desk</b>	<b>Pharmacy Help Desk Phone Number</b>
Aetna	CVS Health	(855) 364-2977
AmeriHealth Caritas	PerformRx	(800) 684-5502
Fee for Service	Molina	(800) 648-0790
Healthy Blue	Express Scripts	(844) 367-6111
Louisiana Healthcare Connections	CVS Caremark	(800) 311-0543
United Healthcare	Optum Rx	(866) 328-3108

Please forward this notice to other providers to assist with notification. Your continued cooperation and support of the Louisiana Medicaid Program efforts to coordinate care and improve health are greatly appreciated.

JS/MBW/GJS

c: Healthy Louisiana Plans  
Melwyn B. Wendt  
Molina