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State of Louisiana

Louisiana Department of Health
Bureau of Health Services Financing

MEMORANDUM

DATE: June 15, 2026

TO: All Louisiana Medicaid Prescribing Providers and Pharmacists

FROM: Seth Gold, Medicaid Executive Director SG^{initial}

SUBJECT: Louisiana Medicaid Pharmacy Point of Sale Diagnosis Code Requirements – July 2026

Effective July 1, 2026, the Louisiana Medicaid Fee for Service (FFS) Pharmacy Program and Managed Care Organizations (MCOs), in consultation with the Drug Utilization Review (DUR) Board, will implement new Point of Sale (POS) diagnosis code requirements for select medications. The diagnosis code requirement applies to pharmacy claims submitted to Gainwell Technologies for FFS and to the Pharmacy Benefits Manager (PBM) for MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Humana Healthy Horizons, and Louisiana Healthcare Connections).

Point of Sale Diagnosis Code Requirements

A pharmacy claim will deny at Point of Sale (POS) when there is a missing or invalid diagnosis code submitted in **NCPDP field 424-DO** (Diagnosis Code) with:

- **Denial from Gainwell Technologies (FFS Only): NCPDP rejection code 39** (Missing/Invalid ICD-10-CM diagnosis code) mapped to **EOB Code 575** (Missing/Invalid ICD-10-CM diagnosis code).
- **Denial from Plan (MCOs Only):** The pharmacy claim will deny with an **NCPDP rejection code**.

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Pharmacy claims for the following select medications in the chart below require a diagnosis code at POS.

Medication (Brand Example)	Diagnosis Description	Diagnosis Code
Depemokimab-ulaa (Exdensur™)	Severe Persistent Asthma	J45.50, J45.51
	Eosinophilic Asthma	J82.83
Dupilumab Pen (Dupixent®)	Allergic Fungal Rhinosinusitis (<i>in addition to current dx codes</i>)	B49, J30.89, J32*
Gepotidacin (Blujepa™)**	Unspecified sexually transmitted disease	A64
Misoprostol (Cytotec®)	A diagnosis code is required on pharmacy claims. Pharmacy claims submitted with certain diagnosis codes will deny.	Diagnosis must be submitted but cannot be O07* or Z33.2
Sibeprenlimab-szsi (Voyxact®)	Primary Immunoglobulin A Nephropathy (IgAN)	N02.B*
Tobramycin for Inhalation (Bethkis®, Kitabis Pak®, Tobi®)	Tracheostomy status (<i>in addition to current dx. code</i>)	Z93.0

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

** – Pharmacy claims for Blujepa submitted with the diagnosis code for unspecified sexually transmitted disease (A64) will bypass the clinical authorization requirement

Additional Information:

FFS and MCO: Most pharmacy claim denials can be overridden in emergency situations at Point of Sale. If it is necessary to override the claim, “03” can be entered in **NCPDP field 418-DI** (Level of Service).

Refer to <http://ldh.la.gov/assets/HealthyLa/Pharmacy/PDL.pdf> for the PDL, which is inclusive of the *Louisiana Uniform Prescription Drug Prior Authorization Form*, medication list, criteria, and diagnosis code list.

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

FFS pharmacy claims should be submitted to Gainwell Technologies. MCO pharmacy claims should be submitted to the appropriate PBM.

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

Health Plan	PBM	Provider Claims/Billing Issues
Aetna Better Health	CVS Caremark	1(855) 364-2977
AmeriHealth Caritas	PerformRx	1(800) 684-5502
Healthy Blue	Carelton RX (MCO) Carrier Name: VOYRX- LA Medicaid	1(833)-485-6236
Humana	Humana Pharmacy Solutions Inc.	1(833) 252-1677
Louisiana Healthcare Connections	Express Scripts	1(833) 750-4451

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.

SY/SF/RB/GJS

cc:

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 Healthy Louisiana MCOs
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