

Rebekah E. Gee MD, MPH
SECRETARY

## State of Louisiana

Louisiana Department of Health Bureau of Health Services Financing

## MEMORANDUM

DATE:

December 18, 2018

TO:

All Louisiana Medicaid Prescribing Providers and Pharmacists

FROM:

Jen Steele, Medicaid Director

**SUBJECT:** 

Louisiana Medicaid Fee for Service (FFS) Pharmacy Clinical

Pre-Authorization for Lomitapide (Juxtapid®), Mipomersen (Kynamro®),

Alirocumab (Praluent®), and Evolocumab (Repatha®)

Effective December 27, 2018, the Louisiana Medicaid FFS Pharmacy Program in collaboration with the Louisiana Medicaid Drug Utilization Review (LADUR) Board will implement clinical pre-authorization requirements for lomitapide (Juxtapid®), mipomersen (Kynamro®), alirocumab (Praluent®), and evolocumab (Repatha®).

## **Clinical Pre-Authorization Requirement**

Pharmacy claims will be reimbursed at Point of Sale (POS) when the prescriber has obtained an approved clinical pre-authorization. Prescribers must complete the *Louisiana Uniform Prescription Drug Prior Authorization Form* in full and fax it to 1-866-797-2329.

Pharmacy claims submitted without an approved clinical pre-authorization will deny at Point of Sale (POS) with:

NCPDP reject code 88 (DUR Reject Error) mapped to EOB code 066 (Clinical Pre-Authorization Required).

Override provisions should be addressed through the Clinical Pre-Authorization process.

Refer to <a href="https://www.lamedicaid.com/provweb1/Pharmacy/rxpa/rxpaindex.htm">https://www.lamedicaid.com/provweb1/Pharmacy/rxpa/rxpaindex.htm</a> for the Louisiana Uniform Prescription Drug Prior Authorization Form and Criteria.

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 Clinical Pre-Authorization Requirements for Juxtapid®, Kynamro®, Praluent®, and Repatha®
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If you have questions about FFS pharmacy claims billing, you may contact the DXC Technology (formerly Molina) pharmacy help desk at (800) 648-0790.

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
DXC Technology