

State of Louisiana

Louisiana Department of Health Bureau of Health Services Financing

MEMORANDUM

DATE:

August 13, 2018

TO:

All Louisiana Medicaid Prescribing Providers and Pharmacists

FROM:

Jen Steele, Medicaid Director

SUBJECT:

Louisiana Medicaid Fee for Service (FFS) and Managed Care

Organizations (MCOs) Pharmacy Opioid Prescription Policy

Effective September 4, 2018 and October 1, 2018, the Louisiana Medicaid Fee for Service Pharmacy Program in collaboration with the Louisiana Medicaid Drug Utilization Review (LADUR) Board will implement new Point of Sale (POS) edits for opioids in addition to current opioid policy. The LADUR Board impacts Fee for Service and Medicaid MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Louisiana Healthcare Connections, and United Healthcare) clinical pharmacy initiatives.

A timeline of the Louisiana Medicaid Opioid Prescription Policy is listed below.

Louisi	ana Medicaid Opioid Prescri	ption Policy
Date	Population	Policy
January 10, 2017	Fee for Service Patients: Acute and Chronic Pain	Medicaid opioid 15-day quantity limit
March 22, 2017	Managed Care Organization Patients: Acute Pain	Implement 15-day quantity limit for opioid naïve recipients
May 01, 2017	FFS and Managed Care Organization Patients: Acute and Chronic Pain	Alert to providers of upcoming Morphine Milligram Equivalent (MME) limit of 120 mg per day of all opioid prescriptions

Date	Population	Policy
July 10, 2017	FFS and Managed Care Organization Patients: Acute Pain	7-day quantity limit for opioid-naïve recipients or Morphine Milligram Equivalent (MME) limit of 120 mg per day, whichever is less
July 10, 2017	FFS and Managed Care Organization Patients: Chronic Pain	Morphine Milligram Equivalent (MME) limit of 120 mg per day for all opioid prescriptions
September 12, 2017	FFS and Managed Care Organization Patients: Chronic Pain	Morphine Milligram Equivalent (MME) limit of 90 mg per day for all opioid prescriptions
May 1, 2018	FFS Patients: Chronic Pain	Long-acting opioid prescriptions have a 30 day quantity limit
September 04, 2018	FFS and Managed Care Organization Patients: Chronic Pain	Long-acting opioid prescriptions require the prior use of a short or long-acting opioid within the previous 90 days
September 04, 2018	FFS and Managed Care Organization Patients: Chronic Pain	POS Quantity and MME Limit for Morphine Sulfate Extended -Release (Arymo ER®)
October 01, 2018	FFS and Managed Care Organization Patients: Acute and Chronic Pain	Pharmacy claims submitted at POS with burn diagnoses are exempt from the Morphine Milligram Equivalent (MME) limit
October 01, 2018	FFS and Managed Care Organization Patients: Morphine Milligram Equivalent (MME) Calculation	Removal of POS Morphine Milligram Equivalent (MME) Limit for Buprenorphine Products

FFS and MCO Pharmacy Opioid Prescription Policy August 13, 2018 Page 3

The National Council for Prescription Drug Programs (NCPDP) denial codes listed below will apply to both FFS and MCO pharmacy claims. The EOB codes will apply to FFS pharmacy claims only.

Long-Acting Opioids (Implementation September 4, 2018)

Pharmacy claims for an incoming prescription for a long-acting opioid will deny if there is not a paid claim for either a short-acting or long-acting opioid medication within the previous 90 days.

Pharmacy claims for a long-acting opioid without a prior history of opioid utilization will deny at POS with:

NCPDP reject code 88 (DUR Reject Error) mapped to <u>FFS ONLY</u>: EOB code 427 (Requires Prior Use of a Short or Long-Acting Agent in the Last 90 Days).

<u>FFS ONLY:</u> After consultation with the prescriber to verify the necessity of long-acting opioid therapy without prior use, the pharmacist may override the denial by submitting the following override at POS:

NCPDP 439-E4 field (Reason for Service Code) PP (Plan Protocol) NCPDP 440-E5 field (Professional Service Code) MØ (Prescriber Consulted) NCPDP 441-E6 field (Result of Service Code) 1G (Filled with Prescriber Approval).

MCO and FFS: Pharmacy claims for long-acting opioid agents will not be subject to the prior use of an opioid in the last 90 days when there is a diagnosis code of the following submitted in NCPDP field 424-DO:

Diagnosis Code	Description
C00.*-C96.*	Cancer
Z51.5	Palliative Care
	ter or combination of UP TO letters of an assigned ICD-10-
CM diagnosis code	

POS Edits for Morphine Sulfate Extended-Release (Arymo ER®) (Implementation September 4, 2018)

Pharmacy claims for morphine sulfate extended-release (Arymo ER®) that exceed the quantity limit of 60 units per rolling 30 days will deny with:

NCPDP reject code 76 (Quantity and/or days supply exceeds program maximum) mapped to

FFS ONLY: EOB code 600 (Quantity exceeds Max-MD Fax Opioid Treatment Worksheet to 1-866-797-2329).

The quantity limit can be overridden for <u>FFS pharmacy claims</u> by using the Emergency override of '03' in NCPDP field 418-DI (Level of Service). The reason for the emergency override must be documented on the hardcopy prescription or in the pharmacy's electronic record keeping system.

The quantity limit can be overridden for <u>MCO pharmacy claims</u> by contacting the health plan's pharmacy help desk listed at the end of this document.

Note: The current edit of 90 MME per day will apply for morphine sulfate extended release (Arymo ER®).

An ICD-10-CM diagnosis code must be submitted at POS in **NCPDP field 424-DO**. A diagnosis code of cancer and palliative care will bypass the MME limit, if applicable for the recipient.

Diagnosis codes which will bypass the quantity and MME limits:

Diagnosis	ICD-10-CM Diagnosis Code(s)
Cancer	C00.*-C96.*
Palliative Care	Z51.5

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

Opioid Quantity and MME Limit Exemption for Burn Diagnoses (Implementation October 1, 2018)

Pharmacy claims for recipients with a diagnosis of burn will be exempt from the opioid quantity and MME limit. Pharmacy claims with a diagnosis of cancer and palliative care are also exempt.

Pharmacy claims for opioids will bypass the edits for quantity and MME limit when the following burn diagnosis codes are submitted at POS in NCPDP field 424-DO:

ICD-10-CM Diagnosis Code	Description
T20.2*	Burn of second degree of head, face, and neck
T20.3*	Burn of third degree of head, face, and neck
T20.6*	Corrosion of second degree of head, face, and neck
T20.7*	Corrosion of third degree of head, face, and neck
T21.2*	Burn of second degree trunk
T21.3*	Burn of third degree trunk
T21.6*	Corrosion of second degree of trunk
T21.7*	Corrosion of third degree trunk
T22.2*	Burn of second degree of shoulder and upper limb, except wrist and hand

T22.3*	Burn of third degree of shoulder and upper limb, except wrist and hand
T22.6*	Corrosion of second degree of shoulder and upper limb, except wrist and hand
T22.7*	Corrosion of third degree of shoulder and upper limb, except wrist and hand
T23.2*	Burn of second degree of wrist and hand
T23.3*	Burn of third degree of wrist and hand
T23.6*	Corrosion of second degree of wrist and hand
T23.7*	Corrosion of third degree of wrist and hand
T24.2*	Burn of second degree of lower limb, except ankle and foot
T24.3*	Burn of third degree of lower limb, except ankle and foot
T24.6*	Corrosion of second degree of lower limb, except ankle and foot
T24.7*	Corrosion of third degree of lower limb, except ankle and foot
T25.2*	Burn of second degree of ankle and foot
T25.3*	Burn of third degree of ankle and foot
T25.6*	Corrosion of second degree of ankle and foot
T25.7*	Corrosion of third degree of ankle and foot
C00.*-C96.*	Cancer
Z51.5	Palliative Care
* - any number or lette assigned ICD-10-CM	er or combination of UP TO FOUR numbers and letters of an diagnosis code

MCO and FFS: When the pharmacist cannot reach the prescriber, the pharmacist, using his/her professional judgment, may deem the filling of the prescription to be an 'emergency.' In these emergency cases, the pharmacist must indicate 'Emergency Prescription' and document the emergency on the hardcopy prescription or in the pharmacy's electronic recordkeeping system.

FFS ONLY: The pharmacist may override the pharmacy claim at POS by:

entering '03' in NCPDP field 418-DI (Level of Service).

MCO ONLY: Override provisions are available through contact with the health plan's pharmacy help desk listed at the end of this document.

FFS and MCO Pharmacy Opioid Prescription Policy August 13, 2018 Page 6

Removal of Morphine Milligram Equivalent (MME) Limits for Buprenorphine Products (Implementation October 1, 2018)

Pharmacy claims for buprenorphine products for the treatment of Substance Use Disorder (SUD) will no longer reject at Point of Sale for exceeding the MME limit. Buprenorphine products will not be included in the MME calculation.

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.

Healthcare Provider	Pharmacy Help Desk	Pharmacy Help Desk Phone Number
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