




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

MEMORANDUM

DATE: December 22, 2021

TO: All Louisiana Medicaid Prescribing Providers and Pharmacists

FROM: Patrick Gillies, Medicaid Executive Director 

SUBJECT: Louisiana Medicaid Pharmacy Point of Sale (POS) Diagnosis Code Requirement and Bypass Diagnosis Codes- January 2022

Effective January 1, 2022, 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 FFS and MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Louisiana Healthcare Connections, and UnitedHealthcare).

Diagnosis Code Requirement

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

- Avalglucosidase alfa-ngpt (Nexviazyme™)
- Deferiprone (Ferriprox®)
- Riluzole (Exservan™)

The approved diagnosis codes are listed in the chart below.

Medication (Generic – Brand Example)	Diagnosis Description	Diagnosis Code
Avalglucosidase alfa-ngpt – Nexviazyme™	Pompe Disease	E74.02
Deferiprone - Ferriprox®	Chronic Iron Overload Due to Blood Transfusions	E83.111
Riluzole – Exservan™	Amyotrophic Lateral Sclerosis	G12.21

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:

MCO Only: The pharmacy claim will deny with a **NCPDP rejection code**.

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).

Bypass Diagnosis Code for Empagliflozin (Jardiance®) Prior Use Requirement

Pharmacy claims submitted for empagliflozin (Jardiance®) will bypass the POS prior drug use requirement (metformin, SGLT2) when submitted with a diagnosis code for heart failure (I50*).

* Any number or letter or combination of up to four numbers and letters of an assigned ICD-10-CM diagnosis code

Additional Information:

FFS Only: 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 www.lamedicaid.com for the POS User Guide for drug specific override procedures.

MCO Only: If an override is required, or additional assistance needed, contact the health plan. (See contact information at the end of this document.)

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, 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.

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

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	Gainwell Technologies	(800) 648-0790
Healthy Blue	CVS	(833) 236-6194
Louisiana Healthcare Connections	CVS Caremark	(800) 311-0543
UnitedHealthcare	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.

PG/MB/MBW/GJS

c: Healthy Louisiana Plans
Melwyn B. Wendt
Gainwell Technologies