

Rebekah E. Gee MD, MPH SECRETARY

State of Louisiana

Louisiana Department of Health Bureau of Health Services Financing

MEMORANDUM

DATE:

August 21, 2018

TO:

All Louisiana Medicaid Prescribing Providers and Pharmacists

FROM:

Jen Steele, Medicaid Director

SUBJECT:

Louisiana Medicaid Fee for Service (FFS) and Medicaid Managed Care

Organizations (MCOs) Pharmacy Point of Sale (POS) Edits for

Lurasidone (Latuda®)

Effective September 18, 2018, the Louisiana Medicaid Fee for Service (FFS) Pharmacy Program in collaboration with the Louisiana Medicaid Drug Utilization Review (LADUR) Board will implement POS edits for lurasidone (Latuda®). The LADUR Board impacts Fee for Service and Medicaid MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Louisiana Healthcare Connections, and United Healthcare) clinical initiatives.

Lurasidone (Latuda®)

Dose Limit FFS Pharmacy Claims Only

Recipients 0-5 years old

Pharmacy claims for lurasidone (Latuda®) for recipients 0-5 years old will deny at POS when the dosage is greater than zero with:

FFS Only: NCPDP reject code 88 (DUR reject error) mapped to FFS Only: EOB code 66 (Clinical Pre-Authorization Required)

Recipients 6-9 years old

Pharmacy claims for lurasidone (Latuda®) for recipients 6-9 years old will deny at POS when the dosage is greater than zero with:

FFS Only: NCPDP reject code 88 (DUR reject error) mapped to

FFS Only: EOB code 325 (Exceeds Max Daily Dose MD Fax Override Form to 866-797-2329)

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Recipients 10-17 years old

Pharmacy claims for lurasidone (Latuda®) for recipients 10-17 years old will deny at POS when the dosage exceeds the maximum recommended dose of 80 mg with:

FFS Only: NCPDP reject code 88 (DUR reject error) mapped to FFS Only: EOB code 325 (Exceeds Max Daily Dose MD Fax Override Form to 866-797-2329)

Dose Limit MCO Pharmacy Claims Only

Recipients 0-9 years old

Pharmacy claims for lurasidone (Latuda®) for recipients 0-9 years old will deny at POS when the dosage is greater than zero with:

MCO Only: NCPDP reject code 75 (Prior Authorization Required)

Recipients 10-17 years old

Pharmacy claims for lurasidone (Latuda®) for recipients 10-17 years old will deny at POS when the dosage exceeds the maximum recommended dose of 80 mg with:

MCO Only: NCPDP reject code 75 (Prior Authorization Required)

For <u>MCO pharmacy claims</u>, the dose limit can only be overridden with an approved prior authorization.

For <u>FFS pharmacy claims</u>, the dose limit can be overridden through the clinical preauthorization process, an approved override form, or an emergency override, if applicable.

<u>FFS Only:</u> 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. The pharmacist may override the pharmacy claim at POS by:

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

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	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