




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 Quantity Limits-
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 quantity limits for select medications. The quantity limits apply to pharmacy claims submitted to FFS and MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Louisiana Healthcare Connections, and UnitedHealthcare).

Quantity Limit

The agents listed in the chart below have quantity limits at Point of Sale (POS).

| Medication (Generic – Brand Example) | Quantity Limit |
|--------------------------------------|---|
| Alirocumab (Praluent®) | 2 injections (2ml) per 28 days |
| Evolocumab (Repatha®) 140mg/ml | 2 injections (2ml) per 28 days |
| Evolocumab (Repatha®) 420mg/3.5ml | 2 injections (7ml) per 28 days |
| Lemborexant (Dayvigo®) | 7 tablets per rolling 30 days (for recipients who are naïve to sedative/hypnotics)*; 15 tablets per rolling 30 days (for recipients who are non-naïve to sedative/hypnotics)** |
| Lomitapide (Juxtapid®) | 60 capsules per 30 days |
| Rimegepant (Nurtec® ODT) | 48 units per year |
| Tramadol oral solution (Qdolo®) | 6 ounces (180ml) or a 7-day supply (whichever is less)*** |

*There is no pharmacy claim for a sedative/hypnotic agent in the previous 60-day period.

**There is at least one pharmacy claim for a sedative/hypnotic agent in the previous 60-day period.

***There is no pharmacy claim for an opioid in the previous 90-day period.

Point of Sale Override for Quantity Limit in the Previous Chart Excluding (Qdolo®)

Pharmacy claims for select drugs which exceed the quantity limit will deny with:

MCO Only: The pharmacy claim will deny with a **NCPDP rejection code**. If additional assistance is needed, contact the health plan. (See contact information at the end of this document.)

FFS Only: **NCPDP rejection code 76** (Quantity and/or days' supply exceeds program maximum) mapped to
EOB code 457 (Quantity and/or days' supply exceeds program maximum)

Upon consultation with the prescriber to verify the necessity of the requested therapy, the pharmacist may override the denial by submitting the following override at POS:

NCPDP 439-E4 Field (Reason for Service Code) **EX** (Excessive Quantity)

NCPDP 440-E5 Field (Professional Service Code) **MØ** (Prescriber Consulted)

NCPDP 441-E6 Field (Result of Service Code) **1G** (Filled with Prescriber Approval)

Override for Quantity Limits for Tramadol Oral Solution (Qdolo®)

Prescriptions for opioid oral liquids will have a quantity limit of 180 ml or a 7-day supply, whichever is less.

Pharmacy claims for opioid (oral) liquid formulations, which exceed the maximum quantity limit will deny with:

MCO Only: The pharmacy claim will deny with a **NCPDP rejection code**. If an override is requested, contact the health plan. (See contact information at the end of this document.)

FFS Only: **NCPDP rejection code 76** (Quantity and/or days' supply exceeds program maximum) mapped to
EOB code 153 (Quantity Exceeds Max-MD Fax Override Form 866-797-2329)

Bypass Diagnosis Codes for Tramadol Oral Solution (Qdolo®)

Pharmacy claims for tramadol oral solution (Qdolo®) will **bypass** the quantity limit when submitted with an appropriate diagnosis code as listed in the chart below.

Diagnosis Codes that Bypass Quantity Limit for Tramadol Oral Solution (Qdolo®)

| Diagnosis Description | ICD-10 Diagnosis Code(s) |
|--|--|
| Cancer | C00.*–C96.* |
| Palliative Care | Z51.5 |
| Second or Third Degree Burns or Corrosions | T20.2*, T20.3*, T20.6*, T20.7*, T21.2*, T21.3*, T21.6*, T21.7*, T22.2*, T22.3*, T22.6*, T22.7*, T23.2*, T23.3*, T23.6*, T23.7*, T24.2*, T24.3*, T24.6*, T24.7*, T25.2*, T25.3*, T25.6*, T25.7* |
| Sickle Cell Crisis | D57.0*, D57.21*, D57.41*, D57.81* |

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

Additional Information:

In addition to a quantity limit, pharmacy claims for tramadol oral solution (Qdolo®) are subject to a maximum daily dose. Tramadol oral solution (Qdolo®) is limited to a maximum daily dose based on age:

- 300mg/day for recipients who are 76 years old and older; and
- 400mg/day for recipients who are 75 years old and younger.

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 |

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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