



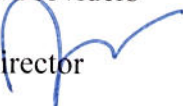
State of Louisiana

Louisiana Department of Health
Bureau of Health Services Financing

MEMORANDUM

DATE: March 13, 2018

TO: All Louisiana Medicaid Providers

FROM: Jen Steele, Medicaid Director 

SUBJECT: Louisiana Medicaid Fee-for-Service (FFS) Pharmacy and Managed Care Organizations (MCOs) Point of Sale (POS) Diagnosis Code Requirements for Attention Deficit Hyperactivity Disorder (ADHD) Agents, Stimulants, and Substance Use Disorder (SUD) Agents

Effective April 1, 2018, the Louisiana Medicaid Drug Utilization Review (LADUR) Program will implement POS edits for diagnosis code requirements for attention deficit hyperactivity disorder (ADHD) agents, stimulants, and substance use disorder (SUD) drugs. As a reminder, the LADUR Program includes Fee-for Service and MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Louisiana Healthcare Connections, and United Healthcare.)

ADHD Agents

Pharmacy claims for ADHD agents billed without an appropriate diagnosis code will deny with:

NCPDP reject code 39 (Missing or Invalid Diagnosis Code).

Acceptable diagnosis codes for billing ADHD medications are listed in the chart below.

ADHD Medications Requiring Diagnosis Codes Acceptable Diagnosis for POS Claims Processing		
Generic - Brand Examples	Diagnosis Description	ICD-10 Code(s)
Amphetamine Salt Combo IR, ER - Adderall®, Adderall XR®	Attention Deficit Hyperactivity Disorders	F90.*
Dextroamphetamine Sulfate IR, ER - Dexedrine®, ProCentra®, Zenzedi® Amphetamine IR - Evekeo®	Narcolepsy	G47.4*

<p>Amphetamine ER - Adzenys XR-ODT™, Dyanavel XR® Atomoxetine - Strattera® Lisdexamfetamine - Vyvanse® Methamphetamine - Desoxyn®</p>	<p>Attention Deficit Hyperactivity Disorders</p>	<p>F90.*</p>
<p>Clonidine ER - Kapvay® Guanfacine ER - Intuniv®</p>	<p>Attention Deficit Hyperactivity Disorders Tics / Tourette's Disorder</p>	<p>F90.* F95.*, G25.6*</p>
<p>Clonidine IR - Catapres® Clonidine Transdermal Patch- Catapres-TTS® Guanfacine IR - Tenex® Diagnosis is only required for Clonidine IR or Guanfacine IR if the recipient is under 21 years of age.</p>	<p>Attention Deficit Hyperactivity Disorders Hypertension Hypertension in Congenital Heart Disease Tics / Tourette's Disorder</p>	<p>F90.* I10, I11.*, I12.*, I13.*, I15.* Q20.*, Q21.*, Q22.*, Q23.*, Q24.*, Q25.*, Q26.*, Q27.*, Q28.* F95.*, G25.6*</p>
<p>Dexmethylphenidate IR, ER - Focalin®, Focalin XR®</p>	<p>Cancer-Related Fatigue Attention Deficit Hyperactivity Disorders</p>	<p>R53.0 F90.*</p>
<p>Methylphenidate IR_ - Methylin®, Ritalin® Methylphenidate Patch - Daytrana® Methylphenidate ER - Aptensio XR®, Concerta®, Metadate® CD/ER, Quillichew ER®, Quillivant XR®, Ritalin® LA/SR</p>	<p>Cancer-Related Fatigue Attention Deficit Hyperactivity Disorders Narcolepsy</p>	<p>R53.0 F90.* G47.4*</p>

Stimulants

Pharmacy claims for stimulants billed without an appropriate diagnosis code will deny with:

NCPDP reject code 39 (Missing or Invalid Diagnosis Code).

Acceptable diagnosis codes for billing stimulants are listed in the chart below.

Stimulants Requiring Diagnosis Codes Acceptable Diagnosis for POS Claims Processing		
Generic - Brand Examples	Diagnosis Description	ICD-10 Code(s)
Armodafinil - Nuvigil®	Circadian Rhythm Sleep Disorder, Shift Work Type	G47.26
Modafinil - Provigil®	Narcolepsy	G47.4*
	Obstructive Sleep Apnea	G47.33

Substance Use Disorder (SUD) Agents

Pharmacy claims for SUD agents billed without an appropriate diagnosis code will deny with:

NCPDP reject code 39 (Missing or Invalid Diagnosis Code).

Acceptable diagnosis codes for billing SUD agents are listed in the chart below.

SUD Drugs Requiring Diagnosis Codes Acceptable Diagnosis for POS Claims Processing		
Generic - Brand Examples	Dosage Form	ICD-10 Code(s)
Buprenorphine- Probuphine®	Implant	F11.2* (Opioid Dependence)
	Tablet	
Buprenorphine HCl/ Naloxone HCl- Bunavail®, Suboxone®, Zubsolv®	Film	
	SL Tablet	

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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.

If you have questions about the contents of this memo, you may contact the Molina Point of Sale (POS) Help Desk (800) 648-0790 or Fee for Service (FFS) Pharmacy Help Desk at (800) 437-9101 or refer to www.lamedicaid.com.

JS/MBW/GJS

c: Healthy Louisiana Plans
Melwyn B. Wendt
Molina