



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

MEMORANDUM

DATE: September 10, 2014

TO: All Louisiana Medicaid Providers

FROM: 
J. Ruth Kennedy, Medicaid Director

SUBJECT: Makena® (Hydroxyprogesterone Caproate) Coverage for La. Medicaid Pharmacy Program

Effective October 1, 2014, Makena® (Hydroxyprogesterone Caproate) will become payable as a pharmacy benefit in addition to the existing medical benefit coverage. To process a pharmacy claim for Makena® (Hydroxyprogesterone Caproate) at Point of Sale (POS), the pharmacist will need to enter the diagnosis code V23.41-Pregnancy with history of pre-term labor.

Pharmacy claims submitted without a valid diagnosis code will deny at Point of Sale (POS) with:

**NCPDP rejection code 39 (Missing or Invalid ICD-9 diagnosis code) mapped to
EOB code 575 (Missing or Invalid ICD-9 diagnosis code)**

The ICD-9-CM diagnosis code must be documented on the hardcopy prescription or in the pharmacy's electronic recordkeeping system.

Override: In the event, that the prescribing provider cannot be contacted, the pharmacist may override the missing or invalid diagnosis code edit. The pharmacist must document "Emergency Prescription" on the hardcopy prescription or in the pharmacy's electronic recordkeeping system and submit the override by entering:

"03" in NCPDP field 418-DI (Level of Service)

Compliance associated with program policy will be verified through our Louisiana Medicaid Pharmacy Compliance Audit Program.

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 Pharmacy Help Desk at (800) 437-9101, send a fax to (225) 342-1980, or refer to www.lamedicaid.com.

MCJ/MBW/ESF

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