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DEPARTMENT OF HEALTH AND HOSPITALS




Department of  
HEALTH and  
HOSPITALS

David W. Hood  
SECRETARY

February 17, 2003

MEMORANDUM

TO: Prescribing Providers  
FROM: Ben A. Bearden, Director   
RE: Monthly Prescription Limits; Clinical Drug Inquiry Applications

This correspondence supersedes the January 13, 2003 memorandum regarding the monthly prescription limits.

Monthly Prescription Limits

Effective for services beginning **March 3, 2003**, the Department of Health and Hospitals, Bureau of Health Services Financing will establish an eight (8) prescription limit per recipient per calendar month in the Medicaid Pharmacy Program.

The following federally mandated recipient groups are exempt from the 8 prescription monthly limitation:

1. **Persons under the age of twenty-one (21) years.** The exemption will expire the month following the recipient's 21<sup>st</sup> birthday;
2. **Persons living in long term care facilities such as nursing homes and ICF-MR facilities (TYPE CASES – 05, 23, 24, 25, 51, 62, 63, 64, 65, 90, 99).** The exemption will expire the month following the recipient's discharge date; or
3. **Pregnant women**  
When a prescribing practitioner issues a prescription to a pregnant woman, he/she shall indicate on the prescription that the recipient is pregnant. In the case of a telephoned prescription, the information that the recipient is pregnant shall be communicated to the pharmacist; and the pharmacist must document on the prescription that the recipient is pregnant.

Recipients who are not exempt from the 8 prescription monthly limitation will be allowed a maximum of 8 prescriptions per calendar month. The 8 prescription monthly limit can be overridden when the prescribing practitioner authorizes the medical necessity of the drug and follows the process listed below. **Claims, including those for emergency prescriptions and prior authorized prescriptions, which are in excess of 8 per calendar month per recipient, will be denied.**

**PROCESS FOR THE OVERRIDE OF THE RX-LIMIT OF 8 RXS PER MONTH**

**STEP 1:** The prescription limit override will occur when a prescribing practitioner communicates either in writing, by phone, or electronically on each prescription over 8 per month the following:  
"medically necessary override" and the "ICD-9-CM Diagnosis". (NOTE: A valid ICD-9-CM Diagnosis Code that directly relates to each drug prescribed over 8 is required. ICD-9-CM literal description is not acceptable.)

**STEP 2: When a pharmacist dispenses the prescription with the above requirements in Step 1, the 8 prescription limit per month will not apply.**

Overrides will apply to the original prescription and its refills when the requirements in Step 1 are followed, up to the pharmacy program's maximum which is up to 5 refills or 6 months from the date of the prescription. Printed statements without the prescribing practitioner's signature, check-off boxes or stamped signatures are not acceptable documentation. An acceptable statement and ICD-9-CM code are required for each prescription in excess of 8 for that month. Prescribers are required to maintain documentation to support the override of a prescription limitation.

The "medically necessary override" stated in Step 1 does not replace the "brand necessary" written requirement needed to prescribe a "brand necessary" drug product when the prescriber certifies that a specified brand is medically necessary for a particular recipient. If "brand necessary" is needed in addition to the "medically necessary override", both statements shall be written on the prescription.

#### **Clinical Drug Inquiry (CDI) Application**

We are pleased to furnish you with the CDI Web Page, which provides you with a listing of all of the drugs that have been dispensed to a Medicaid recipient by all types of prescribers over a four-month period. The CDI data is available 24 hours a day, updated on a daily basis, only accessible by an authorized Medicaid provider and is available in a print friendly version.

The major benefits of the CDI data are:

- Allows you to evaluate a Medicaid recipient's drug usage over a four month period;
- Displays whether the recipient has been prescribed similarly clinically effective drugs;
- Facilitates assessment of your patient, based on your clinical expertise and knowledge, the drug(s) that have been prescribed by yourself and /or other providers---determining whether to discontinue some of the drugs, prescribe less costly drugs, or prescribe drugs that are more clinically appropriate;
- Assist the prescriber in deciding if a Medicaid recipient requires more than 8 prescriptions per month based upon your clinical assessment of the patient's disease state or medical condition.

The Medicaid Clinical Drug Inquiry (CDI) data can be accessed by:

Step 1: Using your Internet browser, access the Internet Web page: [www.lamedicaid.com](http://www.lamedicaid.com)

Step 2: Click on the "Provider Log-In" button in the upper left margin of the home page;

Step 3: Enter "your 7-digit Medicaid Provider ID number" in the data entry box;

Step 4: Follow the instructions for establishing "your online account";

Step 5: Follow the instructions for "activation of your online account";

NOTE: Provider enrollment instructions are available in a print friendly version for steps 4 & 5 by clicking the provider instructions link;

Step 6: Follow the instructions for the "use of the CDI link to view recipient prescription information".

NOTE: Instructions for step 6 are available in a print friendly version.

**NOTE: For assistance with any of the above steps, please call 1-800-648-0790.**

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We strongly encourage you to take advantage of this state-of-the-art Internet accessible recipient drug history. Thank you for your continued support of the Medicaid Pharmacy Benefits Management Program for providing the best health care including the most clinically appropriate and cost effective drug regimes to Medicaid patients.