



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

June 1, 2009

Dear Pharmacist:

Louisiana Medicaid's Pharmacy Benefits Management (LMPBM) staff and Louisiana Medicaid's Drug Utilization Review Board are charged with assuring that pharmacy services billed to Medicaid are appropriate and medically necessary. The purpose of this correspondence is to notify pharmacy providers of upcoming edits and limitations that the LMPBM is implementing regarding buprenorphine agents (Suboxone® and Subutex®) used to treat opioid dependence. The Pharmacy Benefits Management staff has worked in concert with the Office of Addictive Disorders and Louisiana's Drug Utilization Review Board to establish the parameters for Medicaid coverage.

Enclosed is information regarding the use of the Electronic Clinical Drug Inquiry (e-CDI) which allows you to evaluate a Medicaid recipient's drug usage over a four month period. In addition, we encourage you to access the Louisiana Board of Pharmacy Prescription Monitoring Program (PMP) to review your patients' controlled substance medication histories which include prescriptions filled without reimbursement from Louisiana Medicaid.

The Louisiana Medicaid Pharmacy Compliance Audit Program will review claims for adherence to program policy. Pharmacists are reminded to maintain hardcopies of the prescriptions for these agents and to assure appropriate documentation is included on the prescription.

If you have any concerns or comments regarding this correspondence, you may contact Melwyn B. Wendt at 225-342-9768 or send a fax to 225-342-1980. Your continued cooperation and support of Louisiana Medicaid's Pharmacy Benefits Management Program are greatly appreciated.

Sincerely,

  
Jerry Phillips  
Medicaid Director

JP/MJT/mbw

**Buprenorphine HCl/Naloxone HCl (Suboxone®) and Buprenorphine HCl (Subutex®)**

Suboxone® and Subutex® are sublingual tablets indicated for the treatment of opioid dependence. Suboxone® contains buprenorphine (a partial agonist at the mu-opioid receptor and an antagonist at the kappa-opioid receptor) and naloxone (an antagonist at the mu-opioid receptor). Subutex® contains buprenorphine only. **Effective June 17, 2009**, prescriptions for Suboxone® and Subutex® will only be reimbursed by Louisiana Medicaid when the following criteria are met:

**Prescriber Requirements**

- The prescriber is a physician,
- The physician has an X DEA number
  - The prescriber is licensed to prescribe Suboxone® and Subutex® and has provided a copy of his/her current Controlled Substance Registration Certificate and a copy of a Provider Enrollment File Update Form to  
**Unisys Provider Enrollment ATTN: Lois Harpole at Fax Number 1- 225-216-6392.**

If the physician does not meet these requirements, claims for Suboxone® and Subutex® will deny with:

**NCPDP rejection code 71 (Prescriber is Not Covered) mapped to EOB code 514 (Prescribing Provider Does Not Have Prescriptive Authority).**

**ICD-9-CM Diagnosis Code Requirements**

An appropriate ICD-9-CM diagnosis code indicating opioid dependence must be documented on the hardcopy prescription after written or verbal consultation with the physician. Telephone prescriptions for Suboxone® and Subutex® are permissible when the appropriate ICD-9-CM code is documented (by the physician or pharmacist) on the hardcopy prescription. Prescription claims for Suboxone® and Subutex® shall be submitted with one of the following diagnosis code entered in NCPDP field 424-DO (Diagnosis Code):

<b>ICD-9-CM Diagnosis Code</b>	<b>Description</b>
304.0 through 304.03	Opioid Type Dependence
304.7 through 304.73	Combinations of Opioid Type Drug with Any Other

Claims submitted without an appropriate diagnosis code or without any diagnosis code will deny with:

**NCPDP rejection code 39 (Missing or Invalid Diagnosis Code) mapped to EOB code 575 (Missing or Invalid Diagnosis Code).**

### Maximum Dosage Requirements

- Prescriptions for Suboxone® are allowed a **maximum** daily dose of 24mg/day,
- Prescriptions for Subutex® are allowed a **maximum** daily dose of 16mg/day.

Prescriptions for Suboxone® and Subutex® which exceed the maximum daily dosage requirement will deny with:

**NCPDP rejection code 88 (DUR Reject Error) mapped to EOB code 529 (Exceeds Maximum Daily Dose).**

**No provisions for override are allowed for the maximum daily dose rejection.**

### New Prescription Requirement

Refills for Suboxone® and Subutex® prescriptions are **not allowed**. The physician must authorize a new prescription each time. Prescriptions may be submitted by hardcopy or via telephone. However, claims submitted for refills will deny with:

**NCPDP rejection code 73 (Refills Are Not Covered) mapped to EOB code 461 (Refills Not Payable).**

### Concurrent Opioid Analgesic and/or Benzodiazepine Therapies

Concurrent prescriptions for opioid analgesics and/or benzodiazepines with Suboxone® or Subutex® active prescriptions will only be reimbursed when written by the same physician who prescribed Suboxone® or Subutex® for the patient.

When a patient has an active prescription for any opioid analgesic (including Suboxone® or Subutex®) written by the **same prescriber**, the incoming prescription will deny as a therapeutic duplication. The incoming claim will deny with:

**NCPDP rejection code 88 (DUR Reject Error) mapped to EOB code 482 (Therapeutic Duplication).**

An active prescription is a prescription in which the days supply has not expired. The pharmacist will have to **contact the physician for his/her authorization** to assure the physician wants concurrent therapy before filling the incoming opioid prescription and override the denial edit. If the prescriber authorizes use of both prescriptions, the pharmacist must **document the codes listed below on the hardcopy prescription** and submit the override:

**NCPDP 439-E4 field (Reason for Service Code) – TD (Therapeutic Duplication)**  
**NCPDP 440-E5 field (Professional Service Code) – MØ (Prescriber Consulted)**  
**NCPDP 441-E6 field (Result of Service Code) – 1G (Filled with Prescriber Approval)**

Incoming prescriptions for Suboxone® or Subutex® will deny when there is an active prescription for either Suboxone® or Subutex® on the recipient's file with:

**NCPDP rejection code 88 (DUR Reject Error) mapped to EOB code 482 (Therapeutic Duplication).**

**There are no provisions for overrides** for therapeutic duplications or early refills of Suboxone® and/or Subutex® incoming prescriptions.

Concurrent opioid analgesic and/or benzodiazepine prescriptions **written by a different prescriber** for patients on Suboxone® or Subutex® will deny with:

**NCPDP rejection code 88 (DUR Reject Error) mapped to EOB code 471 (Drug to Drug Interaction).**

**There are no provisions for overrides.**

#### Age Requirement

Suboxone® or Subutex® therapy is indicated for ages sixteen and older. Claims for recipients under the age of sixteen will deny with:

**NCPDP rejection code 60 (Product/Service Not Covered for Patient Age) mapped to EOB code 234 (P/F Age Restriction).**

#### Prescription Monitoring Program

The Louisiana Board of Pharmacy operates a Prescription Monitoring Program which captures the controlled substances dispensed in Louisiana. Prescribers and dispensers are permitted to apply for authority to access the information directly via a web portal, but only for their patients. To learn more about the program, please go to [www.labp.com](http://www.labp.com) website.

#### Electronic Clinical Drug Inquiry (e-CDI) Application

The e-CDI provides a clinical drug inquiry application which provides a four-month drug history dispensed to Medicaid recipients by all types of prescribers. This 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. This application is available in the secured provider site of [www.lamedicaid.com](http://www.lamedicaid.com).

The major benefits of the e-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.**

**The Medicaid Clinical Data Inquiry (e-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 red "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" with lamedicaid;
- 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 e-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 1-877-598-8753