



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

MEMORANDUM

DATE: October 18, 2016

TO: All Louisiana Fee-for-Service (FFS) Medicaid Providers

FROM: Jen Steele, Medicaid Director *Jen Steele*

SUBJECT: Fee-for-Service (FFS) Medicaid Pharmacy Preventive Care Coverage and Copayment Exemption List

Effective October 19, 2016, the Louisiana Medicaid Pharmacy Program will implement an updated preventive care coverage and copayment exemption list for select medications. In accordance with U.S. Preventive Services Task Force (USPSTF) A and B Recommendations, the following preventive care medications are covered and copay exempt for eligible Medicaid recipients.

- Aspirin 81mg
 - Women ages 12-79
 - Men ages 45-79
- Vitamin D 400 IU
 - Women and Men ages 65 and older
- Folic acid 0.4mg and 0.8mg
 - Women ages 12-54
- Breast cancer preventive medications
 - Tamoxifen
 - Raloxifene
- Tobacco cessation pharmacotherapy
 - Nicotine
 - Nicotine Polacrilex-gum and lozenge
 - Bupropion HCl SR (Zyban®)
 - Varenicline Tartrate (Chantix®)
- Oral fluoride supplementation
 - Sodium fluoride tabs, drops, chewable tabs
 - Recipients 6 months to 5 years old (This is already copay exempt for all recipients < 21 years old.)
- Gonorrhea prophylactic medication
 - Erythromycin eye ointment

- Newborns (This is already copay exempt for all recipients < 21 years old.)

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 or refer to www.lamedicaid.com.

JS/MBW/GJS

c: Bayou Health Plans
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