




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

MEMORANDUM

DATE: July 20, 2015
TO: All Louisiana Medicaid Providers
FROM: 
Bill Perkins, Medicaid Deputy Director
SUBJECT: Reimbursement Itemized on Fee for Service Pharmacy Claims

Effective July 24, 2015, reimbursement of the dispensing fee and provider fee will be itemized out separately on Fee for Service pharmacy claims. Dispensing fee will be remitted at a maximum allowable of \$10.41 in NCPDP field 507-F7 (dispensing fee paid). Provider fee will be remitted at \$0.10 per paid claim in NCPDP field 558-AW (flat sales tax paid). Previously, both the dispensing fee and provider fee were remitted together at a maximum allowable of \$10.51 in NCPDP field 507-F7 (dispensing fee paid).

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.

BP/MBW/ESF

c: Bayou Health Plans
Mary TC Johnson
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Molina