

John Bel Edwards
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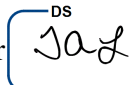
Dr. Courtney N. Phillips
SECRETARY

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

MEMORANDUM

DATE: March 22, 2023

TO: All Louisiana Medicaid Prescribing Providers and Pharmacists

FROM: Tara A. LeBlanc, Medicaid Executive Director  ^{DS}

SUBJECT: Louisiana Medicaid Pharmacy Point of Sale Diagnosis Code Requirement- April 2023

Effective April 1, 2023, the Louisiana Medicaid Fee for Service (FFS) Pharmacy Program and Managed Care Organizations (MCOs), in consultation with the Drug Utilization Review (DUR) Board, will implement new Point of Sale (POS) diagnosis code requirements for select medications. The diagnosis code requirement applies to pharmacy claims submitted to FFS and MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Humana Healthy Horizons, Louisiana Healthcare Connections, and UnitedHealthcare).

Diagnosis Code Requirement

A pharmacy claim will deny at Point of Sale (POS) when there is a missing or invalid diagnosis code submitted in **NCPDP field 424-DO** (Diagnosis Code) with:

MCO Only: The pharmacy claim will deny with a **NCPDP rejection code**.

FFS Only: **NCPDP rejection code 39** (Missing/Invalid ICD-10-CM diagnosis code) mapped to **EOB Code 575** (Missing/Invalid ICD-10-CM diagnosis code).

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Pharmacy claims for the following select medications in the chart require a diagnosis code at POS.

Medication	Diagnosis Description	Diagnosis Code
Amifampridine (Firdapse®)	Lambert-Eaton Myasthenic Syndrome (LEMS)	G70.80, G70.81, G73.1
Chorionic Gonadotropin (Novarel®, Pregnyl®)	Prepubertal Cryptorchidism	Q53.10, Q53.11*, Q53.12, Q53.20, Q53.21*, Q53.22, Q53.9
	Hypogonadotropic Hypogonadism	E23.0
Dexmedetomidine (Igalmi™)	Agitation associated with Schizophrenia	F20.*, F25.*
	Agitation associated with Bipolar I or II Disorder	F30.*, F31.*, F32.8*, F34.8*, F34.9, F39
Dextroamphetamine (Xelstry™)	Attention Deficit Hyperactivity Disorders	F90.*
Ganaxolone (Ztalmy®)	Seizures Associated with Cyclin-Dependent Kinase-Like 5 (CDKL5) Deficiency Disorder	G40.42
Olipudase alfa-rpcp (Xenpozyme™)	Acid Sphingomyelinase Deficiency (ASMD)	E75.241, E75.244
Tadalafil Suspension (Tadliq®)	Pulmonary Arterial Hypertension (PAH)	I27.0, I27.2*, I27.89, P29.3*
Treprostinil (Tyvaso DPI™)	Pulmonary Arterial Hypertension (PAH)	I27.0, I27.2*, I27.89, P29.3*
Vutrisiran (Amvuttra™)	Polyneuropathy of Hereditary Transthyretin-Mediated Amyloidosis	E85.1

* Any number or letter or combination of up to four numbers and letters of an assigned ICD-10 diagnosis code

Removal of Point of Sale Diagnosis Code Requirement for Cabotegravir (Vocabria)

The diagnosis code requirement at POS for cabotegravir (Vocabria) was removed to align with other HIV PrEP agents that do not require a diagnosis code at POS.

Additional Information:

FFS Only: Most pharmacy claim denials can be overridden in emergency situations at Point of Sale. If it is necessary to override the claim, “03” can be entered in **NCPDP field 418-DI** (Level of Service). Refer to www.lamedicaid.com for the POS User Guide for drug specific override procedures.

MCO Only: If an override is required, or additional assistance is needed, contact the health plan. (See contact information at the end of this document.)

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Refer to <http://ldh.la.gov/assets/HealthyLa/Pharmacy/PDL.pdf> for the PDL, which is inclusive of the *Louisiana Uniform Prescription Drug Prior Authorization Form*, medication list, and criteria.

If you have questions about the content of this memo, you may contact the FFS pharmacy help desk by phone at (800) 437-9101. If you have questions about pharmacy claims billing, you may contact the appropriate plan at their pharmacy help desk listed in the chart below.

Healthcare Provider	Pharmacy Help Desk	Pharmacy Help Desk Phone Number
Aetna	CVS Health	(855) 364-2977
AmeriHealth Caritas	PerformRx	(800) 684-5502
Fee for Service	Gainwell Technologies	(800) 648-0790
Healthy Blue	CVS	(833) 236-6194
Humana Healthy Horizons	Gainwell Technologies	(800) 648-0790
Louisiana Healthcare Connections	CVS Caremark	(800) 311-0543
UnitedHealthcare	Optum Rx	(866) 328-3108

Please forward this notice to other providers to assist with notification. Your continued cooperation and support of the Louisiana Medicaid Program efforts to coordinate care and improve health are greatly appreciated.

TL/MBW/GJS

c: Healthy Louisiana Plans
Melwyn B. Wendt
Gainwell Technologies