



# State of Louisiana

Louisiana Department of Health  
Bureau of Health Services Financing

## MEMORANDUM

**DATE:** December 21, 2023

**TO:** All Louisiana Medicaid Prescribing Providers and Pharmacists

**FROM:** Kimberly Sullivan, Interim Medicaid Executive Director *KCS*

**SUBJECT:** Louisiana Medicaid Pharmacy Point of Sale Diagnosis  
Code Requirement- January 2024

Effective January 1, 2024, 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:** **NCPDP rejection code 39** (Missing/Invalid ICD-10-CM diagnosis code) or **NCPDP rejection code 80** (Diagnosis code submitted does not meet drug coverage criteria).

**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).

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

Table 1: POS Diagnosis Code Requirements		
Medication	Diagnosis Description	Diagnosis Code
Buprenorphine Extended-Release Injection (Brixadi™)	Opioid Type Dependence	F11.2*
Efgartigimod alfa-fcab (Vyvgart®)	Myasthenia Gravis	G70.0*
Efgartigimod alfa and hyaluronidase-qvfc (Vyvgart® Hytrulo)	Myasthenia Gravis	G70.0*
Rozanolixizumab-noli (Rystiggo®)	Myasthenia Gravis	G70.0*
<b>Selected Hormonal Agents</b> <ul style="list-style-type: none"> <li>Androgenic Agents – methyltestosterone oral, testosterone cypionate, testosterone enanthate, testosterone nasal, testosterone oral, testosterone transdermal, testosterone pellet implant, testosterone undecanoate</li> <li>Dutasteride (Avodart®)</li> <li>Estrogenic Agents – estradiol (oral, transdermal, vaginal insert), estradiol cypionate, estradiol valerate, estradiol/levonorgestrel patch, estradiol/norethindrone (patch, tablet), estradiol/progesterone oral, conjugated estrogens (oral, injectable) conjugated estrogens/medroxyprogesterone acetate oral, conjugated estrogens/bazedoxifene oral, esterified estrogens oral, ethinyl estradiol/norethindrone acetate oral</li> <li>Finasteride (Proscar®)</li> <li>Progestational Agents on PDL/NPDL</li> <li>Progestins – hydroxyprogesterone caproate injection, medroxyprogesterone acetate (injection, tablet), norethindrone acetate oral, progesterone (injection, oral)</li> <li>Spironolactone oral</li> </ul>	<p>A diagnosis code is required on pharmacy claims for these agents when submitted for recipients who are younger than 18 years old. In these cases, pharmacy claims that are submitted with a diagnosis code associated with gender dysphoria or gender reassignment (F64*, Z87.890) will deny.</p>	<p>Diagnosis <i>must</i> be submitted but <i>cannot</i> be F64* or Z87.890</p>

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

**Additional Information:**

**FFS and MCO:** 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](http://www.lamedicaid.com) for the POS User Guide for drug specific override procedures.

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, criteria, and diagnosis code list.

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, AmeriHealth Caritas, Healthy Blue, Humana Healthy Horizons, Louisiana Healthcare Connections, UnitedHealthcare	Magellan	(800) 424-1664
Fee for Service	Gainwell Technologies	(800) 648-0790

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.

KS/MBW/GJS

c: Healthy Louisiana Plans  
Melwyn B. Wendt  
Gainwell Technologies  
Magellan