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

**MEMORANDUM**

**DATE:** June 27, 2023

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

**FROM:** Tara A. LeBlanc, Medicaid Executive Director 

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

Effective July 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
Dulaglutide – Trulicity® Exenatide –Bydureon®, Bydureon BCise®, Byetta® Liraglutide – Victoza® Liraglutide/Insulin Degludec – Xultophy® Lixisenatide – Adlyxin® ( <i>Discontinued 1/1/23</i> ) Lixisenatide/ Insulin Glargine – Soliqua® Semaglutide – Ozempic®, Rybelsus® Tirzepatide – Mounjaro®	Type 2 Diabetes Mellitus	E11*

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

**Diagnosis Code Requirement Update**

The Pulmonary Arterial Hypertension (PAH) agent treprostinil diolamine (Orenitram® Titration Kit) will be included with treprostinil ER and require a diagnosis code at Point of Sale.

Medication	Diagnosis Description	Diagnosis Code
Treprostinil Diolamine (Orenitram® Titration Kit)	Pulmonary Arterial Hypertension (PAH)	I27.0,I27.2*, I27.89, or P29.3*

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

**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](http://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.)

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.

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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.

<b>Healthcare Provider</b>	<b>Pharmacy Help Desk</b>	<b>Pharmacy Help Desk Phone Number</b>
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