John Bel Edwards GOVERNOR



Dr. Courtney N. Phillips
SECRETARY

# State of Louisiana

Louisiana Department of Health Bureau of Health Services Financing

#### MEMORANDUM

**DATE:** September 29, 2022

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

FROM: Tara A. LeBlanc, Medicaid Executive Director

**SUBJECT:** Louisiana Medicaid Pharmacy Point of Sale (POS) Edits-

October 2022

Effective October 1, 2022, 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) edits. The POS edits apply to pharmacy claims submitted to FFS and MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Louisiana Healthcare Connections, and UnitedHealthcare).

# Point of Sale Edit for Therapeutic Duplication of Tirzepatide (Mounjaro<sup>TM</sup>) with DPP-4 Inhibitors

Pharmacy claims for tirzepatide (Mounjaro<sup>TM</sup>) will deny at POS when there is an active claim on the recipient's file for a DPP-4 inhibitor. Also, pharmacy claims for a DPP-4 inhibitor will deny at POS when there is an active claim on the recipient's file for tirzepatide (Mounjaro<sup>TM</sup>).

# <u>Point of Sale Edit for Therapeutic Duplication of Amlodipine (Norliqva®) with</u> Other Calcium Channel Blockers

Pharmacy claims for amlodipine (Norliqva®) will deny at POS when there is an active claim on the recipient's file for another calcium channel blocker. Also, pharmacy claims for calcium channel blockers will deny at POS when there is an active claim on the recipient's file for amlodipine (Norliqva®).

# <u>Point of Sale Edit for Therapeutic Duplication of Tramadol/Celecoxib (Seglentis®)</u> <u>with Short-Acting Opioid or Buprenorphine-Containing Agent</u>

Pharmacy claims for tramadol/celecoxib (Seglentis®) will deny if there is an active claim on the recipient's file for another short-acting opioid or buprenorphine-containing agent. Conversely, incoming pharmacy claims for a short-acting opioid or buprenorphine-containing agent will deny if there is an active claim on the recipient's file for tramadol/celecoxib (Seglentis®).

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Pharmacy claims with a therapeutic duplication will deny with:

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

FFS Only: NCPDP rejection code 88 (DUR Reject Error) mapped to EOB Code 482 (Therapeutic Duplication)

After consultation with the prescriber, the pharmacist may override the therapeutic duplication denial by submitting:

NCPDP 439-E4 field (Reason for Service Code) TD (Therapeutic Duplication)
NCPDP 440-E5 field (Professional Service Code) MØ (Prescriber Consulted)
NCPDP 441-E6 field (Result of Service Code) 1G (Filled with Prescriber Approval)

## Point of Sale Maximum Dose for Semaglutide (Ozempic®) (Update)

Pharmacy claims for semaglutide (Ozempic®) exceeding the maximum weekly dose of 2mg/week will deny at POS with:

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

FFS Only: NCPDP rejection code 88 (DUR Reject Error) mapped to EOB code 529 (Exceeds maximum dose)

After consultation with the prescriber to verify the necessity of a dose greater than the maximum weekly dose for the recipient, the pharmacist may override the denial by submitting in:

NCPDP 439-E4 field (Reason for Service Code) HD (High Dose)
NCPDP 440-E5 field (Professional Service Code) MØ (Prescriber Consulted)
NCPDP 441-E6 field (Result of Service Code) 1G (Filled with Prescriber Approval)

## **Additional Information**:

<u>FFS Only:</u> 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 <u>www.lamedicaid.com</u> for the POS User Guide for drug specific override procedures.

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

Refer to <a href="http://ldh.la.gov/assets/HealthyLa/Pharmacy/PDL.pdf">http://ldh.la.gov/assets/HealthyLa/Pharmacy/PDL.pdf</a> 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.

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
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