Dr. Courtney N. Phillips
SECRETARY

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# State of Louisiana

Louisiana Department of Health Bureau of Health Services Financing

#### MEMORANDUM

**DATE:** December 16, 2022

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

FROM: Tara A. LeBlanc, Medicaid Executive Director

**SUBJECT:** Louisiana Medicaid Pharmacy Point of Sale Quantity Limits –

January 2023

Effective January 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 quantity limits for select medications. The quantity limits apply to pharmacy claims submitted to FFS and MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Humana Healthy Horizons, Louisiana Healthcare Connections, and UnitedHealthcare).

#### **Quantity Limit**

The agents listed in the chart below have quantity limits at Point of Sale (POS).

Medication	Quantity Limit	
Daridorexant (Quviviq <sup>TM</sup> )	7 tablets per rolling 30 days (naïve	
	recipients) *	
	15 tablets per rolling 30 days (non- naïve	
	recipients) *	
Naloxone Nasal Spray (Narcan®)	4 units/30 days	
Naloxone Nasal Spray (Kloxxado™)	4 units/30 days	
Naloxone Injectable Solution Cartridge/Vial (1ml)	4 units/30 days	
0.4mg/ml		
Naloxone Injectable Solution Syringe 1mg/ml	4 units/30 days	
Naloxone Injectable Solution (5ml, 10ml, 20ml)	1 unit/30 days	
1mg/ml		
Naloxone Injectable Solution (10ml) 0.4mg/ml	1 unit/30 days	
Naloxone Injectable Solution (Zimhi <sup>TM</sup> )	4 syringes (2ml)/30 days	

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\*Naïve is defined as having no paid pharmacy claim for a sedative hypnotic in the previous 60-days whereas non-naïve is defined by at least one paid pharmacy claim for a sedative hypnotic in the previous 60-days.

Note: Pharmacy claims for daridorexant (Quviviq<sup>TM</sup>) submitted with a diagnosis code for palliative end-of-life care (Z51.5) will bypass the quantity limits.

Pharmacy claims that exceed the quantity limit will deny at Point of Sale (POS) with:

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

FFS Only: NCPDP rejection code 76 (Quantity and/or days' supply exceeds program maximum) mapped to EOB code 457 (Quantity and/or days' supply exceeds program maximum.)

### **Quantity Limit Override**

FFS Only: Upon consultation with the prescriber to verify the necessity of the requested therapy, the pharmacist may override the denial by submitting the following override at POS:

NCPDP 439-E4 Field (Reason for Service Code) EX (Excessive Quantity)
NCPDP 440-E5 Field (Professional Service Code) MØ (Prescriber Consulted)
NCPDP 441-E6 Field (Result of Service Code) 1G (Filled with Prescriber Approval)

#### **Quantity Limit Override for Naloxone Products:**

<u>FFS Only</u>: Upon consultation with the prescriber to verify the necessity of the requested therapy, the pharmacist may override the denial by submitting the following override at POS:

NCPDP 439-E4 field (Reason for Service Code) EX (Excessive Quantity)
NCPDP 440-E5 field (Professional Service Code) RØ (Pharmacist Consulted other source)
NCPDP 441-E6 field (Result of Service Code) 1B (Filled, Prescription as Is)

## **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 and override procedures.

MCO Only: If assistance is needed to override the quantity limit, contact the health plan. (See contact information at the end of this document.)

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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.

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