John Bel Edwards
GOVERNOR

State of Louisiana

Rebekah E. Gee MD, MPH
SECRETARY

Louisiana Department of Health
Bureau of Health Services Financing

MEMORANDUM

DATE: September 24, 2019

TO: All Louisiana Medicaid Prescribing Providers and Pharmacists

FROM: Jen Steele, Medicaid Director

SUBJECT: Louisiana Medicaid Updated Opioid Clinical Edits

Effective October 1, 2019, the Louisiana Medicaid Fee for Service (FFS) Pharmacy Program and Managed Care Organizations (MCOs) will update clinical edits at Point of Sale (POS) for opioids. The opioid updates applies to FFS and Medicaid MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Louisiana Healthcare Connections, and United Healthcare).

Therapeutic Duplication of Short-Acting Opiates

An incoming pharmacy claim for a short-acting opiate will deny if there is an active claim for a short acting opiate on the recipient's file. The pharmacy claim will deny with the following codes:

> FFS Only: **NCPDP rejection code 88** (DUR reject error) mapped to
> FFS Only: **EOB code 482** (Therapeutic Duplication).
> MCO Only: The pharmacy claim will deny with an **NCPDP rejection code**.

MCO Only: After consultation with the prescriber, to verify the necessity of the therapeutic duplication, the pharmacist can override the claim. If additional assistance is needed, contact the health plan. (See contact information at the end of this document.)

FFS Only: After consultation with the prescriber, to verify the necessity of the therapeutic duplication, the pharmacist may override the denial by submitting the following codes at POS in:

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)

Therapeutic Duplication of Long-Acting Opiates

An incoming pharmacy claim for a long-acting opiate will deny if there is an active prescription for a long-acting opiate on a recipient's file. The pharmacy claim will deny with the following codes:

> FFS Only: **NCPDP rejection code 88** (DUR reject error) mapped to
> FFS Only: **EOB code 482** (Therapeutic Duplication).
> MCO Only: The pharmacy claim will deny with a **NCPDP rejection code**.

MCO Only: After consultation with the prescriber, to verify the necessity of the therapeutic duplication, the pharmacist can override the claim. If additional assistance is needed, contact the health plan. (See contact information at the end of this document.)

FFS Only: After consultation with the prescriber, to verify the necessity of the therapeutic duplication, the pharmacist may override the denial by submitting the following at POS in:

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).

Concurrent Use of Opiates and Benzodiazepines

An incoming pharmacy claim for an opioid will deny if there is an active claim on a recipient's file for a benzodiazepine. An incoming pharmacy claim for a benzodiazepine will deny if there is an active claim on the recipient's file for an opioid.

A pharmacy claim for the concurrent use of an opioid and a benzodiazepine will deny with the following:

> FFS Only: **NCPDP rejection code 88** (DUR reject error) mapped to
> FFS Only: **EOB code 423** (Additive Toxicity).
> MCO Only: The pharmacy claim will deny with a **NCPDP rejection code**.

MCO Only: After consultation with the prescriber, to verify the necessity of concurrent therapy, the pharmacist can override the claim. If additional assistance is needed, contact the health plan. (See contact information at the end of this document.)

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

NCPDP 439-E4 field (Reason for Service Code) **AT** (Additive Toxicity)
NCPDP 440-E5 field (Professional Service Code) **MØ** (Prescriber Consulted)
NCPDP 441-E6 field (Result of Service Code) **1G** (Filled with Prescriber Approval).

FFS and MCO: Pharmacy claims for concurrent opioid and benzodiazepine therapy (incoming opioid with active benzodiazepine) will not reject when there is a diagnosis code of the following submitted in **NCPDP field 424-DO**:

Diagnosis	ICD-10-CM Diagnosis Code
Cancer	C00.*-C96.*
Palliative Care	Z51.5
*-any number or letter or combination of assigned ICD-10-CM diagnosis code	UP TO FOUR numbers and letters of an

FFS and MCO: An incoming benzodiazepine pharmacy claim will bypass the rejection for additive toxicity, whenever the recipient has an active opioid claim on file and the incoming benzodiazepine claim is submitted with one of the following acceptable diagnosis codes:

Diagnosis	ICD-10-CM Diagnosis Code
Convulsions in Newborn	P90
Epilepsy, Seizures	G40*
Other Convulsions	R56*
*-any number or letter or combination of assigned ICD-10-CM diagnosis code	UP TO FOUR numbers and letters of an

Point of Sale Clinical Edits for Benzhydrocodone/Acetaminophen (Apadaz®)

Pharmacy claims for benzhydrocodone/acetaminophen have the following clinical edits:
- a quantity limit of 45 units every 30 days;
- a quantity limit of 28 units every 7 days (opioid naïve recipients); and
- a 90 Morphine Milligram Equivalent (MME) per day limit.

Pharmacy claims, which exceed the quantity limit for short-acting opioids for **opioid-naïve recipients** will deny with the following:

> FFS Only: **NCPDP rejection code 76** (Quantity and/or days supply exceeds program maximum) mapped to
> FFS Only: **EOB code 062** (Quantity Exceeds Maximum-Override Using PA Process).
> MCO Only: The pharmacy claim will deny with a **NCPDP rejection code**.

Pharmacy claims, which exceed the opioid quantity limit, will deny with the following:

> FFS Only: **NCPDP rejection code 76** (Quantity and/or days supply exceeds program maximum) mapped to
> FFS Only: **EOB code 153** (Quantity Exceeds Maximum-Override Using Prior Authorization (PA) Process).
> MCO Only: The pharmacy claim will deny with an **NCPDP rejection code**.

Pharmacy claims, which exceed the 90 Morphine Milligram Equivalent (MME) limit per day, will deny with the following:

> FFS Only: **NCPDP rejection code 88** (DUR reject error) mapped to
> FFS Only: **EOB code 352** (Over 90 MME/day-Override Using PA Process).
> MCO Only: The pharmacy claim will deny with a **NCPDP rejection code**.

Pharmacy claims for additional increases to the MME limit* will deny at POS with the following:

> FFS Only: **NCPDP rejection code 88** (DUR reject error) mapped to
> FFS Only: **EOB code 353** (MME Limit Exceeded-Override Using PA Process).
> MCO Only: The pharmacy claim will deny with a **NCPDP rejection code**.

MME overrides are programmed to the recipient's total MME at the time of the request. If future claims should cause the MME to exceed amount programmed into the system, an additional override will be required.

MCO Only: The pharmacy claim will deny with a NCPDP rejection code. After consultation with the prescriber, the pharmacist can override the claim by contacting the health plan. (See contact information at the end of this document.)

FFS Only: Override provisions for exceeding the MME limit are available in the prior authorization (PA) process.

NOTE: MME limits, therapeutic duplication edits, limits requiring previous use of a short before a long-acting narcotic do not apply to narcotic analgesics when prescribed for cancer, palliative end-of-life care, second and third degree burns and corrosions, and sickle-cell crisis.

Clinical and prior authorization will require prescribers to complete in full and submit the *Louisiana Uniform Prescription Drug Prior Authorization Form.*

Refer to http://ldh.la.gov/assets/HealthyLa/Pharmacy/PDL.pdf for the Single PDL, which is an inclusive listing of preferred/non-preferred drugs, criteria, and forms.

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	DXC Technology	(800) 648-0790
Healthy Blue	CVS	(833) 236-6194
Louisiana Healthcare Connections	CVS Caremark	(800) 311-0543
United Healthcare	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.

JS/MBW/GJS

c: Healthy Louisiana Plans
  Melwyn B. Wendt
  DXC Technology