



State of Louisiana
Department of Health and Hospitals
Bureau of Health Services Financing

MEMORANDUM

DATE: October 20, 2014

TO: All Louisiana Medicaid Providers

FROM: *J. Ruth Kennedy*
J. Ruth Kennedy, Medicaid Director

SUBJECT: Diagnosis Code Requirements on Attention Deficit Hyperactivity Disorder/Attention Deficit Disorder (ADHD/ADD) Prescriptions for Louisiana Medicaid Pharmacy Program

The purpose of this memo is to advise you that effective October 28, 2014, the Louisiana Medicaid Pharmacy Program in collaboration with the Louisiana Medicaid Drug Utilization Review (DUR) Board has established diagnosis code requirements on all ADHD/ADD prescriptions. Covered diagnosis codes are in the table included in this memo.

For the medications listed in the table, an ICD-9-CM diagnosis code must be documented on the hardcopy prescription or in the pharmacy's electronic recordkeeping system.

Pharmacy claims for ADHD/ADD prescriptions 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:

NCPDP rejection code 39 (Missing or Invalid ICD-9 diagnosis code) mapped to EOB code 575 (Missing or Invalid ICD-9 diagnosis code)

When recipients are established on ADHD/ADD medications, but the ICD-9-CM diagnosis codes submitted are not included in the table of covered diagnoses, prescribing providers may call Louisiana Medicaid RxPA Operations at the University of Louisiana at Monroe School of Pharmacy at 1-866-730-4357 for guidance.

When the diagnosis code written on the prescription is not included in the list of covered diagnoses AND when the pharmacist cannot reach the prescriber OR when the RxPA Center is closed, the pharmacist, using his/her professional judgment, may deem the filling of the ADHD/ADD prescription to be an 'emergency.' In these emergency cases, the pharmacist must indicate 'Emergency Prescription' on the hardcopy or in the pharmacy's electronic recordkeeping system AND may override the diagnosis code requirement by:

Placing '03' in NCPDP field 418-DI (Level of Service)

Compliance associated with program policy will be verified through the Louisiana Medicaid Pharmacy Compliance Audit Program.

Your continued cooperation and support of the Louisiana Medicaid Program efforts to coordinate care and improve health are greatly appreciated.

If you have questions about the contents of this memo, you may contact the Pharmacy Help Desk at (800) 437-9101, send a fax to (225) 342-1980, or refer to www.lamedicaid.com.

MCJ/MBW/ESF

c: Bayou Health Plans
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**Louisiana Medicaid Covered ADHD/ADD ICD-9-CM Diagnosis Codes
For Recipients in Legacy Medicaid and Bayou Health Shared Plans**

| Drug Name | Covered ICD-9-CM Diagnosis Codes | Diagnosis Description |
|--|--|---|
| Dexmethylphenidate (Focalin [®] , Focalin XR [®]) | 314, 314.0, 314.00, 314.01, 314.1, 314.2, 314.8, 314.9 | Hyperkinetic Syndrome |
| | 140-208.9, 209.0-209.39 | Cancer-Related Fatigue |
| Methylphenidate IR, ER, CD, LA, TD patch (Concerta [®] , Daytrana [®] , Metadate CD [®] , Metadate ER [®] , Methylin [®] , Quillivant XR [®] , Ritalin [®] , Ritalin LA [®] , Ritalin SR [®]) | 314, 314.0, 314.00, 314.01, 314.1, 314.2, 314.8, 314.9 | Hyperkinetic Syndrome |
| | 347, 347.0, 347.00, 347.01, 347.1, 347.10, 347.11 | Narcolepsy |
| | 140-208.9, 209.0-209.39 | Cancer-Related Fatigue |
| Atomoxetine (Strattera [®]) | 314, 314.0, 314.00, 314.01, 314.1, 314.2, 314.8, 314.9 | Hyperkinetic Syndrome |
| Clonidine IR (Catapres [®] , Catapres-TTS [®]) Diagnosis only required for recipients 0 through 20 years of age. | 314, 314.0, 314.00, 314.01, 314.1, 314.2, 314.8, 314.9 | Hyperkinetic Syndrome |
| | 401-405.99 ^a | Hypertension |
| | 307.2, 307.20, 307.21, 307.22, 307.23, 333.3 | Tics/Tourette's Disorder |
| | 745-747.9 ^b | Hypertension in Congenital Heart Disease |
| Clonidine ER (Kapvay [®]) | 314, 314.0, 314.00, 314.01, 314.1, 314.2, 314.8, 314.9 | Hyperkinetic Syndrome |
| | 307.2, 307.20, 307.21, 307.22, 307.23, 333.3 | Tics/Tourette's Disorder |
| Guanfacine IR (Tenex [®]) Diagnosis only required for recipients 0 through 20 years of age. | 314, 314.0, 314.00, 314.01, 314.1, 314.2, 314.8, 314.9 | Hyperkinetic Syndrome |
| | 401-405.99 ^a | Hypertension |
| | 307.2, 307.20, 307.21, 307.22, 307.23, 333.3 | Tics/Tourette's Disorder |
| | 745-747.9 ^b | Hypertension in Congenital Heart Disease |
| Guanfacine ER (Intuniv [®]) | 314, 314.0, 314.00, 314.01, 314.1, 314.2, 314.8, 314.9 | Hyperkinetic Syndrome |
| | 307.2, 307.20, 307.21, 307.22, 307.23, 333.3 | Tics/Tourette's Disorder |
| Dextroamphetamine / Amphetamine (Adderall [®] , Adderall XR [®]) | 314, 314.0, 314.00, 314.01, 314.1, 314.2, 314.8, 314.9 | Hyperkinetic Syndrome |
| | 347, 347.0, 347.00, 347.01, 347.1, 347.10, 347.11 | Narcolepsy |
| Dextroamphetamine Sulfate (Dexedrine [®] , Zenzedi [®]) | 314, 314.0, 314.00, 314.01, 314.1, 314.2, 314.8, 314.9 | Hyperkinetic Syndrome |
| | 347, 347.0, 347.00, 347.01, 347.1, 347.10, 347.11 | Narcolepsy |
| Lisdexamfetamine (Vyvanse [®]) | 314, 314.0, 314.00, 314.01, 314.1, 314.2, 314.8, 314.9 | Hyperkinetic Syndrome |

Ranges include:

- a. Hypertension – 401, 401.0, 401.1, 401.9, 402, 402.0, 402.00, 402.01, 402.1, 402.10, 402.11, 402.9, 402.90, 402.91, 403, 403.0, 403.00, 403.01, 403.1, 403.10, 403.11, 403.9, 403.90, 403.91, 404, 404.0, 404.00, 404.01, 404.02, 404.03, 404.1, 404.10, 404.11, 404.12, 404.13, 404.9, 404.90, 404.91, 404.92, 404.93, 405, 405.0, 405.01, 405.09, 405.1, 405.11, 405.19, 405.9, 405.91, 405.99
- b. Hypertension in Congenital Heart Disease – 745, 745.0, 745.1, 745.10, 745.11, 745.12, 745.19, 745.2, 745.3, 745.4, 745.5, 745.6, 745.60, 745.61, 745.69, 745.7, 745.8, 745.9, 746, 746.0, 746.00, 746.01, 746.02, 746.09, 746.1, 746.2, 746.3, 746.4, 746.5, 746.6, 746.7, 746.8, 746.81, 746.82, 746.83, 746.84, 746.85, 746.86, 746.87, 746.89, 746.9, 747, 747.0, 747.1, 747.10, 747.11, 747.2, 747.20, 747.21, 747.22, 747.29, 747.3, 747.31, 747.32, 747.39, 747.4, 747.40, 747.41, 747.42, 747.49, 747.5, 747.6, 747.60, 747.61, 747.62, 747.63, 747.64, 747.69, 747.8, 747.81, 747.82, 747.83, 747.89, 747.9