

Enrollment in New Provider Portal Required for All Medicaid Providers

Louisiana Medicaid recently launched its Provider Enrollment Portal. If you file claims with Louisiana Medicaid, **you must enroll** in the new Medicaid Provider Enrollment Portal **to continue receiving reimbursement**.

CMS mandates enrollment for any provider that provides care to Medicaid members. The mandate includes current managed care organization (MCO) only, Dental Benefits Program Manager (DBPM), Coordinated System of Care (CSoC), existing fee-for-service providers, and any new providers enrolling for the first time.

To help simplify the enrollment process, Louisiana Medicaid has begun an enrollment drive that will devote time to each provider type over the next few months. During this time, Medicaid will be sharing resources, training, and answers to commonly asked question. You can also find additional trainings and FAQs at the bottom of the [Medicaid Provider Enrollment Portal webpage](#).

Providers are encouraged to enroll during their designated enrollment period during the drive. Each provider type can locate the timeframe devoted to their group on the [enrollment drive calendar](#). Please schedule time to enroll during the specified timeframe, if not sooner.

Providers who did not receive their portal invitation, or those who have questions or concerns, can reach out to Louisiana Medicaid via the following methods:

- Email: LouisianaProvEnroll@gainwelltechnologies.com
- Phone: #1-833-641-2140 (Monday – Friday, between 8 a.m. and 5 p.m. CST)

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FDA Drug Safety Communication: FDA Requires Warnings about Increased Risk of Serious Heart-Related Events, Cancer, Blood Clots, and Death for Janus Kinase (JAK) Inhibitors That Treat Certain Chronic Inflammatory Conditions

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Xeljanz/Xeljanz XR (tofacitinib), Olumiant (baricitinib), and Rinvoq (upadacitinib) are part of a drug class known as Janus kinase (JAK) inhibitors and are used to treat certain serious, chronic, and progressive inflammatory conditions. Xeljanz was the first to be approved in 2012. All three medicines are approved to treat rheumatoid arthritis (RA). Rinvoq is also approved to treat psoriatic arthritis and Xeljanz is also approved to treat psoriatic arthritis, ankylosing spondylitis, ulcerative colitis, and polyarticular course juvenile idiopathic arthritis. Xeljanz/Xeljanz XR, Olumiant, and Rinvoq work by decreasing activity of the immune system. Common side effects of these medicines include upper respiratory tract infections such as the common cold and sinus infections,

headache, cough, increased cholesterol levels, high blood pressure, increased muscle enzyme levels, rash, nausea, diarrhea, acne, and shingles.

Based on a completed U.S. Food and Drug Administration (FDA) review of a large randomized safety clinical trial, the FDA concluded that there is an increased risk of serious heart-related events such as heart attack or stroke, cancer, blood clots, and death with Xeljanz and Xeljanz XR (tofacitinib). This trial compared Xeljanz with another type of medicine used to treat arthritis called tumor necrosis factor (TNF) blockers in patients with rheumatoid arthritis. A prior FDA Drug Safety Communication, in July of 2019, was based upon earlier results from this trial and reported an increased risk of blood clots and death only seen at the higher dose. However, the trial's final results also showed an increased risk of blood clots and death with the lower dose of Xeljanz.

The FDA is requiring new and updated warnings for two other Janus kinase (JAK) inhibitors, Olumiant (baricitinib) and Rinvoq (upadacitinib). Olumiant and Rinvoq have not been studied in trials similar to the large safety clinical trial with Xeljanz, so the risks have not been adequately evaluated. However, since they share mechanisms of action with Xeljanz, the FDA considers that these medicines may have similar risks as seen in the Xeljanz safety trial. The FDA is requiring revisions to the Boxed Warning, FDA's most prominent warning, for Xeljanz/Xeljanz XR, Olumiant, and Rinvoq to include information about the risks of serious heart-related events, cancer, blood clots, and death. In addition, to ensure the benefits of these three medicines outweigh the risks in patients who receive them, the FDA is limiting all approved uses to certain patients who have not responded or cannot tolerate one or more TNF blockers.

Healthcare professionals should consider the benefits and risks for the individual patient prior to initiating or continuing therapy with Xeljanz/Xeljanz XR, Olumiant, or Rinvoq. This is particularly the case in patients who are current or past smokers, those with other cardiovascular risk factors, those who develop a malignancy, and those with a known malignancy other than a successfully treated nonmelanoma skin cancer. Healthcare providers should also remember that Xeljanz/Xeljanz XR, Olumiant, and Rinvoq should be reserved for patients who have had an inadequate response or intolerance to one or more TNF blockers.

Healthcare professionals should counsel patients about the benefits and risks of these medicines and advise them to see emergency medical attention if they experience signs and symptoms of a heart attack, stroke, or blood clot. These symptoms include:

- Discomfort in the center of the chest that lasts for more than a few minutes, or that goes away and comes back
- Severe tightness, pain, pressure, or heaviness in the chest, throat, neck, or jaw
- Unusual pain or discomfort in arms, back, neck, jaw, or stomach
- Shortness of breath with or without chest discomfort
- Breaking out in a cold sweat
- Nausea or vomiting
- Feeling lightheaded
- Weakness in one part or on one side of the body
- Slurred speech
- Drooping on one side of the mouth
- Swelling of a leg or arm
- Leg pain or tenderness, or red or discolored skin in the painful or swollen leg or arm

Treatment with these medicines is also associated with an increased risk of certain cancers including lymphoma and lung cancer; therefore, healthcare providers should instruct their patients to inform them if any of the following signs and symptoms are experienced:

- Swelling of lymph nodes in neck, armpits, or groin
- Constantly feeling tired
- Fever

- Night sweats
- Persistent or worsening cough
- Difficulty breathing
- Hoarseness or wheezing
- Unexplained weight loss

To help the FDA track safety issues with medicines, patients and healthcare professionals are urged to report side effects involving Xeljanz/Xeljanz XR, Olumiant, Rinvoq, or other medicines to [MedWatch: The FDA Safety Information and Adverse Event Reporting Program | FDA](#).

References

Olumiant (baricitinib) [package insert]. Indianapolis, IN: Lilly USA, LLC; December 2021. <http://pi.lilly.com/us/olumiant-uspi.pdf>
Rinvoq (upadacitinib) [package insert]. North Chicago, IL: AbbVie Inc; December 2021. https://www.rxabbvie.com/pdf/rinvoq_pi.pdf
U.S. Food and Drug Administration. FDA Drug Safety Communication. FDA requires warnings about increased risk of serious heart-related events, cancer, blood clots, and death for JAK inhibitors that treat certain chronic inflammatory conditions [update]. December 2021. <https://www.fda.gov/drugs/drug-safety-and-availability/fda-requires-warnings-about-increased-risk-serious-heart-related-events-cancer-blood-clots-and-death>
Xeljanz / Xeljanz XR (tofacitinib) [package insert]. New York, NY: Pfizer Labs; December 2021. <https://labeling.pfizer.com/ShowLabeling.aspx?id=959>

Louisiana Developmental Screening Toolkit

As of January 1, 2021, Louisiana Medicaid providers can receive reimbursement for developmental screening, autism screening, and perinatal depression screening. [The Louisiana Department of Health's Developmental Screening Toolkit](#) was created to help clinics integrate these screening into their day-to-day practice. The toolkit consists of step-by-step information contained in webpages, instructional videos, and downloadable worksheets. It is designed to house all of the information and tools you will need to put the Louisiana Developmental Screening Guidelines into practice in one, convenient spot.

The toolkit uses a quality improvement framework, which allows providers to systematically improve the way health care is delivered to the families they serve. The information and QI framework for this toolkit is based on clinical guidelines from the American Academy of Pediatrics (AAP), other national toolkits, and lessons learned from the field. It is designed to improve efficiency, patient safety, and clinical outcomes. It can be used as an [American Board of Pediatrics MOC-4](#) project for providers who are leading the QI efforts.

Check out the Developmental Screening Toolkit at ldh.la.gov/DevScreenToolkit to learn more.

New Medicaid Eligibility Group Covers COVID-19 Testing for Uninsured Patients

Per the Families First Coronavirus Response Act and the Coronavirus Aid, Relief, and Economic Security Act, Louisiana Medicaid has expanded coverage to include COVID-19 testing for uninsured individuals for the duration of the federally declared public health emergency. Coverage is limited to COVID-19 testing and related office visits for uninsured Louisiana residents. No treatment costs are covered under this program.

The new benefit is provided through Medicaid fee-for-service and not Healthy Louisiana through a managed care organization. Providers must be a Medicaid enrolled provider and must be enrolled before services are provided. Providers not enrolled as a Medicaid provider with Gainwell Technologies will need to complete a [temporary emergency application](#) with Medicaid's fiscal intermediary, Gainwell Technologies, to be paid for testing and testing related services for the uninsured. Providers will be required to self-attest on the uninsured individual's application to Medicaid that they are not also [billing the Department of Health and Human Services \(HHS\) or the Health Resources and Services Administration \(HRSA\)](#) for the same services. You also may not bill on any contract with the Louisiana

Department of Health to provide COVID-19 testing for these patients. If Medicaid identifies other third party coverage is available (e.g., Medicare, private insurance), Medicaid will not cover the services.

For additional guidance, visit [Medicaid’s provider web page for COVID-19 testing coverage for uninsured individuals](#). The site contains billing information, a [detailed provider guide](#), frequently asked questions for providers, and the [simplified application](#) patients can fill out to determine if they are eligible for coverage.

PHARMACY FACTS

Program Updates from Louisiana Medicaid

Pharmacy Facts can also be found online at: <http://ldh.la.gov/index.cfm/page/3036>.

November 17, 2021

Brand Over Generic List: PHARMACISTS – adjust your inventory accordingly

On November 3, 2021, LDH held a virtual Pharmaceutical & Therapeutics (P&T) Committee review via Zoom. LDH’s legal department authorized Pharmacy staff to host a review in lieu of an actual meeting due to the constraints of COVID-19 and the current public meeting laws. Since this was a virtual review, it was conducted without the P&T members voting. However, feedback from committee members, the public and drug manufacturers was allowed and taken into consideration.

In addition, the Pharmacy Advisory Council (PAC) members reviewed the Brand over Generic list and provided feedback as well. There are times when brand products are preferred over generics because the net price to the state is less expensive after rebate. After considering the financial and clinical impacts, as well as the feedback on the proposed recommendations, the Brand over Generic List will be as follows effective January 1, 2022:

Brand Over Generic List for Fall 2021 Effective January 1, 2022 (highlight is new to the list)	Spring/Fall
ADDERALL XR	Fall
ADVAIR DISKUS (INHALATION)	Fall
AFINITOR (ORAL)	Fall
ALPHAGAN P 0.15% (OPHTHALMIC)	Fall
AMITIZA (ORAL)	Spring
APRISO (ORAL)	Spring
BANZEL TABLET AND SUSPENSION	Fall
BETHKIS (INHALATION)	Spring
CARBATROL (ORAL)	Fall
CATAPRES-TTS (TRANSDERM)	Fall
CIPRODEX (OTIC)	Fall
COPAXONE 20 MG/ML (SUBCUTANE.)	Spring
DEPAKOTE SPRINKLE (ORAL)	Fall
DIASTAT RECTAL	Fall
ELIDEL (TOPICAL)	Fall
FELBATOL TABLET (ORAL)	Fall
IMITREX (NASAL)	Spring
NATROBA (TOPICAL)	Spring
NEXIUM SUSPENSION (ORAL)	Spring
PROTONIX SUSPENSION (ORAL)	Spring

RAPAMUNE SOLUTION and TABLET (ORAL)	Spring
REVELA TABLET (ORAL)	Spring
RETIN-A CREAM (TOPICAL)	Spring
SABRIL TABLET and POWDER PACK (ORAL)	Fall
SAPHRIS	Fall
SUBOXONE FILM (SUBLINGUAL)	Spring
SUTENT	Fall
SYMBICORT (INHALATION)	Fall
TECFIDERA and TECFIDERA STARTER PACK (ORAL)	Spring
TEGRETOL XR (ORAL)	Fall
TOBRADEX SUSPENSION (OPHTHALMIC)	Fall
TRAVATAN Z (OPHTHALMIC)	Fall
TRILEPTAL SUSPENSION (ORAL)	Fall
ZAVESCA	Fall

	Brand Over Generic Products Removed - Fall 2021	Notes
1	FOCALIN XR (ORAL)	Generic will be preferred

Preferred Drug List (PDL) Updates

The new PDL will be implemented on January 1, 2022. There are two new therapeutic classes added to the PDL. Those classes include:

- Immunomodulators, Lupus.
- Ophthalmics, Cystinosis.

Chantix Brand Not Available, Only PAR Generic Company Covered

We are aware of a manufacturer issue and shortage with the brand Chantix, which is the Medicaid preferred product. During the shortage, PAs should be approved for the generic varenicline when the unavailability of Chantix is documented in the PA submission. PAR pharmaceuticals is the only manufacturer of varenicline that is currently covered by Medicaid due to rebate eligibility.

November 4, 2021

COVID-19 Vaccine Update

COVID-19 vaccine coverage was updated to include a third dose (Moderna or Pfizer) for immunocompromised recipients on September 1, 2021. The third dose is administered in people with moderately to severely compromised immune systems, to improve their response to the initial vaccine series.

Coverage for a **booster** shot of any COVID-19 vaccine (Moderna, Pfizer, or Janssen) for recipients 18 years of age and older will be implemented on **November 15, 2021 with an effective date of October 20, 2021**. A booster shot is given when a person has completed the initial vaccine series and their protection against the COVID-19 virus has decreased over time.

The Pfizer COVID vaccine was recently authorized for children 5-11 years old. We are also currently programming this addition to be implemented on **November 15, 2021 with an effective date of October 29, 2021**. Pfizer released specific NDCs for doses for children. Those NDCs should be used exclusively for children (5-11 years old) to avoid potential vaccine administration errors.

A provider notice with billing instructions will be posted soon.



Remittance Advice Corner

Changes to Durable Medical Equipment, Home Health, Pediatric Day Health Care, Rehabilitation And Personal Care Services, Pharmacy And Other Services Requiring Prior Authorization Due To Hurricane Ida – August 2021

On August 26, 2021, Governor John Bel Edwards declared a state of emergency ahead of Hurricane Ida as significant impact to the state of Louisiana was expected. The policy changes included in this bulletin are effective August 27, 2021 and shall only be applicable for the following Parishes: Ascension, Assumption, East Baton Rouge, East Feliciana, Iberia, Iberville, Jefferson, Lafourche, Livingston, Orleans, Plaquemines, Pointe Coupee, St. Bernard, St. Charles, St. Helena, St. James, St. John the Baptist, St. Martin, St. Mary, St. Tammany, Tangipahoa, Terrebonne, Washington, West Baton Rouge and West Feliciana. Due to a Pharmacy POS systems space failure, it has been determined that certain pharmacy claims submitted on 9/9/2020 were duplicate paid. Systems created manual voids to correct this condition and these manual claims can be identified by EOB 999 (Administrative Correction).

Medicaid beneficiaries who live in one of the parishes under mandatory evacuation, and who are in need of replacement equipment or supplies previously approved by Medicaid, may contact a Medicaid-enrolled durable medical equipment (DME) provider of their choice. Medicaid-enrolled providers must make a request to Gainwell Technologies' Prior Authorization Unit; however, a new prescription and medical documentation are not required. The provider shall submit the required Prior Authorization Form (PA-01) along with a signed letter from the recipient, giving a current place of residence and stating that the original equipment or supplies were lost due to Hurricane Ida.

Beneficiaries who were approved to receive medical equipment, supplies, home health services, rehabilitation, pediatric day health care or personal care services from a provider that is no longer in business or unable to provide the approved equipment, supplies or services may obtain the approved items or services from a new provider of their choice. The provider must be enrolled in Medicaid. Gainwell Technologies shall provide any guidance to the provider on the cancelation of the original authorization and issuance of a new authorization, if applicable.

All existing prior authorizations for the services listed below should be extended through October 31, 2021:

- Any necessary medical and surgical procedures
- Applied Behavior Analysis (ABA)
- Assertive Community Treatment (ACT)
- Community Psychiatric Support and Treatment (CPST)
- EPSDT personal care services (PCS)
- Functional Family Therapy – Child Welfare (FFT-CW)
- Functional Family Therapy (FFT)
- Home Health Services (EHH)
- Homebuilders
- Hospice Services
- Multi-Systemic Therapy (MST)
- Pediatric Day Health Care
- Permanent Supportive Housing (PSH)
- Pharmacy (for non- controlled, non-specialty drugs)
- Psychiatric Outpatient by Licensed Mental Health Professionals (LMHPs)
- Psychosocial Rehabilitation (PSR)
- Substance Use Outpatient and Intensive Outpatient
- Therapies (PT/OT/SLT)

Questions concerning Healthy Louisiana managed care organization processes are to be directed to the appropriate MCO. Those questions related to Medicaid fee-for-service claims should be directed to Gainwell Technologies Provider Relations at (800) 473-2783 or (225) 924-5040.

Medicaid Public Notice and Comment Procedure

As of Aug. 1, 2019, a public notice and comment period is required before certain policies and procedures are adopted. Drafts will be published on LDH's website to allow for public comment, as per HB 434 of the 2019 Regular Legislative Session. This requirement applies to managed care policies and procedures, systems guidance impacting edits and payment, and Medicaid provider manuals.

In compliance with R.S. 46:460.51(15), 460.53, and 460.54, this procedure provides for a defined term, a public notice requirement, implementation of a policy for the adoption of policies and procedures, and for related matters. Public Comments for the listed policies and procedures can be left at the link below.

- Louisiana Medicaid (Title XIX) State Plan and Amendments;
- Louisiana Medicaid Administrative Rulemaking Activity;
- Medicaid Provider Manuals;
- Contract Amendments;
- Managed Care Policies & Procedures; and
- Demonstrations and Waivers.

<http://www.ldh.la.gov/index.cfm/page/3616>

Manual Chapter Revision Log

Manual Chapter	Section(s)	Date of Revision(s)
Behavioral Health Behavioral Health	Section 2.4 – Addition Services – Opioid Treatment Programs	12/21/21
Children’s Choice Waiver (CC) Children’s Choice Waiver (CC)	Appendix F – Claims Filing	12/21/21
Community Choice Waiver (CCW) Community Choice Waiver (CCW)	Appendix D – Claims Related Information	12/21/21
Durable Medical Equipment (DME) Durable Medical Equipment (DME)	<ul style="list-style-type: none"> • Appendix B – Claims Filing • Appendix D – Request Form for Disposable Incontinence Products Appendix E – Contact/Referral Information	12/16/21
Pharmacy Benefits Management Services Pharmacy Benefits Management Services	37.5.4 – Contact Information	12/23/21
Professional Services Professional Services	Section 5.1 – Covered Services – Cardiovascular Services	12/14/21

For Information or Assistance, Call Us!

Provider Relations	1-800-473-2783 (225) 294-5040 Medicaid Provider Website	General Medicaid Eligibility Hotline	1-888-342-6207
Prior Authorization: Home Health/EPSDT – PCS Dental	1-800-807-1320 1-855-702-6262 MCNA Provider Portal	MMIS Claims Processing Resolution Unit MMIS Claims Reimbursement	(225) 342-3855
DME & All Other	1-800-488-6334 (225) 928-5263	MMIS/Recipient Retroactive Reimbursement	(225) 342-1739 1-866-640-3905 MMIS Claims Reimbursement
Hospital Pre-Certification	1-800-877-0666		
REVS Line	1-800-776-6323 (225) 216-(REVS)7387 REVS Website	Medicare Savings	1-888-544-7996 Medicare Provider Website
Point of Sale Help Desk	1-800-648-0790 (225) 216-6381	For Hearing Impaired Pharmacy Hotline Medicaid Fraud Hotline	1-877-544-9544 1-800-437-9101 Medicaid Pharmacy Benefits 1-800-488-2917 Report Medicaid Fraud

