Louisiana Medicaid | **Provider** UPDATE

Hurricane Preparedness

Compiled by: Office of Outcomes Research and Evaluation University of Louisiana at Monroe College of Pharmacy

Louisiana has experienced some of the deadliest tropical storms and hurricanes to ever hit the United States. In recent years, memorable storms include Ike (2008), Rita and Katrina (2005), and Andrew (1992). With the onset of hurricane season, which lasts from June 1st to November 30th each year, it is critical for Louisiana providers to take the necessary steps to prepare their practice and their patients.

Preparing Your Medical Practice

Steps to ensure that your medical practice is prepared for a hurricane include:

- Prepare a disaster plan. This will limit confusion, help keep everyone safe, and ensure that business-critical materials, like computers, are not lost.
- Document employee roles and responsibilities.
- Conduct a drill to test the disaster plan and to make sure the office staff understands their roles.
- Ensure the availability of communication, in the event of a disaster, with both employees and patients.
- Ask your vendors what their disaster preparedness plans are so you will know that the facility supply chain will be protected.
- Ensure that vital records are protected:
 - Review your off-site backup record storage. Be sure that records can be safely accessed from a secondary secure location.
 - Vital records may include, but are not limited to:
 - Patient charts
 - Accounting records
 - Vendor contact information
 - Current inventory of the content of your office
- Consider a 'Go Box' with important supplies, which may include:
 - A hard copy of your disaster plan
 - o Contact information for employees
 - o A copy of insurance policies
 - Contact information for emergency vendors, such as contractors, plumbers, etc.
 - Laptops and portable backup media
 - Basic supplies that would allow the office to operate in an alternate temporary location, which may include prescription pads, blood pressure cuffs, wound care supplies, stethoscopes, etc.

Preparing your Patients

Patients should be educated about the importance of preparation, especially those who take prescription medication or require special medical equipment. Share the following tips with your patients to ensure that their medical and prescription needs will be met in the event of a hurricane.

- Keep an up-to-date list of medications, including dosage and indicated use. (For more information, see *Medication Lists.*)
- Keep prescriptions up-to-date and know how much of each medication is on hand.

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- Refill prescriptions a few days before a storm and do not wait until the last minute!
- Ask healthcare practitioners to provide a copy of helpful medical information.
- Place medication bottles or packages in water-tight containers (such as plastic containers with lids) if there is a possibility of flooding or other water damage.
- Take precautions for storing medications and supplies, which includes having ice available for medications that need refrigeration.
- Most importantly, evacuate when instructed and take:
 - All medicines in their original bottles
 - An up-to-date medication list
 - o Helpful medical information, including medical conditions and allergies
 - Contact information for all current providers
 - o Most recent insurance / LA Medicaid card
 - Picture identification, Social Security card and any important legal papers
 - Medical equipment and supplies (dentures, glucometers & strips, nebulizers, crutches, prostheses, etc.)
 - Personal hygiene items
 - Water, non-perishable food and cash
 - A list of important phone numbers

Medication Lists

A medication list is an important patient tool used to manage medication regimens, increase adherence, and promote drug safety. An up-to-date medication list provides current information to healthcare providers at the point of both prescribing and dispensing. This supports informed, shared decision making about the addition of a new medicine to an existing regimen and to ensure that duplicate or unnecessary medicines are not being taken. Patients should be educated about the importance of creating and maintaining a medication list. See *Additional Resources* for information regarding free medication list templates.

Healthcare providers should discuss the following important points about medication lists with their patients.

- Talk to patients about the importance of keeping the list in their purse or wallet and taking it to every physician visit.
- Make sure patients understand that they should include over-the-counter products, vitamins, and dietary supplements that they take.
- Instruct them to provide a copy to their caregiver or another family member in case of an emergency.
- Educate patients about medication lists and what should be included on the list. A medication list should include the following:
 - \circ How and when the medication should be taken
 - How long it will be taken
 - How long it might take the medication to work
 - Any tests that might be required to take with the medication (e.g., kidney function)
 - Potential adverse effects
 - o Food, drinks, or other medications to avoid when taking the medication
 - Specific storage requirements, if applicable
 - Refill dates
 - o Medications to which the patient is allergic
 - The proper dosage of medications, particularly OTCs such as NSAIDs
 - o The name of the physician who prescribed the medication



Medication List Example

	What I'm Using Rx – Brand & generic name; OTC – Name & active ingredients	What It Looks Like Color, shape, size, markings, etc.	How Much	How to Use / When to Use	Start / Stop Dates	Why I'm Using / Notes	Who Told Me to Use / How to Contact
	- Enter ALL	prescription (Rx) med	licine (include	samples), over-the-co	ounter (OTC) medicine, and dietary supp	lements —
Exc	XXXXX/xxxxxxxxxx	20 mg pill; small, white, round	40 mg; use two 20 mg pills	Take orally, 2 times a day, at \$:00 am & \$:00 pm	1-15-11	Lowers blood pressure; check blood pressure once a week; blood test on 4-15-11	Dr. X (800) 555-1212
1							
2		\sim					

Additional Resources

Louisiana Emergency Preparedness Guides	https://gohsep.la.gov/PREPARE/EMERGENCY- PREPAREDNESS-GUIDE
FDA - Hurricane Safety Resources	https://www.fda.gov/news-events/public-health- focus/hurricane-safety-resources
Department of Homeland Security	https://www.ready.gov/hurricanes
Disaster Information for People with Chronic Conditions and Disabilities	https://www.cdc.gov/disasters/chronic.html
CDC - Hurricanes and Other Tropical Storms	https://www.cdc.gov/disasters/hurricanes/index.html
Medication List Template / FDA – My Medicine Record	https://www.fda.gov/drugs/resources-you/my-medicine- record
Agency for Healthcare Research and Quality – Medication Card	https://www.ahrq.gov/patients-consumers/diagnosis- treatment/treatments/pillcard/index.html

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PHARMACY FACTS Program Updates from Louisiana Medicaid

Pharmacy Facts can also be found online at: <u>http://ldh.la.gov/index.cfm/page/3036</u>. *June 28, 2019*

Hepatitis C Subscription Model

LDH is excited to announce the launch of the hepatitis C subscription model, a partnership with Asegua, a subsidiary of Gilead, to provide unlimited access to the authorized generic of Epclusa (sofosbuvir/velpatasvir) to Louisiana Medicaid recipients. On July 15, 2019, sofosbuvir/velpatasvir (AG) will be the sole preferred drug on the Medicaid Single Preferred Drug List (PDL) with no prior authorization. The managed care organizations (MCO) will follow the updated LDH criteria for the non-preferred direct-acting antiviral (DAA) agents.

Fee-for-Service (FFS) and the MCOs will continue to reimburse pharmacy claims for hepatitis C at the current reimbursement methodology (professional dispensing fee, ingredient cost and provider fee). Pharmacies may continue to utilize their current wholesaler for inventory purposes.

The subscription model is in conjunction with a multi-year campaign led by the Office of Public Health to bolster treatment capacity throughout the state. Planning for the implementation of public health strategies that will support the subscription model is ongoing and includes input from LDH, Medicaid, the Department of Corrections, the Office of Public Health, national experts, pharmacists, medical providers and other stakeholders. The following strategies will be implemented in parallel with the subscription model:

- Expanding provider capacity to treat hepatitis C. This will include optional training for primary care providers to diagnose and treat hepatitis C as well as guidance on referring individuals with advanced liver disease, cancer and substance use disorder to specialists as appropriate.
- Educating the public on the availability of a cure and mobilizing priority populations for screenings. The campaign will include public messaging around risk factors for contracting hepatitis C; education on the importance of treatment before symptoms appear; increased access to screening; and information about the state's new, unprecedented access to DAAs.

• Expanding HCV screening and expediting linkage to an HCV cure. Screening for hepatitis C is recommended for all individuals born between 1945 and 1965 and for those who are at increased risk of infection. Healthcare providers across the state will screen priority populations to ensure all individuals with hepatitis C are linked to care for treatment.

- Strengthening HCV surveillance to link persons previously diagnosed to treatment. LDH's existing hepatitis C surveillance system will be upgraded to support the timely identification of individuals with chronic hepatitis C infections.
- Implementing harm reduction and complementary treatment strategies. Strategies to prevent new or reinfections must also be employed, including expanded access to syringe service programs and behavioral and medication-assisted treatment for opioid use disorder.

• Extending elimination efforts to all populations within the state. Many Louisianans infected with hepatitis C are neither Medicaid beneficiaries nor incarcerated. To truly achieve statewide elimination, the state will work with new and existing partners, including commercial insurers, health systems and entities serving the uninsured through other appropriate mechanisms.

Single PDL

As an update to the Single PDL implementation, LDH was recently made aware that the FMOLHS providers (Our Lady of the Lake, Our Lady of the Lake Ascension, Our Lady of the Angels, Our Lady of the Lake Children's Health, Our Lady of Lourdes in Lafayette and St. Francis in Monroe) and the Baton Rouge Clinic providers have embedded the Medicaid Single PDL within their EPIC electronic health record. This will allow their providers access with a single click. LDH encourages other provider groups to incorporate the Single PDL in their electronic medical records as well.

Rebate Eligible Manufacturers

Pharmacy providers and other stakeholders can access Appendix C of the Medicaid Pharmacy Provider Manual to determine which manufacturers are participating in the federal rebate program. The first five digits of the National Drug Code (NDC) identify the manufacturer and those labeler numbers are included in Appendix C. Medicaid will receive federal funding on claims when the manufacturer signed the federal rebate agreement with the Centers for Medicare and Medicaid Services. Since we do not receive federal funding, Medicaid does not pay for claims when there is not agreement between CMS and the manufacturer.

Appendix C can be found at: <u>https://www.lamedicaid.com/provweb1/forms/drug_appendices/APNDC.pdf</u>

Eligibility and Enrollment System Provider Bulletins

Louisiana Medicaid is publishing bi-weekly provider bulletins to address provider questions and concerns around the new eligibility and enrollment system. The information in these bulletins covers a wide range of provider issues and provider types. This and other news can be found on the web site dedicated to the new system, found here: http://ldh.la.gov/index.cfm/page/3497.

If there are topics you feel need to be covered in these public communications, please let us know by sending an email to <u>Healthy@la.gov</u>.



Online Medicaid Provider Manual Chapter Revisions as of July 2019				
Manual Chapter	Section(s)	Date of Revision(s)		
Behavior Health	Appendix E-5 - Evidenced Based Practices (EBPs) Policy – Child/Parent Psychotherapy Appendix E-6 Evidenced Based Practices (EBPs) Policy – Parent-Child Interaction Therapy Appendix E-7 Evidenced Based Practices (EBPs) Policy – Preschool PTSD Treatment and Youth PTSD	07/16/19		
Community Choices Waiver	7.3 Recipient Requirements7.6 Provider Requirements7.8 Reimbursement	07/29/19		
Federally Qualified Health Centers	Table of Contents22.4Reimbursement23.5Prior Authorization23.6Claims Related Information	07/11/19		
Professional Services	5.1 Laboratory and Radiology Services	07/01/19		
Pharmacy Benefits Management Services	37.3 Reimbursement	07/16/19		
Professional Services	5.1 Telemedicine	08/01/19		
Rural Health Clinics	40.4 Reimbursement	07/11/19		

Archived Online Medicaid Provider Manual Chapter Archived as of July 2019					
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Remittance Advice Corner

Attention Outpatient Hospital and Outpatient Hospital Clinic Providers

Effective for dates of service on or after July 1, 2019, CPT codes 80320-80377 for individual substance(s) or metabolites will no longer be covered on the outpatient hospital services fee schedules. Providers should instead use HCPCS codes G0480 or G0481 or their successors. These changes are to be consistent with Louisiana Medicaid's newly adopted Definitive Drug Testing Policy.

Attention Providers of Laboratory Services

Effective for dates of service on or after August 1, 2019, Louisiana Medicaid will require all providers to include a valid Clinical Laboratory Improvement Amendments (CLIA) number on all claims submitted for laboratory services. Claims submitted with an absent, incorrect or invalid CLIA number will deny.

For claims submitted using the CMS-1500 form, the CLIA number will be required in block 23. Providers should refer to the *CMS 1500 Billing Instructions* under the *Billing Information* link at <u>www.lamedicaid.com</u>, where complete instructions will be provided.

Information regarding this policy change is forthcoming and will be found on <u>www.lamedicaid.com</u> under the Provider Manuals link, within the *Professional Services* and *Independent Laboratory* manuals.

Questions regarding this message and fee for service claims should be directed to DXC Technology Provider Relations at (800) 473-2783 or (225) 924-5040. Questions regarding managed care claims should be directed to the appropriate Managed Care Organization.

Provider Enrollment	For Information or (225)216-6370	Assistance, Call Us! General Medicaid Eligibility Hotline	1-888-342-6207
Prior Authorization: Home Health/EPSDT – PCS Dental	1-800-807-1320 1-866-263-6534 1-504-941-8206	MMIS Claims Processing Resolution Unit	(225) 342-3855
DME & All Other	1-800-488-6334 (225) 928-5263	MMIS/Recipient Retroactive	(225) 342-1739 1-866-640-3905
Hospital Pre-Certification	1-800-877-0666	Reimbursement	
Provider Relations	1-800-473-2783 (225) 924-5040	Medicare Savings Program and Medicaid Purchase Hotline	1-888-544-7996
REVS Line	1-800-776-6323 (225) 216-(REVS)7387		
Point of Sale Help Desk	1-800-648-0790 (225) 216-6381	For Hearing Impaired	1-877-544-9544
		Pharmacy Hotline	1-800-437-9101
Louisiana Madiasid Drouidar		Medicaid Fraud Hotline	1-800-488-2917

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