August 2016 Flood Pharmacy Provider Memo

Note: To view the memo with formatting, click here.

Due to the recent historical flooding, many Louisiana Medicaid recipients are evacuating and are in need of essential medications.

Pharmacists Authority to Dispense Prescriptions in an Emergency
The Louisiana Board of Pharmacy reminded pharmacists about Section 519 of the Board's rules, titled *State of Emergency* that has been activated and is now in effect. This rule is automatically activated whenever the Governor of Louisiana declares and/or renews a state of emergency for some or all parishes of Louisiana. The rule states, in part:

"1. A pharmacist may work in the affected parish(es) and may dispense a one-time emergency prescription of up to a thirty day supply of a prescribed medication if: (a) in the pharmacist's professional opinion the medication is essential to the maintenance of life or to the continuation of therapy, and (b) the pharmacist makes a good faith effort to reduce the information to a written prescription marked "Emergency Prescription", then file and maintain the prescription as required by law."

The above is noted to instruct pharmacists of prescription regulations during a time of emergency. This applies to all patients, regardless of whether they have public or private health insurance coverage or are uninsured. Reimbursement for the prescription is not addressed by this regulation.

Procedures for Emergency Prescriptions Claims for Medicaid Recipients
Fee for Service (FFS) emergency provisions for pharmacy overrides can be found at this link:
http://www.lamedicaid.com/provweb1/Pharmacy/FFS_Emergency_Pharmacy_Overrides.pdf.

The Healthy Louisiana Plans (Managed Care Organizations) have the following instructions per plan to process necessary prescription overrides:

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Plan/Pharmacy Help Desk Numbers	Early Refill/Refill too soon	Prior Authorization	Copay
Aetna **(855) 365-3730**	Bypass	Bypass except for controlled and specialty drugs	No Copay
Amerigroup **(800) 454-3730**	Allow pharmacist override by entering code 91100000001 in NCPDP field 462-EV (Prior Auth Number Submitted) or call (800) 454-3730	Enter PA type "1" and PA number "1111" to override NCPDP rejects 75, "Prior Authorization Required" and MR "Product Not on Formulary", except for controlled and specialty drugs	Exempt
AmeriHealth Caritas **(800) 684-5502**	Bypass	Bypass except for controlled and specialty drugs	Exempt
Louisiana Healthcare Connections **(877) 690-9330**	Bypass	Bypass except for controlled and specialty drugs	Exempt
United HealthCare **(866) 328-3108**	Bypass	Bypass except for controlled and specialty drugs	Exempt

The MCO and FFS procedures are limited to recipients residing in the following parishes: Acadia, Allen, Ascension, Assumption, Avoyelles, Beauregard, Calcasieu, Cameron, East Baton Rouge, East Feliciana, Evangeline, Iberia, Iberville, Jefferson Davis, Lafayette, Livingston, Pointe Coupee, St. Charles, St. Helena, St. James, St. John the Baptist, St. Landry, St. Martin, St. Tammany, Tangipahoa, Vermilion, Vernon, Washington, West Baton Rouge, West Feliciana.

Eligibility and Drug Utilization Data for Medicaid Recipients
Pharmacists may access the Louisiana Medicaid website at www.lamedicaid.com. This website is a useful tool to access information regarding recipients, prescribing provider numbers and clinical data. To gain access to the website, providers should follow directions on the website. Providers should obtain a log-in ID and password. Detailed instructions are at www.lamedicaid.com, then "Provider web account registration instructions" or at this link: http://www.lamedicaid.com/provweb1/Provweb_Enroll/Web_Registration.pdf.

- Providers are able to access the Medicaid Eligibility Verification System (MEVS) to verify recipient eligibility. Go to Provider Log-In on www.lamedicaid.com, enter Medical ID or NPI then enter Login-In ID and password. Go to Medicaid Eligibility Verification System, and then enter the recipient's name and date of birth or social security number.
- Providers may access recipient pharmacy claim history for both FFS and MCOs through the electronic Clinical Data Inquiry (e-CDI). Go to Provider Log-In on www.lamedicaid.com, enter Medicaid ID or NPI then enter Log-In ID and password. Go to Electronic Clinical Data Inquiry, enter recipient ID and date of birth, find recipient, then clinical drug inquiry.

Pharmacy providers may contact the ULM Prior Authorization Call Center (866)730-4357 for assistance with recipient drug history. The call center is open Monday-Saturday 8am-6pm. The following information would be appreciated:
- Name;
- Date of Birth;
- Recipient identification number, and/or social security number.

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

Medicaid Services Provided in the Home for Displaced Members

This notice is published in response to the August 2016 flood.

Many Medicaid Members who receive non-waiver services typically provided in their home have been displaced to shelters or other locations as a result of the August 2016 flood. In order to ensure that non-waiver Medicaid services are continued without disruption, clarification is being provided so that these services may be delivered in the place where the Medicaid member is temporarily residing, unless it is a nursing facility or hospital. Providers should continue to bill as usual.

Special instructions for Medicaid Members receiving Hospice:

For those receiving hospice services, the hospice provider may provide appropriate care to a displaced member in a shelter or any other temporary residence. This may include providing care in a nursing facility or in a hospital if the member meets the appropriate levels of care for payment in those locations.

This notice does not apply to Home and Community-Based Waiver Services which have special provisions.

Changes To DME, Home Health, Rehabilitation And Personal Care Services Due To The August 2016 Flood In Affected Parishes

Medicaid recipients who live in one of the declared disaster parishes caused by the August 2016 flood, and who need to replace equipment or supplies previously approved by Medicaid, may contact either a Medicaid enrolled or health plan contracted durable medical equipment (DME) provider of their choice to obtain a replacement. For Medicaid enrolled providers, the provider must make a request to Molina's 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, was lost due to the August 2016 flood.

Additionally, recipients who were approved to receive medical equipment, supplies, Home Health services, Rehabilitation or Personal Care services from a provider in an affected parish who is no longer in business or unable to provide the approved equipment, supplies or services, may obtain the approved items from a new provider of their choice provided that the provider is enrolled in Medicaid or contracted with a Health Plan. The original authorization will be canceled and a new authorization will be given to the new provider.

For Medicaid enrolled providers, the provider will need to submit the required Prior Authorization Form with a signed letter from the recipient requesting a change in providers and giving his/her current place of residence.

All other prior authorization requests for equipment, supplies and medical services will require a prescription from a doctor and documentation to establish medical necessity.

This policy is applicable for residents in the following affected Parishes:

Acadia, Allen, Ascension, Assumption, Avoyelles, Cameron, East Baton Rouge, East Feliciana, Evangeline, Iberia, Iberville, Jefferson Davis, Lafayette, Livingston, Pointe Coupee, St. Charles, St. Helena, St. James, St. John the Baptist, St. Landry, St. Martin, St. Tammany, Tangipahoa, Vermilion, Washington, West Baton Rouge, and West Feliciana.

Medicaid Fee For Services (FFS) Emergency Provisions for Pharmacy Overrides

Note: To view the memo with formatting, click here.

Due to the recent historical flooding, many Louisiana Medicaid recipients are evacuating and are in need of essential medications.

State of Emergency Declared by Governor Edwards
Governor Edwards declared a State of Emergency for the entire state of Louisiana on Friday, August 12, 2016.

The Louisiana Board of Pharmacy reminded pharmacists about Section 519 of the Board's rules, titled *State of Emergency* that has been activated and is now in effect. This rule is automatically activated whenever the Governor of Louisiana declares and/or renews a state of emergency for some or all parishes of Louisiana. The rule states, in part:

"1. A pharmacist may work in the affected parish(es) and may dispense a one-time emergency prescription of up to a thirty day supply of a prescribed medication if: (a) in the pharmacist's professional opinion the medication is essential to the maintenance of life or to the continuation of therapy, and (b) the pharmacist makes a good faith effort to reduce the information to a written prescription marked "Emergency Prescription", then file and maintain the prescription as required by law."

Effective August 13, 2016, certain FFS pharmacy edits will be lifted for recipients residing in the following parishes: Acadia, Ascension, Assumption, Beauregard, Calcasieu, Cameron, East Baton Rouge, East Feliciana, Evangeline, Iberia, Iberville, Jefferson Davis, Lafayette, Livingston, Pointe Coupee, St. Charles, St. Helena, St. James, St. Landry, St. Martin, St. Tammany, Tangipahoa, Vermilion, Vernon, Washington, West Baton Rouge, West Feliciana.

August 17, 2016 added Allen and Avoyelles parishes
August 19, 2016 added St. John the Baptist parish

Pharmacists may override the early refills of necessary medications when they receive:
NCPDP reject code 88 (DUR Reject Error) mapped to
EOB code 445 (Duplicate Drug Therapy) or
EOB code 447 (Compliance Monitoring/Early or Late Refill)

For a prescription override, the pharmacist must supply the codes listed below with the Point of Sale (POS) claim.

NCPDP Field	Name of Field	Value	Definition
NCPDP 439-E4	Reason for Service Code	ID	Ingredient Duplication (for different pharmacy)
		ER	Overuse/Early Refill (for same pharmacy)
NCPDP 440-E5	Professional Service Code	M0	Prescriber Consulted
		P0	Patient Consulted
NCPDP 441-E6	Result of Service Code	1A	Filled as is, False positive
		1B	Filled prescription as is
		1C	Filled with a different Dose
		1D	Filled with different Directions
		1E	Filled with different Drug
		1F	Filled with different Quantity
		1G	Filled with Prescriber approval

We suggest that pharmacists document the required drug utilization information on the prescription along with the notation of "Flood 2016". This documentation may be accomplished either by direct notation on the hard copy or electronically through such means as pharmacists notes/comments, etc., depending on the software.

When prescriptions are being filled for recipients due to the emergency flooding situation please enter "RE" (Disaster designation) in NCPDP 439-E4 field (Reason for Service Code) in the second occurrence or loop. We are requesting this for tracking purposes only.

The following edits will be changed from a denial to educational or bypassed:
EOB 218 – Lock-In recipient, recipient is MD restricted
EOB 389 – Lock-In recipient, recipient is pharmacy restricted
EOB 485 – PA required, MD must call ULM-PA operations staff
EOB 486 – PA expired, MD must call ULM-PA operations staff
EOB 498 – Number of prescriptions greater than script limit of 4 per month
EOB 576 – Missing or invalid PA/MC code or diag for script override

Prescriptions filled for recipients residing in identified parishes under emergency circumstances will be exempt from copayments.

If override codes are not working or not appropriate, claims should be electronically submitted with a value of "3 = Emergency" in NCPDP field 418-DI (Level of Service). The notation of "Emergency Prescription Flood 2016" should be written on the hard copy prescription.

Eligibility and Drug Utilization Data
Pharmacists may access the Louisiana Medicaid website at www.lamedicaid.com. This website is a useful tool to access information regarding recipients, prescribing provider numbers and clinical data. To gain access to the website, providers should follow directions on the on the website. Providers should obtain a log-in ID and password.

- Providers are able to access the Medicaid Eligibility Verification System (MEVS) to verify recipient eligibility. Providers should have the recipient's name and date of birth or social security number.
- Providers may access recipient pharmacy claim history through the electronic Clinical Data Inquiry (e-CDI).

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 Fee for Service (FFS) Pharmacy Help Desk at (800) 437-9101 or refer to www.lamedicaid.com.

Medicaid Drug Utilizations (DUR)
Importance of Medication Lists

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School of Pharmacy
University of Louisiana at Monroe

According to the Agency for Healthcare Research and Quality, greater than 60% of U.S. adults older than 65 years of age take 5 or more medications each week. Patients in this age group are also more likely than younger patients to experience medication errors and adverse drug events.[1] Ultimately, having an up-to-date medication list can help prevent medication errors that could potentially cause harm such as drug-drug interactions, therapeutic duplications, drug-lab interactions, allergic reactions, and adverse effects.[2]

At a minimum, a medication list should consist of the details and directions for use of the patient's current medications including prescription drugs, over-the-counter medications, and herbal or alternative products. Any reactions to a medication that the patient may have had in the past should also be included, even if the patient is no longer taking the medication. Patient medical conditions, allergies and contact information for physicians, pharmacies and other healthcare providers are very important to include on a personal medication list. There are resources available that can help guide your patient in making his or her list to improve medication safety. Some of these are included in the following table.

Personal Medication List Resources
AARP – My Personal Medical Record
http://www.aarp.org/health/drugs-supplements/info-2007/my_personal_medication_record.html
Agency for Healthcare Research and Quality – How to Create a Pill Card
http://www.ahrq.gov/patients-consumers/diagnosis-treatment/treatments/pillcard/index.html
American Society of Health-System Pharmacists (ASHP) Foundation
http://www.safemedication.com/safemed/MyMedicineList/MyMedicineList_1.aspx
Department of Health and Human Services – Food and Drug Administration (FDA)
http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM095018.pdf
Institute for Safe Medication Practices
https://www.ismp.org/newsletters/consumer/alerts/ISMP_Med_Form_PDF.pdf
National Association of Chain Drug Stores Foundation – My Medication Record
http://www.wapatientsafety.org/downloads/My-Medication-record.pdf

1.Helping patients keep an up-to-date medication list. https://www.pharmacist.com/helping-patients-keep-date-medication-list. Accessed: 8/5/16

2. Fitzgerald RJ. Medication errors: the importance of an accurate drug history. Br J Clin Pharmacol. 2009;67(6):671-5.

Polypharmacy in Heart Failure Patients (DUR)

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- Patients with heart failure (HF) often take multiple medications with complex dosing schedules.

- Heart failure patients take an average of 6.8 prescription medications per day; polypharmacy is defined as the long-term use of 5 or more medications. Therefore, polypharmacy may be universal in HF patients.

- Polypharmacy in HF patients may be due to an increasing number of guideline-directed medications for HF and associated co-morbidities, many of which are common in heart failure.

- The potential for adverse drug events and drug-drug interactions increases as the number of prescription medications increases. Studies have found that patients taking at least 2 medications have a 13% risk of an adverse event, while those with 7 or more medications have a risk of 82%.

- Some medications have the potential to cause or exacerbate HF by:
  o causing direct myocardial toxicity;
  o causing negative inotropic, lusitropic, or chronotropic effects;
  o exacerbating hypertension;
  o delivering a high sodium load; or
  o causing drug-drug interactions that limit the beneficial effects of HF medications.

- Some considerations for minimizing polypharmacy in HF patients:
  o Conduct a comprehensive medication reconciliation at each clinical visit and with each admission.
  o Consider evaluating medication complexity.
  o Implement a medication flow sheet and update it at each visit. Include relevant lab tests.
  o Discontinue medications without indications or with contraindications.
  o Evaluate the potential risks and benefits of each medication before starting them.
  o Avoid prescribing new medications to treat side effects of other medications.
  o Establish a team management approach by working with pharmacists and other healthcare providers.

Some Medications that May Cause or Exacerbate Heart Failure (HF)*
Analgesics
COX-2 inhibitors, NSAIDS
Anti-arrhythmics
Disopyramide, dronedarone, flecainide, sotalol
Antihypertensives
Diltiazem, doxazosin, minoxidil, nifedipine, verapamil
Anti-infectives
Amphotericin B, itraconazole,
Diabetes mellitus agents
Metformin, saxagliptin, sitagliptin, thiazolidinediones
Hematologic agents
Anagrelide, cilostazol
Neurologic and psychiatric agents
Bromocriptine, carbamazepine, citalopram, clozapine, ergotamine, lithium, methysergide, pergolide, pramipexole, pregabalin, stimulants, tricyclic antidepressants
Pulmonary agents
Albuterol, bosentan, epoprostenol
Rheumatological agents
TNF inhibitors
Urological agents
Doxazosin, prazosin, tamsulosin, terazosin

* This list is not all-inclusive; for more information, consult listed reference.

Reference: Page RL, Cheng D, Dow TJ, et al. Drugs That May Cause or Exacerbate Heart Failure: A Scientific Statement From the American Heart Association. Circulation. 2016; Retrieved from http://circ.ahajournals.org/content/early/2016/07/11/CIR.0000000000000426

Remittance Advice Corner

Attention All Fee for Service (FFS) Louisiana Medicaid Providers
Elimination of the Requirement to Submit the Recipient Retroactive Eligibility Certification Form with Claims
When the Certification is Retroactive to Cover Claim Dates of Service Over 1 Year

Previously, in cases where a recipient's eligibility certification was made retroactive to cover services over 1 year old, providers were required to submit the recipient's retroactive eligibility certification form with their claim(s) in order to be paid. Since these claims could not be submitted within the timely filing limit, the date of the certification form allowed the claims to be special handled and have the timely filing edits bypassed (272/Claim Exceeds 1 Year Filing Limit; and 371/Attachment Requires Review/Filing Deadline).

Logic changes have been made in the Fee for Service Medicaid system to modify these edits. With this modification, the claims processing system will use the date entered into the system from the Medicaid Eligibility Determination System file in order to make the timely filing determination and process the claims.

This change is effective for claims received on or after August 9, 2016. This change should streamline this process for providers; eliminate the need to request a certification form; and allow providers to submit these claims electronically rather than hard copy with justification. In the future if you receive timely filing denials on claims where you believe retroactive eligibility certification should apply, you may submit a paper claim with a letter of inquiry concerning the recipient's eligibility to:

Louisiana Department of Health
Louisiana Medicaid Program
Attn: Deborah Davis
P.O. Box 91030
Baton Rouge, LA 70821

Attention Rural Health Clinics:
The Process for Annual PPS Rate Adjustment Notification Is Changing

In the past, each Rural Health Clinic (RHC) has received an annual letter indicating the updated prospective payment system (PPS) rate for the facility. Beginning with updates for State Fiscal Year (SFY) 2017, RHCs who receive rate increases based on the Medicare Economic Index (MEI) will no longer receive a letter notifying them of their annual PPS rate adjustment.

The MEI is the determining factor for the yearly change in the PPS rates for most RHCs. For SFY 2017, that began July 1, 2016, each RHC's current rate increased by 1.1 percent.   The updated PPS rates have been completed for the RHCs via the Medicaid published fee schedule, available on the Medicaid website (www.lamedicaid.com) under the Fee Schedules link.

The RHCs which receive rate changes based on cost reports will continue to receive letters indicating the change and the attestation form indicating their chosen rate.

If you have questions about the content of this message, you may contact Molina Provider Relations at 1-800-473-2783.

Attention Medicaid Providers:
Administrative Correction Voids Processed in August 30, 2016 Payment Cycle

LDH has processed voids for paid Fee-For-Service claim records that were also paid by MCO Plans. The duplicate claim payments are associated with Recipients who were retrospectively enrolled into an MCO plan. Since the Billing Provider has already been paid by the MCO Plan for these FFS voids, no further claim submission by the Billing Provider is required. These voids will be reported in the August 30, 2016 payment cycle using EOB 999 (Administrative Correction).

For questions related to this information please contact Molina Medicaid Solutions Provider Services at (800) 473-2783 or (225) 924-5040.

Attention Fee for Service (FFS) Louisiana Medicaid Providers

Effective August 4, 2016 FFS Medicaid Pharmacy Program will cover mosquito repellent to decrease the risk of exposure to the Zika Virus. Please refer to http://www.lamedicaid.com/provweb1/Pharmacy/pharmacyindex.htm for more information.

Attention Fee for Service (FFS) Louisiana Medicaid Providers:

Effective August 15, 2016, the Fee for Service (FFS) Louisiana Medicaid Pharmacy Program has updated the clinical pre-authorization criteria for Direct-Acting Antiviral (DAA) Agents used to treat Hepatitis C Virus (HCV). Please refer to www.lamedicaid.com for specifics.

Online Medicaid Provider Manual Chapter Revisions

Manual Chapter	Section(s)	Date of Revision
New Opportunities Waiver	**Page** **Title** 32.0 Overview 32.1 Covered Services 32.3 Recipient Requirements 32 4 Rights and Responsibilities 32.5 Service Access and Authorization 32.6 Provider Requirements 32.7 Staffing Requirements 32.8 Record Keeping 32.9 Reimbursement 32.10 Program Monitoring 32.11 Incidents Accidents and Complaints Appendix B Glossary Appendix C Contact Information Appendix D Forms	08/26/16

Archived Online Medicaid Provider Manual Chapter Revisions
As of August 1, 2016

Archived Manual Chapter	Section(s)	Date of Omission
New Opportunities Waiver	**Page** **Title** 32.0 Overview 32.1 Covered Services 32.3 Recipient Requirements 32 4 Rights and Responsibilities 32.5 Service Access and Authorization 32.6 Provider Requirements 32.7 Staffing Requirements 32.8 Record Keeping 32.9 Reimbursement 32.10 Program Monitoring 32.11 Incidents Accidents and Complaints Appendix B Glossary Appendix C Contact Information Appendix D Forms	08/26/16

For Information or Assistance, Call Us!

Provider Enrollment	(225)216-6370	General Medicaid Eligibility Hotline	1-888-342-6207
Prior Authorization:		MMIS Claims Processing Resolution Unit	(225) 342-3855
Home Health/EPSDT – PCS	1-800-807-132		
Dental	1-866-263-6534 1-504-941-8206		
DME & All Other	1-800-488-6334 (225) 928-5263	MMIS/Recipient Retroactive Reimbursement	(225) 342-1739 1-866-640-3905
Hospital Pre-Certification	1-800-877-0666		
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
		Medicaid Fraud Hotline	1-800-488-2917