

**CHAPTER 37: PHARMACY BENEFITS MANAGEMENT SERVICES
MANUAL**

REVISION HISTORY LOG				
Revised/Issued Date	Section	Section Title	Number of Page (s)	Reason for Revision
01/28/22	37.0	Overview	3	Revisions made to update formatting to alphanumeric.
01/28/22	37.1	Covered Services, Limitations, and Exclusions	142	Revisions made to update/clarify the criteria for the following sections: Trulicity, ProAir RespiClick, ProAir Digihaler, Educational MME-Opioids, Lidocaine patch kits, COVID-19 Booster/Home Administration, Ivermectin (Stromectol), and Date of Service. Revisions made to incorporate Cystic Fibrosis Agents as a new section. Revisions made to remove cystic fibrosis criteria under the following sections: Symdeko, Trikafta, and Kalydeco. Revisions made to update formatting to alphanumeric.
01/28/22	37.2	Provider Requirements and Participation Guidelines	19	Revisions made to update formatting to alphanumeric.
01/28/22	37.3	Reimbursement	6	Revisions made to update formatting to alphanumeric.
01/28/22	37.4	Managed Care Applicability	1	Revisions made to update formatting to alphanumeric.

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01/28/22	37.5	Appendixes	1	Revisions made to update formatting to alphanumeric.
01/28/22	37.5.1	Forms and Links	1	Revisions made to update formatting to alphanumeric.
01/28/22	37.5.2	Claims Related Information	12	Revisions made to update formatting to alphanumeric.
01/28/22	37.5.3	Glossary and Acronyms	7	Revisions made to update formatting to alphanumeric.
01/28/22	37.5.4	Contact Information	5	Revisions made to update formatting to alphanumeric.
01/28/22	37.5.5	Louisiana Medicaid Preferred Drug List (PDL) and Non-Preferred Drug List (NPDL)	1	Revisions made to update formatting to alphanumeric.
01/28/22	37.5.6	Prescribers	2	Revisions made to update formatting to alphanumeric.
01/28/22	37.5.7	Medicare Prescription Drug Coverage	8	Revisions made to update formatting to alphanumeric.
01/28/22	37.5.8	Claims Submission and Processing Payments	23	Revisions made to update formatting to alphanumeric.
01/28/22	37.5.9	Public Health Services 340B Drug Pricing Program	3	Revisions made to update formatting to alphanumeric.

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01/28/22	37.5.11	Medication Administration	3	Revisions made to update formatting to alphanumeric.
01/28/22	37.5.12	Patient Counseling and Drug Utilization Review (DUR)	7	Revisions made to update formatting to alphanumeric.
01/28/22	37.5.13	Lock-In Program	3	Revisions made to update formatting to alphanumeric.
01/28/22	37.5.14	Medicaid Drug Rebate Program	2	Revisions made to update formatting to alphanumeric.