## LOUISIANA MEDICAID PROGRAM

ISSUED: REPLACED:

11/06/20

**CHAPTER 37: PHARMACY BENFITS MANAGEMENT SERVICES** 

**MANUAL** 

## **REVISION HISTORY LOG**

Revised/ Issued Date	Section	Section Title	Number of Page (s)	Reason for Revision
11/06/20	37.1	Covered Services	127	Revised section to clarify drug coverage and diagnosis codes.