



Louisiana New Horizon

Volume II

June 2024



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Humana
Healthy Horizons®
in Louisiana

Humana Healthy Horizons in Louisiana is a Medicaid Product of Humana Benefit Plan of Louisiana, Inc.

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Point-of-service diagnosis code requirements for pharmacy claims

Effective Jan. 1, 2024, the Louisiana Medicaid fee-for-service (FFS) pharmacy program and managed care organizations (MCOs), in consultation with the Drug Utilization Review (DUR) board, implemented new point-of-service (POS) diagnosis code requirements for select medications. The diagnosis code requirement applies to pharmacy claims submitted to FFS and MCOs.

A pharmacy claim will deny at POS when a missing or invalid diagnosis code is submitted. Pharmacy claims for the following select medications require a diagnosis code at POS.

POS diagnosis code requirements from the Louisiana Department of Health:

Medication	Diagnosis description	Diagnosis code
Buprenorphine extended-release injection (Brixadi)	Opioid type dependence	F11.2*
Efgartigimod alfa-fcab (Vyvgart)	Myasthenia gravis	G70.0*
Efgartigimod alfa and hyaluronidase-qvfc (Vyvgart Hytrulo)	Myasthenia gravis	G70.0*
Rozanolixizumab-noli (Rystiggo)	Myasthenia gravis	G70.0*
Selected hormonal agents <ul style="list-style-type: none">• Androgenic agents—methyltestosterone oral, testosterone cypionate, testosterone enanthate, testosterone nasal, testosterone oral, testosterone transdermal, testosterone pellet implant, testosterone undecanoate• Dutasteride (Avodart)• Estrogenic agents—estradiol (oral, transdermal, vaginal insert), estradiol cypionate, estradiol valerate, estradiol/levonorgestrel patch, estradiol/norethindrone (patch, tablet), estradiol/progesterone oral, conjugated estrogens (oral, injectable) conjugated estrogens/medroxyprogesterone acetate oral, conjugated estrogens/bazedoxifene oral, esterified estrogens oral, ethinyl estradiol/norethindrone acetate oral• Finasteride (Proscar)• Progestational agents on preferred drug list (PDL)/nonpreferred drug list (NPDL)• Progestins—hydroxyprogesterone caproate injection, medroxyprogesterone acetate (injection, tablet), norethindrone acetate oral, progesterone (injection, oral)• Spironolactone oral	A diagnosis code is required on pharmacy claims for these agents when submitted for recipients who are younger than 18. In these cases, pharmacy claims submitted with a diagnosis code associated with gender dysphoria or gender reassignment (F64*, Z87.890) will deny.	Diagnosis must be submitted but cannot be F64* or Z87.890

*Any number or letter or combination of up to 4 numbers and letters of an assigned International Classification of Diseases, Tenth Revision (ICD-10) diagnosis code



Quantity limit requirements in place for pharmacy claims

On Jan. 1, 2024, the Louisiana Medicaid FFS pharmacy program and MCOs, in consultation with the DUR board, implemented new POS quantity limits for select medications. The quantity limits apply to pharmacy claims submitted to FFS and MCOs.

The agents listed in the following chart have quantity limits at POS.

Medication	Quantity limit
Buprenorphine extended-release injection (Brixadi) 8 mg (weekly)	4 units/21 days
Buprenorphine extended-release injection (Brixadi) 16 mg (weekly)	4 units/21 days
Buprenorphine extended-release injection (Brixadi) 24 mg (weekly)	4 units/21 days
Buprenorphine extended-release injection (Brixadi) 32 mg (weekly)	4 units/21 days
Buprenorphine extended-release injection (Brixadi) 64 mg (monthly)	1 unit/21 days
Buprenorphine extended-release injection (Brixadi) 96 mg (monthly)	1 unit/21 days
Buprenorphine extended-release injection (Brixadi) 128 mg (monthly)	1 unit/21 days
Oxycodone (Skyclarys) capsule	90 capsules/30 days
Ondansetron (Zofra) orally disintegrating tablet/tablet (solid oral dosage forms) [†]	30 tablets/30 days
Trisectine tetrahydrochloride (Cuvrior™) tablet	300 tablets/30 days

POS edits

This quantity limit override option will apply to agents in the chart above except buprenorphine extended-release injection (Brixadi™) agents. Pharmacy claims submitted with a diagnosis code for cancer or palliative end-of-life care will bypass Ondansetron (Zofran®) orally disintegrating tablet (solid oral dosage forms) quantity limits.

† Bypass diagnosis code exemptions for Ondansetron (Zofran) orally disintegrating tablet/tablet (solid oral dosage forms) POS limits are in the chart below.

Cancer	C00.–C96.
Palliative care	Z51.5



Outreach effort to close care gaps encourages members to take healthy actions

This year, Humana Healthy Horizons® in Louisiana launches a multichannel campaign to our members to help close care gaps. We will use direct mail, email, text, voice-activated telephone calls or a combination of channels to encourage members to take healthy actions and earn rewards through the Go365 for Humana Healthy Horizons® wellness program.

These campaigns will be staggered throughout 2024:

- Child/adolescent well-care visits and immunizations
- Diabetic member preventive care
- Women’s health

When Humana Healthy Horizons patients visit your office for their care, please take the opportunity to encourage them to be more proactive in their health, and let them know there are rewards for their efforts. Members younger than 18 must have a parent or guardian register on their behalf to participate.

We welcome the opportunity to work alongside providers to continually improve member outcomes. If you would like to schedule time to discuss any of the outreach efforts or care gaps in more detail, please email the Louisiana quality team at QualityLAMCD@humana.com or call 1-504-389-6211.



Medical record reviews conducted at least once every 2 years

The Humana Healthy Horizons quality improvement team performs medical record documentation reviews as part of regulatory requirements. The reviews can give insights into healthcare provider strengths and areas of opportunity.

Our team reviews all providers at least once every 2 years. The acceptable compliance score is 85%, with a goal of 90%. If providers do not meet the compliance score, Humana Healthy Horizons provides education and a re-review 6 months later.

Medical record elements subject to review/audit include:

Elements subject to review	Actions required
Patient identification	Patient’s name or identification number is included on each page. Records should include the patient’s name, identification number, date of birth, gender, and parent or legal guardianship (if applicable).

Elements subject to review	Actions required
Primary language	
Provider identification	
Services information	All services include date of service (including begin and end times), service site, and name of service provider.
Consent forms	
Legibility	
Allergies	
Chief complaint or purpose of visit	
Medical history	For patients seen 3 or more times, medical history should be easily identifiable.
Advance directive(s)	For patients 21 and older, document that the patients were asked if they have an advance directive. If the response is yes, the medical record must include a copy of the advance directive.
Physical exam (complete)	All body systems should be reviewed within 2 years of the first clinical encounter, including head, eyes, ears, nose and throat, teeth, neck, heart, lungs, and neurological and musculoskeletal systems. Document height, weight, blood pressure and temperature during the initial visit.
History and physical	Document subjective and objective information regarding the presenting complaints.
Working diagnosis	The working diagnosis should be consistent with findings (e.g., the provider's medical impression).
Plan/treatment	Documentation of plan of action and treatment should be consistent with diagnosis.
Records (e.g., consultation, discharge summaries, emergency room reports)	
Referrals (e.g., consultation, therapy)	
X-ray/lab/imaging	
Health education	
Tobacco use/vaping	For patients seen 3 or more times, records must include a notation about patient tobacco use/vaping.
Alcohol	For patients seen 3 or more times, records must include a notation about patient alcohol use.

Elements subject to review	Actions required
Substance use	For patients seen 3 or more times, records must include a notation about patient substance use.
Immunization record	
Prescribed medications	
Prescription drug monitoring program (PMP)	For prescriptions of controlled substances, records must include verification the PMP was checked in accordance with the Louisiana Board of Pharmacy requirements.

For more information regarding our chart elements and medical record review process, please email QualityLAMCD@humana.com.



Medication overrides granted if a shortage is caused by manufacturing issues

Magellan will approve overrides for nonpreferred products when the preferred product has a manufacturer-caused shortage. Pharmacy staff can call the Louisiana Medicaid MCO pharmacy call center administered by Magellan Rx Management at **1-800-424-1664** to get the override. The prescriber does not need to fill out a prior authorization request.



Clotting factor reimbursement processed as a pharmacy benefit

Effective Feb. 1, 2024, the Louisiana Medicaid FFS pharmacy program and MCOs changed the reimbursement methodology for clotting factor products. Clotting factor products administered in an outpatient setting will only be reimbursed as a pharmacy benefit, not as a medical/professional benefit.



Access behavioral health tools online to improve whole-person health

Understanding and acknowledging that behavioral health affects every aspect of life is important for our members' overall well-being. Humana Healthy Horizons acknowledges substance use disorder and other mental health challenges are diseases and should be treated as such.

As a part of our network, you receive dedicated support, including resources to improve patient outcomes. Find patient support, behavioral health screenings, clinical guidelines, tools, and Health Effectiveness Data and Information Set (HEDIS®) measures for behavioral health and more by **signing on to our website.**



ATLAS: a free resource with information on substance use disorder treatment facilities

Substance use disorder (SUD) patients often have difficulty locating treatment in a timely manner. Shatterproof Treatment Atlas is a free resource that provides transparent, unbiased information on the quality of SUD treatment facilities for people seeking care.

Atlas is designed for people with SUDs, their loved ones, care navigators and others to find treatment options that suit a person's clinical needs and preferences. By showing how well sites align with evidence-based clinical practices, Atlas helps people successfully navigate the SUD treatment system.

- Atlas is expert-vetted and easy to use.
- Atlas can be used to take a brief assessment through built-in partnership with the American Society of Addiction Medicine (ASAM).
- Search results can be filtered by distance, special groups served, insurance accepted, languages offered, substances treated and level of care.

Patients and providers can locate participating SUD treatment providers by visiting **www.treatmentatlas.org.**

Humana Healthy Horizons in Louisiana provider website and resources

Our **Humana Healthy Horizons in Louisiana provider website**, has materials and resources to help you achieve optimal results:

- Louisiana Provider Manual
- Network notices
- Claims and payments
- Provider training materials
- Compliance requirements
- Clinical support
- Prior authorization information

We encourage you to visit the website often, as we regularly update its content.

Humana's provider compliance training

Healthcare providers serving Humana Healthy Horizons in Louisiana Medicaid plans must complete the following training modules:

- Humana Medicaid provider orientation
- Health, safety and welfare training
- Cultural competency
- Compliance and fraud, waste and abuse training

To start your training:

1. Go to **Availity.com**.
2. Sign in and select "Payer Spaces," then "Humana."
3. Under the Resources tab, select "Humana Compliance Events" to begin.

For more information, please visit **[Humana.com/ProviderCompliance](https://www.humana.com/providercompliance)**.