



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

INFORMATIONAL LETTER NO.1431

DATE: October 13, 2014

TO: Iowa Medicaid Physician, Dentist, Advanced Registered Nurse Practitioner, Therapeutically Certified Optometrist, Podiatrist, Pharmacy, Home Health Agency, Rural Health Clinic, Clinic, Skilled Nursing Facility, Intermediate Care Facility, Community Mental Health, Family Planning, Residential Care Facility, ICF/ID State and Community Based ICF/ID Providers

FROM: Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

RE: Iowa Medicaid Pharmacy Program Changes

EFFECTIVE: Upon Receipt

1. Dispensing Fee

- The IME received approval from the Centers for Medicare and Medicaid Services (CMS) of the increase in the dispensing fee for outpatient pharmacy claims from \$10.12 to \$11.73.
- The new dispensing fee approval is for dates of service August 1, 2014, and after.
- Claims with dates of service September 24, 2014, and after have the updated \$11.73 dispensing fee applied.
- Completion of the dispensing fee adjustments for claims dated August 1, 2014, through September 23, 2014, will be communicated at a later date.

2. Coverage of naloxone: Effective October 1, 2014, injectable naloxone will be a preferred drug on the Preferred Drug List (PDL) and may be prescribed as a rescue medication for a potentially life-threatening overdose. In addition, coverage of a mucosal atomization device (LMA MAD Nasal) will be available through the pharmacy Point of Sale (POS) system.

a) Stocking the Materials:

- 2mg/ml naloxone (NDC 76329-3369-01) is available from pharmacy wholesalers.
- The LMA MAD Nasal is available from some wholesalers or directly from the manufacturer, Teleflex.

b) Billing:

- Use NDC 76329-3369-01 to bill for 2mg/ml naloxone.
- Use NDC 99999-2718-02 to bill for the LMA MAD Nasal Mucosal Atomization Device without syringe. Reimbursement is \$5.75 per unit and no dispensing fee will be paid for claims for this item.
- The quantity limit for naloxone rescue prescriptions is two syringes (4mls) and two nasal mucosal atomization devices per 30 days.

c) Prescription Requirements:

- Prescriptions may be provided only to members with opiate dependency or addiction.
- Do not bill Iowa Medicaid for naloxone prescriptions intended for use for a non-Iowa Medicaid member.
- Provide patient counseling and information to the patient about the dangers of overdose and the appropriate use of naloxone. Prescribetoprevent.org offers patient education materials on overdose and naloxone administration.
- Remind patients of proper storage. Naloxone should be stored at room temperature and away from direct sunlight.

If you have questions, please contact the Pharmacy Point of Sale Helpdesk at 1-877-463-7671 or 515-256-4608 (local in Des Moines) or email info@iowamedicaidpos.com.