

STATE OF LOUISIANA

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE OR SERVICE LISTED IN SECTION 1902-(Aa) OF THE ACT THAT ARE INCLUDED IN THE PROGRAM UNDER THE PLAN ARE DESCRIBED AS FOLLOWS:

**3. 340B Physician Administered Drugs**

For those Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) that are reimbursing using the encounter rate, reimbursement for 340B physician administered drugs will be encompassed in the all-inclusive rate. All other 340B physician administered drugs will be reimbursed in accordance with Section 2, Outpatient Hospital Setting.

**Clotting Factor**

Pharmacy claims for clotting factor ~~will be~~ are reimbursed using ~~the brand/generic drug~~ a state generated actual acquisition cost (AAC), ingredient cost, and a unit based professional dispensing fee reimbursement methodology. Exclusion: Hemlibra.

**Investigational or Experimental Drugs**

Investigational or experimental drugs shall not be reimbursed by Louisiana Medicaid.