

## **Eculizumab**

Notification:	<u>Category:</u>	<u>Topic:</u>	What is changing? /	Why is Humana making this change? /	Language:	Impacted Products:
			Change Description:	Change Reason:		
<u>9295</u>			We limit reimbursement of charges for HCPCS	These limitations were established by the		Medicaid- Louisiana
			codes J1299, Q5151 or Q5152 if billed with a	FDA-approved package insert,		
			diagnosis of atypical hemolytic uremic	prescribing information and		
			syndrome to no more than:	pharmaceutical compendium		
		Louisianna Medicaid:	• 750 units every 6 weeks for patients 1 year	Note: The limitations described above		
	HCPCS - Drugs &	eculizumab and its	old or younger	are based on maximum dosages		
	Biologicals	biosimilars – HCPCS	• 1,200 units every 6 weeks for patients 2–4	established in milligrams. If any units are	<u>English</u>	
	<u> </u>	codes J1299, Q5151 and	<u>years old</u>	denied, the provider may dispute the		
		Q5152	• 1,500 units every 6 weeks for patients age 5	decision through the appropriate		
				process. The provider may submit		
				information, including medical notes		
				showing the patient's body weight that		
				substantiates the medical necessity of		
				the additional units.		
<u>9297</u>	HCPCS - Drugs & Biologicals	Louisiana Medicaid:	We limit reimbursement of charges for HCPCS	These limitations were established by the		Medicaid- Louisiana
		eculizumab and its	codes J1299, Q5151 or Q5152 to no more than	FDA-approved package insert,		
		biosimilars – HCPCS	1,650 units every 6 weeks if billed with a	prescribing information and	<b>English</b>	
		codes J1299, Q5151 and	diagnosis of paroxysmal nocturnal	pharmaceutical compendium.		
		Q5152	hemoglobinuria.			

9300			We limit reimbursement of charges for HCPCS	These limitations were established by the		Medicaid- Louisiana
<u>3300</u>			codes J1299, Q5151 or Q5152 to no more than	FDA-approved package insert,		
			2,400 units every 6 weeks if the patient is 6	prescribing information and		
			years old or older and the diagnosis on the	pharmaceutical compendium.		
			claim is atypical hemolytic uremic syndrome or			
		Louisiana Medicaid:	myasthenia gravis.	Note: The limitations described above		
		eculizumab and its		are based on maximum dosages		
	HCPCS - Drugs &	biosimilars – HCPCS		established in milligrams. If any units are	<b>English</b>	
	<u>Biologicals</u>	codes J1299, Q5151 and		denied, the provider may dispute the	<del></del>	
		Q5152		decision through the appropriate		
				process. The provider may submit		
				information, including medical notes		
				showing the patient's body weight, that		
				substantiates the medical necessity of		
				the additional units.		
9302		Louisiana Medicaid:	We limit reimbursement of charges for HCPCS	These limitations were established by the		Medicaid- Louisiana
	HCPCS - Drugs &	eculizumab and its	codes J1299, Q5151 or Q5152 to no more than	FDA-approved package insert,		
		biosimilars - HCPCS	2,400 units every 6 weeks if billed with a	prescribing information or	<b>English</b>	
	<u>Biologicals</u>	codes J1299, Q5151 and	diagnosis of neuromyelitis optica spectrum	pharmaceutical compendium.		
		Q5152	disorder.			
9304		Louisiana Medicaid:	We limit reimbursement of charges for HCPCS	These limitations were established by the		Medicaid- Louisiana
	HCPCS - Drugs & Biologicals	eculizumab and its	codes J1299, Q5151 or Q5152 to no more than	FDA-approved package insert,		
		biosimilars - HCPCS	6,150 units every 26 weeks if billed with a	prescribing information and	<u>English</u>	
	biologicals	codes J1299, Q5151 and	diagnosis of paroxysmal nocturnal	pharmaceutical compendium.		
		<u>Q5152</u>	hemoglobinuria.			
<u>9306</u>	HCPCS - Drugs & Biologicals	Louisiana Medicaid:	We limit reimbursement of charges for HCPCS	These limitations were established by the		Medicaid- Louisiana
		eculizumab and its	codes J1299, Q5151 or Q5152 to no more than	FDA-approved package insert,		
		biosimilars – HCPCS	8,400 units every 26 weeks for patients 6 years	prescribing information and	<b>English</b>	
		codes J1299, Q5151 and Q5152	old or older if billed with a diagnosis of atypical	pharmaceutical compendium.	Eligiisii	
			hemolytic uremic syndrome or myasthenia			
		<u>43132</u>	gravis.			
9308	HCPCS - Drugs & Biologicals	Louisiana Medicaid:	We limit reimbursement of charges for HCPCS	These limitations were established by the		Medicaid- Louisiana
		eculizumab and its	codes J1299, Q5151 or Q5152 to no more than	FDA-approved package insert,		
		biosimilars - HCPCS	8,400 units every 26 weeks if billed with a	prescribing information and	<b>English</b>	
		codes J1299, Q5151 and	diagnosis of neuromyelitis optica spectrum	pharmaceutical compendium.		
		Q5152	disorder.			

	<u>9314</u>			For providers with a specialty other than home	These limitations were established by the		Medicaid- Louisiana
		HCPCS - Drugs &	Louisiana Medicaid:	infusion therapy or pharmacy, we limit	FDA-approved package insert,		
			eculizumab and its	reimbursement of charges for HCPCS codes	prescribing information and		
			biosimilars - HCPCS	J1299, Q5151 or Q5152 to no more than 450	pharmaceutical compendium.	<b>English</b>	
	<u>Biologicals</u>	codes J1299, Q5151 and	units per date of service if billed with a				
			Q5152	diagnosis of paroxysmal nocturnal			
				hemoglobinuria or cold agglutinin disease.			