



Eculizumab

<u>Notification:</u>	<u>Category:</u>	<u>Topic:</u>	<u>What is changing? / Change Description:</u>	<u>Why is Humana making this change? / Change Reason:</u>	<u>Language:</u>	<u>Impacted Products:</u>
<u>9295</u>	<u>HCPCS - Drugs & Biologicals</u>	<u>Louisiana Medicaid: eculizumab and its biosimilars – HCPCS codes J1299, Q5151 and Q5152</u>	<u>We limit reimbursement of charges for HCPCS codes J1299, Q5151 or Q5152 if billed with a diagnosis of atypical hemolytic uremic syndrome to no more than:</u> <ul style="list-style-type: none"><u>• 750 units every 6 weeks for patients 1 year old or younger</u><u>• 1,200 units every 6 weeks for patients 2–4 years old</u><u>• 1,500 units every 6 weeks for patients age 5</u>	<u>These limitations were established by the FDA-approved package insert, prescribing information and pharmaceutical compendium</u> <u>Note: The limitations described above are based on maximum dosages established in milligrams. If any units are denied, the provider may dispute the 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>	<u>English</u>	<u>Medicaid- Louisiana</u>
<u>9297</u>	<u>HCPCS - Drugs & Biologicals</u>	<u>Louisiana Medicaid: eculizumab and its biosimilars – HCPCS codes J1299, Q5151 and Q5152</u>	<u>We limit reimbursement of charges for HCPCS codes J1299, Q5151 or Q5152 to no more than 1,650 units every 6 weeks if billed with a diagnosis of paroxysmal nocturnal hemoglobinuria.</u>	<u>These limitations were established by the FDA-approved package insert, prescribing information and pharmaceutical compendium.</u>	<u>English</u>	<u>Medicaid- Louisiana</u>

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

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