

Notification:	HUM 8585
<u>Category:</u>	HCPCS - Drugs & Biologicals
<u>Topic:</u>	Louisiana Medicaid: injection, abatacept, 10 mg – HCPCS code J0129
What is changing? /	We limit reimbursement of charges for HCPCS code J0129 to no more
Change Description:	than 100 units every 26 weeks if billed with a diagnosis of severe
	acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection.
Why is Humana making this change?	The above limitations are established according to the FDA-approved
/ Change Reason:	package insert and prescribing information and pharmaceutical
	compendia.
	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>Language:</u>	<u>English</u>
Impacted Products:	Medicaid- Louisiana