

Humana

Healthy Horizons®
in Louisiana

<u>Notification:</u>	<u>HUM 7807</u>
<u>Category:</u>	<u>HCPCS - Drugs & Biologicals</u>
<u>Topic:</u>	<u>Louisiana Medicaid: fam-trastuzumab deruxtecan – HCPCS code J9358</u>
<u>What is changing? / Change Description:</u>	<p>We limit reimbursement of charges for HCPCS code J9358 to no more than 1 administration every 3 weeks and no more than 1,600 units per 6 weeks for any of the following diagnoses:</p> <ul style="list-style-type: none"> • <u>Brain metastases in HER2-overexpressing breast cancer</u> • <u>Breast cancer</u> • <u>HER2-overexpressing biliary tract cancer</u> • <u>HER-2 overexpressing cervical cancer</u> • <u>HER2-overexpressing endometrial carcinoma</u> • <u>HER2-overexpressing occult primary</u> • <u>HER2-overexpressing ovarian cancer</u> • <u>HER2-overexpressing pancreatic adenocarcinoma</u> • <u>HER2-overexpressing salivary gland tumors</u> • <u>HER2-overexpressing small bowel adenocarcinoma</u> • <u>HER2-overexpressing urothelial carcinoma</u> • <u>HER2-overexpressing vaginal cancer</u> • <u>HER2-overexpressing vulvar cancer</u>
<u>Why is Humana making this change? / Change Reason:</u>	<p><u>The above limitations were established by the FDA-approved package insert and prescribing information and the pharmaceutical compendia.</u></p> <p><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></p>
<u>Language:</u>	<u>English</u>
<u>Impacted Products:</u>	<u>Medicaid- Louisiana</u>