

Notification:	HUM 7809
<u>Category:</u>	HCPCS - Drugs & Biologicals
<u>Topic:</u>	Louisiana Medicaid: fam-trastuzumab deruxtecan – HCPCS code
	<u>J9358</u>
What is changing? /	For providers with a specialty other than home infusion therapy or
Change Description:	pharmacy, we limit reimbursement of charges for HCPCS code J9358
	to no more than 800 units per date of service if the diagnosis is HER2-
	overexpressing salivary gland tumors.
Why is Humana making this change?	The above limitations were established by the FDA-approved package
/ Change Reason:	insert and prescribing information and the 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