

Notification:	HUM 7786
<u>Category:</u>	HCPCS - Drugs & Biologicals
Topic:	Louisiana Medicaid: factor VIII (antihemophilic factor, recombinant)
	per IU, not otherwise specified – HCPCS code J7192
What is changing? /	For providers with a specialty of pharmacy, we limit reimbursement
Change Description:	of charges for HCPCS code J7192 to no more than 16,000 units per
	date of service for patients 6–11 years old with a diagnosis of
	hereditary factor VIII deficiency if the place of service is not:
	• 03 – School
	• 04 – Homeless shelter
	• 09 - Prison/correctional facility
	• 12 – Patient home
	• 13 – Assisted living facility
	• 14 – Group home
	• 16 – Temporary lodging
	• 27 - Outreach site/street
	• 33 – Custodial care facility
	• 54 – Intermediate care facility/individuals with intellectual
	<u>disabilities</u>
	• 55 – Residential substance abuse treatment facility
	• 56 – Psychiatric residential treatment center
Why is Humana making this change?	The above limitations are based on the FDA-approved package insert
/ Change Reason:	and prescribing information and the pharmaceutical
	compendia. Note: The limitations described above are based on
	maximum dosages established in international units. 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