

Notification HUM-6965

Category

HCPCS - Drugs & Biologicals

Topic

Infliximab, 10 mg

What is changing? / Change Description:

We do not reimburse charges for HCPCS codes J1745, Q5103, Q5104 or Q5121 unless billed with one of the following diagnoses:

- Acute graft-versus-host disease
- Acrodermatitis continua
- Ankylosing spondylitis (adult)
- Arthropathic psoriasis, unspecified Behcet's disease
- Chronic graft-versus-host disease
- Crohn's disease
- Distal interphalangeal psoriatic arthropathy
- Felty's syndrome
- Guttate psoriasis
- Hidradenitis suppurativa
- Inflammatory polyarthropathy
- Inflammatory polyps of colon
- Juvenile arthritis
- Kawasaki Panuveitis
- Psoriasis vulgaris
- Psoriatic arthritis
- Psoriatic juvenile arthropathy
- Psoriatic spondylitis
- Pustulosis palmaris et plantaris
- Rheumatoid arthritis
- Rheumatoid bursitis
- Rheumatoid heart disease
- Rheumatoid myopathy
- Rheumatoid nodule
- Rheumatoid polyneuropathy
- Rheumatoid vasculitis
- Sarcoidosis
- Spondylopathy
- Sympathetic uveitis
- Ulcerative (chronic) pancolitis



- Ulcerative (chronic) rectosigmoiditis
- Ulcerative colitis

Language
English

Impacted Products
Medicaid – Louisiana

Why is Humana making this change? / Change Reason:

The above limitations for injection, infliximab, 10 mg, were established by the FDA-approved package insert and prescribing information and pharmaceutical compendia.