

NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES

GUIDANCE DOCUMENT

“This guidance document is advisory in nature but is binding on an agency until amended by such agency. A guidance document does not include internal procedural documents that only affect the internal operations of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules and regulations made in accordance with the Nebraska Administrative Procedure Act. If you believe that this guidance document imposes additional requirements or penalties on regulated parties, you may request a review of the document.”

Pursuant to
Neb. Rev. Stat. § 84-901.03



PROVIDER BULLETIN

No. 18-01

DATE: February 15, 2018

TO: All Providers Participating in Nebraska Medicaid Program

FROM: Thomas "Rocky" Thompson, Interim Director *TNT*
Division of Medicaid & Long-Term Care

BY: Lisa White, Medical Director
Division of Medicaid & Long-Term Care

RE: Makena® and Compounded Hydroxyprogesterone Caproate Injection Update

Please share this information with administrative, clinical, and billing staff.

This provider bulletin rescinds the information regarding compounded hydroxyprogesterone caproate (compounded 17P) found in provider bulletins 14-18 and 15-27. The purpose of this bulletin is to give direction regarding Nebraska Medicaid **fee-for-service coverage** of compounded 17P, a progestin indicated to reduce the risk of pre-term birth in high risk women.

Effective **April 1, 2018**, Nebraska Medicaid fee-for-service will no longer reimburse the compounded 17P unless the FDA approved product, Makena, does not meet the individual medical needs of a patient. Coverage of compounded 17P will require prior authorization and must meet the same clinical criteria as Makena. Also, providers must submit documentation that shows the compounded 17P product for each individual patient has a significant difference from Makena. The compounding pharmacy must follow Section 503A of the Food, Drug, and Cosmetic Act (FDCA). All approved individual compounded ingredients must be billed separately.

Nebraska Medicaid fee-for-service will continue to cover FDA approved uses of the drug Makena, as listed below. There is no prior authorization for Makena. All services reimbursed by Nebraska Medicaid are subject to post-payment review (NAC 471 3-002.03).

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Criteria:

- Singleton pregnancy;
- Prescribed for patients with history of spontaneous pre-term birth < 37 weeks;
- Treatment must be initiated between 16 weeks and 20 weeks 6 days;
- Administer once weekly injections until 37 weeks of gestation or delivery, whichever comes first; and,
- Billed with appropriate diagnosis code for supervision of pregnancy with history of pre-term labor.

As of **January 25, 2018**, Makena has been added to the pharmacy preferred drug list (PDL) and may be billed through the retail pharmacy benefit. Submission of an appropriate ICD -10 code will be required for the pharmacy claim to process. Prescribers can either submit the ICD-10 code on an electronic prescription, or write the ICD-10 code on written prescriptions for the pharmacy to enter during prescription processing. PDL claim limitations apply and may be found under the Providers-Documents tab at: <https://nebraska.fhsc.com/>.

If you have questions regarding this bulletin, please contact Leah Spencer at 402-471-9227, or via email at: dhhs.MedicaidPharmacyUnit@nebraska.gov.

Nebraska Medicaid Provider Bulletins, such as this one, are posted on the DHHS website at http://dhhs.ne.gov/medicaid/Pages/med_pb_index.aspx. The “Recent Web Updates” page will help you monitor changes to the Nebraska Medicaid pages.

To bill for services provided to Managed Care clients, please contact the appropriate Heritage Health plan for specific billing instructions.

Nebraska Total Care

Provider Services 844-385-2192, Monday-Friday 7:00am to 8:00pm

www.nebraskatotalcare.com/providers

Please consult the Nebraska Total Care Provider Manual for additional information:

<https://tinyurl.com/kfl8djf>

UnitedHealthcare Community Plan of Nebraska

Provider Services 866-331-2243, Monday-Friday 7:00am to 8:00pm

www.unitedhealthcareonline.com

Please consult the UnitedHealthcare Community Plan of Nebraska Provider Manual for additional information:

<http://www.uhccommunityplan.com/health-professionals/ne/Provider-Manual.html>

WellCare of Nebraska

Provider Services 855-599-3811, Monday-Friday 7:00am to 8:00pm

www.wellcare.com/Nebraska