

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT2024142 SEPTEMBER 12, 2024

IHCP adds coverage for Releuko (Q5125)

The Centers for Medicare & Medicaid Services (CMS) added a new Healthcare Common Procedure Coding System (HCPCS) code Q5125 for Releuko, effective Oct. 1, 2022, but the drug was not listed as participating in the Medicaid Drug Rebate Program (MDRP). The drug's rebating status was changed effective Nov. 22, 2022.

Effective immediately, retroactive for dates of service (DOS) on or after **Nov. 22, 2022**, the Indiana Health Coverage Programs (IHCP) is adding coverage for procedure code Q5125 – *Injection, filgrastim-ayow, biosimilar, (releuko), 1 microgram* (see Table 1). IHCP coverage for this drug applies to both managed care and fee-for-service (FFS) delivery systems. Prior authorization (PA) is not required.



All claims for Releuko must include the National Drug Code (NDC). For institutional outpatient claims, separate reimbursement is available for Q5125 when billed in conjunction with revenue code 636 – *Drugs requiring detailed coding*.

Table 1 – Newly covered procedure code for Releuko, effective for DOS on or after Nov. 22, 2022

Procedure code	Description	Program coverage	PA required	NDC required	Special billing information
Q5125	Injection, filgrastim-ayow, biosimilar, (releuko), 1 microgram	Covered under Traditional Medicaid and other IHCP programs that include full Indiana Medicaid State Plan benefits; the service may not be covered under IHCP plans with limited benefits	No	Yes	Max Fee: \$0.56 Linked to revenue code 636

The claim-processing systems have been updated. For claims affected by this change, providers can resubmit claims to the IHCP within 90 days from the date of this publication for managed care claims, or 180 days from the date of this publication for FFS claims, to satisfy timely filing requirements. Providers should include a copy of this bulletin when submitting claims beyond the standard filing limit.

This change will be reflected in the next regular update to the Professional Fee Schedule and Outpatient Fee Schedule, accessible from the [IHCP Fee Schedules](#) page at in.gov/medicaid/providers.

This code will also be added to *Procedure Codes That Require National Drug Codes (NDCs)* and *Revenue Codes With Special Procedure Code Linkages*, accessible from the [Code Sets](#) page at in.gov/medicaid/providers.

For more information

Questions about FFS billing and reimbursement under the medical benefit should be directed to Gainwell Technologies Customer Assistance at 800-457-4584 or your [Provider Relations consultant](#). For questions regarding FFS pharmacy billing or reimbursement or about the Statewide Uniform Preferred Drug List (SUPDL), please contact Optum Rx at 855-577-6317.

Within the managed care delivery system, individual managed care entities (MCEs) establish and publish their own billing and reimbursement requirements. Questions about managed care billing and reimbursement should be directed to the MCE with which the member is enrolled.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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