

Bulletin Number: MSA-11-50

Distribution: Practitioners

Issued: December 1, 2011

Subject: Changes in Reimbursement for Injectables – J Code Updates

Effective: January 1, 2012

Programs Affected: Medicaid, Children’s Special Health Care Services (CSHCS), Maternity Outpatient Medical Services Program (MOMS)

Effective for dates of service on or after January 1, 2012, the Michigan Department of Community Health (MDCH) will modify the reimbursement methodology for specific injectable drugs.

This new methodology prices certain lower cost injectable drugs in classes with therapeutic alternatives at the maximum allowable cost. Utilization of lower cost alternative agents within a therapeutic class will have increased reimbursement over current Average Sale Price (ASP) rates, with margins greater than or equal to higher cost agents within the same therapeutic class. Below is the list of drugs that will be affected by this new pricing methodology and is subject to change.

Therapeutic Class	Proc Code	Proc Code Description	Brand Name
Anti-Emetics	J1626	Injection, Granisetron Hydrochlorid 100 Mcg	Kytril
Anti-Emetics	J2405	Injection, Ondansetron Hcl Per 1 Mg	Zofran
Anti-Emetics	J2469	Injection, Palonosetron Hcl 25 Mcg	Aloxi
Bisphosphonates	J3487	Injection, Zoledronic Acid 1 Mg	Zometa
Bisphosphonates	J2430	Injection, Pamidronate Disodium, Per 30 Mg	Aredia
Colony Stimulating Factors	J1440	Injection, Filgrastim, 300 Mcg	Neupogen
Colony Stimulating Factors	J1441	Injection, Filgrastim, 480 Mcg	Neupogen
Colony Stimulating Factors	J2505	Injection, Pegfilgrastim, 6 Mg	Neulasta
Colony Stimulating Factors	J2820	Injection, Sargramostim, 50 Mcg	Leukine
Taxanes	J9171	Injection, Docetaxel, 1 Mg	Taxotere
Taxanes	J9264	Injection, Paclitaxel Protbnd Particl, 1 Mg	Abraxane
Taxanes	J9265	Injection, Paclitaxel, 30 Mg	Taxol

MDCH will review and adjust reimbursement levels in the provider-administered injectable drug schedule on a quarterly basis to reflect changes in market prices for acquiring and administering drugs. Providers are encouraged to purchase lower cost therapeutic alternatives when clinically appropriate.

Information regarding fee screens and coverage parameters is located in the appropriate databases available on the MDCH website at www.michigan.gov/medicaidproviders >> Billing and Reimbursement >> Provider Specific Information.

This bulletin is distributed to a broad range of providers and all codes may not apply to your scope of practice.

Manual Maintenance

Retain this bulletin until the information has been incorporated into the Michigan Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

Approved



Stephen Fitton, Director
Medical Services Administration