

**Michigan Department of Health and Human Services (MDHHS)
Drugs and Therapeutics Carved Out of Hospital Diagnosis Related Group (DRG) Payment
January 2025**

The following list of products are carved out from DRG payment. They will be reimbursed separately as a fee-for-service (FFS) benefit for all FFS and Managed Care enrollees. These drugs and therapeutics may be covered as either professional claims or pharmacy claims. Pharmacies and hospital providers must ensure that claims are not duplicated. For additional information on submitting claims, consult the MDHHS Medicaid Provider Manual.

HCPCS Code	NDC	Short Description	Maximum Fee	Date Added	PA Required?
J2326	64406005801	Nusinersen (Spinraza)	Manual Price	01/01/2018	Yes
J3393	73554311101	Betibeglogene Autotemcel (Zynteglo)	Manual Price	08/01/2023	Yes
J3394	73554111101	Lovotibeglogene autotemcel (Lyfgenia)	Manual Price	01/01/2024	Yes
J3399	71894012002 71894012103 71894012203 71894012303 71894012404 71894012504 71894012604 71894012705 71894012805 71894012905 71894013006 71894013106 71894013206	Onasemnogene abeparvovec-xioi (Zolgensma)	Manual Price	07/01/2019	Yes

HCPCS Code	NDC	Short Description	Maximum Fee	Date Added	PA Required?
	71894013307 71894013407 71894013507 71894013608 71894013708 71894013808 71894013909 71894014009 71894014109 71894014210 71894014310 71894014410 71894014511 71894014611 71894014711 71894014812 71894014912 71894015012 71894015113 71894015213 71894015313 71894015414 71894015514 71894015614				
J3392	51167029009	Exagamglogene autotemcel (Casgevy)	Manual Price	1/1/2025	Yes

The rates for therapeutics and drug product reimbursement are outlined in the Michigan Medicaid State Plan.

The information on this page serves as a reference only. It does not guarantee that services are covered. Providers are to refer to the Michigan Medicaid Provider Manual, MMP Bulletins and other relevant policy for specific coverage and reimbursement policies. This information can be found on the Medicaid Policy, Letters & Forms web page. If there are discrepancies between the information on this page and the Medicaid Provider Manual, such as rate or coverage determinations, they will be resolved in favor of the Medicaid Provider Manual language.