



## INFORMATIONAL LETTER NO. 249I-MC-FFS

**DATE:** August 16, 2023

**TO:** All Iowa Medicaid Medical Providers

**APPLIES TO:** Managed Care (MC), Fee-for-Service (FFS)

**FROM:** Iowa Department of Health and Human Services (HHS), Iowa Medicaid

**RE:** Avastin<sup>®</sup> (bevacizumab) Billing for Use in Ophthalmology

**EFFECTIVE:** Upon Receipt

\*\*\*This informational letter (IL) replaces previous guidance issued in [IL 2264-MC-FFS](#)<sup>1</sup>.\*\*\*

As previously noted in [IL 2264-MC-FFS](#)<sup>2</sup>, Avastin<sup>®</sup> (bevacizumab) was initially approved by the U.S. Food and Drug Administration (FDA) in 2004 to treat metastatic colon cancer. Based on published reports and widespread clinical use, including the support of the American Academy of Ophthalmology (AAO), there is compelling evidence of bevacizumab's safety and efficacy for off-label intravitreal use in choroidal neovascularization in age-related macular degeneration (AMD), proliferative diabetic retinopathy, neovascular glaucoma, diabetic macular edema (DME), retinal and iris neovascularization, and macular edema following branch and central retinal vein occlusions.<sup>i</sup>

Ophthalmological use of Avastin<sup>®</sup> does not require a prior authorization under FFS. However, use of Avastin<sup>®</sup> is considered medically reasonable and necessary only when furnished by a qualified Ophthalmologist.<sup>ii</sup> If a member has coverage under a Managed Care Organization (MCO), the provider should contact the appropriate MCO to determine their coverage requirements.

Iowa Medicaid requires the following when submitting claims for this use to ensure accurate reimbursement:

- HCPCS code: J7999 (compounded drug, not otherwise classified)

<sup>1</sup> <https://secureapp.dhs.state.ia.us/IMPA/Information/ViewDocument.aspx?viewdocument=092e5425-b4a0-4bc3-baa1-997b80b87356>

<sup>2</sup> <https://secureapp.dhs.state.ia.us/IMPA/Information/ViewDocument.aspx?viewdocument=092e5425-b4a0-4bc3-baa1-997b80b87356>

- NOTE: J7999 is also an unspecified code (i.e., “dump code”). The rate of \$76 per unit will need to be applied when the claim is manually priced.
- HCPCS units of:
  - 1 HCPCS unit (1.25 mg). Rate of \$76.00 per eye, per calendar month.
  - 2 HCPCS units (2.5 mg). Rate of \$152.00 for both eyes, per calendar month.
- National Drug Code (NDC) of the product dispensed:
  - 50242-0060-01 (Avastin<sup>®</sup> 100 mg/4 mL vial); or
  - 50242-0061-01 (Avastin<sup>®</sup> 400 mg/16 mL vial).
  - NOTE: If using an individual dose of Avastin<sup>®</sup> (bevacizumab) prepared by an FDA-registered 503B outsourcing facility, submit the NDC of the active medication (Avastin<sup>®</sup>). Outsourcing facilities may, but are not required to, assign NDCs to their finished compounded human drug products, but these NDCs are not eligible for rebate under the Medicaid Drug Rebate Program.

This guidance applies only to Avastin<sup>®</sup> (bevacizumab) and does not apply to biosimilars of Avastin<sup>®</sup>.<sup>iii</sup>

If you have questions, please contact Iowa Medicaid Provider Services or the appropriate MCO:

**Iowa Medicaid Provider Services:**

- Phone: 1-800-338-7909
- Email: [imeproviderservices@dhs.state.ia.us](mailto:imeproviderservices@dhs.state.ia.us)

**Amerigroup Iowa, Inc.:**

- Phone: 1-800-454-3730
- Email: [iowamedicaid@amerigroup.com](mailto:iowamedicaid@amerigroup.com)
- Website: <https://providers.amerigroup.com/ia>

**Iowa Total Care:**

- Phone: 1-833-404-1061
- Email: [providerrelations@iowatotalcare.com](mailto:providerrelations@iowatotalcare.com)
- Website: <https://www.iowatotalcare.com>

**Molina Healthcare of Iowa:**

- Phone: 1-844-236-1464
- Email: [aproviderrelations@molinahealthcare.com](mailto:aproviderrelations@molinahealthcare.com)
- Website: <https://www.molinahealthcare.com/providers/ia/medicaid/home.aspx>
- Provider portal: <https://www.availity.com/molinahealthcare>

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<sup>i</sup> CMS LCD L36962: Vascular Endothelial Growth Factor Inhibitors for the Treatment of Ophthalmological Diseases. Effective 10/01/2019. <https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdId=36962>.

<sup>ii</sup> CMS Local Coverage Article A53008. Billing and Coding: Intraocular Bevacizumab. <https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleid=53008&ver=40&=&>. Original effective date: 10/01/2015. Revision effective date: 02/01/2020.

<sup>iii</sup> January 2022 statement from the American Academy of Ophthalmology (AAO) regarding bevacizumab biosimilars used off-label in the eye. <https://www.aao.org/clinical-statement/use-of-biosimilars-in-ophthalmic-practice>. “Bevacizumab biosimilars have been developed for use in the oncologic space, however neither available biosimilar has been studied for ophthalmic indications and their inactive ingredients have not all been approved for use in the eye. The Academy strongly recommends against using these biosimilars as a replacement for the reference product, bevacizumab, in the absence of sufficient clinical studies for eye disease.”