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Health Services Cost Review Commission

4160 Patterson Avenue, Baltimore, Maryland 21215

Phone: 410-764-2605 · Fax: 410-358-6217

Toll Free: 1-888-287-3229

hsrc.maryland.gov

Donna Kinzer
Executive Director

Katie Wunderlich, Director
Engagement and Alignment

Allan Pack, Director
Population Based
Methodologies

Chris Peterson, Director
Clinical & Financial
Information

Gerard J. Schmith, Director
Revenue & Regulation
Compliance

URGENT

MEMORANDUM

TO: Chief Financial Officers

FROM: Donna Kinzer, Executive Director *DJK per DUP*

DATE: October 25, 2017

RE: Revised Schedule CDS-A Supplemental Schedule for Remicaid, Renniflexis, Inflectra, and Immunoglobulin iviG for FY 2017

The schedule for reporting Remicaid, Renniflexis, Inflectra, and Immunoglobulin, as per my October 20, 2017 memorandum, omitted the J code for Remicaid – Biosimilar and the multiple J codes for Immunoglobulin iviG. Attached you will find the revised schedule. Please report utilizing the applicable J code.

If you have any questions concerning the above, you may contact Dennis Phelps at (410) 764-2565.

<u>CHANGE IN USE OF REMICAID, INFLECTRA, RENIFLEXIS, AND IMMUNOGLOBULIN IVG - REVISED</u>											
(A)	(B)	C	(D)	E	(F)	(G)	(H)	(I)	(J)	(K)	(L)
Per Vial				FY 2015	Total		FY2016	Total		FY2107	Total
HPCS Code	Description	HPCS Doseage	Number of Billed Doses	Medicare ASP Per Dose *	Estimated Invoice Cost (Col. D X Col. E)	Number of Billed Doses	Medicare ASP Per Dose	Estimated Invoice Cost (Col. G X Col. H)	Number of Billed Doses	Medicare ASP Per Dose	Estimated Invoice Cost (Col. J X Col. K)
J1745	Remicaid	10 MG									
Q5101	Remicaid - Biosimilar	1 MCG									
Q5102	Inflectra	10 MG									
Q5102	Reniflexis	10 MG									
J3590	Immunoglobulin IVG *	5 GM									
J0850	Immunoglobulin IVG	Per Vial									
J1459	Immunoglobulin IVG	500 MG									
J1556	Immunoglobulin IVG	500 MG									
J1561	Immunoglobulin IVG	500 MG									
J1566	Immunoglobulin IVG	500 MG									
J1568	Immunoglobulin IVG	500 MG									
J1569	Immunoglobulin IVG	500 MG									
J1571	Immunoglobulin IVG	0.5 ML									
J1572	Immunoglobulin IVG	500 MG									
J1573	Immunoglobulin IVG *	1 ML									
J1575	Immunoglobulin IVG	100 MG									
J1599	Immunoglobulin IVG	500 MG									
J1670	Immunoglobulin IVG	250 UNITS									
J2788	Immunoglobulin IVG	50 MCG									
J2790	Immunoglobulin IVG	300 MCG									
J2791	Immunoglobulin IVG	100 IU									
J2792	Immunoglobulin IVG	100 IU									

* For Immunoglobulin IVG J3590 AND J1573 use latest FY 2017 Invoice cost converted to cost per dose.