

## **\*\* Important Information \*\***



### **The following is information regarding the upcoming TennCare 2014-2015 Synagis® Season:**

Recently, the American Academy of Pediatrics (AAP) updated its guidelines for the use of palivizumab (Synagis®) for the prophylaxis of respiratory syncytial virus (RSV) infection in infants and young children. TennCare has adopted the guidelines from AAP and updated the clinical criteria for 2014 – 2015 Synagis® season to reflect the changes.

#### **Synagis® will be approved for the following based on the infant/child age at the start of RSV season (11/1):**

- < 12 months (1st year of life)
  - Gestational Age (GA) <29 weeks, 0 days (otherwise healthy)
  - Chronic Lung Disease of prematurity (GA <32 weeks, 0 days and > 21% O<sub>2</sub> x first 28 days after birth)
  - Anatomic pulmonary abnormalities, or neuromuscular disorder, or congenital anomaly that impairs the ability to clear secretions
  - Profoundly immunocompromised
  - Cystic Fibrosis with Chronic Lung Disease and/or nutritional compromise
- ≤ 12 months (1st year of life)
  - Congenital Heart Disease (hemodynamically *significant*) with *acyanotic* Heart Disease on Congestive Heart Failure medications and will require cardiac surgery or moderate to severe Pulmonary Hypertension.
  - For *cyanotic* heart defects consult a pediatric cardiologist
- > 12 months (2nd year of life)
  - Chronic Lung Disease of prematurity (GA <32 weeks, 0 days and > 21% O<sub>2</sub> x first 28 days after birth) and medical support (chronic systemic steroids, diuretic therapy, or supplemental O<sub>2</sub>) within 6 months before start of 2nd RSV season
  - Cystic Fibrosis with severe lung disease\* or weight for length <10<sup>th</sup> percentile
- < 24 months (2nd year of life)
  - Cardiac transplant during RSV season
  - Already on prophylaxis and eligible: give post-op dose after cardiac bypass or after ECMO
  - Profoundly immunocompromised

#### **The major revisions to previous guidelines are as follows:**

- In the first year of life, palivizumab prophylaxis is recommended for infants born before 29 weeks 0 days' gestation.
  - This is a change from gestational age before 35 weeks.
- Palivizumab prophylaxis is not recommended for otherwise healthy infants born at or after 29 weeks 0 days' gestation.
  - Previous guidelines advised use in infants younger than six months at the start of RSV if born at 29 to less than 32 weeks' gestation or in infants three months of age at the start of RSV season who were born at 32 to less than 35 weeks' gestation who had environmental risk factors for RSV infection.

- Palivizumab prophylaxis is recommended during the first year of life for infants with chronic lung disease (CLD) of prematurity defined as gestational age before 32 weeks 0 days' and who required more than 21 percent oxygen for at least 28 days after birth.
  - Prophylaxis is no longer recommended in the second year of life except for children with CLD who continue to require medical intervention.

**Please also note the changes below to claims billing process:**

- Magellan will begin accepting Synagis® Prior Authorization requests on 10/15/2014
- **Claims will be paid ONLY between 11/1/2014 and 4/30/2015 for all members** including members who have other primary coverage.
  - Claims billed prior to 11/1/2014 and after 4/30/2015 will not be eligible for primary or secondary billing to TennCare and will not be reimbursed.
  - **Please ensure that claims for Synagis® for TennCare enrollees are not processed prior to 11/1/2014, and Synagis® is NOT dispensed prior to 11/1/2014.**
- Despite differences in beginning and ending dates to RSV season in some states or regions, only a maximum of 5 doses will be approved during RSV season. If prophylaxis is initiated later in the RSV season, the infant or child will receive less than 5 doses.
  - For example, if prophylaxis is initiated in January, the 4th and final dose will be administered in April.
  - For eligible infants born during RSV season, fewer than 5 monthly doses may be needed.

**For further questions, please contact the Magellan Provider Educators at:**

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