

# IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS    BT2025111    JULY 31, 2025

## IHCP provides PA criteria for newly added physician-administered drug Tecelra (Q2057)

The Indiana Health Coverage Programs (IHCP) has finalized prior authorization (PA) criteria for newly covered Healthcare Common Procedure Coding System (HCPCS) code Q2057 (Tecelra) as established in *IHCP Bulletin* [BT202569](#). See Table 1 for the newly added PA criteria.

The PA update for physician-administered drug Tecelra (Q2057) is effective retroactively for dates of service (DOS) on or after **April 1, 2025**.

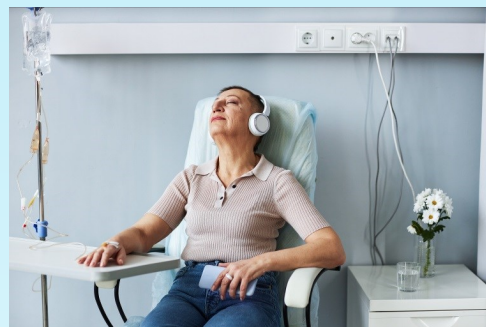


Table 1 – Procedure code with newly added PA criteria, effective for DOS on or after April 1, 2025

Procedure code	Code description	PA criteria
Q2057	Afamitresgene autoleucel, including leukapheresis and dose preparation procedures, per therapeutic dose	<ul style="list-style-type: none"><li>■ Indicated for the treatment of adults with unresectable or metastatic synovial sarcoma:<ul style="list-style-type: none"><li>⇒ Who have previously received prior chemotherapy</li><li>⇒ Test positive for one or more of the following human leukocyte antigens (HLAs):<ul style="list-style-type: none"><li>◆ A*02:01P</li><li>◆ A*02:02P</li><li>◆ A*02:03P</li><li>◆ A*02:06P</li></ul></li><li>⇒ Tumor expresses the melanoma-associated antigen A4 (MAGE-A4) determined by the U.S. Food and Drug Administration (FDA)-authorized companion diagnostic devices</li></ul></li></ul>

IHCP coverage for this drug applies to both managed care and fee-for-service (FFS) delivery systems. All claims for these drugs must include the National Drug Code (NDC). For institutional outpatient claims, separate reimbursement is available when billed with revenue code 636 – *Drugs requiring detailed coding*.

The claim-processing system will be updated. All FFS PA requests for this procedure code should be submitted to the FFS medical (nonpharmacy) prior authorization and utilization management (PA-UM) contractor, Acentra Health. All FFS medical claims for this procedure codes should be submitted to Gainwell Technologies.

This change will be reflected in the next regular update to the Professional Fee Schedule and Outpatient Fee Schedule, accessible from the [IHCP Fee Schedules](#) webpage at [in.gov/medicaid/providers](https://in.gov/medicaid/providers).

This code is included in *Procedure Codes That Require National Drug Codes (NDCs) and Revenue Codes With Special Procedure Code Linkages*, accessible from the [Code Sets](#) webpage at [in.gov/medicaid/providers](https://in.gov/medicaid/providers).

### For more information

Questions about PA criteria for these procedure codes should be directed to Acentra Health Customer Service at 866-725-9991. Questions about PA, billing and reimbursement should be directed to Gainwell at 800-457-4584 or your [Provider Relations consultant](#).

### QUESTIONS?

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