

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT202643 MARCH 24, 2026

IHCP updates PA requirements for certain physician-administered drugs

The Indiana Health Coverage Programs (IHCP) announces updates to prior authorization (PA) requirements for physician-administered drugs, avalglucosidase alfa (Nexviazyme) and alglucosidase alfa (Lumizyme).

For dates of service (DOS) on or after April 24, 2026, PA will be required for Healthcare Common Procedure Coding System (HCPCS) procedure codes J0219 – *Injection, avalglucosidase alfa-ngpt, 4 mg* and J0221 – *Injection, alglucosidase alfa, (Lumizyme), 10 mg* when these drugs are provided under

the fee-for-service (FFS) medical benefit. PA is already required for these drugs under the FFS pharmacy benefit.

Note that the same PA criteria for J0219 and J0221 also apply to these drugs when provided under the pharmacy benefit. For prior authorization requirements for Nexviazyme and Lumizyme, see *Pompe Disease Agents Prior Authorization Criteria* on the [Optum Rx Indiana Medicaid website](#) (under Preferred Products > Pharmacy Criteria and Forms).

Updates will be made to the Professional Fee Schedule and Outpatient Fee Schedule accessible from the [IHCP Fee Schedules](#) webpage at in.gov/medicaid/providers.

For more information

For drugs provided under the FFS medical benefit, PA should be requested through Acentra Health. Questions about FFS medical PA should be directed to Acentra Health Customer Service at 866-725-9991. FFS professional or institutional claims should be submitted to Gainwell Technologies. Questions about billing and reimbursement for these claims should be directed to Gainwell Technologies Customer Assistance at 800-457-4584 or your [Provider Relations consultant](#).

FFS pharmacy claims should be submitted to the FFS pharmacy benefit administrator, Optum Rx. Questions about FFS pharmacy claim processing or reimbursement should be directed to Optum Rx Clinical and Technical Help Desk at 855-577-6317.

Questions regarding managed care medical and pharmacy benefits (for members in the Healthy Indiana Plan [HIP], Hoosier Care Connect, Hoosier Healthwise and Indiana PathWays for Aging [PathWays]) should be referred to the managed care entity (MCE) with which the member is enrolled.



QUESTIONS

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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