

Spinal Muscular Atrophy- Onasemnogene Abeparvovec-Xioi (Zolgensma®)

WA.PHAR.74 Spinal Muscular Atrophy (Zolgensma®)

Effective Date: July 1, 2019

Background:

Gene therapy for spinal muscular atrophy using onasemnogene abeparvovec-xioi, marketed as Zolgensma[®], is managed and paid by the Health Care Authority for Medicaid members.

All requests for authorization or payment must be referred to the Health Care Authority.

Coding:

Codes referenced in this clinical policy are for informational purposes only. Inclusion or exclusion of any codes does not guarantee coverage. Providers should reference the most up-to date sources of professional coding guidance prior to the submission of claims for reimbursement of covered services.

| HCPCS Code | Description |
|-------------------|--|
| J3399 | INJ AVSX-101-XIOI P-TX TO 5X10^15 VCTR GNOMS |

History

| Date | Action and Summary of Changes |
|------------|--|
| 06/23/2020 | Removed NDC numbers. Removed HCPCS Codes: C9399, J3490, and J3590. Added new JCODE J3399. Added disclaimer regarding the HCPCS Code. |