Respiratory Syncytial Virus Immune Globulin, (RSV) Workflow

Synagis

Synagis (Palivizumab) 50 mg (CPT-4 code 90378 [Respiratory Syncytial Virus Immune Globulin, intramuscular]) is reimbursable for passive immunization of infants 2 years of age and younger who are at high risk for complications from Respiratory Syncytial Virus (RSV) infection.

GUIDELINES:

L.A. Care has adopted the guidelines provided by the Department of Health Care Services and the American Academy of Pediatrics. While it is noted the current CMS/CCS guidelines for Synagis administration differ from the AAP guidelines, requests for services based on the CCS guidelines will be considered on a case by case basis. Children with current or potential CCS eligibility should be referred to CCS.

RSV SEASON:

In the Northern Hemisphere, usually in the beginning of November, but could be earlier. Information regarding the epidemiology of RSV in Los Angeles County can be obtained from the local health department. If started in October in a geographic area with an earlier onset of RSV, the last dose should be administered in February. If started in November, the last dose would be provided in March.

INDICATIONS:

Recipients must meet one of the following conditions:

1. Children with moderate to severe Bronchopulmonary Dysplasia (BPD) also known as Chronic Lung Disease (CLD), less than 24 months of age, and either currently receiving oxygen therapy, or have received therapy (oxygen, steroids, bronchodilator, or diuretics) within the 6 months prior to RSV season. Maximum of 5 monthly doses.

2. Children without BPD who were born at 28 weeks and 6 days of gestation or less and are younger than 12 months of age at the start of RSV season.

3. Children without BPD who were born between 29 weeks and 0 days and 31 week, 6 days or less of gestation and are less than 6 months of age at the start of RSV season.
4. Children born between 32 weeks, 0 day and 34 weeks, 6 days of gestation, and are less than 3 months of age at the start of RSV season, who have one of the two significant risk factors including:

- Child care attendance *(AAP Redbook recommends that childcare should be restricted for high risk children whenever feasible)*; or
- Siblings younger than 5 years of age

A Maximum of 3 months doses, but some will receive only 1 or 2 doses before reaching 3 months (90 days) of age.

5. Patients with hemodynamically significant cyanotic or acyanotic Congenital Heart Disease (CHD) who are less than 2 years of age, and who are receiving medication to control congestive heart failure, or with moderate to severe pulmonary hypertension, may be candidates for Palivizumab. *(Please call LA Care UM Department before giving Synagis to this sub-group)*.

6. Children with severe immune deficiency.

Synagis 50 mg (CPT-4 code 90378) is reimbursable for prophylactic treatment against RSV for infants younger than 2 years of age who have been diagnosed with congenital cyanotic or acyanotic heart disease.

<table>
<thead>
<tr>
<th>Prior Authorization</th>
<th>Synagis is reimbursable once in a 25-day period and requires prior authorization from L.A. Care. If medically necessary, providers may request the amount of Synagis needed to cover a recipient’s entire treatment period on one referral.</th>
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<tr>
<td>Reimbursement</td>
<td>L.A. Care maintains contracts with several pharmaceutical vendors. PPGs may utilize their own pharmaceutical contracts, but unless services are emergent or urgent in nature, prior arrangements for reimbursement must be made with L.A. Care UM staff. These claims must be submitted on the standard CMS 1500, contain the appropriate billing codes and medical records to substantiate the reason for the emergent Synagis administration.</td>
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<tr>
<td>CCS Eligibility</td>
<td>Synagis is a MediCal covered benefit that may be provided through CCS for members with CCS eligible conditions <em>(See CCS Numbered Letter – 11-1006)</em>. All referral requests for Synagis received by L.A. Care should be immediately reviewed for CCS current or potential eligibility. CCS policy is to expedite</td>
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authorizations to help ensure prompt initiation of protection from RSV for the infant/child and to prevent a lapse in protection, especially for the infant who will frequently receive the first injection in the hospital prior to discharge.

**Dosage Schedule**

Synagis is given by intramuscular injection on a monthly basis during the RSV season (*Total of five [5] unless there is documentation by the requesting physician of longer need due to a lengthier RSV season and it has been previously approved by L.A. Care*). The usual dosage is 15 mg/kg per injection. One unit equals 50 mg for Medi-Cal billing purposes.

**Note:** Providers may bill for one unit even if only part of the unit was given to the recipient and the remainder of the drug was discarded. (Any unused portion of a reconstituted single-use vial of Synagis has a shelf life of six hours.)

**ADMINISTRATION LOCATIONS**

Synagis may be given in the medical office, in an approved Synagis Clinic or in the home.

- Synagis given in the medical office – professional fees associated with the administration are the financial responsibility of the Shared Risk and PCP CAP PPGs. FFS PPGs may bill L.A. Care for administration costs.

- Synagis Clinics may or may not be capitated through the contracted PPG. For Fee for Service or PCP CAP contracts, prior authorization for the use of a Synagis Clinic must be obtained from L.A. Care. Shared Risk PPG contracts are responsible for the administration services through the clinics.

- Synagis given in the home – Home Health is a non-capitated expense and requires prior authorization from L.A. Care. As pediatric home health providers are limited, request must be made in advance.