

To:
Advanced Practice
Nurse
Prescribers with
Psychiatric
Specialty
Community
Support
Programs
Dispensing
Physicians
Pharmacies
Physician Clinics
Physicians
HMOs and Other
Managed Care
Programs

Changes in Blood Count Testing Impacts Clozapine Management Services

Effective immediately (consistent with Food and Drug Administration policy), Medicaid providers may order white blood cell (WBC) count and absolute neutrophil count (ANC) testing every four weeks for recipients who have been stabilized on clozapine (Clozaril®) for a full year. If a prescriber deems biweekly or weekly WBC count and ANC testing to be medically necessary *and* orders it, Wisconsin Medicaid will cover clozapine management services at the higher frequency.

Definition of Clozapine Management

Clozapine management is a specialized care management service that may be required to ensure the safety of recipients who are receiving this psychoactive medication. Wisconsin Medicaid reimburses clozapine (Clozaril®) separately for outpatient and nursing home recipients. Clozapine management is reimbursable only for outpatient services.

A recipient is required to have a separate order for laboratory work and a prescription for clozapine management services.

Blood Count Testing May Be Every Four Weeks if Requirements Are Met

Effective immediately (consistent with Food and Drug Administration [FDA] policy), providers may order white blood cell (WBC) count and absolute neutrophil count (ANC)

testing every four weeks for recipients who have received clozapine management services for a full year with stable and medically appropriate WBC counts and ANCs. Wisconsin Medicaid covers clozapine management services at the same frequency as the recipient's blood count testing. If a prescriber deems more frequent WBC count and ANC testing to be medically necessary *and* orders it, Wisconsin Medicaid will cover clozapine management at the higher frequency.

Baseline Blood Count and Frequency Requirements

According to a recent FDA labeling revision for clozapine, a recipient must have a baseline WBC count and ANC before initiation of clozapine management, and a WBC count and ANC every week for the first six months while taking clozapine.

The frequency of WBC count and ANC testing may be reduced to once every two weeks for the next six months if the following criteria are met:

- The recipient has taken clozapine continually for six months.
- The weekly WBC count has remained stable at greater than or equal to 3,500/mm³ during that period.

- The weekly ANC has remained stable at greater than or equal to 2,000/mm³ during that period.

If, after the second six months, the recipient has taken clozapine continuously and the biweekly WBC count and ANC remain stable (at the previously listed levels), a recipient's WBC count and ANC may be tested every four weeks.

The frequency of ANC and WBC tests is determined by the prescriber and may be reimbursed by Wisconsin Medicaid as previously described.

Submitting Claims for Clozapine Management Services

Providers are required to submit claims for clozapine management services using Healthcare Common Procedure Coding System code H0034 (Medication training and support, per 15 minutes) *with* modifier "UD" (clozapine management). A quantity of no more than four 15-minute time units per date of service (DOS) may be indicated on the claim. Providers may submit claims for clozapine management only as often as a recipient's WBC count and ANC are tested, even if clozapine is dispensed more frequently.

Clozapine Coverage for Dual Eligibles

For dual eligibles, reimbursement for clozapine management services will remain available; however, clozapine will no longer be reimbursable. Pharmacies should contact the appropriate Medicare Part D Prescription Drug Plan for reimbursement information.

As a reminder, the following are not reimbursable as clozapine management services:

- Clozapine management for a recipient not receiving clozapine, except for the first four weeks after discontinuation of the drug.
- Clozapine management for recipients residing in a nursing facility or hospital on the DOS.
- Care coordination or medical services not related to the recipient's use of clozapine.

For More Information

Prescribers may refer to the Medicine and Surgery section of the Physician Services Handbook for specific information about the components of clozapine management, record keeping requirements, and specifics about billing for clozapine management.

Pharmacy providers should refer to pharmacy publications for additional information about coverage of clozapine.

Information Regarding Medicaid HMOs

This *Wisconsin Medicaid and BadgerCare Update* contains Medicaid fee-for-service policy and applies to providers of services to recipients on fee-for-service Medicaid only. For Medicaid HMO or managed care policy, contact the appropriate managed care organization. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at dhfs.wisconsin.gov/medicaid/.

PHC 1250