



PHARMACY POLICY STATEMENT Indiana Medicaid

DRUG NAME	Luxturna (voretigene neparvovec-rzyl) intraocular suspension for subretinal injection
BILLING CODE	N/A
BENEFIT TYPE	Carved out to FFS (fee-for-service) benefit
SITE OF SERVICE ALLOWED	N/A
COVERAGE REQUIREMENTS	Please see Indiana Fee-For-Service website

Luxturna (voretigene neparvovec-rzyl) is a product that is carved out from managed care benefits and is included in the Indiana Medicaid Fee-For-Service program. Requests for coverage of this product must be submitted directly to OptumRx for review.

DATE	ACTION/DESCRIPTION
08/27/2018	New policy for Luxturna created.
06/01/2020	CareSource coverage removed – product is now carved out.

Effective date: 06/01/2020
Revised date: 06/01/2020