

Point32Health PA Required HCPCS Codes – Oncology Treatments

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HCPCS	HCPCS Description	Brand Name	Commercial Policy	Medicare Policy
A9513	Lutetium lu 177, dotatate, therapeutic, 1 millicurie	Lutathera	Chemotherapy Review Criteria	Chemotherapy Review Criteria
A9543	Yttrium y-90 ibritumomab tiuxetan, therapeutic, per treatment dose, up to 40 millicuries	Zevalin	Chemotherapy Review Criteria	Chemotherapy Review Criteria
A9606	Radium ra-223 dichloride, therapeutic, per microcurie	Xofigo	Chemotherapy Review Criteria	Chemotherapy Review Criteria
A9607	Lutetium lu 177 vipivotide tetraxetan, therapeutic, 1 millicurie	Pluvicto	Pluvicto Policy	Chemotherapy Review Criteria
J0185	Injection, aprepitant, 1 mg	Cinvanti	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J0208	Injection, sodium thiosulfate (pedmark), 100 mg	Pedmark	Chemotherapy Review Policy	Chemotherapy Review Criteria
J0641	Injection, levoleucovorin, not otherwise specified, 0.5 mg	Levoleucovorin	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J0642	Injection, levoleucovorin (khapzory), 0.5 mg	Khapzory	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J0644	Injection, leucovorin calcium (avyxa), 1 mg	Vykoura (Avyxa 505(b)(2))	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J0870	Injection, imetelstat, 1 mg	Rytelo	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J0881	Injection, darbepoetin alfa, 1 microgram (non-esrd use)	Aranesp	ESA Policy	Chemotherapy Review Criteria
J0885	Injection, epoetin alfa, (for non-esrd use), 1000 units	Procrit, Epogen	ESA Policy	Chemotherapy Review Criteria
J0896	Injection, luspatercept-aamt, 0.25 mg	Reblozyl	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J0897	Injection, denosumab, 1 mg	Xgeva	Xgeva Policy and Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J0897	Injection, denosumab, 1 mg	Prolia	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J1323	Injection, elranatamab-bcmm, 1 mg	Elrexfio	Elrexfio Policy	Chemotherapy Review Criteria

J1326	Injection, zolbetuximab-clzb, 2 mg	Vyloy	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J1434	Injection, fosaprepitant (focinvez), 1 mg	N/A	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J1442	Injection, filgrastim (g-csf), excludes biosimilars, 1 microgram	Neupogen	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J1447	Injection, tbo-filgrastim, 1 microgram	Granix	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J1448	Injection, trilaciclib, 1mg	Cosela	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J1449	Injection, eflapegrastim-xnst, 0.1 mg	Rolvedon	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J1453	Injection, fosaprepitant, 1 mg	Emend IV	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J1454	Injection, fosnetupitant 235 mg and palonosetron 0.25 mg	Akynzeo	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J1456	Injection, fosaprepitant (teva), not therapeutically equivalent to j1453, 1 mg	N/A	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J1459	Injection, immune globulin (privigen), intravenous, non-lyophilized (e.g., liquid), 500 mg	Privigen	IVIG Policy	Chemotherapy Review Criteria
J1552	Injection, immune globulin (alyglo), 500 mg	Alyglo	IVIG Policy	Chemotherapy Review Criteria
J1553	Injection, immune globulin (yimmugo), 100 mg	Yimmugo	IVIG Policy	Chemotherapy Review Criteria
J1554	Injection, immune globulin (asceniv), 500 mg	Asceniv	IVIG Policy	Chemotherapy Review Criteria
J1556	Injection, immune globulin (bivigam), 500 mg	Bivigam	IVIG Policy	Chemotherapy Review Criteria
J1557	Injection, immune globulin, (gammaplex), intravenous, non-lyophilized (e.g., liquid), 500 mg	Gammaplex	IVIG Policy	Chemotherapy Review Criteria
J1561	Injection, immune globulin, (gamunex-c/gammaked), non-lyophilized (e.g., liquid), 500 mg	Gamunex-C, Gammaked	IVIG Policy	Chemotherapy Review Criteria

J1566	Injection, immune globulin, intravenous, lyophilized (e.g., powder), not otherwise specified, 500 mg	Gammagard S/D	IVIG Policy	Chemotherapy Review Criteria
J1568	Injection, immune globulin, (octagam), intravenous, non-lyophilized (e.g., liquid), 500 mg	Octagam	IVIG Policy	Chemotherapy Review Criteria
J1569	Injection, immune globulin, (gammagard liquid/gammagard liquid erc), 500 mg	Gammagard ERC	IVIG Policy	Chemotherapy Review Criteria
J1576	Injection, immune globulin (panzyga), intravenous, non-lyophilized (e.g., liquid), 500 mg	Panzyga	IVIG Policy	Chemotherapy Review Criteria
J1577	Injection, immune globulin (qivigy), 100 mg	Qivigy	IVIG Policy	Chemotherapy Review Criteria
J1627	Injection, granisetron, extended-release, 0.1 mg	Sustol	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J1930	Injection, lanreotide, 1 mg	Somatuline Depot	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J1932	Injection, lanreotide, (cipla), 1 mg	N/A	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J2353	Injection, octreotide, depot form for intramuscular injection, 1 mg	Sandostatin LAR Depot	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J2354	Injection, octreotide, non-depot form for subcutaneous or intravenous injection, 25 mcg	Sandostatin	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J2468	Injection, palonosetron hydrochloride (posfrea), 25 micrograms	Posfrea	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J2783	Injection, rasburicase, 0.5 mg	Elitek	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J2802	Injection, romiplostim, 1 microgram	Nplate	Nplate Policy	Chemotherapy Review Criteria
J2820	Injection, sargramostim (gm-csf), 50 mcg	Leukine	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J2860	Injection, siltuximab, 10 mg	Sylvant	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J3055	Injection, talquetamab-tgvs, 0.25 mg	Talvey	Talvey Policy	Chemotherapy Review Criteria
J3262	Injection, tocilizumab, 1 mg	Actemra	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J3263	Injection, toripalimab-tpzi, 1 mg	Loqtorzi	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J3315	Injection, triptorelin pamoate, 3.75 mg	Trelstar	Chemotherapy Review Criteria	Chemotherapy Review Criteria

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J3590	Unclassified biologics	Cablivi	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9011	Injection, datopotamab deruxtecandlnk, 1 mg	Datroway	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9015	Injection, aldesleukin, per single use vial	Proleukin	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9021	Injection, asparaginase, recombinant, (rylaze), 0.1 mg	Rylaze	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9022	Injection, atezolizumab, 10 mg	Tecentriq	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J9023	Injection, avelumab, 10 mg	Bavencio	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J9024	Injection, atezolizumab, 5 mg and hyaluronidase-tqjs	Tecentriq Hybreza	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J9026	Injection, tarlatamab-dlle, 1 mg	Imdelltra	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9028	Injection, nogapendekin alfa inbakicept-pmln, for intravesical use, 1 microgram	Anktiva	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9029	Intravesical instillation, nadofaragene firadenovec-vncg, per therapeutic dose	Adstiladrin	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9032	Injection, belinostat, 10 mg	Beleodaq	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9033	Injection, bendamustine hydrochloride, not otherwise specified, 1 mg	Treanda, bendamustine	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9034	Injection, bendamustine hcl (bendeka), 1 mg	Bendeka	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9035	Injection, bevacizumab, 10 mg	Avastin	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9036	Injection, bendamustine hydrochloride, (belrapzo/bendamustine), 1 mg	Belrapzo, bendamustine	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9039	Injection, blinatumomab, 1 microgram	Blincyto	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9041	Injection, bortezomib, 0.1 mg	Velcade	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9042	Injection, brentuximab vedotin, 1 mg	Adcetris	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9043	Injection, cabazitaxel, 1 mg	Jevtana	Chemotherapy Review Criteria	Chemotherapy Review Criteria

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J9046	Injection, bortezomib (dr. reddy's), not therapeutically equivalent to j9041, 0.1 mg	N/A	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9047	Injection, carfilzomib, 1 mg	Kyprolis	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9048	Injection, bortezomib (fresenius kabi), not therapeutically equivalent to j9041, 0.1 mg	N/A	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9049	Injection, bortezomib (hospira), not therapeutically equivalent to j9041, 0.1 mg	N/A	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9051	Injection, bortezomib (maia), not therapeutically equivalent to J9041, 0.1 mg	N/A	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9053	Injection, belantamab mafodotin-blmf, 0.1 mg	Blenrep	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9054	Injection, bortezomib (boruzu), 0.1 mg	N/A	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9055	Injection, cetuximab, 10 mg	Erbitux	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9056	Injection, bendamustine hydrochloride (vivimusta), 1 mg	Vivimusta	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9061	Injection, amivantamab-vmjw, 2 mg	Rybrevant	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9062	Injection, amivantamab 5 mg and hyaluronidase-lpuj	Rybrevant Faspro	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9063	Injection, mirvetuximab soravtansine-gynx, 1 mg	Elahere	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9064	Injection, cabazitaxel (sandoz), not therapeutically equivalent to J9043, 1 mg	N/A	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9118	Injection, calaspargase pegol-mknl, 10 units	Asparlas	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9119	Injection, cemiplimab-rwlc, 1 mg	Libtayo	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J9144	Injection, daratumumab, 10 mg and hyaluronidase-fihj	Darzalex Faspro	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9145	Injection, daratumumab, 10 mg	Darzalex	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9153	Injection, liposomal, 1 mg daunorubicin and 2.27 mg cytarabine	Vyxeos	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9155	Injection, degarelix, 1 mg	Firmagon	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9161	Injection, denileukin diftitox-cxdl, 1 mcg	Lymphir	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9173	Injection, durvalumab, 10 mg	Imfinzi	PD-1/PD-L1 Policy	Chemotherapy Review Criteria

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J9176	Injection, elotuzumab, 1 mg	Empliciti	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9177	Injection, enfortumab vedotin-ejfv, 0.25 mg	Padcev	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9179	Injection, eribulin mesylate, 0.1 mg	Halaven	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9183	Gemcitabine intravesical system, 225 mg	Inlexzo	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9198	Injection, gemcitabine hydrochloride, (infugem), 100 mg	Infugem	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9202	Goserelin acetate implant, per 3.6 mg	Zoladex	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9203	Injection, gemtuzumab ozogamicin, 0.1 mg	Mylotarg	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9204	Injection, mogamulizumab-kpkc, 1 mg	Poteligeo	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9205	Injection, irinotecan liposome, 1 mg	Onivyde	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9207	Injection, ixabepilone, 1 mg	Ixempra	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9223	Injection, lurbinectedin, 0.1 mg	Zepzelca	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9227	Injection, isatuximab-irfc, 10 mg	Sarclisa	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9228	Injection, ipilimumab, 1 mg	Yervoy	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9229	Injection, inotuzumab ozogamicin, 0.1 mg	Besponsa	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9261	Injection, nelarabine, 50 mg	Arranon	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9262	Injection, omacetaxine mepesuccinate, 0.01 mg	Synribo	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9264	Injection, paclitaxel protein-bound particles, 1 mg	Abraxane	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Chemotherapy Review Criteria
J9266	Injection, pegaspargase, per single dose vial	Oncaspar	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9269	Injection, tagraxofusp-erzs, 10 micrograms	Elzonris	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9271	Injection, pembrolizumab, 1 mg	Keytruda	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J9272	Injection, dostarlimab-gxly, 10 mg	Jemperli	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J9273	Injection, tisotumab vedotin-tftv, 1 mg	Tivdak	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9274	Injection, tebentafusp-tebn, 1 microgram	Kimmtrak	Chemotherapy Review Criteria	Chemotherapy Review Criteria

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J9275	Injection, cosibelimab-ipdl, 2 mg	Unloxcyt	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J9276	Injection, zanidatamab-hrii, 2 mg	Ziihera	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9277	Injection, pembrolizumab, 1 mg and berahyaluronidase alfa-pmph	Keytruda Qlex	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9282	Mitomycin, intravesical instillation, 1 mg	Zusduri	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9286	Injection, glofitamab-gxbm, 2.5 mg	Columvi	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9289	Injection, nivolumab, 2 mg and hyaluronidase-nvhy	Opdivo Qvantig	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J9292	Injection, pemetrexed dipotassium, 10 mg	Axtle	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9294	Injection, pemetrexed (hospira), not therapeutically equivalent to j9305, 10 mg	N/A	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9295	Injection, necitumumab, 1 mg	Portrazza	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9296	Injection, pemetrexed (accord), not therapeutically equivalent to j9305, 10 mg	N/A	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9297	Injection, pemetrexed (sandoz), not therapeutically equivalent to j9305, 10 mg	N/A	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9298	Injection, nivolumab and relatlimab-rmbw, 3 mg/1 mg	Opdualag	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J9299	Injection, nivolumab, 1 mg	Opdivo	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J9301	Injection, obinutuzumab, 10 mg	Gazyva	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9302	Injection, ofatumumab, 10 mg	Arzerra	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9303	Injection, panitumumab, 10 mg	Vectibix	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9304	Injection, pemetrexed (pemfexy), 10 mg	Pemfexy	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9305	Injection, pemetrexed, not otherwise specified, 10 mg	Alimta	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG

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J9306	Injection, pertuzumab, 1 mg	Perjeta	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9307	Injection, pralatrexate, 1 mg	Folotyn	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9308	Injection, ramucirumab, 5 mg	Cyramza	Cyramza Policy	Chemotherapy Review Criteria
J9309	Injection, polatuzumab vedotin-piiq, 1 mg	Polivy	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9311	Injection, rituximab 10 mg and hyaluronidase	Rituxan Hycela	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9312	Injection, rituximab, 10 mg	Rituxan	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9313	Injection, moxetumomab pasudotox-tdfk, 0.01 mg	Lumoxiti	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9314	Injection, pemetrexed (teva), not therapeutically equivalent to j9305, 10 mg	N/A	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9316	Injection, pertuzumab, trastuzumab, and hyaluronidase-zzxf, per 10 mg	Phesgo	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9317	Injection, sacituzumab govitecan-hziy, 2.5 mg	Trodelvy	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9318	Injection, romidepsin, non-lyophilized, 0.1 mg	Romidepsin	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9319	Injection, romidepsin, lyophilized, 0.1 mg	Istodax	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9321	Injection, epcoritamab-bysp, 0.16 mg	Epkinley	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9322	Injection, pemetrexed (bluepoint), not therapeutically equivalent to j9305, 10 mg	N/A	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9323	Injection, pemetrexed ditromethamine, 10 mg	N/A	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9324	Injection, pemetrexed (pemrydi rtu), 10 mg	N/A	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9325	Injection, talimogene laherparepvec, per 1 million plaque forming units	Imlygic	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9326	Injection, telisotuzumab vedotin-tllv, 1 mg	Emrelis	Chemotherapy Review Criteria	Chemotherapy Review Criteria

J9328	Injection, temozolomide, 1 mg	Temodar	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9329	Injection, tislelizumab-jsgr, 1mg	Tevimbra	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J9342	Injection, thiotepa, not otherwise specified, 1 mg	Tepadina	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9345	Injection, retifanlimab-dlwr, 1 mg	Zynyz	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J9347	Injection, tremelimumab-actl, 1 mg	Imjudo	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9348	Injection, naxitamab-gqgk, 1 mg	Danyelza	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9350	Injection, mosunetuzumab-axgb, 1 mg	Lunsumio, Lunsumio VELO	Lunsumio Policy	Chemotherapy Review Criteria
J9353	Injection, margetuximab-cmkb, 5 mg	Margenza	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9354	Injection, ado-trastuzumab emtansine, 1 mg	Kadcyla	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9355	Injection, trastuzumab, excludes biosimilar, 10 mg	Herceptin	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9356	Injection, trastuzumab, 10 mg and hyaluronidase-oysk	Herceptin Hylecta	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9357	Injection, valrubicin, intravesical, 200 mg	Valstar	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9358	Injection, fam-trastuzumab deruxtecan-nxki, 1 mg	Enhertu	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9359	Injection, loncastuximab tesirine-lpyl, 0.075 mg	Zynlonta	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9361	Injection, efbemalenograstim alfa-vuxw, 0.5 mg	Ryzneuta	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9362	Injection, trabectedin, 0.01 mg	Yondelis	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9380	Injection, teclistamab-cqyv, 0.5 mg	Tecvayli	Tecvayli	Chemotherapy Review Criteria
J9382	Injection, zenocutuzumab-zbco, 1 mg	Bizengri	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9390	Injection, vinorelbine tartrate, 10 mg	Navelbine	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9393	Injection, fulvestrant (teva), not therapeutically equivalent to j9395, 25 mg	N/A	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9394	Injection, fulvestrant (fresenius kabi) not therapeutically equivalent to j9395, 25 mg	N/A	Chemotherapy Review Criteria	Chemotherapy Review Criteria

J9395	Injection, fulvestrant, 25 mg	Faslodex	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9400	Injection, ziv-aflibercept, 1 mg	Zaltrap	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9600	Injection, porfimer sodium, 75 mg	Photofrin	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9601	Injection, linvoseltamab-gcpt, 1 mg	Lynozyfic	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9999	Not otherwise classified, antineoplastic drugs	Caelyx	Chemotherapy Review Criteria	Chemotherapy Review Criteria
J9999	Not otherwise classified, antineoplastic drugs	Avzivi	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
J9999	Not otherwise classified, antineoplastic drugs	Penpulimab-kcqx	PD-1/PD-L1 Policy	Chemotherapy Review Criteria
J9999	Not otherwise classified, antineoplastic drugs	Rybrevant Faspro	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q2043	Sipuleucel-t, minimum of 50 million autologous cd54+ cells activated with pap-gm-csf, including leukapheresis and all other preparatory procedures, per infusion	Provenge	Provenge Policy	Chemotherapy Review Criteria
Q2049	Injection, doxorubicin hydrochloride, liposomal, imported lipodox, 10 mg	Lipodox	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q2050	Injection, doxorubicin hydrochloride, liposomal, not otherwise specified, 10 mg	Doxil	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q5106	Injection, epoetin alfa-epbx, biosimilar, (retacrit) (for non-esrd use), 1000 units	Retacrit	ESA Policy	Chemotherapy Review Criteria
Q5110	Injection, filgrastim-aafi, biosimilar, (nivestym), 1 microgram	Nivestym	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5111	Injection, pegfilgrastim-cbqv (udenyca), biosimilar, 0.5 mg	Udenyca	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5112	Injection, trastuzumab-dttb, biosimilar, (ontruzant), 10 mg	Ontruzant	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5113	Injection, trastuzumab-pkrb, biosimilar, (herzuma), 10 mg	Herzuma	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG

Q5114	Injection, trastuzumab-dkst, biosimilar, (ogivri), 10 mg	Ogivri	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5115	Injection, rituximab-abbs, biosimilar, (truxima), 10 mg	Truxima	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5119	Injection, rituximab-pvvr, biosimilar, (ruxience), 10 mg	Ruxience	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5120	Injection, pegfilgrastim-bmez (ziextenzo), biosimilar, 0.5 mg	Ziextenzo	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5122	Injection, pegfilgrastim-apgf (nyvepria), biosimilar, 0.5 mg	Nyvepria	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5123	Injection, rituximab-arrx, biosimilar, (riabni), 10 mg	Riabni	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5125	Injection, filgrastim-ayow, biosimilar, (releuko), 1 microgram	Releuko	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5126	Injection, bevacizumab-maly, biosimilar, (alymsys), 10 mg	Alymsys	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5127	Injection, pegfilgrastim-fpgk (stimufend), biosimilar, 0.5 mg	Stimufend	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5129	Injection, bevacizumab-adcd (vegzelma), biosimilar, 10 mg	Vegzelma	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5130	Injection, pegfilgrastim-pbbk (fylnetra), biosimilar, 0.5 mg	Fylneta	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5133	Injection, tocilizumab-bavi (tofidence), biosimilar, 1 mg	Tofidence	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q5135	Injection, tocilizumab-aazg (tyenne), biosimilar, 1 mg	Tyenne, tocilizumab fresenius	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q5136	Injection, denosumab-bbdz (jubbonti/wyost), biosimilar, 1 mg	Jubbonti	Chemotherapy Review Criteria	Chemotherapy Review Criteria

Q5136	Injection, denosumab-bbdz (jubbonti/wyost), biosimilar, 1 mg	Wyost	Xgeva Policy and Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5146	Injection, trastuzumab-strf (hercessi), biosimilar, 10 mg	Hercessi	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5148	Injection, filgrastim-txid (nypozi), biosimilar, 1 microgram	Nypozi	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5156	Injection, tocilizumab-anoh (avtozma), biosimilar, 1 mg	Avtozma, tocilizumab Celltrion	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q5157	Injection, denosumab-bmwo (stoboclo/osenvelt), biosimilar, 1 mg	Stoboclo	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q5157	Injection, denosumab-bmwo (stoboclo/osenvelt), biosimilar, 1 mg	Osenvelt	Xgeva Policy and Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5158	Injection, denosumab-bnht (bomyntra/conexxence), biosimilar, 1 mg	Conexxence	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q5158	Injection, denosumab-bnht (bomyntra/conexxence), biosimilar, 1 mg	Bomyntra	Xgeva Policy and Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5158	Injection, denosumab-bnht (bomyntra/conexxence), biosimilar, 1 mg	Denosumab fresenius	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q5159	Injection, denosumab-dssb (ospomyv/xbryk), biosimilar, 1 mg	Ospomyv	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q5159	Injection, denosumab-dssb (ospomyv/xbryk), biosimilar, 1 mg	Xbryx	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5159	Injection, denosumab-dssb (ospomyv/xbryk), biosimilar, 1 mg	Denosumab Samsung Bioepis	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5160	Injection, bevacizumab-nwgd (jobevne), biosimilar, 10 mg	Jovevne	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG

Q5161	Injection, denosumab-kyqq (aukelso/bosaya), biosimilar, 1 mg	Bosaya	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q5161	Injection, denosumab-kyqq (aukelso/bosaya), biosimilar, 1 mg	Aukelso	Xgeva Policy and Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5162	Injection, denosumab-nxxp (bildyos/bilprevda), biosimilar, 1 mg	Bildyos	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q5162	Injection, denosumab-nxxp (bildyos/bilprevda), biosimilar, 1 mg	Bilprevda	Xgeva Policy and Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5165	Injection, denosumab-mobz (oziltus), biosimilar, 1 mg	Oziltus	Chemotherapy Review Criteria and Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5167	Injection, denosumab-qbde (enoby/xtrenbo), biosimilar, 1 mg	Enoby	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q5167	Injection, denosumab-mobz (boncresa), biosimilar, 1 mg	Xtrenbo	Xgeva Policy and Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5169	Injection, pegfilgrastim-unne (armlupeg), biosimilar, 0.5 mg	Armlupeg	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG
Q5171	Injection, denosumab-mobz (boncresa), biosimilar, 1 mg	Boncresa	Chemotherapy Review Criteria	Chemotherapy Review Criteria
Q5172	Injection, filgrastim-laha (filkri), biosimilar, 1 microgram	Filkri	Harvard Pilgrim Commercial Medical Benefit Step Therapy MNG	Tufts Medicare Medical Benefit Step Therapy MNG

Version Updates:

Effective Date:	Update Type:
9/1/2023	• Removed 60 drugs from PA
10/1/2023	• Updated HCPCS codes for bortezomib, Zynyz to reflect CMS updates • Updated coverage policy for Elahere • Added Columvi

11/1/2023	• Updated Erbitux, Vectibix and Empliciti to reflect that they use the chemotherapy review criteria policy for medical necessity reviews
12/1/2023	• Added Epkinly as a PA drug • Updated HCPCS codes for Zynyz and bortezomib (Fosun) to reflect newly assigned codes
1/1/2024	• Updated HCPCS codes for: Columvi, Epkinly, paclitaxel protein-bound (Teva), and pemetrexed (pemrydi).
1/5/2024	• Updated Cuvitru to use Chemotherapy Review Criteria • Removed Carimune NF as it's not on the market • Added Zepzelca (has been on PA since 2021).
3/1/2024	• Ryzneuta and Ogivri added
4/1/2024	• Updated Commercial policy to "PD-1/PD-L1 Policy" for the following drugs: Bavencio, Imfinzi, Jemperli, Keytruda, Libtayo, Loqtorzi, Opdivo, Opdualag, Tecentriq, Zynyz. • Added Loqtorzi, Tecvayli, Elrexfio, and Talvey
5/1/2024	• Retired IV Oncology IV Anti-emetics policies. All drugs previously reviewed under that policy will now use Chemotherapy Review Criteria. • Added J9064, J1434, and J9051 (new codes for previously approved drugs) • Added J9999 Caelyx
7/1/2024	• Added J9316 Phesgo, J9059 Bendamustine (baxter), J9999 Anktiva, J9999 Hercessi, J9999 Tevimbra (PA to start 10/1/24 for Medicare), J9999 Docivyx • HCPCS Updated: Loqtorzi, Ryzneuta • Removed: Marqibo (HCPCS Inactivated)
8/1/2024	• Added J9999 Rytelo (PA to start 10/1/24 for both LOB)
10/1/2024	• Added J9999 Pemetrexed (Apotex); J9999 Lymphir (PA to start 11/1/24 for Commercial and 1/1/25 for Medicare); J9999 Lacluze (PA to start 11/1/24 for Commercial and 1/1/25 for Medicare) • HCPCS Updated: Tevimbra, Docivyx • Removed: Paclitaxel Protein-Bound Particles (Teva) (HCPCS Inactivated)
11/1/2024	• Added J9999 Tecentriq Hybreza, J9999 Boruzu • J9039 Blincyto now falls under Chemotherapy Review Criteria. Blincyto specific policy has been archived.
1/1/2025	• Added Yimmugo to J1599 • Added J2468 Posfrea, J9292 Pemetrexed • Updated J1454, J0185, J1453, J1434, J1456, and J1627; J9033, J9034, J9036, J9056, J9058, and J9059; J0641 and J0642; J9294, J9296, J9297, J9304, J9305 J9314, J9322, and J9324 to reflect newly adopted Medical Benefit Step Therapy Medical Necessity Guidelines (MNG) • Retired the following Drug Specific Policies and moved corresponding HCPCS to Medical Benefit Step Therapy MNG: Abraxane Policy, Bevacizumab Policy, Rituximab Policy, Trastuzumab Policy • Added promt that Medical Benefit Step Therapy MNG also applies to HCPCS within: Long-Acting GCSFs Policy, Short-Acting GCSFs Policy, and Xgeva Policy • HCPCS Updated: Rytelo, Alyglo, Imdelltra, Anktiva, Hercessi, Nplate • HCPCS Description Updated: Bendamustine (J9033) • Removed: Bendamustine (J9058), Bendamustine (J9059), and Paclitaxel Protein-Bound Particles (J9259)
2/1/2025	• Added J9999 Vyloy; J9999 Ziihera; J9999 Bizengri; J9999 Unloxcyt; J9999 Opdivo Qvantig • Removed J9172 Docivyx from PA
3/1/2025	• Added J9999 Datroway
4/1/2025	• Removed: Rolapitant (J2797), Alqopa (J9057), Depocyt (J9098), Sylatron and Pegintron (J9999), Lazcluze (J8999), Blenrep (J9037) • HCPCS Description Updated: bortezomib (J9054)

	• HCPCS Updated: Tecentriq Hybreza, Lymphir
6/1/2025	• Added Nypozi (Q5148), Avzivi (J9999) • Deleted reference to LA-CSF (Rolvedon, Ryzneuta, Udenyca, Ziextenzo, Nyvepria, Stimufend, Fylnetra), SA-CSF (Neupogen, Granix, Nivestym, Releuko) policies • Removed Neulasta (J2506), Fulphila (Q5108) from PA • Additional edits – removal of J9285, J1555 updates to several HCPCS descriptions per CMS April 2025 HCPCS File
7/1/2025	• HCPCS Updated: Vyloy (J1326), Unloxcyt (J9275), Ziihera (J9276), Opdivo Qvantig (J9289), Tepadina (J9342), Bizengri (J9382) • HCPCS Description Updated Tepadina (J9342), pemetrexed (Axtle) (J9292), Lutrate depot (J1954) • Added Jubbonti (Q5136), Wyost (Q5136), Stoboclo (J3590), Osenvelt (J3590)
8/1/2025	• Added penpulimab-kcqx (J9999), Tofidence (Q5133), Tyenne (Q5135)
9/1/2025	• Added bevacizumab-nwgd (Jobevne) (J9999) – effective 8/1/2025) • Added denosumab-bnht (Bomyntra, Conexxence and denosumab fresenius) (J3590), Lynozyfic (J9999), Bendamustine 505(b)(2) Dr Reddy (J9999), telisotuzumab vedotin-tllv (Emrelis) (J9999) • Removed (effective 9/5/2025): Tofidence (Q5133) and Tyenne (Q5135)
10/1/2025	• HCPCS Updated: Datroway (J9011), Bomyntra/Conexxence/denosumab Fresenius (Q5158), Osenvelt/Stoboclo (Q5157) • Removal of Dacogen (J0893), decitabine (J0894) (note, these codes have not required PA for P32H since 8/31/2023) • Removal of Azedra (A9590), Lutrate Depot (J1954), Fyarro (J9331), Monjuvi (J9349)
11/1/2025	• Removed pemetrexed Apotex (J9999) • Added Actemra (J3262), Tofidence (Q5133), Tyenne (Q5135), Avtozma (Q5156), tocilizumab Fresenius (Q5135), tocilizumab celltrion (Q5156)
12/1/2025	• Added Keytruda Qlex (J9999), Inlexzo (J9999), Papzimeos (J9999), Bildyos (J3590), Bilprevda (J3590), Bosaya (J3590), Aukelso (J3590), Enoby (J3590), Xtrenbo (J3590), Qivigy (J1599); Zusduri (J9999); Blenrep (J9999); Xbryx (Q5159), Ospomyv (Q5159), denosumab samsung bioepis (Q5159) • Updated policy reference for Bilprevda, Aukelso, Xtrenbo to P32_OH_Xgeva Policy • Removed Lupron Depot (J9217), Camcevi (J1952), Lupron Depot (J1950)
1/1/2026	• Addition of separate columns for Tufts Medicare PA list (1/1/2026) and continuation of Harvard Pilgrim PA list • Updated HCPCS codes: Zusduri (J9282), Emrelis (J9326), Jobevne (Q5160) • Removed due to HCPCS deletion: Flebogamma (J1572), Erwinaze (J9019) • Updated policy reference for: Wyost (Q5136), Osenvelt (Q5157), Bomyntra (Q5158) • Removal of Papzimeos
4/1/2026	• Updated HCPCS codes: Aukelso/Bosaya (Q5161); Bildyos/Bilprevda (Q5162); Yimmugo (J1553); Inlexzo (J9183); Keytruda Qlex (J9277); Lynozyfic (J9601); Rybrevant Faspro (J9999); Boncresa/Oziltus (J3590)
7/1/2026	• Updated HCPCS codes: Blenrep (J9037), Qivigy (J1577), Rybrevant Faspro (J9062), Oziltus (Q5165), Boncresa (Q5171), Enoby/Xtrenbo (Q5167) • Updated HCPCS code description name: Gammagard to Gammagard ERC (J1569)
9/1/2026	• Removed HCPCS Q2017 (was effective 1/1/2026)
10/1/2026	• Updated HCPCS code: Yondelis (J9362) • Updated HCPCS Description: Treanda (J9033) • Updated HCPCS and Description: Blenrep (J9053) • Updated Policy reference: Anktiva (J9028), Inlexzo

	• Added Filkri (Q5172), denosumab Samsumg Bioepis (Q5159), Lunsumio VELO (J9350), Vykoura (J0644), Armlupeg (Q5169), Adstiladrin (J9029) • Removal of HCPCS code: 505(b)(2) Dr. Reddy's bendamustine (J9999)