



**Health Partners Plans
Medical Oncology Code List**

*****Please note: This list is constantly evolving as new drugs come to market and are approved by the FDA as well as with any HCPC code changes issued by CMS. Please contact Health Partners Plans or eviCore, if the drug you are requesting is not contained on this list, to determine if prior authorization is needed*****

***** For Medicaid only: Drugs on this list may be non-preferred agents or require clinical prior authorization according to the Pennsylvania Statewide Preferred Drug List (PDL). The current list of non-preferred agents and prior authorization requirements, as well as applicable criteria, can be found here: *****

https://papdl.com/sites/default/files/ghs-files/Penn%20Statewide%20PDL%202023_0.pdf

Effective Date: 10/01/23

Description	Alt Descriptions	Primary	Program	Drug Class	Administration Technique	HPP (Health Partners Plans) - Medicaid	HPP (Health Partners Plans) - Medicare	Drug Comments	Current MUE
5-Fluorouracil- Injection	SFU, Adrucil	J9190	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		20
Ado-Trastuzumab Emtansine	Kadcyla	J9354	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		600
Aldesleukin	Proleukin, Interleukin-2	J9015	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		1
Amivantamab-vmjw	Rybrevant	J9061	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		700
Aprepitant	Cinvanti	J0185	Medical Oncology - SPORT	Supportive - Antiemetic	INJECTABLE	N: This is a preferred drug for Medicaid and does not require prior authorization.	Y		130
Arsenic Trioxide	Trisenox	J9017	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		30
Asparaginase	Erwinaze	J9019	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		60
Asparaginase erwinia chrysanthemi (recombinant)-rywn	Rylaze	J9021	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		800
Atezolizumab	Tecentriq	J9022	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		168
Avelumab	Bavencio	J9023	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		140
Azacitidine	Vidaza	J9025	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		300
BCG	TheraCys, Tice	J9030	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		50
Belantamab Mafodotin-blmf	Blenrep	J9037	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		800
Belinostat	Beleodaq	J9032	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		300
Bendamustine HCL	Treanda	J9033	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		300
Bendamustine HCL	Bendeka	J9034	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		360
Bendamustine HCL	Belrapzo	J9036	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		360
Bendamustine HCL (Apotex)		J9058	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		0
Bendamustine HCL (Baxter)		J9059	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		0

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Bendamustine HCL (Vivimusta)		J9056	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		0
Bevacizumab	Avastin	J9035	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		180
Bevacizumab (Radiation Necrosis)	Avastin	J9035	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y	Supportive pathway for the use of Avastin to treat Radiation Induced Necrosis of the CNS	180
Bevacizumab-adcd	Vegzelma	Q5129	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y		#N/A
Bevacizumab-adcd	Vegzelma	Q5129	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Bevacizumab-awwb	Mvasi	Q5107	Medical Oncology - CHEMO	Primary - Biosimilar	INJECTABLE	Y	Y		170
Bevacizumab-awwb (Radiation Necrosis)	Mvasi	Q5107	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y	Supportive pathway for the use of Mvasi to treat Radiation Induced Necrosis of the CNS	170
Bevacizumab-bvzr	Zirabev	Q5118	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y		230
Bevacizumab-bvzr	Zirabev	Q5118	Medical Oncology - CHEMO	Primary - Biosimilar	INJECTABLE	Y	Y		230
Bevacizumab-maly	Alymsys	Q5126	Medical Oncology - CHEMO	Primary - Biosimilar	INJECTABLE	Y	Y		#N/A
Bevacizumab-maly (Radiation Necrosis)	Alymsys	Q5126	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y		#N/A
Bleomycin	Blenoxane	J9040	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		4
Blinatumomab	Blinicyto	J9039	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		210
Bortezomib	Velcade	J9041	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		35
Bortezomib (Dr. Reddy's)		J9046	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Bortezomib (Fresenius Kabi)		J9048	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Bortezomib (Hospira)		J9049	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Bortezomib (maia)		J9051	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y	New manufacture code: J9051 for Bortezomib effective: 10/01/23.	35
Brentuximab Vedotin	Adcetris	J9042	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		200
Burosumab-twza	Crysvita	J0584	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y		90
Cabazitaxel	Jevtana	J9043	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		60
Cabazitaxel (sandoz)		J9064	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y	New manufacture code: J9064 for Cabazitaxel (sandoz), effective: 10/01/23.	60
Calaspargase pegol-mknl	Asparlas	J9118	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		750
Carboplatin	Paraplatin	J9045	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		22
Carfilzomib	Kyprolis	J9047	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		160
Carmustine	BiCNU, BCNU	J9050	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		6
Cemiplimab-nwlc	Libtayo	J9119	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		350
Cetuximab	Erbix	J9055	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		150
Cisplatin	Platinol	J9060	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		24
Cladribine	Leustatin	J9065	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		100
Clofarabine	Clofar	J9027	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		100
Copanlisib	Aliqopa	J9057	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		60
Cyclophosphamide - inj	Cytosan, Endoxan-Asta	J9070	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		55
Cyclophosphamide - inj (auromedic)	Cyclophosphamide - inj (auromedics) 10 mg	J9071	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		1500

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Description	Alt Descriptions	Primary	Program	Drug Class	Administration Technique	HPP (Health Partners Plans) - Medicaid	HPP (Health Partners Plans) - Medicare	Drug Comments	Current MUE
Cytarabine	Ara-C	J9100	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		120
Cytarabine-Liposome	DepoCyt	J9098	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		5
Dacarbazine	DTIC-Dome	J9130	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		24
Dactinomycin	Cosmegen, Actinomycin	J9120	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		5
Daratumumab	Darzalex	J9145	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		240
Daratumumab and hyaluronidase-fihj	Darzalex Faspro	J9144	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		180
Darbepoetin alfa	Aranesp	J0881	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		500
Daunorubicin	Cerubidine	J9150	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		12
Decitabine	Dacogen	J0894	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		100
Decitabine (sun pharma)		J0893	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Degarelix	Firmagon	J9155	Medical Oncology - CHEMO	Primary	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		240
Denosumab	Xgeva, Prolia	J0897	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		120
Dinutuximab	Unituxin	C9399	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Dinutuximab	Unituxin	J9999	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Docetaxel	Taxotere	J9171	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		240
Dostarlimab-gxly	Jemperli	J9272	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		100
Doxorubicin HCL	Adriamycin	J9000	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		20
Doxorubicin HCL (liposomal)	Doxil, Doxorubicin HCL (Liposomal) not otherwise specified	Q2050	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		20
Durvalumab	Imfinzi	J9173	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		150
Eflapegrastim-xnst	Rolvedon	J1449	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y		N/A
Elotuzumab	Empliciti	J9176	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		3000
Elranatamab-bcmm	Elrexfio	C9399	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y	New primary chemotherapy drug effective: 09/01/23	#N/A
Elranatamab-bcmm	Elrexfio	J9999	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y	New primary chemotherapy drug effective: 09/01/23	#N/A
Enfortumab vedotin-efv	Padcev	J9177	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		520
Eporitamab-bysp	Epkinly	C9155	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y	New NOC Code: C9155 replacing NOC Code: C9399 effective: 10/01/23.	0
Eporitamab-bysp	Epkinly	J9999	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Epirubicin	Ellence	J9178	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		150
Epoetin alfa	Epogen, Procrit	J0885	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: Epogen is Preferred and Procrit is Non-Preferred, but both drugs require Prior Auth for Medicaid	Y		60
Epoetin alfa-epbx	Retacrit	Q5106	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a preferred drug for Medicaid and requires prior authorization.	Y		60
Eribulin mesylate	Halaven	J9179	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		50

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Description	Alt Descriptions	Primary	Program	Drug Class	Administration Technique	HPP (Health Partners Plans) - Medicaid	HPP (Health Partners Plans) - Medicare	Drug Comments	Current MUE
Etoposide - inj	Toposar, VePesid, Etopophos	J9181	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		100
Fam-trastuzumab deruxtecan-rxki	Enhertu	J9358	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		900
Filgrastim	Neupogen	J1442	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		1500
Filgrastim-aafi	Nivestym	Q5110	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		1500
Filgrastim-ayow	Releuko	Q5125	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y		#N/A
Filgrastim-sndz	Zarxio	Q5101	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		1500
Floxuridine	FUDR	J9200	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		20
Fludarabine Phosphate	Fludara, Oforta	J9185	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		2
Fosaprepitant	Emend	J1453	Medical Oncology - SPORT	Supportive - Antiemetic	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		150
Fosaprepitant (teva)	Fosaprepitant (teva)	J1456	Medical Oncology - SPORT	Supportive - Antiemetic	INJECTABLE	Y	Y		#N/A
Fosnetupitant/Palonosetron	Akynzeo	J1454	Medical Oncology - SPORT	Supportive - Antiemetic	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		1
Fulvestrant	Faslodex	J9395	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		20
Fulvestrant (Fresenius Kabi)		J9394	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Fulvestrant (Teva)		J9393	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Gemcitabine	Gemzar	J9201	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		20
Gemcitabine HCL in NaCL	Infugem	J9198	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		38
Gemcitabine Hydrochloride (accord)		J9196	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		38
Gemtuzumab Ozogamicin	Mylotarg	J9203	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		180
Glofitamab-gxbm	Columvi	C9399	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y	New primary chemotherapy drug effective 07/07/23	#N/A
Glofitamab-gxbm	Columvi	J9999	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y	New primary chemotherapy drug effective 07/07/23	#N/A
Goserelin acetate implant	Zoladex	J9202	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		3
Granisetron - subcutaneous	Sustol	J1627	Medical Oncology - SPORT	Supportive - Antiemetic	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		100
Histrelin Implant	Vantas	J9225	Medical Oncology - CHEMO	Primary	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		1
Idarubicin HCL - inj	Idamycin	J9211	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		6
Ifosfamide	Ifex, Mitoxana	J9208	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		15
Inotuzumab Ozogamicin	Besponsa	J9229	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		27
Interferon, alfa-2b, recombinant	Intron A	J9214	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		100
Iplimumab	Yervoy	J9228	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		1100
Irinotecan	Camptosar	J9206	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		42

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Description	Alt Descriptions	Primary	Program	Drug Class	Administration Technique	HPP (Health Partners Plans) - Medicaid	HPP (Health Partners Plans) - Medicare	Drug Comments	Current MUE
Irinotecan Liposome	Onivyde	J9205	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		215
Isatuximab-irfc	Sarclisa	J9227	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		150
Ixabepilone	Ixempra	J9207	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		90
Lanreotide	Somatuline Depot	J1930	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		120
Lanreotide (Cipla)		J1932	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Leucovorin - inj		J0640	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		24
Leuprolide Acetate		J1954	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Leuprolide Acetate (J1950: 3.75mg)	Eligard, Lupron Depot, Lupron, Leuprolide Acetate	J1950	Medical Oncology - CHEMO	Primary	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		12
Leuprolide Acetate (J9217: 7.5mg)	Eligard, Lupron Depot, Lupron, Leuprolide Acetate	J9217	Medical Oncology - CHEMO	Primary	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		6
Leuprolide Acetate (J9218: 1mg)	Lupron	J9218	Medical Oncology - CHEMO	Primary	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		1
Leuprolide Mesylate	Camcevi	J1952	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		42
Levoleucovorin	Khapzory	J0642	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		1200
Levoleucovorin	Fusilev	J0641	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		1200
Liposome-encapsulated combination of Daunorubicin and Cytarabine	Vyxeos	J9153	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		132
Loncastuximab tesirine-lpyl	Zynlonta	J9359	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		400
Lurbinectedin	Zepzelca	J9223	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		120
Luspatercept-aamt	Reblozyl	J0896	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y		1100
Margetuximab-cmkb	Margenza	J9353	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		450
Melphalan HCL - inj	Evomela	J9246	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		300
Melphalan HCL - NOS inj	Alkeran	J9245	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		11
Methotrexate Sodium (J9250: 5mg)	Folex, Methotrexate	J9250	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		50
Methotrexate Sodium (J9260: 50mg)	Folex, Methotrexate	J9260	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		20
Mirvetuximab Soravtansine-gynx	Elahere	J9063	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Mitomycin	Mutamycin	J9280	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		12
Mitomycin	Jelmyto	J9281	Medical Oncology - CHEMO	Primary	PYELOCALYCEAL	Y	Y	Medicare Part B	80
Mitoxantrone HCL	Novantrone	J9293	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		8
Mogamulizumab-kpkc	Poteligeo	J9204	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		160
Mosunetuzumab-axgb	Lunsumio	J9350	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Moxetumomab pasudotox-tdfk	Lumoxiti	J9313	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		600
Nadofaragen Firadenovec-vncg	Adstiladrin	J9029	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Naxitamab-ggqk	Danyelza	J9348	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		160
Necitumumab	Portrazza	J9295	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		800
Nelarabine	Arranon	J9261	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		80

Data Class: Internal

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Description	Alt Descriptions	Primary	Program	Drug Class	Administration Technique	HPP (Health Partners Plans) - Medicaid	HPP (Health Partners Plans) - Medicare	Drug Comments	Current MUE
Nivolumab	Opdivo	J9299	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		480
Nivolumab and Relatlimab-rmbw	Opduvalag	J9298	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Obinutuzumab	Gazyva	J9301	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		100
Octreotide depot	Sandostatin	J2353	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		60
Octreotide depot	Sandostatin	J2353	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y		60
Octreotide non-depot	Sandostatin	J2354	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		60
Octreotide non-depot	Sandostatin	J2354	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y		60
Ofatumumab	Arzerra	J9302	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		200
Omacetaxine	Synribo	J9262	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		700
Oxaliplatin	Eloxatin	J9263	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		700
Pacitaxel	Nov-Onxol, Taxol	J9267	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		750
Pacitaxel (albumin-bound)	Abraxane	J9264	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		700
Pacitaxel (American Regent)		J9259	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		700
Palonosetron	Aloxi	J2469	Medical Oncology - SPORT	Supportive - Antiemetic	INJECTABLE	N: This is a preferred drug for Medicaid and does not require prior authorization.	Y		10
Pamidronate Disodium	Aredia	J2430	Medical Oncology - SPORT	Supportive	INJECTABLE	N: This is a preferred drug for Medicaid and does not require prior authorization.	Y		3
Panitumumab	Vectibix	J9303	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		90
Pegaspargase	Oncaspar	J9266	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		2
Pegfilgrastim, excludes biosimilar, 0.5 mg	Neulasta	J2506	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		12
Pegfilgrastim-apgf	Nyvepria	Q5122	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		12
Pegfilgrastim-bmez	Ziextenzo	Q5120	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		12
Pegfilgrastim-cbqv	Udenyca	Q5111	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		12
Pegfilgrastim-fpgk	Stimufend	Q5127	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y		#N/A
Pegfilgrastim-jmdb	Fulphila	Q5108	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a preferred drug for Medicaid and requires prior authorization.	Y		12
Pegfilgrastim-pbbk	Fylintra	Q5130	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y		0
Peginterferon, alfa-2a	Pegasys	J3590	Medical Oncology - CHEMO	Primary	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		#N/A
Peginterferon, alfa-2b	Pegintron	J3590	Medical Oncology - CHEMO	Primary	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		#N/A
Pembrolizumab	Keytruda	J9271	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		400

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Pemetrexed	Alimta, Pemetrexed not otherwise specified	J9305	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		150
Pemetrexed	Pemfexy	J9304	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		150
Pemetrexed (accord)		J9296	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		150
Pemetrexed (bluepoint)		J9322	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		150
Pemetrexed (hospira)		J9323	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		150
Pemetrexed (hospira)		J9294	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		150
Pemetrexed (sandoz)		J9297	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		150
Pemetrexed (Teva)		J9314	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Pentostatin	Nipent	J9268	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		1
Pertuzumab	Perjeta	J9306	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		840
Pertuzumab / trastuzumab / hyaluronidase-zzxf	Phesgo	J9316	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		180
Polatuzumab vedotin-piiq	Polivy	J9309	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		280
Porfimer Sodium	Photofrin	J9600	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		4
Pralatrexate	Folotyn	J9307	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		80
Ramucirumab	Cyramza	J9308	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		280
Retifanlimab-dlwr	Zynyz	J9345	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y	New permanent HCPC Code: J9345 replacing NOC Codes: C9399 & J9999 for primary chemotherapy drug: Retifanlimab-dlwr (Zynyz), effective: 10/01/23.	0
Rituximab	Rituxan	J9312	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		150
Rituximab and Hyaluronidase Human	Rituxan Hycela	J9311	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		160
Rituximab-abbs	Truxima	Q5115	Medical Oncology - CHEMO	Primary - Biosimilar	INJECTABLE	Y	Y		150
Rituximab-arxx	Riabni	Q5123	Medical Oncology - CHEMO	Primary - Biosimilar	INJECTABLE	Y	Y		150
Rituximab-pwr	Ruxience	Q5119	Medical Oncology - CHEMO	Primary - Biosimilar	INJECTABLE	Y	Y		150
Romidepsin (lyophilized)	Istodax	J9319	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		500
Romidepsin (non-lyophilized)		J9318	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		475
Ropeginterferon alfa-2b-njft	Besremi	C9399	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Ropeginterferon alfa-2b-njft	Besremi	J9999	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Sacituzumab govitecan-hziy	Trodelvy	J9317	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		648
Sargramostim	Leukine	J2820	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		10
Siltuximab	Sylvant	J2860	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		170
Sipuleucel-T	Provenge	Q2043	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		1
Sirolimus protein-bound particles for injectable suspension (albumin bound)	Fyarro	J9331	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		300
Sodium Thiosulfate Injection	Pedmark	J0208	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y		#N/A
Streptozocin	Zanosar	J9320	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		4
Tafasitamab-cxix	Monjuvi	J9349	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		900

Effective Date: 10/01/23

Description	Alt Descriptions	Primary	Program	Drug Class	Administration Technique	HPP (Health Partners Plans) - Medicaid	HPP (Health Partners Plans) - Medicare	Drug Comments	Current MUE
Tagraxofusp-erzs	Elzonris	J9269	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		200
Talimogene Laherparepvec	Imlygic	J9325	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		400
Talquetamab-tgvs	Talvey	C9399	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y	New primary chemotherapy drug effective: 09/01/23	#N/A
Talquetamab-tgvs	Talvey	J9999	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y	New primary chemotherapy drug effective: 09/01/23	#N/A
Tbo-filgrastim	Granix	J1447	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		960
Tebentafusp-tebn	Kimtrak	J9274	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Teclistamab-cqyv	Tecvayli	J9380	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Temozolomide - inj	Temodar	J9328	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		400
Temsirolimus	Torisel	J9330	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		50
Teniposide	Vumon	Q2017	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		12
Thiotepa	Thioplex	J9340	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		30
Tisotumab vedotin-tftv	Tivdak	J9273	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		200
Tocilizumab	Actemra	J3262	Medical Oncology - SPORT	Supportive	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y	Supportive pathway for the use of Actemra for CAR-T induced CRS Effective: 10/01/23	800
Tocilizumab	Actemra	J3262	Medical Oncology - CHEMO	Primary	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		800
Topotecan - inj	Hycamtin	J9351	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		120
Trabectedin	Yondelis	J9352	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		40
Trastuzumab	Herceptin	J9355	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		120
Trastuzumab and hyaluronidase-oyks	Herceptin Hylecta	J9356	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		60
Trastuzumab-anns	Kanjinti	Q5117	Medical Oncology - CHEMO	Primary - Biosimilar	INJECTABLE	Y	Y		120
Trastuzumab-dkst	Ogivri	Q5114	Medical Oncology - CHEMO	Primary - Biosimilar	INJECTABLE	Y	Y		120
Trastuzumab-dttb	Ontuzant	Q5112	Medical Oncology - CHEMO	Primary - Biosimilar	INJECTABLE	Y	Y		120
Trastuzumab-pkrb	Herzuma	Q5113	Medical Oncology - CHEMO	Primary - Biosimilar	INJECTABLE	Y	Y		120
Trastuzumab-qyyp	Trazimera	Q5116	Medical Oncology - CHEMO	Primary - Biosimilar	INJECTABLE	Y	Y		120
Tremelimumab-actl	Imjudo	J9347	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		#N/A
Trilaciclib	Cosela	J1448	Medical Oncology - SPORT	Supportive	INJECTABLE	Y	Y		900
Triptorelin Pamoate	Trelstar	J3315	Medical Oncology - CHEMO	Primary	INJECTABLE	Y: This is a non-preferred drug for Medicaid and requires prior authorization.	Y		6
Valrubicin	Valstar	J9357	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		4
Vinblastine Sulfate	Velban	J9360	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		40
Vincristine Sulfate	Oncovin, Vincasar PFS	J9370	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		4
Vinorelbine Tartrate	Navelbine	J9390	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		36
Zivafibercept	Zaltrap	J9400	Medical Oncology - CHEMO	Primary	INJECTABLE	Y	Y		500

Effective Date: 10/01/23

Description	Alt Descriptions	Primary	Program	Drug Class	Administration Technique	HPP (Health Partners Plans) - Medicaid	HPP (Health Partners Plans) - Medicare	Drug Comments	Current MUE
Zoledronic Acid		J3489	Medical Oncology - SPORT	Supportive	INJECTABLE	N: This is a preferred drug for Medicaid and does not require prior authorization.	Y		5