# **PROVIDER***Update*

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MARCH 2, 2018

UPDATE 18-161 |

4 PAGES

# Injectable Medication HCPCS/DOFR Crosswalk Reference Table Updated

On January 16, 2018, the Health Net of California, Inc. and Health Net Community Solutions, Inc. (Health Net) Pharmacy and Therapeutics (P&T) Committee approved updates to the Injectable Medication Healthcare Common Procedure Coding System (HCPCS)/Division of Financial Responsibility (DOFR) Crosswalk. The approved updates are effective May 8, 2018, and are listed on pages 2 through 4. The DOFR categories into which injectable medications are placed mirror the DOFR matrix categories located in the Health Net Provider Participation Agreement (PPA). The update includes:

- The addition of 16 new medications and their DOFR categories.
- Updates and changes to 17 injectable medication procedure codes.
- One category change in the DOFR secondary category.

#### ADDITIONAL INFORMATION

Relevant sections of Health Net's provider operations manuals will be revised to reflect the information contained in this update as applicable. Provider operations manuals are available electronically in the Provider Library, located on Health Net's provider website at provider.healthnet.com.

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If you have questions regarding the information contained in this update, contact the Health Net Provider Services Center by email at provider services@healthnet.com within 60 days, or by telephone or through the Health Net provider website as listed in the righthand column.

## THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

- Physicians
- Participating Physician Groups
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- O Ancillary Providers

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## ADDITIONS TO INJECTABLE MEDICATION HCPCS/DOFR CROSSWALK

The following medications have been approved by the Health Net P&T Committee as additions to the Injectable Medication HCPCS/DOFR Crosswalk Reference Table. P&T Committee members include physicians and representatives from Health Net participating physician groups (PPGs).

HCPCS* Codes	Brand Name	Generic Name	Duimon Coto com	Consider Cotons
	Branu Name	Genericiname	Primary Category	Secondary Category
J7210	Afstyla <sup>®</sup>	Injection, factor VIII, antihemophilic factor, recombinant	Therapeutic injection	Blood/blood products for hemophilia
C9399, J9999	Aliqopa™	Copanlisib for injection, for intravenous (IV) use	Therapeutic injection	Chemotherapy*
J3590	Cyltezo™	Adalimumab-adbm injection, for subcutaneous use	Self-injectable	
C9399, J3590	Fasenra™	Benralizumab, for subcutaneous use	Therapeutic injection	
C9399, J3590	Hemlibra <sup>®</sup>	Emicizumab-kxwh injection, for subcutaneous use	Therapeutic injection	Blood/blood products for hemophilia
90739	Heplisav-B <sup>™</sup>	Hepatitis B vaccine (Hep B), adult dosage, 2-dose schedule, for intramuscular (IM) use	Therapeutic injection	Immunizations
Q2040	Kymriah <sup>™</sup>	Tisagenlecleucel, up to 250 million car-positive viable T cells, including leukapheresis and dose preparation procedures, per infusion	Therapeutic injection	Chemotherapy*
J9203	Mylotarg <sup>™</sup>	Gemtuzumab ozogamicin, 0.1 mg 4.5 mg reconstituted solution (Solr)	Therapeutic injection	Chemotherapy*
C9399, J3490	Ogivri™	Trastuzumab-dkst	Therapeutic injection	Chemotherapy*
C9399, J3490	Ozempic®	SemaglutIde solution, injection, for subcutaneous use	Self-injectable	
J0606	Parsabiv <sup>™</sup>	Injection, etelcalcetide, 0.1 mg for intravenous use	Therapeutic injection	
J3490	Prewmis™	Letermovir injection, for intravenous use	Therapeutic injection	
J7195	Rebinyn <sup>®</sup>	Coagulation factor IX (recombinant), glycoPEGylated lyophilized powder for solution for intravenous injection	Therapeutic injection	Blood/blood products for hemophilia
90750	Shingrix <sup>®</sup>	Zoster vaccine recombinant adjuvanted for IM injection	Therapeutic injection	Immunizations

HCPCS* Codes	Brand Name	Generic Name	Primary Category	Secondary Category
J3490	Varubi <sup>®</sup>	Rolapitant hydrochloride (HCI) IV emulsion	Therapeutic injection	Chemotherapy adjunct*
C9399, J9999	Yescarta™	Axicabtagene ciloleucel suspension for intravenous infusion	Therapeutic injection	Chemotherapy*

## UPDATES/CHANGES TO INJECTABLE MEDICATION PROCEDURE CODES OR MEDICATIONS

Updates to the Injectable Medication HCPCS/DOFR Crosswalk Reference Table are based on changes or updates to HCPCS codes or changes in medication descriptions or availability. The following are changes to injectable medications currently listed in the crosswalk.

HCPCS*/CPT Codes	Brand Name	Generic Name	Comment
J9023	Bavencio <sup>®</sup>	Avelumab injection, for intravenous use	Replaces C9399, J9999
C9028	Besponsa <sup>™</sup>	Inotuzumab ozogamicin for IV solution	Replaces J9399
C9014	Brineura <sup>™</sup>	Cerliponase alfa for intraventricular use	Replaces J3590, C9399
J1555	Cuvitru <sup>®</sup>	Immune globulin subcutaneous 20% solution	Replaces J3590, C9399
J1428	Exondys 51 <sup>™</sup>	Eteplirsen IV solution 100 mg/2 ml	Replaces C9484
C9015	Haegarda <sup>®</sup>	C1 esterase inhibitor (human) for subcutaneous injection	Replaces J3590
J7211	Kovaltry <sup>®</sup>	Antihemophilic factor (recombinant), is a recombinant, human DNA sequence derived, full length factor VIII concentrate	Replaces J7912
J9285	Lartruvo™	Injection, olaratumab, 10 mg	Replaces C9485
J1726	Makena <sup>®</sup>	Injection, hydroxyprogesterone caproate, 10 mg, (Makena)	Replaces Q9986
J2350	Ocrevus™	Ocrelizumab injection, for intravenous use	Replaces J3590, C9399
J2326	Spinraza <sup>™</sup>	Nusinersen injection, for intrathecal use	Replaces C9489
C9487	Stelara <sup>®</sup> IV	Ustekinumab, for intravenous injection, 1 mg	Replaces C9487
J1627	Sustol®	Granisetron extended-release	Replaces C9486

HCPCS*/CPT Codes	Brand Name	Generic Name	Comment
J9022	Tecentriq <sup>™</sup>	Atezolizumab injection	Replaces C9399, J9999
C9029	Tremfya <sup>™</sup>	Guselkumab injection, for subcutaneous use	Replaces J3590
C9024	Vyxeos™	Daunorubicin-cytarabine liposome for IV injection	Replaces J9999
J0565	Zinplava <sup>™</sup>	Injection, bezlotoxumab, 10 mg	Replaces J9999

## **DOFR CATEGORY CHANGE**

The Health Net P&T Committee reviewed the categorization of one medication and added a secondary category of chemotherapy adjunct.

HCPCS* Codes	Brand Name	Generic Name	Primary Category	Secondary Category
J1930	Somatuline <sup>®</sup> Depot	Lanreotide acetate, 1 mg	Therapeutic injection	Chemotherapy adjunct*

 $<sup>^*</sup> HCPCS \ \ codes \ w \ ere \ taken \ from \ the \ Centers \ for \ Medicare \ \& \ Medicaid \ Services \ (CMS) \ HCPCS \ \ w \ ebsite \ at \ www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/Alpha-Numeric-HCPCS.html.$ 

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UPDATE 18-161sum

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# Summary Update: Injectable Medication HCPCS/DOFR Crosswalk Reference Table Updated

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- The addition of 16 new medications and their DOFR categories.
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## ADDITIONAL INFORMATION

To obtain a comprehensive description of the above topics, the complete update, 18-161, Injectable Medication HCPCS/DOFR Crosswalk Reference Table Updated, is available on the Health Net provider portal at provider.healthnet.com in the Provider Library under Updates and Letters > 2018; search for provider update 18-161. Providers who do not have access to the Internet may request a print copy of update 18-161 by contacting the Health Net Provider Communications Department by fax at 1-800-937-6086 or by email at provider.communications@healthnet.com.

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