





CONTRACTUAL | MAY 11, 2018 | UPDATE 18-307

3 PAGES

Injectable Medication HCPCS/DOFR Crosswalk Reference Table Updated – 2nd Quarter 2018

On April 10, 2018, the 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 July 17, 2018, and are listed on pages 2 through 3. The DOFR categories into which injectable medications are placed mirror the DOFR matrix categories located in the *Provider Participation Agreement (PPA)*. The update includes:

- The addition of 14 new medications and their DOFR categories.
- Updates and changes to six injectable medication procedure codes.
- One update to the primary DOFR category.

ADDITIONAL INFORMATION

Relevant sections of the provider operations manuals have been revised to reflect the information contained in this update as applicable. Provider operations manuals are available electronically in the Provider Library, located on the provider website at provider.healthnet.com.

Providers are encouraged to access the provider portal online at provider.healthnet.com for real-time information, including eligibility verification, claims status, prior authorization status, plan summaries, and more.

If you have questions regarding the information contained in this update, contact CalViva Health at 1-888-893-1569.

THIS UPDATE APPLIES TO MEDI-CAL PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- O Ancillary Providers

PROVIDER SERVICES 1-888-893-1569

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ADDITIONS TO INJECTABLE MEDICATION HCPCS/DOFR CROSSWALK

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

HCPCS*/CPT Codes	Brand Name	Generic Name	Primary Category	Secondary Category
C9399, J3490	Admelog®	Insulin lispro for subcutaneous injection	Self-injectable	
J0714	Avycaz™	Ceftazidime and avibactam, 0.5 g/0.125 g	Therapeutic injection	
J3490	Bydureon [®] BCise [™]	Exenatide extended release injectable suspension 2 mg	Self-injectable	
J3490	Cinvanti [™]	Aprepitant injectable emulsion, for intravenous use	Therapeutic injection	Chemo adjunct*
J3490	Durolane®	Sodium hyaluronic, for single intra-articular injection 60mg/3ml	Therapeutic injection	
C9399, J3590	Fibryga [®]	Fibrinogen concentrate (human) lyophilized powder for reconstitution	Therapeutic injection	Blood/blood products for hemophilia
J3490	Giapreza™	Angiotensin II injection for intravenous infusion	Therapeutic injection	
90375	Hyperrab [®]	Rabies immune globulin (RIg), human, for intramuscular and/or subcutaneous use	Therapeutic injection	
90399	Kedrab [™]	Rabies immune globulin (RIg), human, for intramuscular use	Therapeutic injection	
C9399, J3590	Luxturna™	Voretigene neparvovec-rzyl	Therapeutic injection	
C9399, J3590	Mepsevii [™]	Vestronidase alpha-vjbk	Therapeutic injection	
C9399, J3490	Sublocade [™]	Buprenorphine extended release injection	Therapeutic injection	
C9399, J3490	Vabomere [™]	Meropenem and vaborbactam for injection, for intravenous use	Therapeutic injection	
Q2041	Yescarta [™]	Axicabtagene ciloleucal, up to 200 million autologous Anti-CD 19 Car T Cells, including leukapheresis and dose preparation	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 Codes	Brand Name	Generic Name	Comment
J2426 Invega Sustenna [®]		Paliperidone palmitate	Replaces C9399, J3490
J1729	Hydroxyprogesterone caproate	Hydroxyprogesterone caproate 1.25 GM/5ML SOLN	Replaces Q9985
J7199	Rebinyn [®]	Coagulation factor IX (recombinant), glycoPEGylated lyophilized powder for solution for intravenous injection	Correction from J7195
J3358	Stelara [®] IV	Ustekinumab, for intravenous injection, 1 mg	Replaces C9487
C9016	Triptodur [™] Triptorelin pamoate for IM ER susp 22.5 mg		Correction to J3315
J3030	Zembrace [™]	Sumatriptan succinate	Replaces C9399, J3490

CATEGORY UPDATES/CHANGE

Correction to the primary category.

HCPCS Codes	Brand Name	Generic Name	Primary Category	Secondary Category
C9399, J3590	Hemlibra [®]	Emicizumab-kxwh injection, for subcutaneous use	Self-injectable	Blood/blood products for hemophilia

*HCPCS codes were taken from the Centers for Medicare & Medicaid Services (CMS) HCPCS website at www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/Alpha-Numeric-HCPCS.html.