

# PROVIDER Update



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## Injectable Medication HCPCS/DOFR Crosswalk Reference Table Update – 3rd Quarter 2019

Approved updates are effective December 23, 2019

On July 16, 2019, the 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 December 23, 2019, and listed on pages 2 and 3. Injectable medications are placed in DOFR categories that mirror the DOFR matrix categories in the Health Net *Provider Participation Agreement (PPA)*.

The update includes:

- 15 new injectable medications and DOFR categories.
- 11 updates and changes to injectable medication procedure codes.

### Additional information

Relevant sections of Health Net's 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 Health Net's provider website as listed in the right-hand column.

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](mailto:provider_services@healthnet.com) within 60 days, by telephone or through the Health Net provider website as listed in the right-hand column.

THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

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- Hospitals
- Ancillary Providers

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PROVIDER COMMUNICATIONS

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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	Drug name	Generic name	Primary category	Secondary category
J3590	Ascenvi™	Immune globulin intravenous, human-sira	Therapeutic injection	Home health/infusion
J3590	Cutaquig®	Immune globulin subcutaneous (human)-hipp	Therapeutic injection	Home health/infusion
C9048	Dextenza®	Dexamethasone ophthalmic insert	Therapeutic injection	
J3590	Evenity®	Romosozumab-aqqg injection, for subcutaneous use	Therapeutic injection	
Q5113	Herzuma®	Trastuzumab-pkrb, biosimilar, 10	Therapeutic injection	Chemotherapy
C9399, J3590	Infugem™	Gemcitabine in sodium chloride injection, for intravenous use	Therapeutic injection	Chemotherapy
Q5114	Ogivri®	Trastuzumab-dkst, biosimilar, 10	Therapeutic injection	Chemotherapy
Q5112	Ontruzant®	Trastuzumab-dttb, biosimilar, 10	Therapeutic injection	Chemotherapy
J3590, J9999	Polivy™	Polatuzumab vedotin-piiq for intravenous use	Therapeutic injection	Chemotherapy
C9399, J3590	Skyrizi™	Rosankizumab-rzaa injection, for subcutaneous use	Therapeutic injection	
J1444	Triferic®	Ferric pyrophosphate citrate powder, 0.1 mg of iron	Therapeutic injection	
J3490	Xyosted Inj™	Testosterone enanthate solution auto-injector	Therapeutic injection	
J3490	Zolgensma®	Onasemnogene abeparvocec-xioi	Therapeutic injection	
J3490	Zulresso™	Brexanolone injection, for intravenous use	Therapeutic injection	
90619	N/A	Meningococcal conjugate vaccine, serogroups A, C, W, Y, quadrivalent, tetanus toxoid carrier (MenACWY-TT), for intramuscular use	Therapeutic injection	Immunizations

## 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	Drug name	Generic name	Comment
J9036	Belrapzo™	Bendamustine hcl (belrapzo), 1 mg	Replaces C9042
C9047	Cablivi®	Caplacizumab-yhdp, 1 mg	Replaces J3590
C9049	Elzonris™	Tagraxofusp-erzs, 10 mcg	Replaces J9999
C9050	Gamifant®	Emapalumab-lzsg, 1 mg	Replaces J3590

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**Updates, continued**

HCPCS	Drug name	Generic name	Comment
J9355	Hercep Hylecta™	Trastuzumab, excludes biosimilar, 10 mg	New description-replaces X7640
J7208	Jivi®	factor viii, (antihemophilic factor, recombinant), pegylated-aucl, 1 i.u.	Replaces C9141
C9044	Libtayo®	Cemiplimab-Rwlc intravenous Soln	Replaces J9999
90734	Menactra®, Menveo®	Meningococcal conjugate vaccine, serogroups A, C, W, Y, quadrivalent, diphtheria toxoid carrier (MenACWY- D) or CRM197 carrier (MenACWY-CRM), for intramuscular use	New description
Q5115	Truxima™	Rituximab-abbs, biosimilar, 10 mg	Replaces J9999
J9031	Theracys®	bCG (intravesical), per installation	Code deleted
C9052	Ultomiris™	Ravulizumab-cwvz, 10 mg	Replaces J3590

\*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](http://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/Alpha-Numeric-HCPCS.html).