

## 3rd Quarter 2025 Injectable Medication HCPCS/DOFR Crosswalk

### Use the updates for dates of service on and after January 8, 2026

The Pharmacy Advisory Committee approved updates to the Injectable Medication Healthcare Common Procedure Coding System (HCPCS)/Division of Financial Responsibility (DOFR) Crosswalk. The Pharmacy Advisory Committee members include physicians and pharmacists.

The approved updates, effective January 8, 2026 are listed on pages 2-6 of this update. Injectable medications are placed in DOFR categories that mirror the DOFR matrix categories in the Health Net\* and CalViva Health *Provider Participation Agreement (PPA)*.

The update includes:

- 18 **new** injectable medications to be added to the DOFR crosswalk
- 9 **new** biosimilars and updates to be added to the DOFR Crosswalk
- 3 **new** generic drugs
- 45 **updates and changes** to current injectable medication procedure codes
- 4 **category** changes

#### Additional information

Relevant sections of the Plan'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 on the provider portal at [provider.healthnetcalifornia.com](https://provider.healthnetcalifornia.com) >

*Provider Library* under Quick Links, or go directly to [providerlibrary.healthnetcalifornia.com](https://providerlibrary.healthnetcalifornia.com).

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

#### THIS UPDATE APPLIES TO:

- Participating Physician Groups

#### PROVIDER SERVICES

CalViva Health Medi-Cal  
(including ECM and CS providers) –  
888-893-1569

#### PROVIDER PORTAL

[provider.healthnetcalifornia.com](https://provider.healthnetcalifornia.com)

## Additions to HCPCS/DOFR crosswalk

The following medications have been approved as additions to the Injectable Medication HCPCS/DOFR Crosswalk.

HCPCS	Drug name	Generic name	Primary category	Secondary category
J3590	Andembry®	Garadacimab-gxii, subcutaneous injection	Self-injectable	
J9174	Biezray™	Injection, docetaxel , 1 mg	Therapeutic injection	Chemotherapy <sup>1</sup>
J9220	Bludigo®	Injection, indigotindisulfonate sodium, 1 mg	Therapeutic injection	
J3490	Bonsity®	Teriparatide, subcutaneous injection	Self-injectable	
J3290	Cykolkapron®	Injection, tranexamic acid, 5 mg	Therapeutic injection	
J1807	Sodium Edecrin®	Injection, ethacrynate sodium, 1 mg	Therapeutic injection	
J0458	Emblaveo™	Aztreonam and avibactam injection, intravenous (IV)	Therapeutic injection	
90382	Enflonsia™	Clesrovimab-cfor injection, for intramuscular use	Therapeutic injection	
J1834	Isoniazid	Injection, isoniazid, 1 mg	Therapeutic injection	
J9999	Lynozytic™	Linvoseltamab-gcpt injection, for IV use	Therapeutic injection	Chemotherapy <sup>1</sup>
A9607	Lutathera®	lutetium Lu 177 dotatate, injection, for IV use	Therapeutic injection	Chemotherapy <sup>1</sup>
J2151	Mannitol	Injection, mannitol, 250 mg	Therapeutic injection	
91323	mNexspike®	COVID-19 vaccine, 2025-2026 mRNA, injection, intramuscular (IM)	Therapeutic injection	Immunization
90624	Penmenvy®	Meningococcal Groups A, B, C, W, and Y vaccine injection, IM	Therapeutic injection	Immunization
90625	Vaxchora®	Cholera vaccine, live, adult dosage, 1 dose schedule, for oral use	Therapeutic injection	Immunization
J0738	Yeztugo®	Injection, lenacapavir (only for use as HIV treatment), 1 mg. Must also use Yeztugo 300-mg oral tablets.	Therapeutic injection	
J0681	Zevtera®	Ceftobiprole medocaril sodium for injection	Therapeutic injection	
J9999	Zusduri™	Mitomycin for intravesical solution	Therapeutic injection	

<sup>1</sup>If associated with a cancer diagnosis – ICD-10 codes between C00.0-C79.9, C7A.00-C7B.8, C80.0-C96.9, D00.0-D09.9.

## New biosimilars to be added to the HCPCS/DOFR crosswalk

The following medications have been approved as additions to the Injectable Medication HCPCS/DOFR Crosswalk.

HCPCS	Drug name	Generic name	Primary category	Secondary category
Q5154	Omlyclo®	Injection, omalizumab-igec, biosimilar to Xolair, 5 mg	Therapeutic injection	
J3590	Osenvelt®	Denosumab-bmwo injection, subcutaneous biosimilar to Xgeva	Therapeutic injection	Chemotherapy adjunctive <sup>1</sup>
Q9997	Pyzchiva®	Ustekinumab-ttwe IV solution 130 mg/26 ml, biosimilar to Stelara	Therapeutic injection	
Q9996	Pyzchiva®	Ustekinumab-ttwe subcutaneous solution 45 mg/0.5 ml, biosimilar to Stelara	Self-injectable	
Q5157	Stoboclo®	Denosumab-bmwo, subcutaneous injection, biosimilar to Prolia	Therapeutic injection	
Q5155	Yesafili™	Injection, aflibercept-jbvf, biosimilar to Eylea, 1 mg	Therapeutic injection	
Q5156	Avtozma®	Injection, tocilizumab-anoh, biosimilar to Actemra, 1 mg	Self-injectable	
Q5159	Ospomyv™	Injection, denosumab-dssb (ospomyv/xbryk), biosimilar to Prolia, 1 mg	Therapeutic injection	
Q5159	Xbryk™	Injection, denosumab-dssb (ospomyv/xbryk), biosimilar to Xgeva, 1 mg	Therapeutic injection	Chemotherapy adjunctive <sup>1</sup>

## New generic injectable medications

The following medications have been approved as additions to the Injectable Medication HCPCS/DOFR Crosswalk.

HCPCS	Drug name	Generic name	Primary category	Secondary category
J1163	Diltiazem	Injection, diltiazem HCl, 0.5 mg	Therapeutic injection	
J0618	Calcium Chloride	Injection, calcium chloride, 2 mg	Therapeutic injection	
J3490	Xifyrml™	Meloxicam injection, IV	Therapeutic injection	

<sup>1</sup>If associated with a cancer diagnosis – ICD-10 codes between C00.0-C79.9, C7A.00-C7B.8, C80.0-C96.9, D00.0-D09.9.

## Updates/changes to injectable medication procedure codes or HCPCS codes

Updates to the Injectable Medication HCPCS/DOFR Crosswalk 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
<b>J0169</b>	Adrenalin	Injection, epinephrine (adrenalin), not therapeutically equivalent to J0165, 0.1 mg	Replaces J1071
<b>J7173</b>	Alhemo®	Concizumab-mtci subcutaneous injection	Replaces J3590
<b>J9220</b>	Aucatzyl®	Obecabtagene autoleucel suspension for IV infusion	Replaces J3590
<b>J3590</b>	Benlysta®	Injection, belimumab, 200 mg/ml solution auto-injector	Replaces J3590
<b>J3590</b>	Benlysta®	Injection, belimumab, 200 mg/ml solution prefilled syringe	Replaces J3590
<b>J9382</b>	Bizengri®	Zenocutuzumab-zbco injection, for IV use	Replaces J9999
<b>90287</b>	Botulinim antitoxin	Botulinim antitoxin, equine, any route	No active products
<b>Q5158</b>	Bomynta®	Denosumab 120 mg/1.7 ml, injection, for subcutaneous use (Biosimilar to Xgeva)	Replaces J3590
<b>J0525</b>	Cefotetan	Cefotetan disodium, 10 mg	Replaces S0074
<b>90725</b>	Cholera vaccine	Cholera vaccine, injectable	Discontinued
<b>C9248</b>	Cleviprex®	Clevidipine butyrate, 1 mg	Replaces J0759
<b>90748</b>	Comvax®	Hepatitis B and Haemophilus influenzae type B vaccine (Hib-HepB), for intramuscular use	Discontinued
<b>Q5158</b>	Conexence®	Denosumab-bnht injection, for subcutaneous use (biosimilar to Prolia)	Replaces J3590
<b>J9011</b>	Datroway®	Datopotamab deruxtecan-dlnk, IV	Replaces J9999
<b>J3402</b>	Encelto™	Revakinagene Taroretcel-lwey intravitreal implant 200,000 cells	Replaces J3590
<b>J0165</b>	Epinephrine	Injection, epinephrine, not otherwise specified, 0.1 mg	Replaces J1071
<b>J0166</b>	Epinephrine	Injection, epinephrine (belcher), not therapeutically equivalent to J0171, 0.1 mg	Replaces J0173
<b>J0167</b>	Epinephrine	Injection, epinephrine (hospira), not therapeutically equivalent to J0165, 0.1 mg	Replaces J1071

**Updates/changes to injectable medication procedure codes or HCPCS codes, *continued***

<b>HCPCS</b>	<b>Drug name</b>	<b>Generic name</b>	<b>Comment</b>
<b>J0168</b>	Epinephrine	Injection, epinephrine (international medication systems), not therapeutically equivalent to J0165, 0.1 mg	Replaces J1071
<b>J0614</b>	Grafapex™	Treosulfan for injection, for IV use	Replaces J9999
<b>J7172</b>	Hympavzi™	Marstacimab-hncq) injection, for subcutaneous use	Replaces J3590
<b>J0167</b>	Intron A®	Interferon Alfa-2B injection kit 5 mu/0.5 ml	No longer manufactured
<b>90713</b>	Ipol®	Poliovirus vaccine, inactivated (IPV), for subcutaneous or intramuscular use	No longer manufactured
<b>90377</b>	Kedrab®	Rabies immune globulin, heat- and solvent/detergent-treated (Rlg-HT S/D), human, for intramuscular and/or subcutaneous use	Replaces 90399
<b>J2503</b>	Macugen®	Pegaptanib sodium, 0.3 mg	No longer manufactured
<b>90734</b>	Menactra®	Meningococcal conjugate vaccine, serogroups A, C, W, Y, quadrivalent, diphtheria toxoid carrier (MenACWY-D), or CRM197 carrier (MenACWY-CRM), for intramuscular use	Discontinued
<b>90733</b>	Menomune®	Meningococcal polysaccharide vaccine, serogroups A, C, Y, W-135, quadrivalent (MPSV4), for subcutaneous use	Discontinued
<b>90385</b>	Micrhogam®	Rh IG, minidose, IM	Discontinued
<b>J2788</b>	Micrhogam®	Rho(D) immune globulin, human, minidose (50 mcg or 250 IU)	Discontinued
<b>J1370</b>	Nexium® I.V.	Esomeprazole sodium, injection, 20 mg	Replaces J3490
<b>J1809</b>	Nulibry®	Injection, fosdenopterin, 0.1 mg	Replaces J3490
<b>J9292</b>	Pemetrexed	Injection, pemetrexed, not therapeutically equivalent to J9305, 10 mg	Replaces J9305
<b>J2547</b>	Rapiblyk™	Landiolol HCl for IV solution 280 mg	Replaces J3590
<b>J3402</b>	Ryoncil®	Remestemcel-L-rknd 2 x 3.8 ml suspension for IV infusion kit	Replaces J3590
<b>J9361</b>	Ryzneuta®	Injection, efbemalenograstim alfa-vuxw, 0.5 mg	Code Correction
<b>Q5099</b>	Steqeyma®	Injection, ustekinumab-STBA, biosimilar to Stelara, 1 mg	Replaces J3590
<b>S0040</b>	Ticarcillin®	Ticarcillin disodium	No longer manufactured

**Updates/changes to injectable medication procedure codes or HCPCS codes, *continued***

<b>HCPCS</b>	<b>Drug name</b>	<b>Generic name</b>	<b>Comment</b>
<b>90393</b>	Vaccinia	Vaccinia immune globulin, human, for intramuscular use	Discontinued
<b>J9225</b>	Vantas® implant	Histrelin implant	No longer manufactured
<b>J1326</b>	Vyloy®	Zolbetuximab-clzb	Replaces J9999
<b>J3374</b>	Vancomycin	Injection, vancomycin hydrochloride (mylan) not therapeutically equivalent to J3373, 10 mg	Replaces J3371
<b>J3375</b>	Vancomycin	Injection, vancomycin hydrochloride (xellia), not therapeutically equivalent to J3373, 10 mg	Replaces J3372
<b>J3373</b>	Vancomycin	Injection, vancomycin HCL, 500 mg	Replaces J3370
<b>J9174</b>	Ziihera®	Zanidatamab-hrii injection IV solution	Replaces J9999
<b>J2313</b>	Zimhi™	Injection, naloxone HCL, 1 mg	Replaces J2311

**Category changes**

The following medications have been approved to correct the secondary category listed below.

<b>HCPCS</b>	<b>Drug name</b>	<b>Generic name</b>	<b>Primary category</b>	<b>Secondary category</b>
<b>Q5121</b>	Avsola®	Injection, infliximab-axxq, biosimilar to Remicade, 10 mg	Therapeutic injection	Home health/infusion <sup>2</sup>
<b>J0567</b>	Brineura®	Cerliponase alfa for intraventricular use	Therapeutic injection	Home health/infusion <sup>2</sup>
<b>J1203</b>	Pombiliti®	Cipaglucosidase alfa-atga for IV solution	Therapeutic injection	Home health/infusion <sup>2</sup>
<b>J2508</b>	Elfabrio®	Pegunigalsidase alfa-iwxj injection	Therapeutic injection	Home health/infusion <sup>2</sup>

<sup>2</sup>When administered by a nurse in a home setting.

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