



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 Community Health Plan of Imperial Valley *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 >

Provider Library under Quick Links, or go directly to

providerlibrary.healthnetcalifornia.com.

If you have questions regarding the information contained in this update, contact Community Health Plan of Imperial Valley at 833-236-4141.

THIS UPDATE APPLIES TO:

- Participating Physician Groups

PROVIDER SERVICES

CHPIV Medi-Cal
(including ECM and CS providers) –
833-236-4141

PROVIDER PORTAL

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 ¹
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	Lynozofic™	Linvoseltamab-gcpt injection, for IV use	Therapeutic injection	Chemotherapy ¹
A9607	Lutathera®	lutetium Lu 177 dotatate, injection, for IV use	Therapeutic injection	Chemotherapy ¹
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	

¹If 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 ¹
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 ¹

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	

¹If 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
J0169	Adrenalin	Injection, epinephrine (adrenalin), not therapeutically equivalent to J0165, 0.1 mg	Replaces J1071
J7173	Alhemo®	Concizumab-mtci subcutaneous injection	Replaces J3590
J9220	Aucatzyl®	Obecabtagene autoleucel suspension for IV infusion	Replaces J3590
J3590	Benlysta®	Injection, belimumab, 200 mg/ml solution auto-injector	Replaces J3590
J3590	Benlysta®	Injection, belimumab, 200 mg/ml solution prefilled syringe	Replaces J3590
J9382	Bizengri®	Zenocutuzumab-zbco injection, for IV use	Replaces J9999
90287	Botulinim antitoxin	Botulinim antitoxin, equine, any route	No active products
Q5158	Bomynta®	Denosumab 120 mg/1.7 ml, injection, for subcutaneous use (Biosimilar to Xgeva)	Replaces J3590
J0525	Cefotetan	Cefotetan disodium, 10 mg	Replaces S0074
90725	Cholera vaccine	Cholera vaccine, injectable	Discontinued
C9248	Cleviprex®	Clevidipine butyrate, 1 mg	Replaces J0759
90748	Comvax®	Hepatitis B and Haemophilus influenzae type B vaccine (Hib-HepB), for intramuscular use	Discontinued
Q5158	Conexence®	Denosumab-bnht injection, for subcutaneous use (biosimilar to Prolia)	Replaces J3590
J9011	Datroway®	Datopotamab deruxtecan-dlnk, IV	Replaces J9999
J3402	Encelto™	Revakinagene Taroretcel-lwey intravitreal implant 200,000 cells	Replaces J3590
J0165	Epinephrine	Injection, epinephrine, not otherwise specified, 0.1 mg	Replaces J1071
J0166	Epinephrine	Injection, epinephrine (belcher), not therapeutically equivalent to J0171, 0.1 mg	Replaces J0173
J0167	Epinephrine	Injection, epinephrine (hospira), not therapeutically equivalent to J0165, 0.1 mg	Replaces J1071
J0168	Epinephrine	Injection, epinephrine (international medication systems), not therapeutically equivalent to J0165, 0.1 mg	Replaces J1071

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

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

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

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

Category changes

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

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

²When 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.