

2023 Outpatient Infusion Services: SOC Contract List of Drug Codes

Groupings	Trade Name	Drug Name	HCPCS
Various Therapeutic Drugs			
	Actemra®	tocilizumab	J3262 *
	Adakveo®	crizanlizumab	J0791
	Benlysta®	belimumab	J0490 *
	Cinqair®	reslizumab	J2786
	Cinvanti®	aprepitant	J0185
	Crysvita®	burosumab-twza	J0584
	Enjaymo®	sutimilimab	J1302
	Entyvio®	vedolizumab	J3380
	Evenity®	romosozumab	J3111
	Givlaari®	givosiran	J0223
	Krystexxa®	pegloticase	J2507
	Mozobil®	plerixafor	J2562
	Ocrevus®	ocrelizumab	J2350
	Onpattro®	patisiran	J0222
	Opdivo®	nivolumab	J9299
	Orencia®	abatacept	J0129
	Prolia®, Xgeva®	denosumab	J0897
	Radicava®	edaravone	J1301
	Reblozyl®	luspatercept	J0896
	Sandostatin® LAR Depot	octreotide depot IM	J2353
	Saphnelo®	anifrolumab-fnia	J0491
	Simponi Aria®	golimumab	J1602
	Soliris®	eculizumab	J1300
	Somatuline® Depot	lanreotide	J1930
	Spinraza®	nusinersen	J2326
	Tepezza®	teprotumumab-trbw	J3241
	Trogarzo®	ibalizumab-uiyk	J1746
	Tysabri®	natalizumab	J2323
	Ultomiris®	ravulizumab-cwvz	J1303
	Uplizna®	inebilizumab	J1823
	Viltepso®	viltolarsen	J1427
	Vyepti®	eptinezumab-jjmr	J3032
	Vyvgart®	efgartigimod	J9332
	Yervoy®	ipilimumab	J9228
		Unclassified Drugs or Biologicals	C9399
		Unclassified Biologics	J3590
		Unclassified Drugs	J3490
Alpha-1 proteinase inhibitor			
	Aralast® NP, Prolastin-C®, Zemaira®	alpha-1 proteinase inhibitor	J0256
	Glassia®	alpha-1 proteinase inhibitor	J0257
Bevacizumab (Avastin®) biosimilars			
	Alymsys®	bevacizumab-maly	Q5126
	Mvasi®	bevacizumab-awwb	Q5107

	Zirabev®	bevacizumab-bvzr	Q5118
C-1 esterase inhibitor			
	Berinert®	C-1 esterase inhibitor (human)	J0597
	Cinryze®	C-1 esterase inhibitor (human)	J0598
	Ruconest®	C-1 esterase inhibitor (recombinant)	J0596
Enzyme Replacement Therapies			
	Aldurazyme®	laronidase	J1931
	Cerezyme®	Imiglucerase	J1786
	Elaprase®	idursulfase	J1743
	Elelyso®	taliglucerase alfa	J3060
	Fabrazyme®	agalsidase beta	J0180
	Kanuma®	sebelipase alfa	J2840
	Lumizyme®	alglucosidase alfa	J0221
	Mepsevii®	vestronidase alfa-vjvk	J3397
	Naglazyme®	galsulfase	J1458
	Nexviazyme®	avalglucosidase alfa-ngpt	J0219
	Vimizim®	elosulfase alfa	J1322
	VPRIV®	velaglucerase alfa	J3385
Filgrastim and biosimilars			
	Granix®	tbo-filgrastim	J1447
	Neupogen®	filgrastim, excludes biosimilars	J1442
	Nivestym®	filgrastim-aafi	Q5110
	Releuko®	filgrastim-ayow	Q5125
	Zarxio®	filgrastim-sndz	Q5101
Immune Globulins			
	Asceniv®	immune globulin	J1554
	Bivigam®	immune globulin	J1556
	Carimune® NF, Gammagard® S/D	immune globulin	J1566
	Cutaquig®	immune globulin	J1551
	Cuvitru®	immune globulin	J1555
	Flebogamma®, Flebogamma® DIF	immune globulin	J1572
	Gammagard®	immune globulin	J1569
	Gammaked®, Gamunex-C®	immune globulin	J1561
	Gammaplex®	immune globulin	J1557
	Hizentra®	immune globulin	J1559
	Hyqvia®	immune globulin	J1575
	IVIG non-lyophilized, NOS (Panzyga®)	immune globulin	J1599
	Octagam®	immune globulin	J1568
	Privigen®	immune globulin	J1459
	Xembify®	immune globulin	J1558
Infliximab and biosimilars			
	Avsola®	infliximab-axxq	Q5121
	Inflectra®	infliximab-dyyb	Q5103
	Ixifi®	infliximab-qbtx	Q5109
	Remicade®	infliximab, excludes biosimilars	J1745
	Renflexis®	infliximab-abda	Q5104
Iron Injectables			
	Feraheme®	feromoxytol, non-esrd	Q0138

	Infed®	iron dextran	J1750
	Injectafer®	ferric caboxymaltose	J1439
Pegfilgrastim and biosimilars			
	Fulphila®	pegfilgrastim-jmdb	Q5108
	Neulasta®	pegfilgrastim	J2506
	Nyvepria®	pegfilgrastim	Q5122
	Udenyca®	pegfilgrastim-cbqv	Q5111
	Ziextenzo®	pegfilgrastim-bmez	Q5120
Rituximab (Rituxan®) biosimilars			
	Riabni®	rituximab-arrx	Q5123
	Ruxience®	rituximab-pvvr	Q5119
	Truxima®	rituximab-abbs	Q5115
Rituximab containing drugs			
	Rituxan® Hycela	rituximab and hyaluronidase	J9311
Trastuzumab (Herceptin®) biosimilars			
	Herzuma®	trastuzumab-pkrb	Q5113
	Kanjinti®	trastuzumab-anns	Q5117
	Ogiviri®	trastuzumab-dkst	Q5114
	Ontruzant®	trastuzumab-dttb	Q5112
	Trazimera®	trastuzumab-qyyp	Q5116
Trastuzumab containing drugs			
	Enhertu®	fam-trastuzumab deruxtecan-nxki	J9358
	Herceptin® Hylecta	trastuzumab and hyluronidase-oysk	J9356
	Kadcyla®	ado-trastuzumab emtansine	J9354

***Coding/Billing: Route of administration modifier - JA and -JB**

Claim denials may occur when the appropriate modifier is not applied to a J code/medication, which has more than one route of administration

JA - Intravenous administration

JB - Subcutaneous administration

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Last update (new HCPCS codes released)

12/6/2022