

Provider update

Site of care drug list

The specialty drugs listed below, when covered under the medical benefit, require a site of care clinical review under the *Clinical Utilization Management Guideline* **CG-MED-83**. All drugs on this list are still subject to existing *Clinical Criteria*, step therapy criteria, and/or quantity limits.

HCPCS code	Brand name	Drug class
J3262	Actemra	Inflammatory conditions
J0791	Adakveo	Miscellaneous specialty conditions
J1931	Aldurazyme	Enzyme deficiency
J0256	Aralast NP, Prolastin, Zemaira	Respiratory conditions
J1554	Asceniv	Immunodeficiency
Q5121	Avsola	Inflammatory conditions
J0490	Benlysta	Inflammatory conditions
J1556	Bivigam	Immunodeficiency
J1786	Cerezyme	Enzyme deficiency
J2786	Cinqair	Respiratory conditions
J1743	Elaprase	Enzyme deficiency
J3060	Elelyso	Enzyme deficiency
J3380	Entyvio	Inflammatory conditions
J0180	Fabrazyme	Enzyme deficiency
J1572	Flebogamma	Immunodeficiency
J1460	Gamma globulin, intramuscular, 1cc	Immunodeficiency
J1560	Gamma globulin, intramuscular, over 10cc	Immunodeficiency
J1569	Gammagard Liquid	Immunodeficiency
J1561	Gammaked, Gamunex-C	Immunodeficiency
J1557	Gammaplex	Immunodeficiency
J0257	Glassia	Respiratory conditions
J1566	Immune globulin, not otherwise specified	Immunodeficiency
Q5103	Inflectra	Inflammatory conditions
J2840	Kanuma	Enzyme deficiency
J2507	Krystexxa	Inflammatory conditions
J0221	Lumizyme	Enzyme deficiency
J3397	Mepsevii	Enzyme deficiency
J1458	Naglazyme	Enzyme deficiency
J0485	Nulojix	Transplant
J2350	Ocrevus	Multiple Sclerosis

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J1568	Octagam	Immunodeficiency
J0222	Onpattro	Miscellaneous specialty conditions
J0129	Orencia	Inflammatory conditions
J1599	Panzyga	Immunodeficiency
J1459	Privigen	Immunodeficiency
J1745	Remicade	Inflammatory conditions
Q5104	Renflexis	Inflammatory conditions
J9312	Rituxan	Inflammatory conditions
J1602	Simponi Aria	Inflammatory conditions
J1300	Soliris	Blood modifying agents
J2323	Tysabri	Multiple Sclerosis
J1303	Ultomiris	Blood modifying agents
J1322	Vimizim	Enzyme deficiency
J3385	VPRIV	Enzyme deficiency
J2357	Xolair	Respiratory conditions

*Effective Date: August 1, 2022

Disclaimer: This list is not a guarantee of benefits. Please check the drug list for coverage. This list may change without notice, which may affect benefit coverage.