BlueCross BlueShield of Vermont
VERMONT BLUE Rx

DRUGS REQUIRING PRIOR AUTHORIZATION IN THE MEDICAL BENEFIT

Any drug that has been recently FDA approved and is considered a new drug to the market requires PA. If you are unsure if the drug is a new drug to the market and/or do not see the drug listed below as requiring prior approval, please call VT Blue Rx at 800-313-7879. Specific groups or policies may have special benefits or other coverage, call 800-924-3494 to verify benefits

Effective Date: 11/01/2026

Trade Name	Generic Name	Route of Administration	HCPCS Procedure Code	HCPCS Procedure Code Description	Preferred Product Information
ABECMA	idecabtagene vicleucel	IV - INTRAVENOUS	Q2055	Idecabtagene vicleucel, up to 510 million autologous anti-bcma car-positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose	
ABRILADA	adalimumab-afzb	SC - SUBCUTANEOUS	Q5145	Injection, adalimumab-afzb (abrilada), biosimilar, 1 mg	Simlandi
ACTEMRA	tocilizumab	IV/Subcut	J3262	Injection, tocilizumab, 1 mg	Tyenne
ACTHAR	corticotropin	IM/Subcut	J0801	Injection, corticotropin (acthar gel), up to 40 units	
ACTIMMUNE	interferon gamma-1b	SC - SUBCUTANEOUS	J9216	Injection, interferon, gamma 1-b, 3 million units	
ADAKVEO	crizanlizumab	IV - INTRAVENOUS	J0791	Injection, crizanlizumab-tmca, 5 mg	
ADALIMUMAB-ADBM	adalimumab-adbm	SC - SUBCUTANEOUS	Q5143	Injection, adalimumab-adbm, biosimilar, 1 mg	Simlandi
ADBRY	tralokinumab-ldrm	SC - SUBCUTANEOUS	J3590/C9399	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
ADCETRIS	brentuximab	IV - INTRAVENOUS	J9042	Injection, brentuximab vedotin, 1 mg	
ADSTILADRIN	nadofaragene firadenovec-vncg	IS	J9029	Injection, nadofaragene firadenovec-vncg, per therapeutic dose	
ADZYNMA	adamts13 recombinant-krhn	IV - INTRAVENOUS	J7171	Injection, adamts13, recombinant-krhn, 10 iu	
AIMOVIG	erenumab-aooe	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
AJOVY	fremanezumab-vfrm	SC - SUBCUTANEOUS	J3031	Injection, fremanezumab-vfrm, 1 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	
ALDURAZYME	laronidase	IV - INTRAVENOUS	J1931	Injection, laronidase, 0.1 mg	
ALHEMO	concizumab-mtci	SC - SUBCUTANEOUS	J7173	Injection, concizumab-mtci, 0.5 mg	
ALIQOPA	copanlisib	IV - INTRAVENOUS	J9057	Injection, copanlisib, 1 mg	
ALYGLO	immune globulin (human)-stwk	IV - INTRAVENOUS	J1552	Injection, immune globulin (alyglo), 500 mg	
ALYMSYS	bevacizumab-maly	IV - INTRAVENOUS	Q5126	Injection, bevacizumab-maly, biosimilar, (alymsys), 10 mg	Mvasi OR Zirabev
AMJEVITA	adalimumab-atto	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	Simlandi
AMONDYS 45	casimersen	IV - INTRAVENOUS	J1426	Injection, casimersen, 10 mg	
AMTAGVI	lifileucel	IV - INTRAVENOUS	C9399/J9999	Use ONLY)	
AMVUTTRA	vutrisiran	IV - INTRAVENOUS	J0225	Injection, vutrisiran, 1 mg	
ANDEMBRY	garadacimab-gxii	SC - SUBCUTANEOUS	C9399/J3590	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
ANKTIVA	nogapendekin alfa inbak-pmln	IS	J9028	Injection, nogapendekin alfa inbakicept-pmln, for intravesical use, 1 microgram	
APOKYN	apomorphine	SC - SUBCUTANEOUS	J0364	Injection, apomorphine HCl, 1 mg	
ARALAST NP	alpha-1 proteinase inhibitor	IV - INTRAVENOUS	J0256	Injection, alpha 1-proteinase inhibitor (human), not otherwise specified, 10 mg	
ARANESP	darbepoetin alfa	IV/Subcut	J0881 or	Injection, darbepoetin alfa, 1 mcg (non-ESRD use) or	
ARANESP	darbepoetin alfa	IV/Subcut	J0882	Injection, darbepoetin alfa, 1 mcg (for ESRD on dialysis)	
ARCALYST	rilonacept	SC - SUBCUTANEOUS	J2793	Injection, rilonacept, 1 mg	
ARMLUPEG	pegfilgramstim-unne	SC - SUBCUTANEOUS	Q5169	Injection, pegfilgrastim-unne (armlupeg), biosimilar, 0.5 mg	Fulphila OR Udenyca/Udenyca ONBO
ARZERRA	ofatumumab	IV - INTRAVENOUS	J9302	Injection, ofatumumab, 10 mg	
ASCENIV	immune globulin	IV - INTRAVENOUS	J1554	Injection, immune globulin (asceniv), 500 mg	
AUCATZYL	obecabtagene autoleucel	IV - INTRAVENOUS	Q2058	Obecabtagene autoleucel, up to 400 million cd19 car-positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose	
AUKELSO	denosumab-kvqq	SC - SUBCUTANEOUS	Q5161	Injection, denosumab-kyqq (aukelso/bosaya), biosimilar, 1 mg	Bildyos OR Bilprevda
AURLUMYN	iloprost	IV - INTRAVENOUS	J1749	Injection, iloprost, 0.1 mcg	
AVASTIN	bevacizumab	IV - INTRAVENOUS	J9035	Injection, bevacizumab, 10 mg	Mvasi OR Zirabev
AVGEMSI	Gemcitabine	IV - INTRAVENOUS	J9184	Injection, gemcitabine hydrochloride (avyxa), 200 mg	
AVLAYAH	tividenofusp alfa-eknm	IV - INTRAVENOUS	J1757	Injection, tividenofusp alfa-eknm, 1 mg	
AVONEX	interferon beta-1a	IM	Q3027 or	Injection, interferon beta-1a, 1 mcg for intramuscular use or	
AVONEX	interferon beta-1a	IM	J1826	Injection, interferon beta-1a, 30 mcg	
AVOPEF	etoposide	IV - INTRAVENOUS	J9186	Injection, etoposide (avyxa), 1 mg	
AVTOZMA	tocilizumab-anoh	IV - INTRAVENOUS	Q5156	Injection, tocilizumab-anoh (avtozma), biosimilar, 1 mg	Tyenne
AZHANTIVE	aflibercept-mrbb	IJ	Q5150	Injection, aflibercept-mrbb (ahzantive), biosimilar, 1 mg	
BAVENCIO	avelumab	IV - INTRAVENOUS	J9023	Injection, avelumab, 10 mg	
BEIZRAY	docetaxel	IV - INTRAVENOUS	J9174	Injection, docetaxel (beizray), 1 mg	
BELEODAQ	belinostat	IV - INTRAVENOUS	J9032	Injection, belinostat, 10 mg	
BELRAPZO/BENDAMUSTINE	bendamustine	IV - INTRAVENOUS	J9036	Injection, bendamustine hydrochloride, (Belrapzo/bendamustine), 1 mg	
BENDAMUSTINE	bendamustine hcl (avyxa)	IV - INTRAVENOUS	J9066	Injection, bendamustine hydrochloride (avyxa), 1 mg	
BENDEKA	bendamustine	IV - INTRAVENOUS	J9034	Injection, bendamustine HCl (Bendeka), 1 mg	
BENLYSTA	belimumab	IV/Subcut	J0490	Injection, belimumab, 10 mg	
BEOVU	brolucizumab-dbll	Intravitreal	J0179	Injection, brolucizumab-dbll, 1 mg	
BEQVEZ	fidanacogene elaparvovec-dzkt	IV - INTRAVENOUS	J1414	Injection, fidanacogene elaparvovec-dzkt, per therapeutic dose	
BERINERT	c1 esterase	IV - INTRAVENOUS	J0597	Injection, C1 esterase inhibitor (human), Berinert, 10 units	
BESPONSA	inotuzumab ozogamicin	IV - INTRAVENOUS	J9229	Injection, inotuzumab ozogamicin, 0.1 mg	
BESREMI	ropeginterferon alfa-2b-njft	SC - SUBCUTANEOUS	J9999/C9399	Not otherwise classified, antineoplastic drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
BETASERON	interferon beta-1b	SC - SUBCUTANEOUS	J1830	the direct supervision of a physician, not for use when drug is self-administered	
BILDYOS	denosumab-nxxp	SC - SUBCUTANEOUS	Q5162	Injection, denosumab-nxxp (bildyos/bilprevda), biosimilar, 1 mg	
BILPREVDA	denosumab-nxxp	SC - SUBCUTANEOUS	Q5162	Injection, denosumab-nxxp (bildyos/bilprevda), biosimilar, 1 mg	
BIMZELX	bimekizumab-bkzx	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
BIVIGAM	immune globulin	IV - INTRAVENOUS	J1556	Injection, immune globulin (Bivigam), 500 mg	
BIZENGRI	zenocutuzumab-zbco	IV - INTRAVENOUS	J9382	Injection, zenocutuzumab-zbco, 1 mg	
BKEMV	eculizumab-aeeb	IJ	Q5152	Injection, eculizumab-aeeb (bkemv), biosimilar, 2 mg	Epysqli
BLENREP	belantamab mafodotin-blmf	IV - INTRAVENOUS	J9053	Injection, belantamab mafodotin-blmf, 0.1 mg	
BLINCYTO	blinatumomab	IV - INTRAVENOUS	J9039	Injection, blinatumomab, 1 mcg	
BOMYNTRA	denosumab-bnht	SC - SUBCUTANEOUS	Q5158	Injection, denosumab-bnht (bomyntra/conexxence), biosimilar, 1 mg	Bildyos OR Bilprevda
BONCRESA	denosumab-mobz (boncresa)	SC - SUBCUTANEOUS	Q5171	Injection, denosumab-mobz (boncresa), biosimilar, 1 mg	Bildyos OR Bilprevda

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Trade Name	Generic Name	Route of Administration	HCPCS Procedure Code	HCPCS Procedure Code Description	Preferred Product Information
BONSITY	teriparatide	SC - SUBCUTANEOUS	C9399/J3490	Injection, teriparatide, 10 mcg	
BORTEZOMIB (generic)	bortezomib	IV - INTRAVENOUS	J9041	Injection, bortezomib, 0.1 mg	
BORTEZOMIB (generic)	bortezomib	IV - INTRAVENOUS	J9046	Injection, bortezomib, (dr. reddy's), not therapeutically equivalent to j9041, 0.1 mg	
BORTEZOMIB (generic)	bortezomib	IV - INTRAVENOUS	J9048	Injection, bortezomib (fresenius kabi), not therapeutically equivalent to j9041, 0.1 mg	
BORTEZOMIB (generic)	bortezomib	IV - INTRAVENOUS	J9049	Injection, bortezomib (hospira), not therapeutically equivalent to j9041, 0.1 mg	
BORTEZOMIB (generic)	bortezomib	IV - INTRAVENOUS	J9051	Injection, bortezomib (maia), not therapeutically equivalent to j9041, 0.1 mg	
BORUZU	bortezomib	IJ	J9054	Injection, bortezomib (boruzu), 0.1 mg	
BOSAYA	denosumab-kvqq	SC - SUBCUTANEOUS	Q5161	Injection, denosumab-kyqq (aukelso/bosaya), biosimilar, 1 mg	Bildyos OR Bilprevda
BOTOX	onabotulinumtoxinA	Various	J0585	Injection, onabotulinumtoxinA, 1 unit	
BOTOX COSMETIC	onabotulinumtoxinA	IM	J0585	Injection, onabotulinumtoxinA, 1 unit	
BREYANZI	lisocabtagene maraleucel	IV - INTRAVENOUS	Q2054	Lisocabtagene maraleucel, up to 110 million autologous anti-cd19 car-positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose	
BRINEURA	cerliponase	Intraventricular	J0567	Injection, cerliponase alfa, 1 mg	
BRIUMVI	ublituximab-xiiy	IV - INTRAVENOUS	J2329	Injection, ublituximab-xiiy, 1 mg	
BYNFEZIA	octreotide acetate	SC - SUBCUTANEOUS	J2354	Injection, octreotide, nondepot form for subcutaneous or intravenous injection, 25 mcg	
BYOOVIZ	ranibizumab-nuna	Intravitreal	Q5124	Injection, ranibizumab-nuna, biosimilar, (byooviz), 0.1 mg	
CABAZITAXEL	cabazitaxel	IV - INTRAVENOUS	J9064	Injection, cabazitaxel (sandoz), not therapeutically equivalent to j9043, 1 mg	
CABENUVA	cabotegravir-rilpivirine	IM	J0741	Injection, cabotegravir and rilpivirine, 2mg/3mg	
CABLIVI	caplacizumab-yhdp	IV/Subcut	C9047	Injection, caplacizumab-yhdp, 1 mg	
CAMCEVI	leuprolide	SC - SUBCUTANEOUS	J1952	Leuprolide injectable, camcevi, 1 mg	
CAMCEVI ETM	leuprolide	SC - SUBCUTANEOUS	J9003	Leuprolide injectable (camcevi etm), 1 mg	
CARVYKTI	ciltacabtagene autoleucel	IV - INTRAVENOUS	Q2056	Ciltacabtagene autoleucel, up to 100 million autologous b-cell maturation antigen (bcma) directed car-positive t cells, including leukapheresis and dose preparation procedures, per therapeutic dose (Code Price is for drug only)	
CASGEVY	exagamglogene autotemcel	IV - INTRAVENOUS	J3392	Injection, exagamglogene autotemcel, per treatment	
CAYSTON	aztreonam	IN	J7699	NOC drugs, inhalation solution administered through DME	
CEREZYME	imiglucerase	IV - INTRAVENOUS	J1786	Injection, imiglucerase, 10 units	
CIMERLI	ranibizumab-eqrn	Intravitreal	Q5128	Injection, ranibizumab-eqrn (cimerli), biosimilar, 0.1 mg	
CIMZIA	certolizumab	SC - SUBCUTANEOUS	J0717	Injection, certolizumab pegol, 1 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	
CINQAIR	reslizumab	IV - INTRAVENOUS	J2786	Injection, reslizumab, 1 mg	Nucala OR Fasenra
CINRYZE	c1 esterase	IV - INTRAVENOUS	J0598	Injection, C1 esterase inhibitor (human), Cinryze, 10 units	
COLUMVI	glofitamab-gxbm	IV - INTRAVENOUS	J9286	Injection, glofitamab-gxbm, 2.5 mg	
CONEXXENCE	denosumab-bnht	SC - SUBCUTANEOUS	Q5158	Injection, denosumab-bnht (bomyntra/conexxence), biosimilar, 1 mg	Bildyos OR Bilprevda
COPAXONE	glatiramer	SC - SUBCUTANEOUS	J1595	Injection, glatiramer acetate, 20 mg	
COSELA	trilaciclib	IV - INTRAVENOUS	J1448	Injection, trilaciclib, 1 mg	
COSENTYX	secukinumab	SC - SUBCUTANEOUS	J3590/C9399	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	TWO of the following: Cimzia, Enbrel, Simlandi, Simponi, Yesintek, Tremfya, Skyrizi, Rinvoq/LQ, or Xeljanz/XR
COSENTYX	secukinumab	IV - INTRAVENOUS	J3247	Injection, secukinumab, intravenous, 1 mg	TWO of the following: Cimzia, Enbrel, Simlandi, Simponi, Yesintek, Tremfya, Skyrizi, Rinvoq/LQ, or Xeljanz/XR
CRYSVITA	burosumab-twza	SC - SUBCUTANEOUS	J0584	Injection, burosumab-twza 1 mg	
CUTAQUIG	immune globulin	SC - SUBCUTANEOUS	J1551	Injection, immune globulin (cutaquig), 100 mg	
CUVITRU	immune globulin	SC - SUBCUTANEOUS	J1555	Injection, immune globulin (Cuvitru), 100 mg	
CYLTEZO	adalimumab-adbm	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	Simlandi
CYRAMZA	ramucirumab	IV - INTRAVENOUS	J9308	Injection, ramucirumab, 5 mg	
CYTOGAM	cytomegalovirus immune globulin	IV - INTRAVENOUS	J0850	Injection, cytomegalovirus immune globulin intravenous (human), per vial	
DANYELZA	naxitamab-gqgk	IV - INTRAVENOUS	J9348	Injection, naxitamab-gqgk, 1 mg	
DARZALEX	daratumumab	IV - INTRAVENOUS	J9145	Injection, daratumumab, 10 mg	
DARZALEX FASPRO	daratumumab-hyaluronidase-fihj	SC - SUBCUTANEOUS	J9144	Injection, daratumumab 10 mg and hyaluronidase-fihj	
DATROWAY	datopotamab deruxtecan-dlnk	IV - INTRAVENOUS	C9174	Injection, datopotamab deruxtecan-dlnk, 1 mg	
DAWNZERA	donidalorsen	SC - SUBCUTANEOUS	C9399/J3490	Unclassified Drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
DAXXIFY	daxibotulinumtoxina-lanm	IM	J0589	Injection, daxibotulinumtoxina-lanm, 1 unit	Botox OR Xeomin
DECNUPAZ	pivekimab sunirine-pvzy	IV - INTRAVENOUS	C9313	Injection, pivekimab sunirine-pvzy, 0.01 mg	
DUPIXENT	dupilumab	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
DUROLANE	sodium hyaluronate	Intra-articular	J7318	Hyaluronan or derivative, Durolane, for intra-articular injection, 1 mg	Euflexxa OR Gel One
DYSPORT	abobotulinumtoxinA	IM	J0586	Injection, abobotulinumtoxinA, 5 units	Botox OR Xeomin
EBGLYSS	lebrikizumab-lbkz	SC - SUBCUTANEOUS	C9399/J3590	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
EGRIFTA	tesamorelin	SC - SUBCUTANEOUS	J3590/C9399	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
EGRIFTA SV	tesamorelin	SC - SUBCUTANEOUS	J3590/C9399	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
ELAHERE	mirvetuximab soravtansine-gynx	IV - INTRAVENOUS	J9063	Injection, mirvetuximab soravtansine-gynx, 1 mg	
ELAPRASE	idursulfase	IV - INTRAVENOUS	J1743	Injection, idursulfase, 1 mg	
ELELYSO	taliglucerase	IV - INTRAVENOUS	J3060	Injection, taliglucerase alfa, 10 units	
ELEVIDYS	delandistrogene moxeparvovec-rokl	IV - INTRAVENOUS	J1413	Injection, delandistrogene moxeparvovec-rokl, per therapeutic dose	
ELFABRIO	pegunigalsidase alfa-iwxj	IV - INTRAVENOUS	J2508	Injection, pegunigalsidase alfa-iwxj, 1 mg	

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ELIGARD	leuprolide	SC - SUBCUTANEOUS	J9217	Leuprolide acetate (for depot suspension), 7.5 mg	Fensolvi OR Triptodur OR Supprelin
ELREXFIO	elranatamab-bcmm	SC - SUBCUTANEOUS	J1323	Injection, elranatamab-bcmm, 1 mg	
ELZONRIS	tagraxofusp-erzs	IV - INTRAVENOUS	J9269	Injection, tagraxofusp-erzs, 10 mcg	
EMGALITY	galcanezumab-gnlm	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
EMPAVELI	pegcetacoplan	Subcut Infusion	J3490/C9399	Unclassified Drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
EMPLICITI	elotuzumab	IV - INTRAVENOUS	J9176	Injection, elotuzumab, 1 mg	
EMRELIS	telisotuzumab vedotin-tllv	IV - INTRAVENOUS	J9326	Injection, telisotuzumab vedotin-tllv, 1 mg	
ENBREL	etanercept	SC - SUBCUTANEOUS	J1438	Injection, etanercept, 25 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	
ENCELTO	revakinagene taroretcel-lwey	Intravitreal	J3403	Revakinagene taroretcel-lwey, per implant	
ENHERTU	fam-trastuzumab deruxtecan-nxki	IV - INTRAVENOUS	J9358	Injection, fam-trastuzumab deruxtecan-nxki, 1 mg	
ENJAYMO	sutimlimab-jome	IV - INTRAVENOUS	J1302	Inj, sutimlimab-jome, 10 mg	
ENOBY	denosumab-qbde	SC - SUBCUTANEOUS	Q5167	Injection, denosumab-qbde (enoby/xtrenbo), biosimilar, 1 mg	Bildyos OR Bilprevda
ENSPRYNG	satralizumab-mwge	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
ENTYVIO	vedolizumab	IV - INTRAVENOUS	J3380	Injection, vedolizumab, 1 mg	
ENTYVIO	vedolizumab	SC - SUBCUTANEOUS	J3590/C9399	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
ENZEEVU	aflibercept-abzv	IJ	Q5149	Injection, aflibercept-abzv (enzeevu), biosimilar, 1 mg	
EPKINLY	epcoritamab-bysp	IV - INTRAVENOUS	J9321	Injection, epcoritamab-bysp, 0.16 mg	
EPOGEN	epoetin alfa	IV/Subcut	J0885 or	Injection, epoetin alfa, (for non-ESRD use), 1000 units or	Aranesp, Procrit OR Retacrit
EPOGEN	epoetin alfa	IV/Subcut	Q4081	Injection, epoetin alfa, 100 units (for ESRD on dialysis)	
EPOPROSTENOL (generic)	epoprostenol	IV - INTRAVENOUS	J1325	Injection, epoprostenol, 0.5 mg	
EPYSQLI	eculizumab-aagh	IJ	Q5151	Injection, eculizumab-aagh (epysqli), biosimilar, 2 mg	
ERBITUX	cetuximab	IV - INTRAVENOUS	J9055	Injection, cetuximab, 10 mg	
EUFLEXXA	sodium hyaluronate	Intra-articular	J7323	Hyaluronan or derivative, Euflexxa, for intra-articular injection, per dose	
EVDI	trabectedin	IV - INTRAVENOUS	C9312	Injection, trabectedin (apotex), not therapeutically equivalent to j9362, 0.01 mg	
EVENITY	romosozumab-aqqg	SC - SUBCUTANEOUS	J3111	Injection, romosozumab-aqqg, 1 mg	
EVKEEZA	evinacumab-dgnb	IV - INTRAVENOUS	J1305	Injection, evinacumab-dgnb, 5 mg	
EXDENSUR	depemokimab-ulaa	SC - SUBCUTANEOUS	J2361	Injection, depemokimab-ulaa, 1 mg	
EXONDYS 51	eteplirsen	IV - INTRAVENOUS	J1428	Injection, eteplirsen, 10 mg	
EXTAVIA	interferon beta-1b	SC - SUBCUTANEOUS	J1830	Injection interferon beta-1b, 0.25 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered	
EYDENZELT		Intravitreal	Q5170	Injection, aflibercept-boav (eydenzelt), biosimilar, 1 mg	
EYLEA	aflibercept	Intravitreal	J0178	Injection, aflibercept, 1 mg	
EYLEA HD	aflibercept hd	Injection	J0177	Injection, aflibercept hd, 1 mg	
FABRAZYME	agalsidase beta	IV - INTRAVENOUS	J0180	Injection, agalsidase beta, 1 mg	
FASENRA	benralizumab	SC - SUBCUTANEOUS	J0517	Injection, benralizumab, 1 mg	
FAVLYXA	fluorouracil	IV - INTRAVENOUS	J9191	Injection, fluorouracil (avyxa), 10 mg	
FENSOLVI	leuprolide acet	SC - SUBCUTANEOUS	J1951	Injection, leuprolide acetate for depot suspension (fensolvi), 0.25 mg	Fensolvi OR Triptodur OR Supprelin
FILKRI	filgrastim-laha	IJ	Q5172	Injection, filgrastim-laha (filkri), biosimilar, 1 microgram	Zarxio
FIRAZYR	icatibant	SC - SUBCUTANEOUS	J1744	Injection, icatibant, 1 mg	
FIRMAGON	degarelix	SC - SUBCUTANEOUS	J9155	Injection, degarelix, 1 mg	
FLEBOGAMMA DIF	immune globulin	IV - INTRAVENOUS	J1572	Injection, immune globulin, (Flebogamma/Flebogamma Dif), intravenous, nonlyophilized (e.g., liquid), 500 mg	
FLOLAN	epoprostenol	IV - INTRAVENOUS	J1325	Injection, epoprostenol, 0.5 mg	
FOLOTYN	pralatrexate	IV - INTRAVENOUS	J9307	Injection, pralatrexate, 1 mg	
FORTEO	teriparatide	SC - SUBCUTANEOUS	J3110	Injection, teriparatide, 10 mcg	
FORZINITY	elamipretide	SC - SUBCUTANEOUS	C9399/J3490	Unclassified drugs or biologicals (This code should only be used for drugs and biologicals that are approved by the FDA on or after January 1, 2004) (Hospital Outpatient Use ONLY	
FULPHILA	pegfilgrastim	SC - SUBCUTANEOUS	Q5108	Injection, pegfilgrastim-jmdb (fulphila), biosimilar, 0.5 mg	
FUROSCIX	furosemide	SC - SUBCUTANEOUS	J1947	Injection, furosemide (furoscix), 1 mg	
FYARRO	sirolimus	IV - INTRAVENOUS	J9331	Injection, sirolimus protein-bound particles, 1 mg	
FYLNETRA	pegfilgrastim-pbbk	SC - SUBCUTANEOUS	Q5130	Injection, pegfilgrastim-pbbk (fylnetra), biosimilar, 0.5 mg	Fulphila OR Udenyca/Udenyca ONBO
GAMASTAN	immune globulin	IM	J1460 or	Injection, gamma globulin, intramuscular, 1 cc or	
GAMASTAN	immune globulin	IM	J1560	Injection, gamma globulin, intramuscular, over 10 cc	
GAMIFANT	emapalumab-lzsg	IV - INTRAVENOUS	J9210	Injection, emapalumab-lzsg, 1 mg	
GAMMAGARD LIQUID	immune globulin	IV - INTRAVENOUS	J1569	Injection, immune globulin, (Gammagard liquid), nonlyophilized, (e.g., liquid), 500 mg	
GAMMAGARD LIQUID/GAMMAGARD LIQUID ERC	immune globulin	IJ	J1569	Injection, immune globulin, (gammagard liquid/gammagard liquid erc), 500 mg	
GAMMAGARD S/D	immune globulin	IV - INTRAVENOUS	J1566	Injection, immune globulin, intravenous, lyophilized (e.g., powder), not otherwise specified, 500 mg	
GAMMAKED	immune globulin	IV - INTRAVENOUS	J1561	Injection, immune globulin, (Gamunex-C/Gammaked), nonlyophilized (e.g., liquid), 500 mg	
GAMMAPLEX	immune globulin	IV - INTRAVENOUS	J1557	Injection, immune globulin, (Gammaplex), intravenous, nonlyophilized (e.g., liquid), 500 mg	
GAMUNEX-C	immune globulin	IV - INTRAVENOUS	J1561	Injection, immune globulin, Gamunex-C/Gammaked), nonlyophilized (e.g., liquid), 500 mg	
GATTEX	teduglutide	SC - SUBCUTANEOUS	J3490/C9399	Unclassified Drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
GAZYVA	obinutuzumab	IV - INTRAVENOUS	J9301	Injection, obinutuzumab, 10 mg	
GEL-ONE	sodium hyaluronate	Intra-articular	J7326	Hyaluronan or derivative, Gel-One, for intra-articular injection, per dose	
GELSYN-3	sodium hyaluronate	Intra-articular	J7328	Hyaluronan or derivative, GELSYN-3, for intra-articular injection, 0.1 mg	Euflexxa OR Gel One

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Effective Date: 11/01/2026

Trade Name	Generic Name	Route of Administration	HCPCS Procedure Code	HCPCS Procedure Code Description	Preferred Product Information
GENGLYCOS	pariglasgene brecaparvovec-opnr	IV - INTRAVENOUS	C9399/J3590	Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)/Unclassified biologics	
GENOTROPIN	somatropin	SC - SUBCUTANEOUS	J2941	Injection, somatropin, 1 mg	
GENVISC 850	sodium hyaluronate	Intra-articular	J7320	Hyaluronan or derivative, GenVisc 850, for intra-articular injection, 1 mg	Euflexxa OR Gel One
GIVLAARI	givosiran	SC - SUBCUTANEOUS	J0223	Injection, givosiran, 0.5 mg	
GLASSIA	alpha-1 proteinase inhibitor	IV - INTRAVENOUS	J0257	Injection, alpha 1 proteinase inhibitor (human), (GLASSIA), 10 mg	
(generic)	glatiramer	SC - SUBCUTANEOUS	J1595	Injection, glatiramer acetate, 20 mg	
GLATOPA	glatiramer	SC - SUBCUTANEOUS	J1595	Injection, glatiramer acetate, 20 mg	
GRAFAPEX	treosulfan	IV - INTRAVENOUS	C9175	Injection, treosulfan, 50 mg	
GRANIX	tbo-filgrastim	SC - SUBCUTANEOUS	J1447	Injection, tbo-filgrastim, 1 mcg	Zarxio
HADLIMA	adalimumab-bwwd	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	Simlandi
HAEGARDA	c1 esterase	SC - SUBCUTANEOUS	J0599	Injection, C1 esterase inhibitor (human), (Haegarda), 10 units	
HALAVEN	eribulin	IV - INTRAVENOUS	J9179	Injection, eribulin mesylate, 0.1 mg	
HEMGENIX	etranacogene dezaparvovec-drlb	IV - INTRAVENOUS	J1411	Injection, etranacogene dezaparvovec-drlb, per therapeutic dose	
HEPCLUDEX	bulevirtide acetate gmod	SC - SUBCUTANEOUS	C9399/J3590	Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)/Unclassified biologics	
HEPZATO	melphalan	IV - INTRAVENOUS	J9248	Injection, melphalan (hepzato), 1 mg	
HERCEPTIN	trastuzumab	IV - INTRAVENOUS	J9355	Injection, trastuzumab, excludes biosimilar, 10 mg	Kanjinti OR Ogivri
HERCEPTIN HYLECTA	oysk	SC - SUBCUTANEOUS	J9356	Injection, trastuzumab, 10 mg and hyaluronidase-oysk	Kanjinti OR Ogivri
HERCESSI	trastuzumab-strf	IJ	Q5146	Injection, trastuzumab-strf (hercessi), biosimilar, 10 mg	Kanjinti OR Ogivri
HERZUMA	trastuzumab-pkrb	IV - INTRAVENOUS	Q5113	Injection, trastuzumab-pkrb, biosimilar, (Herzuma), 10 mg	Kanjinti OR Ogivri
HIZENTRA	immune globulin	SC - SUBCUTANEOUS	J1559	Injection, immune globulin (Hizentra), 100 mg	
HULIO	adalimumab-fkjp	SC - SUBCUTANEOUS	Q5140	Injection, adalimumab-fkjp, biosimilar, 1 mg	Simlandi
HUMATROPE	somatropin	SC - SUBCUTANEOUS	J2941	Injection, somatropin, 1 mg	
HUMIRA	adalimumab	SC - SUBCUTANEOUS	J0139	Injection, adalimumab, 1 mg	Simlandi
HYALGAN	sodium hyaluronate	Intra-articular	J7321	Hyaluronan or derivative, hyalgan, supartz or visco-3, for intra-articular injection, per dose	Euflexxa OR Gel One
HYMOVIS and HYMOVIS ONE	sodium hyaluronate	Intra-articular	J7322	Hyaluronan or derivative, Hymovis, for intra-articular injection, 1 mg	Euflexxa OR Gel One
HYMPAVZI	marstacimab-hncq	SC - SUBCUTANEOUS	J7172	Injection, marstacimab-hncq, 0.5 mg	
HYQVIA	hyaluron immune globulin	SC - SUBCUTANEOUS	J1575	Injection, immune globulin/hyaluronidase, 100 mg immuneglobulin	
HYRIMOZ/ADALIMUMAB-ADAZ	adalimumab-adaz	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	Simlandi
ICATIBANT (generic)	icatibant	SC - SUBCUTANEOUS	J1744	Injection, icatibant, 1 mg	
IDACIO	adalimumab-aacf	SC - SUBCUTANEOUS	Q5144	Injection, adalimumab-aacf (idacio), biosimilar, 1 mg	Simlandi
IDOSE TR	travoprost intracameral implant	IO	J7355	Injection, travoprost, intracameral implant, 1 microgram	
ILARIS	canakinumab	SC - SUBCUTANEOUS	J0638	Injection, canakinumab, 1 mg	
ILUMYA	tildrakizumab-asmn	SC - SUBCUTANEOUS	J3245	Injection, tildrakizumab, 1 mg	
IMAAVY	nipocalimab-aahu	IV - INTRAVENOUS	J9256	Injection, nipocalimab-aahu, 3 mg	
IMDELLTRA	tarlatamab-dlle	IV - INTRAVENOUS	J9026	Injection, tarlatamab-dlle, 1 mg	
IMFINZI	durvalumab	IV - INTRAVENOUS	J9173	Injection, durvalumab, 10 mg	
IMJUDO	tremelimumab-actl	IV - INTRAVENOUS	J9347	Injection, tremelimumab-actl, 1 mg	
IMULDOSA	ustekinumab-srlf	Various	Q5098	Injection, ustekinumab-srlf (imuldosa), biosimilar, 1 mg	Yesintek
INCRELEX	mecasermin	SC - SUBCUTANEOUS	J2170	Injection, mecasermin, 1 mg	
INFLIXIMAB	infliximab	IV - INTRAVENOUS	J1745	Infliximab not biosimil 10mg	Inflectra OR Avsola
INLEXZO	gemcitabine	IS	J9183	Gemcitabine intravesical system, 225 mg	
ISEMBYLD	apitegromab-mstn	IV - INTRAVENOUS	C9399/J3590	Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)/Unclassified biologics	
ISTODAX	romidepsin	IV - INTRAVENOUS	J9319	Injection, romidepsin, lyophilized, 0.1 mg	
ITVISMA	onasemnogene abeparvovec-brve	IT - INTRATHECAL	J3405	Injection, onasemnogene abeparvovec-brve, per treatment	
IVRA	melphalan hcl	IV - INTRAVENOUS	C9399/J9999	Not otherwise classified, antineoplastic drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
IZERVAY	avacincaptad pegol	SC - SUBCUTANEOUS	J2782	Injection, avacincaptad pegol, 0.1 mg	
JEMPERLI	dostarlimab-gxly	IV - INTRAVENOUS	J9272	Injection, dostarlimab-gxly, 100 mg	
JEVTANA	cabazitaxel	IV - INTRAVENOUS	J9043	Injection, cabazitaxel, 1 mg	
JOBEVNE	bevacizumab-nwgd	IV - INTRAVENOUS	Q5160	Injection, bevacizumab-nwgd (jobevne), biosimilar, 10 mg	Mvasi OR Zirabev
JUBBONTI	denosumab-bbdz	Injection	Q5136	Injection, denosumab-bbdz (jubbonti/wyost), biosimilar, 1 mg	Bildyos OR Bilprevda
JUBEREQ	denosumab-desu	SC - SUBCUTANEOUS	Q5166	Injection, denosumab-desu (osvyrti/jubereq), biosimilar, 1 mg	Bildyos OR Bilprevda
KADCYLA	ado-trastuzumab emtansine	IV - INTRAVENOUS	J9354	Injection, ado-trastuzumab emtansine, 1 mg	
KALBITOR	ecallantide	SC - SUBCUTANEOUS	J1290	Injection, ecallantide, 1 mg	
KANJINTI	trastuzumab-anns	IV - INTRAVENOUS	Q5117	Injection, trastuzumab-anns, biosimilar, (Kanjinti), 10 mg	
KANUMA	sebelipase alfa	IV - INTRAVENOUS	J2840	Injection, sebelipase alfa, 1 mg	
KEBILIDI	eladocagene exuparvovec-tneq	Injection	C9399/J3590	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
KESIMPTA	ofatumumab	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
KEVZARA	sarilumab	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
KEYTRUDA	pembrolizumab	IV - INTRAVENOUS	J9271	Injection, pembrolizumab, 1 mg	
KEYTRUDA QLEX	berahyaluronidase alfa-pmph	SC - SUBCUTANEOUS	J9277	Injection, pembrolizumab, 1 mg and berahyaluronidase alfa-pmph	
KHAPZORY	levoleucovorin	IV - INTRAVENOUS	J0642	Injection, levoleucovorin (Khapzory), 0.5 mg	
KIMMTRAK	tebentafusp-tdbn	IV - INTRAVENOUS	J9274	Inj, tebentafusp-tebn, 1 mcg	
KINERET	anakinra	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
KISUNLA	donanemab-azbt	IV - INTRAVENOUS	J0175	Injection, donanemab-azbt, 2 mg	
KORSUVA	difelikefalin	IV - INTRAVENOUS	J0879	Injection, difelikefalin, 0.1 microgram, (for esrd on dialysis)	
KRESLADI	marnetegragene autotemcel	IV - INTRAVENOUS	C9399/J3590	Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)/Unclassified biologics	
KRYSTEXXA	pegloticase	IV - INTRAVENOUS	J2507	Injection, pegloticase, 1 mg	
KYMRIAH	tisagenlecleucel	IV - INTRAVENOUS	Q2042	preparation procedures, per therapeutic dose	

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Trade Name	Generic Name	Route of Administration	HCPCS Procedure Code	HCPCS Procedure Code Description	Preferred Product Information
KYPROLIS	carfilzomib	IV - INTRAVENOUS	J9047	Injection, carfilzomib, 1 mg	
KYXATA	carboplatin	IV - INTRAVENOUS	J9278	Injection, carboplatin (avyxa), 1 mg	
LAMZEDE	velmanase alfa-tycv	IV - INTRAVENOUS	J0217	Injection, velmanase alfa-tycv, 1 mg	
LANREOTIDE (generic)	lanreotide	SC - SUBCUTANEOUS	J1932	Injection, lanreotide, 1 mg	
LANTIDRA	donislecel-jujn	IV - INTRAVENOUS	C9399/J3590	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
Lasix® ONYU	furosemide	SC - SUBCUTANEOUS	J1946	Injection, furosemide (lasix onyu), 1 mg	
LEMTRADA	alemtuzumab	IV - INTRAVENOUS	J0202	Injection, alemtuzumab, 1 mg	
LENMELDY	atidarsagene autotemcel	IV - INTRAVENOUS	J3391	Injection, atidarsagene autotemcel, per treatment	
LEQEMBI	lecanemab-irmb	IV - INTRAVENOUS	J0174	Lecanemab-irmb, for intravenous injection, 1 mg	
LEQVIO	inclisiran	SC - SUBCUTANEOUS	J1306	Injection, inclisiran, 1 mg	
LEROCHOL	lerodalcibep-liga	IV - INTRAVENOUS	C9399/J3590	approved by the FDA on or after January 1, 2004) (Hospital Outpatient Use ONLY)/Unclassified	
LEUKINE	sargramostim	IV/Subcut	J2820	Injection, sargramostim (GM-CSF), 50 mcg	Zarxio
LEUPROLIDE (generic)	leuprolide	SC - SUBCUTANEOUS	J9218	Leuprolide acetate, per 1 mg	Fensolvi OR Triptodur OR Supprelin
LIBTAYO	cemiplimab-rwlc	IV - INTRAVENOUS	J9119	Injection, cemiplimab-rwlc, 1 mg	
LOARGYS	pegzilarginase-nbln	IJ	J1818	Injection, pegzilarginase-nbln, 0.05 mg	
LOQTORZI	toripalimab-tpzi	IV - INTRAVENOUS	J3263	Injection, toripalimab-tpzi, 1 mg	
LUCENTIS	ranibizumab	Intravitreal	J2778	Injection, ranibizumab, 0.1 mg	
LUMIZYME	alglucosidase alfa	IV - INTRAVENOUS	J0221	Injection, alglucosidase alfa, (Lumizyme), 10 mg	
LUMOXITI	moxetumomab pasudotox-tdfk	IV - INTRAVENOUS	J9313	Injection, moxetumomab pasudotox-tdfk, 0.01 mg	
LUMVOA	veligrotug-vvze	IV - INTRAVENOUS	C9399/J3590	Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)/Unclassified biologics	
LUNSUMIO	mosunetuzumab	IV - INTRAVENOUS	J9350	Use ONLY)	
LUPRON DEPOT	leuprolide	IM	J1950	Injection, leuprolide acetate (for depot suspension), per 3.75 mg	Fensolvi OR Triptodur OR Supprelin
LUPRON DEPOT	leuprolide	IM	J9217	Leuprolide acetate (for depot suspension), 7.5 mg	Fensolvi OR Triptodur OR Supprelin
LUPRON DEPOT-PED	leuprolide	IM	J1950	Injection, leuprolide acetate (for depot suspension), per 3.75 mg	Fensolvi OR Triptodur OR Supprelin
LUTATHERA	lutetium Lu 177 dotatate	IV - INTRAVENOUS	A9513	Lutetium Lu 177, dotatate, therapeutic, 1 mCi	
LUTRATE DEPO (Avyxa)	leuprolide acetate	IM	J1954	Injection, leuprolide acetate for depot suspension (lutrate depot), 7.5 mg	Fensolvi OR Triptodur OR Supprelin
LUXTURNA	voretigene neparvovec-rzyl	Intraocular	J3398	Injection, voretigene neparvovec-rzyl, 1 billion vector genomes	
LYFGENIA	lovotibeglogene autotemcel	IV - INTRAVENOUS	J3394	Injection, lovotibeglogene autotemcel, per treatment	
LYMPHIR	denileukin diftitox-cxdl	IJ	J9161	Injection, denileukin diftitox-cxdl, 1 mcg	
LYNOZYFIC	linvoseltamab-gcpt	IV - INTRAVENOUS	J9601	Injection, linvoseltamab-gcpt, 1 mg	
MARGENZA	margetuximab-cmkb	IV - INTRAVENOUS	J9353	Injection, margetuximab-cmkb, 5 mg	
MELPHALAN	melphalan	IV - INTRAVENOUS	J9249	Injection, melphalan (apotex), 1 mg	
MEPSEVII	vestronidase alfa-vjbk	IV - INTRAVENOUS	J3397	Injection, vestronidase alfa-vjbk, 1 mg	
MIMRYLO	rusfertide acetate	SC - SUBCUTANEOUS	C9399/J3490	Unclassified drugs or biologicals (Hospital Outpatient Use ONLY), Unclassified drugs	
MIRCERA	epoetin	IV/Subcut	J0887	Injection, epoetin beta, 1 mcg, (for ESRD on dialysis)	
MIRCERA	epoetin	IV/Subcut	J0888	Injection, epoetin beta, 1 mcg, (for non-ESRD use)	Aranesp, Procrit OR Retacrit
MITOXANTRONE (generic)	mitoxantrone	IV - INTRAVENOUS	J9293	Injection, mitoxantrone hydrochloride, per 5 mg	
MONJUVI	tafasitamab-cxix	IV - INTRAVENOUS	J9349	Injection, tafasitamab-cxix, 2 mg	
MONOVISC	hyaluronan	Intra-articular	J7327	Hyaluronan or derivative, Monovisc, for intra-articular injection, per dose	Euflexxa OR Gel One
MVASI	bevacizumab-awwb	IV - INTRAVENOUS	Q5107	Injection, bevacizumab-awwb, biosimilar, (mvasi), 10 mg	
MYALEPT	metreleptin	SC - SUBCUTANEOUS	J3590/C9399	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
MYLOTARG	gemtuzumab	IV - INTRAVENOUS	J9203	Injection, gemtuzumab ozogamicin, 0.1 mg	
MYOBLOC	rimabotulinumtoxinB	IM	J0587	Injection, rimabotulinumtoxinB, 100 units	Botox OR Xeomin
NAGLAZYME	galsulfase	IV - INTRAVENOUS	J1458	Injection, galsulfase, 1 mg	
NATPARA	parathyroid hormone	SC - SUBCUTANEOUS	J3590/C9399	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
NEMLUVIO	nemolizumab-ilto	SC - SUBCUTANEOUS	C9399/J3590	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
NEULASTA	pegfilgrastim	SC - SUBCUTANEOUS	J2506	Injection, pegfilgrastim, excludes biosimilar, 0.5 mg	Fulphila OR Udenyca/Udenyca ONBO
NEUPOGEN	filgrastim	IV/Subcut	J1442	Injection, filgrastim (G-CSF), excludes biosimilars, 1 mcg	Zarxio
NEXVIAZYME	avalglucosidase alfa-ngpt	IV - INTRAVENOUS	J0219	Injection, avalglucosidase alfa-ngpt, 4 mg	
NGENLA	somatrogon-ghla	SC - SUBCUTANEOUS	C9399/J3590	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
NIKTIMVO	axatilimab-csfr	IV - INTRAVENOUS	J9038	Injection, axatilimab-csfr, 0.1 mg	
NIVESTYM	filgrastim-aafi soln	IV/Subcut	Q5110	Injection, filgrastim-aafi, biosimilar, (Nivestym), 1 mcg	Zarxio
NORDITROPIN FLEXPRO	somatropin	SC - SUBCUTANEOUS	J2941	Injection, somatropin, 1 mg	
NPLATE	romiplostim	SC - SUBCUTANEOUS	J2802	Injection, romiplostim, 1 microgram	
NUCALA	mepolizumab	SC - SUBCUTANEOUS	J2182	Injection, mepolizumab, 1 mg	
NUFYMCO	ranibizumab-leyk	Intravitreal	Q5168	Injection, ranibizumab-leyk (nufymco), biosimilar, 0.1 mg	
NULIBRY	fosdenopterin	IV - INTRAVENOUS	J1809	Injection, fosdenopterin, 0.1 mg	
NUTROPIN AQ	somatropin	SC - SUBCUTANEOUS	J2941	Injection, somatropin, 1 mg	
NYPOZI	filgrastim-txid	IJ	Q5148	Injection, filgrastim-txid (nypozi), biosimilar, 1 microgram	Zarxio
NYVEPRIA	pegfilgrastim-apgf soln	SC - SUBCUTANEOUS	Q5122	Injection, pegfilgrastim-apgf (nyvepria), biosimilar, 0.5 mg	Fulphila OR Udenyca/Udenyca ONBO
OCREVUS	ocrelizumab	IV - INTRAVENOUS	J2350	Injection, ocrelizumab, 1 mg	
OCREVUS ZUNOVO	ocrelizumab-hyaluronidase-ocsq	SC - SUBCUTANEOUS	J2351	Injection, ocrelizumab, 1 mg and hyaluronidase-ocsq	
OCTAGAM	immune globulin	IV - INTRAVENOUS	J1568	Injection, immune globulin, (Octagam), intravenous, nonlyophilized (e.g., liquid), 500 mg	
OCTREOTIDE (generic)	octreotide	SC - SUBCUTANEOUS	J2354	Injection, octreotide, nondepot form for subcutaneous or intravenous injection, 25 mcg	
OGIVRI	trastuzumab-dkst	IV - INTRAVENOUS	Q5114	Injection, Trastuzumab-dkst, biosimilar, (Ogivri), 10 mg	
OHTUVAYRE	ensifentrine	IN	J7601	through dme, unit dose form, 3 mg	

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OMISIRGE	omidubicel-onlv	IV - INTRAVENOUS	J3406	Injection, omidubicel-onlv, per therapeutic dose	
OMLYCLO	omalizumab-igec	SC - SUBCUTANEOUS	Q5154	Injection, omalizumab-igec (omlyclo), biosimilar, 5 mg	
OMNITROPE	somatropin	SC - SUBCUTANEOUS	J2941	Injection, somatropin, 1 mg	
OMVOH	mirikizumab-mrkz	IV/Subcut	J2267	Injection, mirikizumab-mrkz, 1 mg	
ONAPGO	apomorphine hcl	SC - SUBCUTANEOUS	C9399/J3490	Unclassified Drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
ONPATTRO	patisiran sodium	IV - INTRAVENOUS	J0222	Injection, patisiran, 0.1 mg	
ONTRUZANT	trastuzumab-dttb	IV - INTRAVENOUS	Q5112	Injection, trastuzumab-dttb, biosimilar, (Ontruzant), 10 mg	Kanjinti OR Ogivri
OPDIVO	nivolumab	IV - INTRAVENOUS	J9299	Injection, nivolumab, 1 mg	
OPDIVO QVANTIG	nivolumab-hyaluronidase-nvhy	SC - SUBCUTANEOUS	J9289	Injection, nivolumab, 2 mg and hyaluronidase-nvhy	
OPDUALAG	nivolumab/relatlimab-rmbw	IV - INTRAVENOUS	J9298	Injection, nivolumab and relatlimab-rmbw, 3 mg/1 mg	
OPFOLDA	miglustat	Oral	J1202	Miglustat, oral, 65 mg	
OPUVIZ	aflibercept-yszy	Various	Q5153	Injection, aflibercept-yszy (opuviz), biosimilar, 1 mg	
ORENCIA	abatacept	IV/Subcut	J0129	direct supervision of a physician, not for use when drug is self-administered)	
ORTHOVISC	sodium hyaluronate	Intra-articular	J7324	Hyaluronan or derivative, Orthovisc, for intra-articular injection, per dose	Euflexxa OR Gel One
OSENVELT	denosumab-bmwo	SC - SUBCUTANEOUS	C9399/J3590	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	Bildyos OR Bilprevda
OSVYRTI	denosumab-desu	SC - SUBCUTANEOUS	Q5166	Injection, denosumab-desu (osvyrti/jubereq), biosimilar, 1 mg	Bildyos OR Bilprevda
OTARMENI	lunsotogene parvec-chwa	Injection	C9399/J3590	Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)/Unclassified biologics	
OTULFI	ustekinumab-aauz	IV/Subcut	Q9999	Injection, ustekinumab-aauz (otulfi), biosimilar, 1 mg	Yesintek
OXLUMO	lumasiran sodium	SC - SUBCUTANEOUS	J0224	Injection, lumasiran, 0.5 mg	
OZILTUS	denosumab-mobz	SC - SUBCUTANEOUS	Q5165	Injection, denosumab-mobz (oziltus), biosimilar, 1 mg	Bildyos OR Bilprevda
PADCEV	enfortumab vedotin-ejfv	IV - INTRAVENOUS	J9177	Injection, enfortumab vedotin-ejfv, 0.25 mg	
PALYNZIQ	pegvaliase-pqpz	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
PANZYGA	immune globulin (human)-ifas	IV - INTRAVENOUS	J1576	Intravenous, non-lyophilized (e.g., liquid), 500 mg	
PAPZIMEOS	zopapogene imadenovec-drba	SC - SUBCUTANEOUS	J3404	Injection, zopapogene imadenovec-drba suspension, per therapeutic dose	
PASATRU	garetosmab-grts	IV - INTRAVENOUS	C9399/J3590	Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)/Unclassified biologics	
PAVBLU	aflibercept-ayyh intravitreal	Intravitreal	Q5147	Injection, aflibercept-ayyh (pavblu), biosimilar, 1 mg	
PEMRYDI RTU	pemetrexed	Injection	J9324	Injection, pemetrexed (pemrydi rtu), 10 mg	
PERJETA	pertuzumab	IV - INTRAVENOUS	J9306	Injection, pertuzumab, 1 mg	
PHESGO	pertuzumab-trastuz-hyaluron-zzxf	SC - SUBCUTANEOUS	J9316	Injection, pertuzumab, trastuzumab, and hyaluronidase-zzxf, per 10 mg	
PIASKY	crovalimab-akkz	Injection	J1307	Injection, crovalimab-akkz, 10 mg	
PLEGRIDY	peginterferon beta	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
PLUVICTO	tetraxetan, therapeutic, 1 millicurie	IV - INTRAVENOUS	A9607	Lutetium lu 177 vipivotide tetraxetan, therapeutic, 1 millicurie	
POLIVY	polatuzumab vedotin-piiq	IV - INTRAVENOUS	J9309	Injection, polatuzumab vedotin-piiq, 1 mg	
POMBILITI	cipaglucosidase alfa-atga	IV - INTRAVENOUS	J1203	Injection, cipaglucosidase alfa-atga, 5 mg	
PONLIMSI	denosumab-adet	SC - SUBCUTANEOUS	Q5173	Injection, denosumab-adet (ponlimsi), biosimilar, 1 mg	
PORTRAZZA	necitumumab	IV - INTRAVENOUS	J9295	Injection, necitumumab, 1 mg	
POTELIGEO	mogamulizumab-kpkc	IV - INTRAVENOUS	J9204	Injection, mogamulizumab-kpkc, 1 mg	
PRIVIGEN	immune globulin	IV - INTRAVENOUS	J1459	Injection, immune globulin (Privigen), intravenous, nonlyophilized (e.g., liquid), 500 mg	
PROCRIT	epoetin alfa	IV/Subcut	J0885 or	Injection, epoetin alfa, (for non-ESRD use), 1000 units or	
PROCRIT	epoetin alfa	IV/Subcut	Q4081	Injection, epoetin alfa, 100 units (for ESRD on dialysis)	
PROLASTIN-C	alpha-1 proteinase inhibitor	IV - INTRAVENOUS	J0256	Injection, alpha 1-proteinase inhibitor (human), not otherwise specified, 10 mg	
PROLIA	denosumab	SC - SUBCUTANEOUS	J0897	Injection, denosumab, 1 mg	Bildyos OR Bilprevda
PROVENGE	sipuleucel-T	IV - INTRAVENOUS	Q2043	leukapheresis and all other preparatory procedures, per infusion	
PULMOZYME	dornase alfa	IN	J7639	through DME, unit dose form, per mg	
GEL	corticotropin	IM/Subcut	J0802	Injection, corticotropin (ani), up to 40 units	Acthar Gel
PYZCHIVA	ustekinumab-ttwe	SC - SUBCUTANEOUS	Q9996	Injection, ustekinumab-ttwe (pyzchiva), subcutaneous, 1 mg	Yesintek
PYZCHIVA	ustekinumab-ttwe	IV - INTRAVENOUS	Q9997	Injection, ustekinumab-ttwe (pyzchiva), intravenous, 1 mg	Yesintek
QALSODY	tofersen	IT - INTRATHECAL	J1304	Injection, tofersen, 1 mg	
QFITLIA	fitusiran sodium	SC - SUBCUTANEOUS	J7174	Injection, fitusiran, 0.04 mg	
QIVIGY	immune globulin	IV - INTRAVENOUS	J1577	Injection, immune globulin (qivigy), 100 mg	
RADICAVA	edaravone	IV - INTRAVENOUS	J1301	Injection, edaravone, 1 mg	
REBIF	interferon beta-1a	SC - SUBCUTANEOUS	Q3028	Injection, interferon beta-1a, 1 mcg for subcutaneous use	
REBLOZYL	luspatercept-aamt	SC - SUBCUTANEOUS	J0896	Injection, luspatercept-aamt, 0.25 mg	
REBYOTA	fecal microbiota, live	Rectal	J1440	Fecal microbiota, live - jslm, 1 ml	
REDEMPLO	plozasiran sodium	SC - SUBCUTANEOUS	C9399/J3590	Use ONLY)	
RELEUKO	filgrastim-ayow	IV/Subcut	Q5125	Injection, filgrastim-ayow, biosimilar, (releuko), 1 microgram	Zarxio
REMICADE	infliximab	IV - INTRAVENOUS	J1745	Infliximab not biosimil 10mg	Inflectra OR Avsola
REMODULIN	treprostinil	Cont SC/IV	J3285	Injection, treprostinil, 1 mg	Generic treprostinil
RENFLEXIS	infliximab-abda	IV - INTRAVENOUS	Q5104	Injection, infliximab-abda, biosimilar, (Renflexis), 10 mg	Inflectra OR Avsola
RETACRIT	epoetin alfa-epbx	IV/Subcut	Q5106 or	Injection, epoetin alfa-epbx, biosimilar, (Retacrit) (for non-ESRD use), 1000 units or	
RETACRIT	epoetin alfa-epbx	IV/Subcut	Q5105	Injection, epoetin alfa-epbx, biosimilar, (Retacrit) (for ESRD on dialysis), 100 units	
REVATIO	sildenafil	IV - INTRAVENOUS	J3490	Unclassified drugs	
REVCOVI	elapegademase-lvlr	IM	J3590/C9399	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
REVTORPYK	gedatolisib	INTRAVENOUS	C9399/J9999	Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)/Not otherwise classified, antineoplastic drugs	
REZZAYO	rezafungin	IV - INTRAVENOUS	J0349	Injection, rezafungin, 1 mg	

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VERMONT BLUE Rx

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Effective Date: 11/01/2026

Trade Name	Generic Name	Route of Administration	HCPCS Procedure Code	HCPCS Procedure Code Description	Preferred Product Information
RIABNI	rituximab-arrx	IV - INTRAVENOUS	Q5123	Injection, rituximab-arrx, biosimilar, (riabni), 10 mg	
RITUXAN	rituximab	IV - INTRAVENOUS	J9312	Injection, rituximab, 10 mg	Riabni OR Truxima
RITUXAN HYCELA	rituximab-hyaluronidase	SC - SUBCUTANEOUS	J9311	Injection, rituximab 10 mg and hyaluronidase	Riabni OR Truxima
RIVFLOZA	nedosiran sodium	SC - SUBCUTANEOUS	J3490/C9399	Unclassified Drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
ROLVEDON	eflapegrastim-xnst	SC - SUBCUTANEOUS	J1449	Injection, eflapegrastim-xnst, 0.1 mg	
ROMIDEPSIN	romidepsin	IV - INTRAVENOUS	J9318	Injection, romidepsin, non-lyophilized, 0.1 mg	
RUCONEST	c1 esterase	IV - INTRAVENOUS	J0596	Injection, C1 esterase inhibitor (recombinant), Ruconest, 10 units	
RUXIENCE	rituximab-pvvr	IV - INTRAVENOUS	Q5119	Injection, rituximab-pvvr, biosimilar, (RUXIENCE), 10 mg	Riabni or Truxima
RYBREVANT	amivantamab-vmjw	IV - INTRAVENOUS	J9061	Injection, amivantamab-vmjw, 10 mg	
RYBREVANT FASPRO	amivantamab- hyaluronidase-lpuj	IV - INTRAVENOUS	J9062	Injection, amivantamab 5 mg and hyaluronidase-lpuj	
RYLAZE	asparaginase erwinia chrys	IM	J9021	Injection, asparaginase, recombinant, (rylaze), 0.1 mg	
RYONCIL	remestemcel-l-rknd	IV - INTRAVENOUS	J3402	Injection, remestemcel-l-rknd, per therapeutic dose	
RYPLAZIM	plasminogen, human-tvmh	IV - INTRAVENOUS	J2998	Injection, plasminogen, human-tvmh, 1 mg	
RYSTIGGO	rozanolixizumab-noli	SC - SUBCUTANEOUS	J9333	Injection, rozanolixizumab-noli, 1 mg	
RYTELO	imetelstat sodium	IV - INTRAVENOUS	J0870	Injection, imetelstat, 1 mg	
RYZNEUTA	efbemalenograstim alfa-vuxw	SC - SUBCUTANEOUS	J9361	Injection, efbemalenograstim alfa-vuxw, 0.5 mg	
SAIZEN	somatropin	SC - SUBCUTANEOUS	J2941	Injection, somatropin, 1 mg	
SAJAZIR	icatibant	SC - SUBCUTANEOUS	J1744	Injection, icatibant, 1 mg	
SANDOSTATIN	octreotide	SC - SUBCUTANEOUS	J2354	Injection, octreotide, nondepot form for subcutaneous or intravenous injection, 25 mcg	
SANDOSTATIN LAR	octreotide	IM	J2353	Injection, octreotide, depot form for intramuscular injection, 1 mg	
SAPHNELO	anifrolumab-fnia iv soln	IV - INTRAVENOUS	J0491	Injection, anifrolumab-fnia, 1 mg	
SAPHNELO	anifrolumb-fnia	SC - SUBCUTANEOUS	J3590/C9399	Injection, anifrolumab-fnia, 1 mg	
SARCLISA	isatuximab-irfc iv	IV - INTRAVENOUS	J9227	Injection, isatuximab-irfc, 10 mg	
SARCLISA	isatuximab-irfc	SC - SUBCUTANEOUS	C9399/J9999	antineoplastic drugs	
SCENESSE	afamelanotide acetate implant	SC Implant	J7352	Afamelanotide implant, 1 mg	
SC/USTEKINUMAB-AEKN	ustekinumab-aekn	strength	Q9998	Injection, ustekinumab-aekn (selarsdi), biosimilar, 1 mg	Yesintek
SEROSTIM	somatropin	SC - SUBCUTANEOUS	J2941	Injection, somatropin, 1 mg	
SIGNIFOR	pasireotide	SC - SUBCUTANEOUS	J3490/C9399	Unclassified Drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
SIGNIFOR LAR	pasireotide	IM	J2502	Injection, pasireotide long acting, 1 mg	
SILDENAFIL (generic)	sildenafil	IV - INTRAVENOUS	J3490	Unclassified drugs	
SILIQ	brodalumab	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
SIMLANDI	adalimumab-ryvk	SC - SUBCUTANEOUS	Q5142	Injection, adalimumab-ryvk biosimilar, 1 mg	
SIMPONI	golimumab	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
SIMPONI ARIA	golimumab	IV - INTRAVENOUS	J1602	Injection, golimumab, 1 mg, for intravenous use	
SKYRIZI IV	risankizumab-rzaa	IV - INTRAVENOUS	J2327	Injection, risankizumab-rzaa, intravenous, 1 mg	
SKYRIZI SC	risankizumab-rzaa	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
SKYSONA	elivaldogene autotemcel	IV - INTRAVENOUS	J3387	Injection, elivaldogene autotemcel, per treatment	
SKYTROFA	lonapegsomatropin-tcgd	SC - SUBCUTANEOUS	J3590/C9399	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
SOGROYA	somapacitan-beco	SC - SUBCUTANEOUS	J3590/C9399	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
SOLIRIS	eculizumab	IV - INTRAVENOUS	J1299	Injection, eculizumab, 2 mg	Epysqli
SOMATULINE DEPOT	lanreotide	SC - SUBCUTANEOUS	J1930	Injection, lanreotide, 1 mg	
SOMAVERT	pegvisomant	SC - SUBCUTANEOUS	J3590/C9399	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
SPEVIGO	spesolimab-sbzo	IV - INTRAVENOUS	J1747	Injection, spesolimab-sbzo, 1 mg	
SPINRAZA	nusinersen	Intrathecal	J2326	Injection, nusinersen, 0.1 mg	
SPRAVATO	esketamine	Nasal	J0013	Esketamine, nasal spray, 1 mg	
STARJEMZA	ustekinumab-hmny	SC - SUBCUTANEOUS	Q5164	Injection, ustekinumab-hmny (starjemza), biosimilar, 1 mg	Yesintek
STARJEMZA	ustekinumab-hmny	IV - INTRAVENOUS	Q5164	Injection, ustekinumab-hmny (starjemza), biosimilar, 1 mg	Yesintek
STELARA IV/USTEKINUMAB IV	ustekinumab	IV - INTRAVENOUS	J3358	Ustekinumab, for intravenous injection, 1 mg	Yesintek
SC	ustekinumab	SC - SUBCUTANEOUS	J3357	Ustekinumab, for subcutaneous injection, 1 mg	Yesintek
STEQEYMA	ustekinumab-stba	SC - SUBCUTANEOUS	Q5099	Injection, ustekinumab-stba (steqeyma), biosimilar, 1 mg	Yesintek
STIMUFEND	pegfilgrastim-fpgk	SC - SUBCUTANEOUS	Q5127	Injection, pegfilgrastim-fpgk (stimufend), biosimilar, 0.5 mg	Fulphila OR Udenyca/Udenyca ONBO
STOBOCLO	denosumab-bmwo	SC - SUBCUTANEOUS	Q5157	(stoboclo/osenvelt), biosimilar, 1 mg	Bildyos OR Bilprevda
STRENSIQ	asfotase alfa	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
SUPARTZ FX	sodium hyaluronate	Intra-articular	J7321	Hyaluronan or derivative, hyalgan, supartz or visco-3, for intra-articular injection, per dose	Euflexxa OR Gel One
SUPPRELIN LA	histrelin acetate	SC - SUBCUTANEOUS	J9226	Histrelin implant (Supprelin LA), 50 mg	
SUSVIMO	ranibizumab	Intravitreal Implant	J2779	Injection, ranibizumab, via sustained release intravitreal implant (susvimo), 0.1 mg	
SYFOVRE	pegcetacoplan	Intravitreal	J2781	Injection, pegcetacoplan, intravitreal, 1 mg	
SYLVANT	siltuximab	IV - INTRAVENOUS	J2860	Injection, siltuximab, 10 mg	
SYNAGIS	palivizumab	IM	90378	Respiratory syncytial virus, monoclonal antibody, recombinant, for intramuscular use, 50 mg, each	
SYNDROS	dronabinol	Oral	Q0155	therapeutic substitute for an iv anti-emetic at the time of chemotherapy treatment, not to exceed a 48	
SYNOJOYNT	sodium hyaluronate	Intra-articular	J7331	Hyaluronan or derivative, synojoynt, for intra-articular injection, 1 mg	Euflexxa OR Gel One
SYNVISC	sodium hyaluronate	Intra-articular	J7325	Hyaluronan or derivative, Synvisc or Synvisc-One, for intra-articular injection, 1 mg	Euflexxa OR Gel One

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Effective Date: 11/01/2026

Trade Name	Generic Name	Route of Administration	HCPCS Procedure Code	HCPCS Procedure Code Description	Preferred Product Information
SYNVISC-ONE	sodium hyaluronate	Intra-articular	J7325	Hyaluronan or derivative, Synvisc or Synvisc-One, for intra-articular injection, 1 mg	Euflexxa OR Gel One
TAKHZYRO	lanadelumab-flyo	SC - SUBCUTANEOUS	J0593	direct supervision of a physician, not for use when drug is self-administered)	
TALTZ	ixekizumab	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
TALVEY	talquetamab-tgvs	SC - SUBCUTANEOUS	J3055	Injection, talquetamab-tgvs, 0.25 mg	
TECARTUS	brexucabtagene autoleucel	IV - INTRAVENOUS	Q2053	including leukapheresis and dose preparation procedures, per therapeutic dose	
TECELRA	afamitresgene autoleucel	IV - INTRAVENOUS	Q2057	dose	
TECENTRIQ	atezolizumab	IV - INTRAVENOUS	J9022	Injection, atezolizumab, 10 mg	
TECENTRIQ HYBREZA	atezolizumab-hyaluronidase-tqjs	SC - SUBCUTANEOUS	J9024	Injection, atezolizumab, 5 mg and hyaluronidase-tqjs	
TECVAYLI	teclistamab-cqyv	SC - SUBCUTANEOUS	J9380	Injection, teclistamab-cqyv, 0.5 mg	
TEGSEDI	inotersen	SC - SUBCUTANEOUS	J3590/C9399	Unclassified drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	Amvuttra OR Onpattro
TEPEZZA	teprotumumab-trbw	IV - INTRAVENOUS	J3241	Injection, teprotumumab-trbw, 10 mg	
TERIPARATIDE (Brand)	teriparatide (recombinant)	SC - SUBCUTANEOUS	J3110	Injection, teriparatide, 10 mcg	
TEVIMBRA	tislelizumab-jsgr	IV - INTRAVENOUS	J9329	Injection, tislelizumab-jsgr, 1mg	
TEZSPIRE	tezepelumab-ekko	SC - SUBCUTANEOUS	J2356	Injection, tezepelumab-ekko, 1 mg	
TIVDAK	tisotumab vedotin-tftv	IV - INTRAVENOUS	J9273	Injection, tisotumab vedotin-tftv, 1 mg	
TOFIDENCE	tocilizumab-bavi	IV - INTRAVENOUS	Q5133	Injection, tocilizumab-bavi (tofidence), biosimilar, 1 mg	Tyenne
TRAZIMERA	trastuzumab-qyyp	IV - INTRAVENOUS	Q5116	Injection, trastuzumab-qyyp, biosimilar, (Trazimera), 10 mg	Kanjinti OR Ogivri
TREANDA	bendamustine	IV - INTRAVENOUS	J9033	Injection, bendamustine hydrochloride, not otherwise specified, 1 mg	
TREGZI	tregs & hspc & tcons-vldq	IV - INTRAVENOUS	C9399/J3590	Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)/Unclassified biologics	
TRELSTAR	triptorelin	IM	J3315	Injection, triptorelin pamoate, 3.75 mg	
TREMFYA	guselkumab	SC - SUBCUTANEOUS	J1628	Injection, guselkumab, 1 mg	
TREMFYA	guselkumab	IV - INTRAVENOUS	J1628	Injection, guselkumab, 1 mg	
TREPROSTINIL (generic)	treprostinil	Cont SC/IV	J3285	Injection, treprostinil, 1 mg	
TRILURON	sodium hyaluronate	Intra-articular	J7332	Hyaluronan or derivative, Triluron, for intra-articular injection, 1 mg	Euflexxa OR Gel One
TRIPTODUR	triptorelin	IM	J3316	Injection, triptorelin, extended-release, 3.75 mg	
TRIVISC	sodium hyaluronate	Intra-articular	J7329	Hyaluronan or derivative, Trivisc, for intra-articular injection, 1 mg	Euflexxa OR Gel One
TRODELVY	sacituzumab govitecan-hziy	IV - INTRAVENOUS	J9317	Injection, sacituzumab govitecan-hziy, 2.5 mg	
TRUTAKNA	atacicept-vymj	SC - SUBCUTANEOUS	C9399/J3590	Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)/Unclassified biologics	
TRUXIMA	rituximab-abbs iv soln	IV - INTRAVENOUS	Q5115	Injection, rituximab-abbs, biosimilar, (Truxima), 10 mg	
TRYNGOLZA	olezarsen sod	SC - SUBCUTANEOUS	C9399/J3590	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
TUDRIQEV	vusolimogene oderparepvec-wtpg	LS - INTRALESIONAL	C9399/J9999	Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)/Not otherwise classified, antineoplastic drugs	
TYENNE	tocilizumab-aazg	IV - INTRAVENOUS	Q5135	Injection, tocilizumab-aazg (tyenne), biosimilar, 1 mg	
TYENNE	tocilizumab-aazg	SC - SUBCUTANEOUS	Q5135	Injection, tocilizumab-aazg (tyenne), biosimilar, 1 mg	
TYMLOS	abaloparatide	SC - SUBCUTANEOUS	J3490/C9399	Unclassified drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
TYRUKO	natalizumab-sztn	IV - INTRAVENOUS	Q5134	Injection, natalizumab-sztn (tyruko), biosimilar, 1 mg	
TYSABRI	natalizumab	IV - INTRAVENOUS	J2323	Injection, natalizumab, 1 mg	
TYVASO	treprostinil	IN	J7686	Treprostinil, inhalation solution, FDA-approved final product, noncompounded, administered through DME, unit dose form, 1.74 mg	
TYVASO DPI	treprostinil	IN	J8499	Prescription drug, oral, non-chemotherapeutic, Not Otherwise Specified	
TZIELD	teplizumab-mzwv	IV - INTRAVENOUS	J9381	Injection, teplizumab-mzwv, 5 mcg	
UDENYCA	pegfilgrastim-cbqv	SC - SUBCUTANEOUS	Q5111	Injection, pegfilgrastim-cbqv (udenyca), biosimilar, 0.5 mg	
UDENYCA ONBODY	pegfilgrastim-cbqv	SC - SUBCUTANEOUS	Q5111	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
ULTOMIRIS	ravulizumab-cwvz	IV - INTRAVENOUS	J1303	Injection, ravulizumab-cwvz, 10 mg	
UNITUXIN	dinutuximab	IV - INTRAVENOUS	J9999/C9399	Use ONLY)	
UNLOXCYT	cosibelimab-ipdl	Various	J9275	Injection, cosibelimab-ipdl, 2 m	
UPLIZNA	inebilizumab-cdon iv soln	IV - INTRAVENOUS	J1823	Injection, inebilizumab-cdon, 1 mg	
UPTRAVI	selexipag	IV - INTRAVENOUS	J3490/C9399	Unclassified drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
USTEKINUMAB IV	ustekinumab-ttwe	IV - INTRAVENOUS	J3590/C9399	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	Yesintek
USTEKINUMAB SC	ustekinumab-ttwe	SC - SUBCUTANEOUS	J3590/C9399	Unclassified Biologics/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	Yesintek
VABRINTY	leuprolide	SC - SUBCUTANEOUS	J9217	Leuprolide acetate (for depot suspension), 7.5 mg	Fensolvi OR Triptodur OR Supprelin
VABYSMO	faricimab-svoa	Intravitreal	J2777	Injection, faricimab-svoa, 0.1 mg	
VALCHLOR	mechlorethamine	Topical	J9999/C9399	Use ONLY)	
VEGZELMA	bevacizumab-adcd	IV - INTRAVENOUS	Q5129	Injection, bevacizumab-adcd (vegzelma), biosimilar, 10 mg	Mvasi OR Zirabev
VELCADE	bortezomib	IV - INTRAVENOUS	J9041	Injection, bortezomib, 0.1 mg	
VELETRI	epoprostenol	IV - INTRAVENOUS	J1325	Injection, epoprostenol, 0.5 mg	
VENTAVIS	iloprost	IN	Q4074	DME, unit dose form, up to 20 mcg	
VEOPOZ	pozelimab-bbfg	Injection	J9376	Injection, pozelimab-bbfg, 1 mg	
VILTEPSO	viltolarsen	IV - INTRAVENOUS	J1427	Injection, viltolarsen, 10 mg	
VIMIZIM	elosulfase	IV - INTRAVENOUS	J1322	Injection, elosulfase alfa, 1 mg	
VISCO-3	sodium hyaluronate	Intra-articular	J7321	Hyaluronan or derivative, hyalgan, supartz or visco-3, for intra-articular injection, per dose	Euflexxa OR Gel One
VIVIMUSTA	bendamustine	IV - INTRAVENOUS	J9056	Injection, bendamustine hydrochloride (vivimusta), 1 mg	
VOXZOGO	vosoritide	SC - SUBCUTANEOUS	J3490/C9399	Unclassified Drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
VOYXACT	sibeprenlimab-szsi	SC - SUBCUTANEOUS	C9399/J3490	Unclassified Drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
VPRIV	velaglucerase	IV - INTRAVENOUS	J3385	Injection, velaglucerase alfa, 100 units	
VYALEV	foslevodopa-foscarbidopa	SC - SUBCUTANEOUS	J7356	Injection, foscarbidopa 0.25 mg/foslevodopa 5 mg	
VYEPTI	eptinezumab-jjmr iv	IV - INTRAVENOUS	J3032	Injection, eptinezumab-jjmr, 1 mg	

Any unclassified HCPCS code with a drug TRADE name not on this list may suspend for post service review if the claim exceeds $1000

BlueCross BlueShield of Vermont
VERMONT BLUE Rx

DRUGS REQUIRING PRIOR AUTHORIZATION IN THE MEDICAL BENEFIT

Any drug that has been recently FDA approved and is considered a new drug to the market requires PA. If you are unsure if the drug is a new drug to the market and/or do not see the drug listed below as requiring prior approval, please call VT Blue Rx at 800-313-7879. Specific groups or policies may have special benefits or other coverage, call 800-924-3494 to verify benefits

Effective Date: 11/01/2026

Trade Name	Generic Name	Route of Administration	HCPCS Procedure Code	HCPCS Procedure Code Description	Preferred Product Information
VYJUVEK	beremagene geperpavec-svdt	EX	J3401	administration, containing nominal 5 x 10^9 pfu/ml vector genomes, per 0.1 ml	
VYKOURA	leucovorin calcium	IJ	J0644	Injection, leucovorin calcium (avyxa), 1 mg	
VYLOY	zolbetuximab-clzb	IV - INTRAVENOUS	J1326	Injection, zolbetuximab-clzb, 2 mg	
VYONDYS 53	golodirsen	IV - INTRAVENOUS	J1429	Injection, golodirsen, 10 mg	
VYVGART	efgartigimod alfa-fcab	IV - INTRAVENOUS	J9332	Injection, efgartigimod alfa-fcab, 2mg	
VYVGART HYTRULO	qvfc	SC - SUBCUTANEOUS	J9334	hyaluronidase-qvfc	
VYXEOS	daunorubicin cytarabine	IV - INTRAVENOUS	J9153	Injection, liposomal, 1 mg daunorubicin and 2.27 mg cytarabine	
WAINUA	eplontersen sodium	SC - SUBCUTANEOUS	C9311	direct supervision of a physician, not for use when drug is self administered)	
WASKYRA	etuvetidigene autotemcel	IV - INTRAVENOUS	J3386	Injection, etuvetidigene autotemcel, per treatment	
WEZLANA	ustekinumab-auub	SC - SUBCUTANEOUS	Q5137	Injection, ustekinumab-auub (wezlana), biosimilar, subcutaneous, 1 mg	Yesintek
WEZLANA	ustekinumab-auub	IV - INTRAVENOUS	Q5138	Injection, ustekinumab-auub (wezlana), biosimilar, intravenous, 1 mg	Yesintek
WINREVAIR	sotatercept-csrk	SC - SUBCUTANEOUS	C9399/J3590	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
WYOST	denosumab-bbdz	Injection	Q5136	Injection, denosumab-bbdz (jubbonti/wyost), biosimilar, 1 mg	Bildyos OR Bilprevda
XEMBIFY	immune globulin	SC - SUBCUTANEOUS	J1558	Injection, immune globulin (xembify), 100 mg	
XENPOZYME	olipudase alfa-rpcp	IV - INTRAVENOUS	J0218	Injection, olipudase alfa-rpcp, 1 mg	
XEOMIN	incobotulinumtoxinA	IM	J0588	Injection, incobotulinumtoxinA, 1 unit	
XGEVA	denosumab	SC - SUBCUTANEOUS	J0897	Injection, denosumab, 1 mg	Bildyos OR Bilprevda
XIAFLEX	histolyticum	Intralesional	J0775	Injection, collagenase, clostridium histolyticum, 0.01 mg	
XIPERE	triamcinolone acetonide	Suprachoroidal	J3299	Injection, triamcinolone acetonide (xipere), 1 mg	
XOLAIR	omalizumab	SC - SUBCUTANEOUS	J2357	Injection, omalizumab, 5 mg	
XTRENBO	denosumab-qbde	SC - SUBCUTANEOUS	Q5167	Injection, denosumab-qbde (enoby/xtrenbo), biosimilar, 1 mg	Bildyos OR Bilprevda
YARTEMLEA	narsoplimab-wuug	IV - INTRAVENOUS	J1289	Injection, narsoplimab-wuug, 1 mg	
YCANTH	cantharidin	EX	J7354	Cantharidin for topical administration, 0.7%, single unit dose applicator (3.2 mg)	
YERVOY	ipilimumab	IV - INTRAVENOUS	J9228	Injection, ipilimumab, 1 mg	
YESAFILI	aflibercept-jbvf	IZ	Q5155	Injection, aflibercept-jbvf (yesafili), biosimilar, 1 mg	
YESCARTA	axicabtagene ciloleucel	IV - INTRAVENOUS	Q2041	leukapheresis and dose preparation procedures, per therapeutic dose	
YESINTEK	ustekinumab-kfce	IV/Subcut depending on strength	Q5100	Injection, ustekinumab-kfce (yesintek), biosimilar, 1 mg	
YIMMUGO	immune globulin	IV - INTRAVENOUS	J1553	Injection, immune globulin (yimmugo), 100 mg	
YONDELIS	trabectedin	INJECTION	J9362	Injection, trabectedin, 0.01 mg	
YORVIPATH	palopegteriparatide	SC - SUBCUTANEOUS	J3490/C9399	Unclassified Drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
YUFLYMA	adalimumab-aaty	SC - SUBCUTANEOUS	Q5141	Injection, adalimumab-aaty, biosimilar, 1 mg	Simlandi
YUSIMRY	adalimumab-aqvh	SC - SUBCUTANEOUS	J3590/C9399	Unclassified biologics/ Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	Simlandi
YUVIWEL	navepegritide	SC - SUBCUTANEOUS	C9399/J3490	approved by the FDA on or after January 1, 2004) (Hospital Outpatient Use ONLY), Unclassified	
ZALTRAP	ziv-aflibercept	IV - INTRAVENOUS	J9400	Injection, ziv-aflibercept, 1 mg	
ZANVASTRO	zilganersen sodium	IT - INTRATHECAL	C9399/J3490	Unclassified drugs or biologicals (Hospital Outpatient Use ONLY), Unclassified drugs	
ZARXIO	filgrastim	IV/Subcut	Q5101	Injection, filgrastim-sndz, biosimilar, (Zarxio), 1 mcg	
ZEMAIRA	alpha-1 proteinase inhibitor	IV - INTRAVENOUS	J0256	Injection, alpha 1-proteinase inhibitor (human), not otherwise specified, 10 mg	
ZEPZELCA	lurbinectedin	IV - INTRAVENOUS	J9223	Injection, lurbinectedin, 0.1 mg	
ZEVASKYN	prademagene zamikeracel	EX	J3389	Topical administration, prademagene zamikeracel, per treatment	
ZIEXTENZO	pegfilgrastim-bmez	SC - SUBCUTANEOUS	Q5120	Injection, pegfilgrastim-bmez (ziextenzo), biosimilar, 0.5 mg	Fulphila OR Udenyca/Udenyca ONBO
ZIIHERA	zanidatamab-hrii	IV - INTRAVENOUS	J9276	Injection, zanidatamab-hrii, 2 mg	
ZILBRYSQ	zilucoplan sodium	SC - SUBCUTANEOUS	J3490/C9399	Unclassified Drugs/Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)	
ZIRABEV	bevacizumab-bvzr	IV - INTRAVENOUS	Q5118	Injection, bevacizumab-bvcr, biosimilar, (Zirabev), 10 mg	
ZOLGENSMA	onasemnogene abeparvovec-xioi	IV - INTRAVENOUS	J3399	Injection, onasemnogene abeparvovec-xioi, per treatment, up to 5x10	
ZOMACTON	somatropin	SC - SUBCUTANEOUS	J2941	Injection, somatropin, 1 mg	
ZORBTIVE	somatropin	SC - SUBCUTANEOUS	J2941	Injection, somatropin, 1 mg	
ZULRESSO	brexanolone	IV - INTRAVENOUS	J1632	Injection, brexanolone, 1 mg	
ZUSDURI	mitomycin	IS	J9282	Mitomycin, intravesical instillation, 1 mg	
ZYCUBO	copper histidinate	SC - SUBCUTANEOUS	C9399/J3490	Unclassified drugs or biologicals (Hospital Outpatient use ONLY)/Unclassified drugs	
ZYMFENTRA	infliximab-dyyb	SC - SUBCUTANEOUS	J1748	Injection, infliximab-dyyb (zymfentra), 10 mg	Inflectra OR Avsola
ZYNLONTA	loncastuximab tesirine-lpyl	IV - INTRAVENOUS	J9359	Injection, loncastuximab tesirine-lpyl, 0.1 mg	
ZYNTEGLO	betibeglogene autotemcel	IV - INTRAVENOUS	J3393	Injection, betibeglogene autotemcel, per treatment	
ZYNYZ	retifanlimab-dlwr	IV - INTRAVENOUS	J9345	Injection, retifanlimab-dlwr, 1 mg	

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