



Providence

Medicare Advantage Plans

PROVIDENCE MEDICARE ADVANTAGE PLANS

2024 PRIOR AUTHORIZATION CRITERIA FOR PART B DRUGS

Effective 7/1/2024

For more recent information or other questions, please contact Providence Health Assurance Customer Service at 503-574-8000 or 1-800-603-2340 or, for TTY users, 711, seven days a week, between 8 a.m. and 8 p.m. (Pacific Time), or visit [ProvidenceHealthAssurance.com](https://www.ProvidenceHealthAssurance.com).

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Medicare Part B Drug Prior Authorization

Our job as your health plan is to make sure that you receive the right care at the right time and at the most affordable price. Providence Medicare Advantage Plans requires you (or your physician) to get approval for certain medical services, including administration of certain medications, before we will agree to cover the drug for you. This is called “prior authorization.” Sometimes the requirement for getting approval in advance helps guide appropriate use of certain drugs including specialty drugs injected or infused by your provider. If you do not get this approval, your drug might not be covered by the plan.

This document contains the Prior Authorization requirements for certain Part B eligible drugs.

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2024 Medicare Part B Prior Authorization Drug List

HCPCS/CPT Code	<u>Brand name (Generic name) with link to policy criteria</u>
Q2055	<u>Abecma (Idencabtagene vicleucel)</u>
J9264	<u>Abraxane (Paclitaxel protein-bound particles)</u>
J3262	<u>Actemra (Tocilizumab)</u>
J0791	<u>Adakveo (Crizanlizumab-tmca)</u>
J9042	<u>Adcetris (Brentuximab vedotin)</u>
J0172	<u>Aduhelm (Aducanumab-avwa)</u>
C9167, J3590	<u>Adzynma (ADAMTS13, recombinant-krhn)</u>
J1931	<u>Aldurazyme (Laronidase)</u>
J9057	<u>Aliqopa (Copanlisib)</u>
J9245	<u>Alkeran (Melfalan hydrochloride)</u>
J7214	<u>Altuviiio (Factor viii/von willebrand factor complex, recombinant)</u>
Q5126	<u>Alymsys (Bevacizumab-maly)</u>
J1426	<u>Amondys-45 (Casimersen)</u>
J0225	<u>Amvuttra (Vutrisiran)</u>
J2277	<u>Aphexda (Motixafortide)</u>
J0256	<u>Aralast, Prolastin-C, Zemaira (Alpha 1-proteinase inhibitor)</u>
J0881	<u>Aranesp (Darbepoetin alfa), non-ESRD use</u>
J2793	<u>Arcalyst (Rilonacept)</u>
J9261	<u>Arranon (Nelarabine)</u>
J9302	<u>Arzerra (Ofatumumab)</u>
J1554	<u>Asceniv (Immune globulin)</u>
J9118	<u>Asparlas (Calaspargase pegol-mknl)</u>
J9029	<u>Astiladrin (Nadofaragene firadenovec-vncg)</u>
J9035	<u>Avastin (Bevacizumab)</u>
J3145	<u>Aveed (Testosterone undecanoate)</u>
Q5121	<u>Avsola (Infliximab-axxq)</u>
A9590	<u>Azedra (Iobenguane iodine-131)</u>
J9023	<u>Bavencio (Avelumab)</u>
J9032	<u>Beleodaq (Belinostat)</u>
J9036	<u>Belrapzo (Bendamustine hydrochloride)</u>
J9058	<u>Bendamustine hydrochloride (apotex)</u>
J9034	<u>Bendeka (Bendamustine HCl)</u>
J0490	<u>Benlysta (Belimumab)</u>
J0179	<u>Beovu (Brolucizumab-dbli)</u>
J0597	<u>Berinert (C1 esterase inhibitor)</u>
J9229	<u>Besponsa (Inotuzumab ozogamicin)</u>
J1556	<u>Bivigam (Immune globulin)</u>
J9037	<u>Blenrep (Belantamab mafodotin-blmf)</u>
J9039	<u>Blincyto (Blinatumomab)</u>
J9046	<u>Bortezomib (Dr. Reddy's)</u>

2024 Medicare Part B Prior Authorization Drug List

HCPCS/CPT Code	<u>Brand name (Generic name) with link to policy criteria</u>
J9048	<u>Bortezomib (fresenius kabi)</u>
J9049	<u>Bortezomib (hospira)</u>
J9051	<u>Bortezomib (maia)</u>
J0585	<u>Botox (OnabotulinumtoxinA)</u>
Q2054	<u>Breyanzi (Lisocabtagene maraleucel)</u>
J0567	<u>Brineura (Cerliponase alfa)</u>
J2329	<u>Briumvi (Ublituximab)</u>
J9064	<u>Cabazitaxel (sandoz)</u>
J1952	<u>Camcevi (Leuprolide)</u>
Q2056	<u>Carvykti (Ciltacabtagene autoleucely)</u>
J1786	<u>Cerezyme (Imiglucerase)</u>
J3490	<u>Cetrotide (Cetrotide acetate)</u>
Q5128	<u>Cimerli (Ranibizumab-eqrn)</u>
J0717	<u>Cimzia IV (Certolizumab)</u>
J2786	<u>Cinqair (Reslizumab)</u>
J0598	<u>Cinryze (C1 esterase inhibitor)</u>
J9286	<u>Columvi (Glofitamab-gxbm)</u>
J1448	<u>Cosela (Trilaciclib)</u>
J0584	<u>Crysvita (Burosumab-twza)</u>
J1551	<u>Cutaquig (Immune globulin)</u>
J1555	<u>Cuvitru (Immune globulin)</u>
J9308	<u>Cyramza (Ramucirumab)</u>
J0894	<u>Dacogen (Decitabine)</u>
J9348	<u>Danyelza (Naxitamab-ggqk)</u>
J9145	<u>Darzalex (Daratumumab)</u>
J9144	<u>Darzalex Faspro (Daratumumab/hyaluronidase-fihj)</u>
J0589	<u>Daxxify (DaxibotulinumtoxinA-lanm)</u>
J0893	<u>Decitabine (Sun Pharma)</u>
E0607	<u>Diabetic Durable Medical Equipment (DME) - Glucose Meters</u>
A4253	<u>Diabetic Durable Medical Equipment (DME) - Test Strips</u>
J7351	<u>Durysta (Bimatoprost intracameral implant)</u>
J0586	<u>Dysport (AbobotulinumtoxinA)</u>
J9063	<u>Elahere (Mirvetuximab soravtansine-gynx)</u>
J1743	<u>Elaprase (Idursulfase)</u>
J3060	<u>Elelyso (Taliglucerase alfa)</u>
J1413	<u>Elevidys (Delandistrogene moxeparvovec-rokl)</u>
J2508	<u>Elfabrio (Pegunigalsidase alfa-iwxj)</u>
J1950	<u>Eligard, Lupron Depot (Leuprolide acetate)</u>
J1323	<u>Elrexio (Elranatamab-bcmm)</u>
J9269	<u>Elzonris (Tagraxofusp-erzs)</u>

2024 Medicare Part B Prior Authorization Drug List

HCPCS/CPT Code	<u>Brand name (Generic name) with link to policy criteria</u>
J7799	Empaveli (Pegcetacoplan)
J9176	Empliciti (Elotuzumab)
J9358	Enhertu (Fam-trastuzumab deruxtecan-nxki)
J1302	Enjaymo (Sutimlimab-jome)
J3380	Entyvio (Vedolizumab), intravenous
J9321	Epkiny (Epcoritamab-bysp)
J0885	Epogen, Procrit (Epoetin alfa), non-ESRD use
J9055	Erbix (Cetuximab)
J7999	Estradiol Pellet
J3111	Evenity (Romosozumab-aqqg)
J1305	Evkeeza (Evinacumab-dgnb)
J9246	Evomela (Melphalan hcl/betadex sulfobutyl ether sodium)
J1428	Exondys-51 (Eteplirsen)
J0180	Fabrazyme (Agalsidase beta)
J0517	Fasenra (Benralizumab)
J9395	Faslodex (Fulvestrant)
J1951	Fensolvi (Leuprolide acetate)
J1572	Flebogamma (Immune globulin)
J1325	Flolan, Veletri (Epoprostenol)
J3590	Follistim AQ (Follitropin b)
J9307	Foloty (Pralatrexate)
J9394	Fulvestrant (fresenius kabi)
J9393	Fulvestrant (teva)
J9331	Fyarro (Sirolimus protein-bound particles)
S0132	Fyremadel (Ganirelix acetate)
J1460	GamaSTAN S/D (Immune globulin)
J9210	Gamifant (Emapalumab-lzsg)
J1569	Gammagard Liquid (Immune globulin)
J1566	Gammagard S-D (Immune globulin)
J1561	Gammaked (Immune globulin)
J1557	Gammplex (Immune globulin)
J1561	Gamunex-C (Immune globulin)
J0223	Givlaari (Givosiran)
J0257	Glassia (Alpha 1 proteinase inhibitor (human))
J3490, S0126	Gonal-F (Follitropin alfa)
J9179	Halaven (Eribulin mesylate)
J1411	Hemgenix (Etranacogene dezaparvovec-drlb)
J7170	Hemlibra (Emicizumab-kxwh)
J9248	Hepzato (Melphalan)
J9355	Herceptin (Trastuzumab)

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HCPCS/CPT Code	<u>Brand name (Generic name) with link to policy criteria</u>
J9356	<u>Herceptin Hylecta (Trastuzumab/hyaluronidase-oysk)</u>
Q5113	<u>Herzuma (Trastuzumab-pkrb)</u>
J1559	<u>Hizentra (Immune globulin)</u>
J1575	<u>Hyqvia (Immune globulin)</u>
J0638	<u>Ilaris (Canakinumab/pf)</u>
J3245	<u>Ilumya (Tildrakizumab-asmn)</u>
J9173	<u>Imfinzi (Durvalumab)</u>
J9347	<u>Imjudo (Tremelimumab-actl)</u>
J9325	<u>Imlygic (Talimogene laherparepvec)</u>
J1599	<u>immune globulin, intravenous, non-lyophilized (e.g. liquid), not otherwise specified</u>
Q5103	<u>Inflectra (Infliximab-dyyb)</u>
J9319	<u>Istodax (Romidepsin, lyophilized)</u>
J9207	<u>Ixempra (Ixabepilone)</u>
J9281	<u>Jelmyto (Mitomycin pyelocalyceal instillation)</u>
J9272	<u>Jemperli (Dostarlimab-gxly)</u>
J9043	<u>Jevtana (Cabazitaxel)</u>
J9354	<u>Kadcyla (Ado-trastuzumab emtansine)</u>
J1290	<u>Kalbitor (Ecallantide)</u>
J1290	<u>Kanjinti (Trastuzumab-anns)</u>
Q5117	<u>Kanjinti (Trastuzumab-anns)</u>
J2840	<u>Kanuma (Sebelipase alfa)</u>
J9271	<u>Keytruda (Pembrolizumab)</u>
J9274	<u>Kimmitrak (Tebentafusp-tebn)</u>
J0879	<u>Korsuva (Difelikefalin)</u>
J2507	<u>Krystexxa (Pegloticase)</u>
Q2042	<u>Kymriah (Tisagenlecleucel)</u>
J9047	<u>Kyrpolis (Carfilzomib)</u>
J0217	<u>Lamzede (Velmanase alfa-tycv)</u>
J0202	<u>Lemtrada (Alemtuzumab)</u>
J0174	<u>Legembi (Lecanemab-irmb)</u>
J1306	<u>Leqvio (Inclisiran)</u>
J1954	<u>Leuprolide acetate for depot suspension (cipl)</u>
J9218	<u>Leuprolide acetate, per 1 mg</u>
J9119	<u>Libtayo (Cemiplimab-rwlc)</u>
J3263	<u>Loqtorzi (Toripalimumab-tpzi)</u>
J2778	<u>Lucentis (Ranibizumab)</u>
J0221	<u>Lumizyme (Alglucosidase alfa)</u>
J9313	<u>Lumoxiti (Moxetumomab pasudotox-tdfk)</u>
J9350	<u>Lunsumio (Mosunetuzumab-axgb)</u>

2024 Medicare Part B Prior Authorization Drug List

HCPCS/CPT Code	<u>Brand name (Generic name) with link to policy criteria</u>
J9217	<u>Lupron Depot (Leuprolide acetate)</u>
A9513	<u>Lutathera (Luteium lu177 dotatate)</u>
J3398	<u>Luxturna (Voretigene neparvovec-rzyl)</u>
J9353	<u>Margenza (Margetuximab-cmkb)</u>
B4104, B4105, B4149, B4150, B4152, B4153, B4154, B4155, B4157, B4158, B4159, B4160, B4161, B4162	<u>Medical Nutrition (Enteral) - Medicare Part B</u>
J3590	<u>Menopur (Menotropins)</u>
J3397	<u>Mepsevii (Vestronidase alfa-vjkb)</u>
J0888	<u>Mircera (Epoetin beta), non-ESRD use</u>
J9349	<u>Monjuvi (Tafasitamab-cxix)</u>
Q5107	<u>Mvasi (Bevacizumab-awwb)</u>
J9203	<u>Mylotarg (Gemtuzumab ozogamicin)</u>
J0587	<u>Myobloc (RimabotulinumtoxinB)</u>
J1458	<u>Naglazyme (Galsulfase)</u>
J0219	<u>Nexviazyme (Avalglucosidase alfa)</u>
J0725	<u>Novarel, Pregnyl (Chorionic gonadotropin)</u>
J2796	<u>Nplate (Romiplostim)</u>
J2182	<u>Nucala (Mepolizumab)</u>
C9399, J3490	<u>Nulibry (Fosdenopterin hydrobromide)</u>
J2350	<u>Ocrevus (Ocrelizumab)</u>
J1568	<u>Octagam (Immune globulin)</u>
Q5114	<u>Ogivri (Trastuzumab-dkst)</u>
J9205	<u>Onivyde (Irinotecan liposome)</u>
J0222	<u>Onpattro (Patisiran)</u>
Q5112	<u>Ontruzant (Trastuzumab-dttb)</u>
J9299	<u>Opdivo (Nivolumab)</u>
J9298	<u>Opdualag (Nivolumab/relatlimab-rmbw)</u>
J0129	<u>Orencia (Abatacept/maltose) intravenous solution</u>
J3490	<u>Ovidrel (chorionic gonadotropin)</u>
J0224	<u>Oxlumo(Lumasiran sodium)</u>
J9258	<u>Paclitaxel protein-bound particles (american regent)</u>
J9259	<u>Paclitaxel protein-bound particles (teva)</u>
J9177	<u>Padcev (Enfortumab vedotin-ejfv)</u>
J1576	<u>Panzyga (Immune globulin)</u>
J0208	<u>Pedmark (Sodium thiosulfate)</u>
J9306	<u>Perjeta (Pertuzumab)</u>
J9316	<u>Phesgo (Pertuzumab/trastuzumab/hyaluronidase-zzxf)</u>

2024 Medicare Part B Prior Authorization Drug List

HCPCS/CPT Code	<u>Brand name (Generic name) with link to policy criteria</u>
A9607	Pluvicto (Luteium lu-177 vipivotide tetraxetan)
J9309	Polivy (Polatuzumab vedotin-piiq)
J1203	Pombiliti (Cipaglucoisidase alfa-atga)
J9295	Portrazza (Necitumumab)
J9204	Poteligeo (Mogamulizumab-kpkc)
J3490	Prevymis (Letermovir)
J1459	Privigen (Immune globulin)
Q2043	Provenge (Sipuleucel-T)
J1304	Qalsody (Tofersen)
J1301	Radicava (Edaravone)
J0896	Reblozyl (Luspatercept-aamt)
J1440	Rebyota (Fecal microbiota, live - jslm)
J1745	Remicade (Infliximab)
J3285	Remodulin (Treprostinil)
Q5104	Renflexis (Infliximab-abda)
Q5106	Retacrit (Epoetin alfa-epbx), non-esrd use
J3590	Rethymic (Allogenic processedthymus tissue-agdc)
J3490	Revatio (Sildenafil), pulmonary hypertension
Q5123	Riabni (Rituximab-arrx)
J9312	Rituxan (Rituximab)
J9311	Rituxan Hycela (Rituximab/hyaluronidase, human recombinant)
J1412	Roctavian (Valoctocogene roxaparvovec-rvox)
J9318	Romidepsin, non-lyophilized
J0596	Ruconest (C1 esterase inhibitor, recombinant)
Q5119	Ruxience (Rituximab-pvvr)
J9061	Rybrevant (Amivantamab-vmjw)
J9021	Rylaze (Asparaginase, recombinant)
J2998	Ryplazim (Plasminogen, human-tvmh)
J9333	Rystiggo (Rozanolixizumab-noli)
J2353	Sandostatin LAR Depot (Octreotide acetate, microspheres)
J0491	Saphnelo (Anifrolumab-fnia)
J9227	Sarclisa (Isatuximab-irf)
J7352	Scenesse (Afamelanotide implant)
J2502	Signifor LAR (Pasireotide pamoate)
J1602	Simponi ARIA (Golimumab)
J2327	Skyrizi Risankizumab-rzaa) intravenous solution
J1300	Soliris (Eculizumab)
J1930	Somatuline Depot (Lanreotide)
J1747	Spevigo (Spesolimab-sbzo)
J2326	Spinraza (Nusinersen)

2024 Medicare Part B Prior Authorization Drug List

HCPCS/CPT Code	Brand name (Generic name) with link to policy criteria
G2082, G2083, S0013	Spravato (Esketamine)
J3358	Stelara (Ustekinumab) intravenous solution
J9226	Supprelin LA (Histrelin implant)
J2779	Susvimo (Ranibizumab injection/implant)
J2781	Syfovre (Pegcetacoplan)
J2860	Sylvant (Siltuximab)
J3055	Talvey (Talquetamab-tgvs)
Q2053	Tecartus (Brexucabtagene autoleucl)
J9022	Tecentriq (Atezolizumab)
J9380	Tecvayli (Teclistamab-cqyv)
J3241	Tepezza (Teprotumumab-trbw)
J3490, J7999, S0189	Testopel (Testosterone pellet)
J2356	Tezspire (Tezepelumab-ekko)
J9273	Tivdak (Tisotumab vedotin-tftv)
J9330	Torisel (Temsirolimus)
B4164, B4168, B4172, B4176, B4178, B4180, B4185, B4187, B4189, B4193, B4197, B4199, B4216, B4220, B4222, B4224, B5000, B5100, B5200	Total Parenteral Nutrition (TPN) - Medicare Part B
Q5116	Trazimera (Trastuzumab-qyyp)
J9033	Treanda (Bendamustine HCl)
J3315	Trelstar (Triptorelin pamoate)
J3316	Triptodur (Triptorelin)
J9317	Trodelyv (Sacituzumab govitecan-hziy)
Q5115	Truxima (Rituximab-abbs)
J2323	Tysabri (Natalizumab)
J7686	Tyvaso (Treprostinil, inhalation solution)
J9381	Tzield (Teplizumab-mzwv)
J1303	Ultomiris (Ravulizumab-cwvz)
J1823	Uplizna (Inebilizumab-cdon)
C9399, J3490	Upravi (Selexipag)
J2777	Vabysmo (Faricimab)
J9303	Vectibix (Panitumumab)
Q5129	Vegzelma (Bevacizumab-adcd)
J9041	Velcade (Bortezomib)
Q4074	Ventavis (Iloprost)
J9376	Veopoz (Pozelimab-bbfg)

2024 Medicare Part B Prior Authorization Drug List

HCPCS/CPT Code	<u>Brand name (Generic name) with link to policy criteria</u>
J9025	<u>Vidaza (Azacitidine)</u>
J1427	<u>Viltepso (Viltolarsen)</u>
J1322	<u>Vimizim (Elosulfase alfa)</u>
J9056	<u>Vivimusta (Bendamustine hydrochloride)</u>
J3385	<u>VPRIV (Velaglucerase alfa)</u>
J3032	<u>Vyepi (Eptinezumab-jjmr)</u>
J3401	<u>Vyjuvek (Beremagene geperpavec-svdt)</u>
J1429	<u>Vyondys-53 (Golodirsen)</u>
J9332	<u>Vyvgart (Efgartigimod alfa)</u>
J9334	<u>Vyvgart Hytrulo (Efgartigimod alfa/hyaluronidase)</u>
J9153	<u>Vyxeos (Daunorubicin/cytarabine liposomal)</u>
J1558	<u>Xembify (Immune globulin)</u>
J0218	<u>Xenpozyme (Olipudase alfa-rpcp)</u>
J0588	<u>Xeomin (IncobotulinumtoxinA)</u>
J0775	<u>Xiaflex (Collagenase, clostridium histolyticum)</u>
A9606	<u>Xofigo (Radium-223)</u>
J2357	<u>Xolair (Omalizumab)</u>
J9228	<u>Yervoy (Ipilimumab)</u>
Q2041	<u>Yescarta (Axicabtagene ciloleucel)</u>
J9352	<u>Yondelis (Trabectedin)</u>
J9400	<u>Zaltrap (Ziv-aflibercept)</u>
J9223	<u>Zepzelca (Lurbinectedin)</u>
J0565	<u>Zinplava (Bezlotoxumab, 10 mg)</u>
Q5118	<u>Zirabev (Bevacizumab-bvzr)</u>
J9202	<u>Zoladex (Goserelin acetate implant)</u>
J3399	<u>Zolgensma (Onasemnogene abeparvovec-xioi)</u>
J9359	<u>Zynlonta (Loncastuximab tesirine-lpyl)</u>
J9345	<u>Zynyz (Retifanlimab-dlwr)</u>