



2020 Injectable Drug (Part B) Authorization Guide

Special Needs Program - Minnesota Senior Health Options (MSHO) and Connect + Medicare

The medical drugs on this list are most often given in the doctor's office. They require either prior authorization or step therapy approval before they can be dispensed or given. Drugs requiring step therapy are marked as "ST". Providers should review the injectable drug policy before sending an approval request.

Drugs not found on this list do not require a prior authorization through the medical benefit.

Self-Administered Drugs - Pharmacy Benefit (Part D)	Provider Administered Drugs - Medical Benefit (Part B)		Could be Self-Administered (Part D) or Provider Administered (Part B)	
Call Express Scripts for authorization at 1-877-558-7521.	Call Care Continuum for authorization at 1-800-818-6747		If self-administered call Express Scripts for authorization at 1-877-558-7521 If provider administered contact Care Continuum for authorization at 1-800-818-6747 * Requires authorization on pharmacy (Part D) benefit only	
Drug	Drug	HCPCS Code	Drug	HCPCS Code
Apokyn	Actemra	J3262	Aralast NP	J0256
Arcalyst	Adagen	J2504	Benlysta	J0490
Avonex	Adakveo	J0791	Cablivi	C9047
Cosentyx	Adcetris	J9042	Cinryze	J0598
Dupixent	Aldurazyme	J1931	Darzalex Faspro	C9062
Enbrel	Alimta	J9305	Enhertu	J9358
Glatopa	Aliqopa	J9057	Fasenra	J0517
Haegarda	Arzerra	J9302	Firazyr	J1744
Humira	Asparlas	J9118	Granix*	
Increlex	Azedra (diagnostic and therapeutic)	A9590	Neulasta - ST	J2505
Lupron	Bavencio	J9023	Neupogen - ST	J1442
Myalept	Beleodaq	J9032	Orencia	J0129
Natpara	Belrapzo	J9036	Padcev	J9177
Omnitrope	Bendeka	J9034	Procrit - ST	J0885
Pegasys	Berinert	J0597	Prolastin	J0256
Praluent	Besponsa	J9229	Sarclisa	J9227
Plegridy	Blenrep	NOC	Stelara SQ	J3357

Self-Administered Drugs - Pharmacy Benefit (Part D)	Provider Administered Drugs - Medical Benefit (Part B)	Could be Self-Administered (Part D) or Provider Administered (Part B)
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Rebif	Blincyto	J9039	Synribo	J9262
Relistor	Brineura	J0567	Xolair SQ	J2357
Repatha	Cerezyme	J1786	Xgeva*	
Signifor	Chorionic Gonadotropin	J0725	Zarxio*	
SymlinPen	Cimzia	J0717		
Somavert	Cinqair	J2786		
Trulicity	Crysvita	J0584		
Victoza	Cyramza	J9308		
	Darzalex	J9145		
	Duopa	J7340		
	Elaprase	J1743		
	Elelyso	J3060		
	Elzonris	J9269		
	Empliciti	J9176		
	Entyvio	J3380		
	Epogen - ST	J0885		
	Erbix	J9055		
	Erwinaze	J9019		
	Evenity	J3111		
	Exondys 51	J1428		
	Fabrazyme	J0180		
	Faslodex	J9395		
	Folotyn	J9307		
	Gamifant	J9210		
	Gazyva	J9301		
	Givlaari	J0223		
	Glassia	J0257		
	Halaven	J9179		
	Hemlibra	J7170		
	Herceptin - ST	J9355		
	Herceptin Hylecta	J9356		
	HP Acthar	J0800		
	Ilaris	J0638		
	Ilumya	J3245		
	Imfinzi	J9173		

Self-Administered Drugs - Pharmacy Benefit (Part D)	Provider Administered Drugs - Medical Benefit (Part B)	Could be Self-Administered (Part D) or Provider Administered (Part B)
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	Imlygic	J9325		
	Jelmyto	C9064		
	Jevtana	J9043		
	Kadcyla	J9354		
	Kalbitor	J1290		
	Kanuma	J2840		
	Keytruda	J9271		
	Krystexxa	J2507		
	Kymriah	Q2042		
	Kyprolis	J9047		
	Lartruvo	J9285		
	Lemtrada	J0202		
	Libtayo	J9119		
	Lumizyme	J0221		
	Lumoxiti	J9313		
	Lutathera	A9513		
	Luxturna	J3398		
	Mepsevii	J3397		
	Monjuvi	NOC		
	Mylotarg	J9203		
	Naglazyme	J1458		
	Novarel	J0725		
	Nucala	J2182		
	Ocrevus	J2350		
	Oncaspar	J9266		
	Onivyde	J9205		
	Onpattro	J0222		
	Opdivo	J9299		
	Ovidrel	NOC		
	Perjeta	J9306		
	Phesgo	NOC		
	Polivy	J9309		
	Portrazza	J9295		
	Poteligeo	J9204		
	Pregnyl	J0725		

Self-Administered Drugs - Pharmacy Benefit (Part D)	Provider Administered Drugs - Medical Benefit (Part B)	Could be Self-Administered (Part D) or Provider Administered (Part B)
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	Provenge	Q2043		
	Radicava	J1301		
	Reblozyl	J0896		
	Remicade - ST	J1745		
	Revcovi	NOC		
	Rituxan - ST	J9312		
	Rituxan Hycela	J9311		
	Ruconest	J0596		
	Scenesse	NOC		
	Simponi Aria	J1602		
	Soliris	J1300		
	Spinraza	J2326		
	Spravato	NOC		
	Stelara IV	J3358		
	Sylvant	J2860		
	Takhzyro	J0593		
	Tecartus	NOC		
	Tecentriq	J9022		
	Tegsedi	NOC		
	Tepezza	J3241		
	Treanda	J9033		
	Tremfya	J1628		
	Trodelyv	C9066		
	Trogarzo	J1746		
	Tysabri	J2323		
	Ultomiris	J1303		
	Uplinza	NOC		
	Vectibix	J9303		
	Velcade	J9041		
	Vimizim	J1322		
	Viltepso	NOC		
	Vyepti	J3032		
	Vyondys 53	J1429		
	Vpriv	J3385		
	Xiaflex	J0775		

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	Yervoy	J9228		
	Yescarta	Q2041		
	Zaltrap	J9400		
	Zemaira	J0256		
	Zolgensma	J3399		
	Zulresso	J1632		

UCare's MSHO (HMO SNP) is a health plan that contracts with both Medicare and the Minnesota Medical Assistance (Medicaid) program to provide benefits of both programs to enrollees. Enrollment in UCare's MSHO depends on contract renewal.

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