

HealthFirst - NY

Medical Oncology Code List

Please note: This list is constantly evolving as new drugs come to market and are approved by the FDA as well as with any HCPC code changes issued by CMS. Please contact Healthfirst-NY or eviCore, if the drug you are requesting is not contained on this list, to determine if prior authorization is needed

Effective Date: 04/01/2024

| Description | Alt Descriptions | HCPCs Code | Program | Drug Class | Administration Technique | Healthfirst Commercial | N/A - HFNY COM (Pharm Benefits) PA Status | Healthfirst Medicaid | N/A - HFNY Medicaid (Pharm Benefits) PA Status | Healthfirst Medicare | Drug Comments |
|---|---|------------|--------------------------|-------------------------|--------------------------|------------------------|---|----------------------|--|----------------------|-----------------|
| 5-Fluorouracil - Topical | 5FU Cream, Efudex, Carac, Fluoroplex | J3490 | Medical Oncology - CHEMO | Primary | TOPICAL | Y | Y | Y | Y | N | |
| 5-Fluorouracil - Injection | 5FU, Adrucil | J9190 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Abemaciclib - oral | Verzenio | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Abiraterone Acetate - oral | Yonsa (not interchangeable with Zytiga) | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Abiraterone Acetate - oral | Zytiga (not interchangeable with Yonsa) | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Acalabrutinib - oral | Calquence | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Adagrasib - oral | Krazati | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | N | Y | N | N | |
| Ado-Trastuzumab Emtansine | Kadcyla | J9354 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Afatinib - oral | Gilotrif | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Aldesleukin | Proleukin, Interleukin-2 | J9015 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Alectinib - oral | Alecensa | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| All-trans Retinoic Acid - oral | Vesanoid, ATRA, Tretinoin | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | N | Y | N | N | |
| Alpelisib - oral | Piqray | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Amivantamab-vmjw | Rybrevant | J9061 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Apalutamide - oral | Erleada | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Aprepitant | Cinvanti | J0185 | Medical Oncology - SPORT | Supportive - Antiemetic | INJECTABLE | Y | N | Y | N | Y | |
| Aprepitant - oral | Emend | J8501 | Medical Oncology - SPORT | Supportive - Antiemetic | ORAL | Y | N | Y | Y | N | |
| Arsenic Trioxide | Trisenox | J9017 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Ascciminib - oral | Scemblix | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Asparaginase | Erwinaze | J9019 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Asparaginase erwinia chrysanthemi (recombinant)-ryw | Rylaze | J9021 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Atezolizumab | Tecentriq | J9022 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Avapritinib - oral | Ayvakit | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Avelumab | Bavencio | J9023 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Axitinib - oral | Inlyta | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Azacitidine | Vidaza | J9025 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | Y | Y | |
| Azacitidine - oral | Onureg | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | Medicare Part B |
| BCG | TheraCys, Tice | J9030 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Belantamab Mafodotin-blmf | Blenrep | J9037 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Belinostat | Beleodaq | J9032 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Belzutifan - oral | Welireg | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |

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|---------------------------------------|------------------|-----------|--------------------------|----------------------|--------------------------|--|---|--|---|--|--|
| Bendamustine HCL | Treanda | J9033 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Bendamustine HCL | Bendeka | J9034 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Bendamustine HCL | Belrapzo | J9036 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Bendamustine HCL (apotex) | | J9058 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Bendamustine HCL (baxter) | | J9059 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Bendamustine HCL (vivimusta) | | J9056 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Bevacizumab | Avastin | J9035 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Bevacizumab (Radiation Necrosis) | Avastin | J9035 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | Supportive pathway for the use of Avastin to treat Radiation Induced Necrosis of the CNS |
| Bevacizumab-addc | Vegzelma | Q5129 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | Y: except for no PA required on pharmacy for HFD and HFT plan types | Y: This is a non-preferred drug and requires prior authorization | Y: except for no PA required on pharmacy for HFD and HFT plan types | Y: This is a non-preferred drug and requires prior authorization | Supportive pathway for the use of Vegzelma to treat Radiation Induced Necrosis of the CNS |
| Bevacizumab-addc | Vegzelma | Q5129 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Bevacizumab-awwb | Mvasi | Q5107 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | |
| Bevacizumab-awwb (Radiation Necrosis) | Mvasi | Q5107 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | Supportive pathway for the use of Mvasi to treat Radiation Induced Necrosis of the CNS |
| Bevacizumab-bvzr | Zirabev | Q5118 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | Supportive pathway for the use of Zirabev to treat Radiation Induced Necrosis of the CNS |
| Bevacizumab-bvzr | Zirabev | Q5118 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | |
| Bevacizumab-maly | Alymsys | Q5126 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Bevacizumab-maly (Radiation Necrosis) | Alymsys | Q5126 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | Supportive pathway for the use of Alymsys to treat Radiation Induced Necrosis of the CNS |
| Bevacizumab-trjn | Avzivi | C9399 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New primary biosimilar chemotherapy drug. |
| Bevacizumab-trjn | Avzivi | J3490 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New primary biosimilar chemotherapy drug. |
| Bevacizumab-trjn | Avzivi | J3590 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New primary biosimilar chemotherapy drug. |
| Bevacizumab-trjn | Avzivi | J9999 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New primary biosimilar chemotherapy drug. |
| Bevacizumab-trjn | Avzivi | C9399 | Medical Oncology - SPORT | Supportive | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New supportive pathway for the use of Avzivi to treat Radiation Induced Necrosis of the CNS. |
| Bevacizumab-trjn | Avzivi | J3490 | Medical Oncology - SPORT | Supportive | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New supportive pathway for the use of Avzivi to treat Radiation Induced Necrosis of the CNS. |
| Bevacizumab-trjn | Avzivi | J3590 | Medical Oncology - SPORT | Supportive | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New supportive pathway for the use of Avzivi to treat Radiation Induced Necrosis of the CNS. |
| Bevacizumab-trjn | Avzivi | J9999 | Medical Oncology - SPORT | Supportive | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New supportive pathway for the use of Avzivi to treat Radiation Induced Necrosis of the CNS. |
| Bexarotene - oral | Targretin | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Bexarotene - topical | Targretin gel | C9399 | Medical Oncology - CHEMO | Primary | TOPICAL | Y | Y | Y | Y | N | |
| Bexarotene - topical | Targretin gel | J3490 | Medical Oncology - CHEMO | Primary | TOPICAL | Y | Y | Y | Y | N | |
| Binimetinib - oral | Mektovi | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Bleomycin | Blenoxane | J9040 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |

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|--------------------------------------|-----------------------|------------|--------------------------|------------|--------------------------|------------------------|---|----------------------|--|----------------------|--|
| Blinatumomab | Blincyto | J9039 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Bortezomib | Velcade | J9041 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Bortezomib (Dr. Reddy's) | | J9046 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N | Termed | N | Termed | All NDC's have been inactive effective: 01/10/24 |
| Bortezomib (fresenius kabi) | | J9048 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Bortezomib (hosira) | | J9049 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Bortezomib (maia) | | J9051 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Bosutinib - oral | Bosulif | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Brentuximab Vedotin | Adcetris | J9042 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Brigatinib - oral | Alunbrig | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Burosomab-twza | Crysvita | J0584 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | N | Y | N | Y | |
| Cabazitaxel | Jevtana | J9043 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Cabazitaxel (sandoz) | | J9064 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Cabozantinib - oral | Cabometyx | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Cabozantinib - oral | Cometriq | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Calaspargase pegol-mknl | Asparlas | J9118 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Capecitabine - oral | Xeloda (150 mg) | J8520 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | Medicare Part B |
| Capecitabine - oral | Xeloda (500 mg) | J8521 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | Medicare Part B |
| Capivasertib - oral | Truqap | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Capmatinib - oral | Tabrecta | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Carboplatin | Paraplatin | J9045 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Carfilzomib | Kyprolis | J9047 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Carmustine | BICNU, BCNU | J9050 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Carmustine (accord) | | J9052 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Cemiplimab-rwlc | Libtayo | J9119 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Ceritinib - oral | Zykadia | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Cetuximab | Erbitux | J9055 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Chlorambucil - oral | Leukeran | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | Medicare Part B |
| Chlorambucil - oral | Leukeran | S0172 | Medical Oncology - CHEMO | Primary | ORAL | Y | N | Y | N | N | Medicare Part B |
| Cisplatin | Platinol | J9060 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Cladribine | Leustatin | J9065 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Clofarabine | Ciolar | J9027 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Cobimetinib - oral | Cotellic | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Copanlisib | Aliqopa | J9057 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N | Termed | N | Termed | |
| Crizotinib - oral | Xalkori | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Cyclophosphamide - inj | Cytosan, Endoxan-Asta | J9070 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Cyclophosphamide - inj (auromedic) | | J9071 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Cyclophosphamide - inj (dr. reddy's) | | J9072 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Cyclophosphamide - inj (ingenus) | | J9073 | Medical Oncology - CHEMO | Primary | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New manufacturer code: J9073 for Cyclophosphamide - inj, effective: 04/01/24 |
| Cyclophosphamide - inj (sandoz) | | J9074 | Medical Oncology - CHEMO | Primary | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New manufacturer code: J9074 for Cyclophosphamide - inj, effective: 04/01/24 |

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| Cyclophosphamide Inj, not otherwise specified | | J9075 | Medical Oncology - CHEMO | Primary | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New generic HCPC Code: J9075 for Cyclophosphamide inj, effective: 04/01/24 |
| Cytarabine | Ara-C | J9100 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Cytarabine-Liposome | DepoCyt | J9098 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Dabrafenib - oral | Tafinlar | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Dacarbazine | DTIC-Dome | J9130 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Dacomitinib - oral | Vizimpro | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Dactinomycin | Cosmegen, Actinomycin | J9120 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Daratumumab | Darzalex | J9145 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Daratumumab and hyaluronidase-fjh | Darzalex Faspro | J9144 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Darbepoetin alfa | Aranesp | J0881 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a preferred drug and requires prior authorization | | Y: This is a preferred drug and requires prior authorization | | Y: This is a preferred drug and requires prior authorization | |
| Darolutamide - oral | Nubeqa | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Dasatinib - oral | Sprycel | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Daunorubicin | Cerubidine | J9150 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Decitabine | Dacogen | J0894 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Decitabine (sun pharma) | | J0893 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Decitabine and cedazuridine - oral | Inqovi | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Degarelix | Firmagon | J9155 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Denosumab | Xgeva, Prolia | J0897 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | Y | Y | N | Y | |
| Denosumab | Xgeva, Prolia | J0897 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | Primary chemo pathway for the use of Xgeva to treat Giant Cell Tumor. |
| Denosumab-bbdz | Wyost, Jubboniti | C9399 | Medical Oncology - SPORT | Supportive | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New supportive biosimilar for Xgeva and Prolia effective: 03/19/24 |
| Denosumab-bbdz | Wyost, Jubboniti | J3490 | Medical Oncology - SPORT | Supportive | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New supportive biosimilar for Xgeva and Prolia effective: 03/19/24 |
| Denosumab-bbdz | Wyost, Jubboniti | J3590 | Medical Oncology - SPORT | Supportive | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New supportive biosimilar for Xgeva and Prolia effective: 03/19/24 |
| Denosumab-bbdz | Wyost, Jubboniti | J9999 | Medical Oncology - SPORT | Supportive | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New supportive biosimilar for Xgeva and Prolia effective: 03/19/24 |
| Dinutuximab | Unituxin | C9399 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Dinutuximab | Unituxin | J9999 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Docetaxel | Taxotere | J9171 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Docetaxel (ingenus) | | J9172 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Dolasetron Mesylate | Anzemet | J8597 | Medical Oncology - SPORT | Supportive - Antiemetic | ORAL | Y | Y | Y | Y | N | |
| Dostarlimab-gxly | Jemperli | J9272 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Doxorubicin HCL | Adriamycin | J9000 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Doxorubicin HCL (liposomal) not otherwise specified | Doxil, Doxorubicin HCL (Liposomal) | Q2050 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Durvalumab | Imfinzi | J9173 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Duvelisib - oral | Copiktra | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Efbemalenograstim alfa-vuxw | Ryzneuta | C9399 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | Y | Y | Y | Y | |
| Efbemalenograstim alfa-vuxw | Ryzneuta | J3490 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | Y | Y | Y | Y | |
| Efbemalenograstim alfa-vuxw | Ryzneuta | J3590 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | Y | Y | Y | Y | |
| Efbemalenograstim alfa-vuxw | Ryzneuta | J9999 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | Y | Y | Y | Y | |
| Eflapegrastim-xnt | Rolvedon | J1449 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | N | Y | N | Y | |

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| Eflornithine - oral | Iwifin | J8999 | Medical Oncology - CHEMO | Primary | ORAL | TBD | TBD | TBD | TBD | N | New primary oral chemotherapy drug effective: 01/04/24 |
| Elacestrant - oral | Orserdu | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | | Y | | N | |
| Elotuzumab | Impliciti | J9176 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Elranatamab-bcmm | Elrexio | J1323 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | New permanent HCPC Code: J1323 will replace NOC Code: C9165 & J9999 for Elrexio, effective: 04/01/24 |
| Elranatamab-bcmm | Elrexio | C9165 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | Termed | Termed | Termed | Termed | New permanent HCPC Code: J1323 will replace NOC Code: C9165 & J9999 for Elrexio, effective: 04/01/24 |
| Elranatamab-bcmm | Elrexio | J9999 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | Termed | Termed | Termed | Termed | New permanent HCPC Code: J1323 will replace NOC Code: C9165 & J9999 for Elrexio, effective: 04/01/24 |
| Enasidenib - oral | IDHIFA | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Encorafenib - oral | Braftovi | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Enfortumab vedotin-ejfv | Padovex | J9177 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y: 04/01/24 | Y | N | Y | |
| Entrectinib - oral | Rozlytrek | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Enzalutamide - oral | Xtandi | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Epcoritamab-bywp | Epknly | C9399 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N | Termed | N | Termed | |
| Epcoritamab-bywp | Epknly | J9321 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Epirubicin | Ellence | J9178 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Epoetin alfa | Epogen, Procrit | J0885 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: Procrit is Preferred and Epogen is Non-Preferred; both drugs require prior authorization | N | Y: Procrit is Preferred and Epogen is Non-Preferred; both drugs require prior authorization | Y | Y: Procrit is Preferred and Epogen is Non-Preferred; both drugs require prior authorization | |
| Epoetin alfa-epbx | Retacrit | Q5106 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a preferred drug and requires prior authorization | Y | Y: This is a preferred drug and requires prior authorization | Y | Y: This is a preferred drug and requires prior authorization | |
| Erdaftinib-oral | Balversa | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Eribulin mesylate | Halaven | J9179 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Erlotinib - oral | Tarceva | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Estramustine - oral | Emcyt | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | N | Y | N | N | |
| Etoposide - inj | Toposar, VePesid, Etopophos | J9181 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Etoposide - oral | Toposar | J8560 | Medical Oncology - CHEMO | Primary | ORAL | Y | N | Y | N | N | Medicare Part B |
| Everolimus - oral | Afinitor | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Exemestane - oral | Aromasin | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | N | Y | N | N | |
| Exemestane - oral | Aromasin | S0156 | Medical Oncology - CHEMO | Primary | ORAL | Y | N | Y | N | N | |
| Fam-trastuzumab deruxtecan-nxki | Enheru | J9358 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Fedratinib - oral | Inrebic | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Filgrastim | Neupogen | J1442 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Filgrastim-aafi | Nivestym | Q5110 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a preferred drug and requires prior authorization | Y | Y: This is a preferred drug and requires prior authorization | Y | Y: This is a preferred drug and requires prior authorization | |
| Filgrastim-ayow | Releuko | Q5125 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | Y | Y: This is a non-preferred drug and requires prior authorization | Y | Y: This is a non-preferred drug and requires prior authorization | |
| Filgrastim-sndz | Zarxio | Q5101 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | Y | Y: This is a preferred drug and requires prior authorization | |
| Floxuridine | FUDR | J9200 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |

Effective Date: 04/01/2024

| Description | Alt Descriptions | HPCPs Code | Program | Drug Class | Administration Technique | Healthfirst Commercial | N/A - HFNY COM (Pharm Benefits) PA Status | Healthfirst Medicaid | N/A - HFNY Medicaid (Pharm Benefits) PA Status | Healthfirst Medicare | Drug Comments |
|------------------------------------|------------------|------------|--------------------------|-------------------------|--------------------------|------------------------|---|----------------------|---|----------------------|---|
| Fludarabine Phosphate | Fludara, Oforta | J9185 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Fluoxymesterone - oral | Androxy | J8499 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Fosaprepitant | Emend | J1453 | Medical Oncology - SPORT | Supportive - Antiemetic | INJECTABLE | Y | N | Y | Y | Y | |
| Fosaprepitant (focinvez) | | J1434 | Medical Oncology - SPORT | Supportive - Antiemetic | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New manufacturer code: J1434 for Fosaprepitant, effective: 04/01/24 |
| Fosaprepitant (teva) | | J1456 | Medical Oncology - SPORT | Supportive - Antiemetic | INJECTABLE | Y | N | Y | N | Y | |
| Fosnetupitant/Palonosetron | Akynzeo | J1454 | Medical Oncology - SPORT | Supportive - Antiemetic | INJECTABLE | Y | N | Y | N | Y | |
| Fruquintinib - oral | Fruzaqia | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Fulvestrant | Faslodex | J9395 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Fulvestrant (fresenius kabi) | | J9394 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Fulvestrant (teva) | | J9393 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Futibatinib - oral | Lygobi | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Gefitinib - oral | Iressa | J8565 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Gemcitabine | Gemzar | J9201 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Gemcitabine HCL in NaCL | Infugem | J9198 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Gemcitabine Hydrochloride (accord) | | J9196 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Gemtuzumab Ozogamicin | Mylotarg | J9203 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Gilteritinib - oral | Xospata | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Glasdegib - oral | Daurismo | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Glofitamab-gxm | Columvi | J9286 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y: except for no PA required on pharmacy for HFD and HFT plan types | Y | Y: except for no PA required on pharmacy for HFD and HFT plan types | Y | |
| Goserelin acetate implant | Zoladex | J9202 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | | | | | |
| Granisetron - subcutaneous | Sustol | J1627 | Medical Oncology - SPORT | Supportive - Antiemetic | INJECTABLE | Y | N | Y | N | Y | |
| Granisetron - transdermal | Sancuso | J3490 | Medical Oncology - SPORT | Supportive - Antiemetic | TRANSDERMAL | Y | N | Y | Y | N | |
| Histrelin Implant | Vantas | J9225 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Ibrutinib - oral | Imbruvica | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Idarubicin HCL - inj | Idamycin | J9211 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Idelalisib - oral | Zydelig | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Ifosfamide | Ifex, Mitoxana | J9208 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Imatinib - oral | Gleevec | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Imatinib - oral | Gleevec | S0088 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Infigratinib - oral | Truseltiq | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Termed | N/A | Termed | N/A | N | |
| Inotuzumab Ozogamicin | Besponsa | J9229 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Interferon, alfa-2b, recombinant | Intron A | J9214 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | Y | Y | |
| Interferon, gamma-1b | Actimmune | J9216 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | Y | Y | |
| Ipilimumab | Yervoy | J9228 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Irinotecan | Camptosar | J9206 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Irinotecan Liposome | Onivyde | J9205 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Isatuximab-irfc | Sarcisa | J9227 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Ivosidenib - oral | Tibsovo | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Ixabepilone | Ixempra | J9207 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Ixazomib - oral | Ninlaro | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |

Effective Date: 04/01/2024

| Description | Alt Descriptions | HPCPs Code | Program | Drug Class | Administration Technique | Healthfirst Commercial | N/A - HFNY COM (Pharm Benefits) PA Status | Healthfirst Medicaid | N/A - HFNY Medicaid (Pharm Benefits) PA Status | Healthfirst Medicare | Drug Comments |
|--|--|------------|--------------------------|------------|--------------------------|--|---|--|---|--|--|
| Lanreotide | Somatuline Depot | J1930 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y: This is a preferred drug and requires prior authorization | Y | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | |
| Lanreotide (cipa) | | J1932 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | Y | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Lapatinib - oral | Tykerb | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Larotrectinib - oral | Vitrakvi | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Lenalidomide - oral | Revlimid | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Lenvatinib - oral | Lenvima | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Leucovorin - inj | Leucovorin Calcium | J0640 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Leucovorin - oral | Leucovorin | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | N | Y | N | N | |
| Leuproreotide (cipa) | | J1954 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Leuproreotide Acetate (J1950: 3.75mg) | Eligard, Lupron Depot, Lupron, Leuproreotide Acetate | J1950 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | Y | Y | |
| Leuproreotide Acetate (J9217: 7.5mg) | Eligard, Lupron Depot, Lupron, Leuproreotide Acetate | J9217 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | Y | Y | |
| Leuproreotide Acetate (J9218: 1mg) | Lupron | J9218 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | Y | Y | |
| Leuproreotide Mesylate | Camcevi | J1952 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Levolevucovorin | Fusilev | J0641 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Levolevucovorin | Khapzory | J0642 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Liposome-encapsulated combination of Daunorubicin and Cytarabine | Vyxeos | J9153 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Lomustine - oral | Gleostine, CCNU | S0178 | Medical Oncology - CHEMO | Primary | ORAL | Y | N | Y | N | N | |
| Loncastuximab tesirine-ipy1 | Zynlonta | J9359 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Lorlatinib - oral | Lorbrena | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Lurbinectedin | Zepzelca | J9223 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Luspatercept-aamt | Reblozyl | J0896 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | N | Y | N | Y | |
| Margetuximab-cmkb | Margenza | J9353 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Mechlorethamine - topical | Valchlor | J9999 | Medical Oncology - CHEMO | Primary | TOPICAL | Y | Y | Y | Y | N | |
| Melphalan (apotex) | | J9249 | Medical Oncology - CHEMO | Primary | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New manufacture code: J9249 for Melphalan, effective: 04/01/24 |
| Melphalan (hepzato) | | J9248 | Medical Oncology - CHEMO | Primary | INJECTABLE | TBD | TBD | TBD | TBD | TBD | New manufacture code: J9248 for Melphalan, effective: 04/01/24 |
| Melphalan HCl - inj | Eromela | J9246 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Melphalan HCl - NOS inj | Alkeran | J9245 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Mesna | Mesnex | J9209 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | N | Y | N | Y | |
| Methotrexate (accord) | | J9255 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Methotrexate Sodium (J9250: 5mg) | Folex, Methotrexate | J9250 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Methotrexate Sodium, 50mg | | J9260 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Midostaurin - oral | Rydapt | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Minvetuximab Soravtansine-gynx | Elahere | C9146 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N/A | Termed | N | Termed | |
| Minvetuximab Soravtansine-gynx | Elahere | C9399 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N/A | Termed | N | Termed | |
| Minvetuximab Soravtansine-gynx | Elahere | J9063 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y: except for no PA required on pharmacy for HFD and HFT plan types | | Y: except for no PA required on pharmacy for HFD and HFT plan types | | |
| Minvetuximab Soravtansine-gynx | Elahere | J9999 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N/A | Termed | N | Termed | |
| Mitomycin | Mutamycin | J9280 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Mitomycin | Jelmyto | J9281 | Medical Oncology - CHEMO | Primary | PYELOCALYCEAL | Y | N | Y | N | Y | Medicare Part B |

Effective Date: 04/01/2024

| Description | Alt Descriptions | HPCPs Code | Program | Drug Class | Administration Technique | Healthfirst Commercial | N/A - HFNY COM (Pharm Benefits) PA Status | Healthfirst Medicaid | N/A - HFNY Medicaid (Pharm Benefits) PA Status | Healthfirst Medicare | Drug Comments |
|--|------------------|------------|--------------------------|-------------------------|--------------------------|--|---|--|---|--|---|
| Mitotane - oral | Lysodren | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Mitoxantrone HCL | Novantrone | J9293 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | Y | Y | |
| Mobocertinib - oral | Exkivity | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Mogamulizumab-kpjc | Poteligeo | J9204 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Momeletinib - oral | Oijaara | J9999 | Medical Oncology - CHEMO | Primary | ORAL | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | N | J8499 will replace C9399 & J9999 for Oijaara, effective: 04/01/24 |
| Momeletinib - oral | Oijaara | C9399 | Medical Oncology - CHEMO | Primary | ORAL | Termed | Termed | Termed | Termed | N | |
| Momeletinib - oral | Oijaara | J9999 | Medical Oncology - CHEMO | Primary | ORAL | Termed | Termed | Termed | Termed | N | |
| Mosunetuzumab-axgb | Lunsumio | C9399 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N/A | Termed | N/A | Termed | |
| Mosunetuzumab-axgb | Lunsumio | J9350 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y: except for no PA required on pharmacy for HFD and HFT plan types | Y | Y: except for no PA required on pharmacy for HFD and HFT plan types | Y | |
| Mosunetuzumab-axgb | Lunsumio | J9999 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | | | | | Termed |
| Moxetumomab pasudotox-tdk | Lumoxiti | J9313 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Nadofaragen Pirafenove-vncg | Adstiladrin | C9399 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N | Termed | N | Termed | |
| Nadofaragen Pirafenove-vncg | Adstiladrin | J9029 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Nadofaragen Pirafenove-vncg | Adstiladrin | J9999 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N | Termed | N | Termed | |
| Naxitamab-gqk | Danyelza | J9348 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Necitumumab | Portrazza | J9295 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Nelarabine | Arranon | J9261 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Neratinib - oral | Nerlynx | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Netupitant/Falonosetron - oral | Akyzeo | J8655 | Medical Oncology - SPORT | Supportive - Antiemetic | ORAL | Y | N | Y | Y | N | |
| Nilotinib - oral | Tasigna | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Niraparib - oral | Zejula | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | N | Y | Y | N | |
| Niraparib and Abiraterone Acetate - Oral | Akeega | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Nirogacestat - oral | Ogsiveo | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Nivolumab | Opdivo | J9299 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Nivolumab and Relatlimab-rmbw | Opduaag | J9298 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | Y | Y | |
| Obinutuzumab | Gazyva | J9301 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Octreotide depot | Sandostatin | J2353 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Octreotide depot | Sandostatin | J2353 | Medical Oncology - SPORT | Supportive | INJECTABLE | | | | | | Y: This is a non-preferred drug and requires prior authorization |
| Octreotide non-depot | Sandostatin | J2354 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Octreotide non-depot | Sandostatin | J2354 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | N | Y | N | Y | |
| Ofatumumab | Arzerra | J9302 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Olaparib - oral | Lynparza | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Olutasidenib - oral | Rezlidhia | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | N | Y | N | N | |
| Omacetaxine | Synribo | J9262 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Osimertinib - oral | Tagrisso | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Oxaliplatin | Eloxatin | J9263 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Paclitaxel | Nov-Onxol, Taxol | J9267 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Paclitaxel (albumin-bound) | Abraxane | J9264 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |

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| Description | Alt Descriptions | HCPCs Code | Program | Drug Class | Administration Technique | Healthfirst Commercial | N/A - HFNY COM (Pharm Benefits) PA Status | Healthfirst Medicaid | N/A - HFNY Medicaid (Pharm Benefits) PA Status | Healthfirst Medicare | Drug Comments |
|--|--|------------|--------------------------|-------------------------|--------------------------|--|--|--|--|--|---------------|
| Paclitaxel albumin-bound (american regent) | | J9259 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y: OOS for exchange/commercial (InsPlanCode HFC, HXI, HXS)for Pharmacy only. In scope for Medical. Added to "Com Exclusion Rules & Messaging" tab. | Y | N | Y | |
| Paclitaxel protein-bound (teva) | | J9258 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y: OOS for exchange/commercial (InsPlanCode HFC, HXI, HXS)for Pharmacy only. In scope for Medical. Added to "Com Exclusion Rules & Messaging" tab. | Y | N | Y | |
| Pacritinib - oral | Vonjo | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Palbociclib - oral | Ibrance | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Palonosetron | Aloxi | J2469 | Medical Oncology - SPORT | Supportive - Antiemetic | INJECTABLE | Y | N | Y | N | Y | |
| Pamidronate Disodium | Aredia | J2430 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | N | Y | N | Y | |
| Panitumumab | Vectibix | J9303 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Pazopanib - oral | Votrient | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Pegasparagase | Oncaspar | J9266 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | Y | Y | |
| Pegfilgrastim, excludes biosimilar, 0.5 mg | Neulasta | J2506 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | |
| Pegfilgrastim-apgf | Nyvepria | Q5122 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | |
| Pegfilgrastim-brmez | Ziextzeno | Q5120 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | Y | Y: This is a non-preferred drug and requires prior authorization | Y | Y: This is a non-preferred drug and requires prior authorization | |
| Pegfilgrastim-cbqv | Udenyca | Q5111 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | |
| Pegfilgrastim-fpgk | Stimufend | Q5127 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Pegfilgrastim-jmdb | Fulphila | Q5108 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Pegfilgrastim-pbbk | Fylnetra | Q5130 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Peginterferon, alfa-2a | Pegasys | S0145 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | Y | Y | |
| Pembrolizumab | Keytruda | J9271 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Pemetrexed | Pemfexy | J9304 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | Y | Y | |
| Pemetrexed | Alimta, Pemetrexed not otherwise specified | J9305 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Pemetrexed (accord) | | J9296 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Pemetrexed (bluepoint) | | J9322 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Pemetrexed (hospira) | | J9323 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Pemetrexed (novaplus / hospira) | | J9294 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Pemetrexed (perrydri rtu) | | J9324 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Pemetrexed (sandoz) | | J9297 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Pemetrexed (teva) | | J9314 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Pernigatinib - oral | Pemazyre | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Pentostatin | Nipent | J9268 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Pertuzumab | Perjeta | J9306 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |

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| Description | Alt Descriptions | HCPs Code | Program | Drug Class | Administration Technique | Healthfirst Commercial | N/A - HFNY COM (Pharm Benefits) PA Status | Healthfirst Medicaid | N/A - HFNY Medicaid (Pharm Benefits) PA Status | Healthfirst Medicare | Drug Comments |
|--|------------------|--------------------------|--------------------------|-------------------------|--------------------------|--|---|--|--|--|--|
| Pertuzumab / trastuzumab / hyaluronidase-zzxf Phesgo | | J9316 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Pexidartinib - oral Turalio | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Pirtobrutinib - oral Jaypirca | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | | Y | | N | |
| Polatuzumab vedotin-piiq Polivy | | J9309 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Pomalidomide - oral Pomalyst | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Ponatinib - oral Iclusig | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Porfimer Sodium Photofrin | | J9600 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Pralatrexate Folotyn | | J9307 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Pralsetinib - oral Gavreto | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Procarbazine - oral Matulane | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Procarbazine - oral Matulane | | S0182 | Medical Oncology - CHEMO | Primary | ORAL | Y | N | Y | N | N | |
| Quizartinib - oral Vanflyta | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Ramucirumab Cyramza | | J9308 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Regorafenib - oral Stivarga | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Relugolix - oral Orgovyx | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Repotrectinib - oral Augtyro | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Retifanlimab-dlwr Zynyz | | C9399 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N | Termed | N | Termed | |
| Retifanlimab-dlwr Zynyz | | J9345 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Retifanlimab-dlwr Zynyz | | J9999 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N | Termed | N | Termed | |
| Ribociclib - oral Kisqali | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Ripretinib - oral Qinlock | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Rituximab Rituxan | | J9312 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Rituximab and Hyaluronidase Human Rituxan Hycela | | J9311 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Rituximab-abbs Truxima | | Q5115 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | |
| Rituximab-arrx Riabni | | Q5123 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Rituximab-pvrr Ruxience | | Q5119 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | |
| Rolapitant - oral Varubi | | J8670 | Medical Oncology - SPORT | Supportive - Antiemetic | ORAL | Y | N | Y | N | N | |
| Romidepsin (lyophilized) Romidepsin (non-lyophilized) | Istodax | J9319 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Romidepsin (lyophilized) J9318 | | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | N | Y | |
| Romiplostim Nplate | | J2796 | Medical Oncology - SPORT | Supportive | INJECTABLE | TBD | TBD | TBD | TBD | TBD | Supportive drug used to treat myelosuppressive doses of radiation. |
| Ropeginterferon alfa-2b-njt Besremi | | C9399 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Ropeginterferon alfa-2b-njt Besremi | | J9999 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Rucaparib - oral Rubraca | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Ruxolitinib - oral Jakafi | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Sacituzumab govitecan-hziy Trodelvy | | J9317 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Sargramostim Leukine | | J2820 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | N | Y | N | Y | |
| Selinexor - oral Xpovio | | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |

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|---|------------------|-----------|--------------------------|------------|--------------------------|--|---|--|---|--|--|
| Selpercatinib - oral | Retevmo | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Selumetinib - oral | Koselugo | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Siltuximab | Sylvant | J2860 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Sipuleucel-T | Provenge | Q2043 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Sirolimus protein-bound particles for injectable suspension (albumin bound) | Fyarro | J9331 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Sodium Thiosulfate Injection | Pedmark | J0208 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | Y | Y | Y | Y | |
| Sodium Thiosulfate injection (hope) | | J0209 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | New manufacturer code: J0209 for Sodium Thiosulfate effective: 04/01/24 |
| Sonidegib - oral | Odomzo | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Sorafenib Tosylate - oral | Nexavar | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Sotorasib - oral | Lumakras | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Streptozocin | Zanosar | J9320 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Sunitinib - oral | Sutent | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Tafasitamab-cxix | Monjuvi | J9349 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Tagraxofusp-erzs | Elzronis | J9269 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Talazoparib - oral | Talzenna | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Talmogene Laherparepvec | Imlydig | J9325 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Talquetamab-tgvs | Talvey | J3055 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | New permanent HCPC Code: J3055 will replace NOC Codes: C9163 & J9999 for Talvey, effective: 04/01/24 |
| Talquetamab-tgvs | Talvey | C9163 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | Termed | Termed | Termed | Termed | New permanent HCPC Code: J3055 will replace NOC Codes: C9163 & J9999 for Talvey, effective: 04/01/24 |
| Talquetamab-tgvs | Talvey | J9999 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | Termed | Termed | Termed | Termed | New permanent HCPC Code: J3055 will replace NOC Codes: C9163 & J9999 for Talvey, effective: 04/01/24 |
| Tazemetostat - oral | Tazverik | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Tbo-filgrastim | Granix | J1447 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Tebentafusp-tebn | Kimmtrak | J9274 | Medical Oncology - CHEMO | Primary | INJECTABLE | | | | | | |
| Teclistamab-cqvy | Tecvayli | C9148 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N/A | Termed | N/A | Termed | |
| Teclistamab-cqvy | Tecvayli | C9399 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N/A | Termed | N/A | Termed | |
| Teclistamab-cqvy | Tecvayli | J9380 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y: except for no PA required on pharmacy for HFD and HFT plan types | Y | Y: except for no PA required on pharmacy for HFD and HFT plan types | Y | |
| Teclistamab-cqvy | Tecvayli | J9999 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | | | | | |
| Telotristat ethyl - oral | Xermelo | J8499 | Medical Oncology - SPORT | Supportive | ORAL | Y | N | Y | N | N | |
| Temozolomide - inj | Temodar | J9328 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | Y | Y | |
| Temozolomide - oral | Temodar | J8700 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | Medicare Part B |
| Tensirolimus | Torisel | J9330 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Teniposide | Vumon | Q2017 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Tepotinib - oral | Tepmetko | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Thalidomide - oral | Thalomid | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Thiotepa | Thioplex | J9340 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |

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|------------------------------------|-------------------|-----------|--------------------------|----------------------|--------------------------|--|---|--|--|--|---|
| Tisotumab vedotin-tftv | Tivdak | J9273 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Tivozanib - oral | Fotivda | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Tocilizumab | Actemra | J3262 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | Y | Y | N | Y | Supportive pathway for the use of Actemra for CAR-T induced CRS |
| Tocilizumab | Actemra | J3262 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N | Y | |
| Tocilizumab-bavi | Tofidence | Q5133 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | New Permanent HCPC Code: Q5133 will replace NOC Codes: C9399 & J9999 for Tofidence effective: 04/01/24. |
| Tocilizumab-bavi | Tofidence | Q5133 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | Y: 04/01/24 | New permanent HCPC Code: Q5133 will replace NOC Codes: C9399 & J9999 for Tofidence effective: 04/01/24. |
| Tocilizumab-bavi | Tofidence | C9399 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Termed | Termed | Termed | Termed | Termed | New Permanent HCPC Code: Q5133 will replace NOC Codes: C9399 & J9999 for Tofidence effective: 04/01/24. |
| Tocilizumab-bavi | Tofidence | C9399 | Medical Oncology - SPORT | Supportive | INJECTABLE | Termed | Termed | Termed | Termed | Termed | New permanent HCPC Code: Q5133 will replace NOC Codes: C9399 & J9999 for Tofidence effective: 04/01/24. |
| Tocilizumab-bavi | Tofidence | J9999 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Termed | Termed | Termed | Termed | Termed | New Permanent HCPC Code: Q5133 will replace NOC Codes: C9399 & J9999 for Tofidence effective: 04/01/24. |
| Tocilizumab-bavi | Tofidence | J9999 | Medical Oncology - SPORT | Supportive | INJECTABLE | Termed | Termed | Termed | Termed | Termed | New permanent HCPC Code: Q5133 will replace NOC Codes: C9399 & J9999 for Tofidence effective: 04/01/24. |
| Topotecan - inj | Hycamtin | J9351 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Topotecan - oral | Hycamtin | J8705 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | Medicare Part B |
| Toripalimab-tpzi | Loqtorzi | C9399 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | TBD | Y | TBD | Y | |
| Toripalimab-tpzi | Loqtorzi | J9999 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | TBD | Y | TBD | Y | |
| Trabectedin | Yondelis | J9352 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Trametinib - oral | Mekinist | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Trametinib - powder for suspension | Mekinist | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Trastuzumab | Herceptin | J9355 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Trastuzumab and hyaluronidase-oyk | Herceptin Hylecta | J9356 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Trastuzumab-anns | Kanjinti | Q5117 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | |
| Trastuzumab-dkst | Ogviri | Q5114 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |

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|-------------------------------|-----------------------|------------|--------------------------|----------------------|--------------------------|--|---|--|--|--|---------------|
| Trastuzumab-dttb | Ontruzant | Q5112 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Trastuzumab-pkrb | Herzuma | Q5113 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | N | Y: This is a non-preferred drug and requires prior authorization | |
| Trastuzumab-qyyp | Trazimera | Q5116 | Medical Oncology - CHEMO | Primary - Biosimilar | INJECTABLE | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | N | Y: This is a preferred drug and requires prior authorization | |
| Tremelimumab-actl | Imjudo | C9147 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N/A | Termed | N/A | Termed | |
| Tremelimumab-actl | Imjudo | J9347 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | Y | Y | N/A | Y | |
| Tremelimumab-actl | Imjudo | J9999 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N/A | Termed | N/A | Termed | |
| Trifluridine/Tipiracil - oral | Lonsurf | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Trilaciclib | Cosela | J1448 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | N | Y | N | Y | |
| Triptorelin Pamoate | Trelstar | J3315 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Tucatinib - oral | Tukysa | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Valrubicin | Valstar | J9357 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Vandetanib - oral | Caprelsa | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Vemurafenib - oral | Zelboraf | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Venetoclax - oral | Venclexta | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Vinblastine Sulfate | Velban | J9360 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Vincristine Sulfate | Oncovin, Vincasar PFS | J9370 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Vincristine Sulfate Liposome | Marqbo | J9371 | Medical Oncology - CHEMO | Primary | INJECTABLE | Termed | N/A | Termed | N/A | Termed | |
| Vinorelbine Tartrate | Navelbine | J9390 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Vismodegib - oral | Erivedge | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Vorinostat - oral | Zolinza | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Zanubrutinib - oral | Brukinsa | J8999 | Medical Oncology - CHEMO | Primary | ORAL | Y | Y | Y | Y | N | |
| Ziv-Aflibercept | Zaltrap | J9400 | Medical Oncology - CHEMO | Primary | INJECTABLE | Y | N | Y | N | Y | |
| Zoledronic Acid | Zoledronic Acid | J3489 | Medical Oncology - SPORT | Supportive | INJECTABLE | Y | Y | Y | N | Y | |