

## 2018 MDwise Medical Exclusion List

MDwise will transfer coverage of the following physician-administered medications to the pharmacy benefit effective on the dates **noted by green or blue highlight, 4/1/2018 and 6/1/2018 respectively**. At that time, medication should be sourced from a contracted specialty pharmacy (i.e., AllianceRx Walgreens Prime, IU Health Retail, or Eskenazi Retail Pharmacies). To do so, the provider should generate a prescription for the desired medication, and the dispensing pharmacy will submit a claim through the point-of-sale system. Current UM criteria will still apply for pharmacy claims processing, but the drugs will no longer appear on the medical PA list. Prior authorization requests may be faxed to the MDwise Pharmacy Benefit Manager, MedImpact, at **(858) 790-7100**.

### Phase 1 – effective 4/1/2018

### Phase 2 – effective 6/1/2018

Code	Descriptor, Generic Name, J code unit	Brand Name
C9015	Injection, C-I esterase inhibitor (human), Haegarda, 10 units	Haegarda
J0129	Injection, abatacept, 10 mg	Orencia
J0202	Injection, alemtuzumab, 1 mg	Lemtrada
J0490	Injection, belimumab, 10 mg	Benlysta
J0570	Buprenorphine implant, 74.2 mg	Probuphine
J0596	Injection, C-I esterase inhibitor (recombinant), Ruconest, 10 units	Ruconest
J0597	Injection, C-I esterase inhibitor (human), Berinert, 10 units	Berinert
J0598	Injection, CI esterase inhibitor (human), Cinryze, 10 units	Cinryze
J0638	Injection, canakinumab, 1 mg	Ilaris
J0800	Injection, corticotropin, up to 40 units	H.P. Acthar
J1290	Injection, ecallantide, 1 mg	Kalbitor
J1300	Injection, eculizumab, 10 mg	Soliris
J1428	Injection, eteplirsen, 10 mg	Exondys-51
J1602	Injection, golimumab, 1 mg, for intravenous use	Simponi Aria
J1645	Injection, dalteparin sodium, per 2500 IU	Fragmin
J1650	Injection, enoxaparin sodium, 10 mg	Lovenox
J1652	Injection, fondaparinux sodium, 0.5 mg	Arixtra
J1655	Injection, tinzaparin sodium, 1000 IU	N/A
J1744	Injection, icatibant, 1 mg	Firazyr
J1745	Injection, infliximab, excludes biosimilar, 10 mg	Remicade
J1930	Injection, lanreotide, 1 mg	Somatuline
J2182	Injection, mepolizumab, 1 mg	Nucala
J2315	Injection, naltrexone, depot form, 1 mg	Vivitrol
J2323	Injection, natalizumab, 1 mg	Tysabri
J2326	Injection, nusinersen, 0.1 mg	Spinraza

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Code	Descriptor, Generic Name, J code unit	Brand Name
J2350	Injection, ocrelizumab, 1 mg	Ocrevus
J2353	Injection, octreotide, depot form for intramuscular injection, 1 mg	Sandostatin LAR
J2354	Injection, octreotide, non-depot form for subcutaneous or intravenous injection, 25 mcg	Sandostatin
J2357	Injection, omalizumab, 5 mg	Xolair
J2786	Injection, reslizumab, 1 mg	Cinqair
J2793	Injection, rilonacept, 1 mg	Arcalyst
J2860	Injection, siltuximab, 10 mg	Sylvant
J3262	Injection, tocilizumab, 1 mg	Actemra
J3358	Ustekinumab, for intravenous injection, 1 mg	Stelara IV
J3380	Injection, vedolizumab, 1 mg	Entyvio
J7175	Injection, factor x, (human), 1 IU	Coagadex
J7178	Injection, human fibrinogen concentrate, 1 mg	RiaSTAP
J7179	Injection, von willebrand factor (recombinant), (Vonvendi), 1 IU vwf:rco	Vonvendi
J7180	Injection, factor xiii (antihemophilic factor, human), 1 IU	Corifact
J7181	Injection, factor xiii a-subunit, (recombinant), per IU	Tretten
J7182	Injection, factor viii, (antihemophilic factor, recombinant), (Novoeight), per IU	Novoeight
J7183	Injection, von willebrand factor complex (human), Wilate, 1 IU vwf:rco	Wilate
J7185	Injection, factor viii (antihemophilic factor, recombinant) (Xyntha), per IU	Xyntha
J7186	Injection, antihemophilic factor viii/von willebrand factor complex (human), per factor viii IU	Alphanate (VWF Complex)
J7187	Injection, von willebrand factor complex (Humate-P), per IU vwf:rco	Humate-P
J7188	Injection, factor viii (antihemophilic factor, recombinant), (Obizur), per IU	Obizur
J7189	Factor viia (antihemophilic factor, recombinant), per 1 microgram	NovoSeven RT
J7190	Factor viii (antihemophilic factor, human) per IU	Hemofil M
J7191	Factor viii (antihemophilic factor (porcine), per IU	N/A
J7192	Factor viii (antihemophilic factor, recombinant) per IU, not otherwise specified	Advate
J7193	Factor ix (antihemophilic factor, purified, non-recombinant) per IU	Alphanine SD

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Code	Descriptor, Generic Name, J code unit	Brand Name
J7194	Factor ix, complex, per IU	Bebulin
J7195	Injection, factor ix (antihemophilic factor, recombinant) per IU, not otherwise specified	BeneFIX
J7196	Injection, antithrombin recombinant, 50 IU	Atryn
J7197	Antithrombin iii (human), per IU	Thrombate III
J7198	Anti-inhibitor, per IU	Feiba
J7199	Hemophilia clotting factor, not otherwise classified	<various>
J7200	Injection, factor ix, (antihemophilic factor, recombinant), Rixubis, per IU	RIXUBIS
J7201	Injection, factor ix, fc fusion protein, (recombinant), Alprolix, 1 IU	Alprolix
J7202	Injection, factor ix, albumin fusion protein, (recombinant), Idelvion, 1 IU	Idelvion
J7205	Injection, factor viii fc fusion protein (recombinant), per IU	Eloctate
J7207	Injection, factor viii, (antihemophilic factor, recombinant), pegylated, 1 IU	Adynovate
J7209	Injection, factor viii, (antihemophilic factor, recombinant), (Nuwiq), 1 IU	Nuwiq
J7210	Injection, factor VIII, (antihemophilic factor, recombinant), (Afstyla), 1 IU	Afstyla
J7211	Injection, factor VIII, (antihemophilic factor, recombinant), (Kovaltry), 1 IU	Kovaltry