# North Carolina Division of Health Benefits

Physician Administered Drug Program Catalog

Unless otherwise indicated, the catalog contains procedure codes representing drugs, biologics, devices and vaccines which are only covered for FDA approved indications.

11 digit National Drug Codes (NDCs) are required to be billed along with their corresponding procedure code. Drugs and biologics must be classified as CMS covered outpatient drugs from a labeler/manufacturer participating in the Medicaid Drug Rebate Program (MDRP).

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| -Flocedule cou      | es foi covei  | red devices and vaccines are   | e not required to be from  |                            | abeler/manufacture                                  | er as they are not classified as o  | overed outpatient drugs.  |                 |                      |             |             |                        |                 |                              |          |                       |
|---------------------|---------------|--|----------------------------|----------------------------|---|---|---|-----------------|----------------------|-------------|-------------|------------------------|-----------------|------------------------------|----------|-----------------------|
| Category            | HCPCS<br>Code | HCPCS Description  | HCPCS Code Billing<br>Unit | HCPCS<br>Effective<br>Date | Brand Name  | Generic Name  | FDA Approved Indications<br>(See Package Insert for full FDA approved indication descriptions)  | Max Daily Units | Max Monthly<br>Units | Minimum Age | Maximum Age | Gender<br>Restrictions | NDC<br>Required | Rebating Labeler<br>Required | Comments | Last Modified<br>Date |
| Biologicals         | J0584         | Injection, burosumab-<br>twza 1 mg   | 1 mg                       | 1/1/2019                   | Crysvita®   | burosumab-twza injection,<br>for subcutaneous use   | Indicated for the treatment of X-linked hypophosphatemia (XLH) in adult and pediatric patients 6 months of age and older.   | 90              | 270                  | 6 months    | N/A         | N/A                    | Y               | Y                            |          | 10/28/2019            |
| Immune<br>Globulins | 90291         | Cytomegalovirus immune<br>globulin (CMV-IgIV),<br>human, for intravenous<br>use  | 50 mL                      | 1/1/2000                   | Cytogam®  | cytomegalovirus immune<br>globulin intravenous, human   | Indicated for the prophylaxis of cytomegalowirus disease associated with transplantation of kidney, lung, liver, pancreas, and heart.<br>In transplants of these organs other than kidney from CMV seropositive donors into seronegative recipients, prophylactic CMV-IGIV<br>should be considered in combination with gandclowir.  | 8.4             | 25.2                 | N/A         | N/A         | N/A                    | ¥               | N                            |          | 9/12/2018             |
| Immune<br>Globulins | 90371         | Hepatitis B Immune<br>Globulin (HBIg), human,<br>for intramuscular use   | 1 mL                       | 1/1/2000                   | HyperHEP B*<br>S/D, Nabi-HB*                        | hepatitis b immune globulin,<br>(human)   | Indicated for treatment of acute exposure to blood containing HBsAg, perinatal exposure of infants born to HBsAg-positive<br>mothers, sexual exposure to HBsAg-positive persons and household exposure to persons with acute HBV infection in the following<br>settings:<br>Acute Exposure to Blood Containing HBsAg. Following either parenteral exposure (needlestick, bits, sharps), direct mucous<br>membrane contact (accidental splash), or oral ingestion (pipetting accident), involving HBsAg-positive materials such as blood,<br>plasma, or serum.<br>• Perinatal Exposure of Infants Born to HBsAg-positive Mothers: Infants born to mothers positive for HBsAg with or without HBeAg.<br>• Sexual Exposure to HBsAg-positive Persons. Sexual partners of HBsAg-positive persons.<br>• Jousehold Exposure to Persons Macute HBV Infection: Infants Is Bart 12 months old whose mother or primary caregiver is<br>positive for HBsAg. Other household contacts with an identifiable blood exposure to the index patient. | 9               | 18                   | N/A         | N/A         | N/A                    | Y               | N                            |          | 9/21/2018             |
| Immune<br>Globulins | 90375         | Rabies Immune Globulin<br>(RIg), human, for<br>intramuscular and/or<br>subcutaneous use                                  | 150 IU                     | 1/1/2000                   | HyperRAB <sup>®</sup> S/D,<br>HyperRAB <sup>®</sup> | (human) treated with<br>solvent/detergent, for  | HyperRAB 5/D: Rabies vaccine and HyperRAB 5/D should be given to all persons suspected of exposure to rabies with one<br>exception: persons who have been previously immunized with rabies vaccine and have a confirmed adequate rabies antibody titer<br>should receive only vaccine. HyperRAB 5/D should be administered as promptly as possible after exposure, but can be administered<br>up to the eighth day after the first dose of vaccine is given.<br>HyperRAB: Indicated for post exposure prophylaxis, along with rabies vaccine, for all persons suspected of exposure to rabies.<br>Limitations of user previously immunized with rabies vaccine that have a confirmed adequate rabies antibody titer should receive only<br>vaccine.   | 20              | 20                   | N/A         | N/A         | N/A                    | Y               | ¥                            |          | 4/8/2020              |
| Immune<br>Globulins | 90376         | Rabies Immune Globulin,<br>heat-treated (RIg-HT),<br>human, for intramuscular<br>and/or subcutaneous use                 | 150 IU                     | 1/1/2000                   | Imogam <sup>®</sup> Rabies<br>– HT                  | rabies immune globulin<br>(human) USP, heat treated   | Indicated for individuals suspected of exposure to rabies, particularly severe exposure, with one exception: persons who have been<br>previously immunized with rabies vaccine prepared from human diploid cells (HDCV) in a pre-exposure or post exposure treatment<br>series should receive only vaccine. Persons who have been previously immunized with rabies vaccines other than HDCV, RVA<br>(Rabies Vaccine Adsorbed), or PECC [Purified Chick Embryo Cell Vaccine) vaccines should have confirmed adequate rabies antibody<br>titers if they are to receive only vaccine.  | 20              | 20                   | N/A         | N/A         | N/A                    | Y               | Y                            |          | 9/21/2018             |
| Immune<br>Globulins | 90389         | Tetanus Immune Globulin<br>(Tig), human, for<br>intramuscular use  | 250 U (1 mL)               | 1/1/2000                   | HyperTET* S/D                                       | tetanus immune globulin<br>(human)  | Indicated for prophylaxis against tetanus following injury in patients whose immunization is incomplete or uncertain. It is also<br>indicated, although evidence of effectiveness is limited, in the regimen of treatment of active cases of tetanus.   | 1               | 2                    | N/A         | N/A         | N/A                    | Y               | Y                            |          | 6/4/2019              |
| Immune<br>Globulins | 90396         | Varicella-zoster Immune<br>Globulin (VZIG), human,<br>for intramuscular use<br>(Code Price is per 1 vial =<br>125 units) | 125 units (1 vial)         | 1/1/2000                   | Varizig <sup>⊕</sup>                                | varicella zoster immune<br>globulin (human) for<br>intramuscular administration<br>only       | Indicated for post exposure prophylaxis in high risk individuals. High risk groups include:<br>• immunocompromised children and adults,<br>• newborns of mothers with varicella shortly before or after delivery,<br>• premature indirats,<br>• infants less than one year of age,<br>• adults without evidence of immunity,<br>• pregnant women.<br>Administration is intended to reduce the severity of varicella.  | 5               | 10                   | N/A         | N/A         | N/A                    | Y               | Y                            |          | 7/3/2018              |
| Immune<br>Globulins | 90399         | Unlisted immune globulin   | 150 IU                     | 1/1/2000                   | Kedrab™   | rabies immune globulin<br>(human) solution for<br>intramuscular injection                     | Indicated for passive, transient post-exposure prophylaxis (PEP) of rabies infection, when given immediately after contact with a<br>rabid or possibly rabid animal. Kedrab should be administered concurrently with a full course of rabies vaccine.<br>• Do not administer additional (repeat) does of Kedrab once vaccine treatment has been initiated, since this may interfere with the<br>immune response to the rabies vaccine.<br>• Do not administer Kedrab to persons with a history of a complete pre-exposure or post-exposure rabies vaccination and<br>confirmed adequate rabies antibody titer.  | 20              | 20                   | 18 years    | N/A         | N/A                    | Y               | Y                            |          | 7/26/2018             |
| Vaccines            | 90585         | Bacillus Calmette-Guerin<br>Vaccine (BCG) for<br>tuberculosis, live, for<br>percutaneous use.                            | 50 mg                      | 1/1/2000                   | BCG Vaccine   | bacillus Calmette-Guérin<br>vaccine (BCG) for<br>tuberculosis, live, for<br>percutaneous use. | For the prevention of tuberculosis (TB) in people not previously infected with Mycobacterium tuberculosis, who are at high risk for<br>exposure.  | 1               | 1                    | N/A         | N/A         | N/A                    | Y               | N                            |          | 7/2/2018              |

|          | 1     | Meningococcal   |        |          | 1                                       |  |  |   | 1 |           |           |     | <u>г г</u> |   | <u> </u>  |
|----------|-------|---|--------|----------|---|--|--|---|---|-----------|-----------|-----|------------|---|-----------|
| Vaccines | 90620 | Meningococcai<br>recombinant protein and<br>outer membrane vesicle<br>vaccine, serogroup B<br>(MenB-4C), 2 dose<br>schedule, for<br>intramuscular use | 0.5 mL | 7/1/2017 | Bexsero*                                | meningococcal group b<br>vaccine suspension for<br>intramuscular injection   | Indicated for active immunization to prevent invasive disease caused by Neisseria meningitidis serogroup B. Bexsero is approved for<br>use in individuals 10 through 25 years of age.  | 1 | 2 | 10 years  | 25 years  | N/A | Y          | N | 9/12/2018 |
| Vaccines | 90621 | Meningococcal<br>recombinant lipoprotein<br>vaccine, serogroup B<br>(MenB-FHbp), 2 or 3 dose<br>schedule, for<br>intramuscular use                    | 0.5 mL | 7/1/2017 | Trumenba®                               | meningococcal group b<br>vaccine suspension for<br>intramuscular injection   | Indicated for active immunization to prevent invasive disease caused by Neisseria meningitidis serogroup 8. Trumenba is approved<br>for use in individuals 10 through 25 years of age.   | 1 | 2 | 10 years  | 23 years  | N/A | Y          | N | 9/12/2018 |
| Vaccines | 90630 | Influenza virus vaccine,<br>quadrivalent (IIV4), split<br>virus, preservative free,<br>for intradermal use  | 0.1 mL | 1/1/2015 | Fluzone®<br>Intradermal<br>Quadrivalent | influenza vaccine suspension<br>for intradermal injection  | Indicated for active immunization for the prevention of influenza disease caused by influenza A subtype viruses and type B viruses<br>contained in the vaccine.<br>Formulation specific information (2017-18):<br>- Fluxone Intradermal Quadrivalent. Approved for use in persons 18 through 64 years of age   | 1 | 1 | 18 years  | 64 years  | N/A | Y          | N | 7/3/2018  |
| Vaccines | 90632 | Hepatitis A vaccine (Hep<br>A), adult dosage, for<br>intramuscular use  | 1 mL   | 1/1/2000 | Havrix®, Vaqta®                         | hepatitis a vaccine, adult<br>dosage, suspension for<br>intramuscular injection  | Indicated for active immunization against disease caused by hepatitis A virus (HAV). Approved for use in persons 12 months of age<br>and older. Primary immunization should be administered at least 2 weeks prior to expected exposure to HAV.  | 1 | 1 | 19 years  | N/A       | N/A | Y          | N | 7/3/2018  |
| Vaccines | 90633 | Hepatitis A vaccine (Hep<br>A), pediatric/adolescent<br>dosage - 2-dose schedule,<br>for intramuscular use  | 0.5 mL | 1/1/2000 | Havrix®, Vaqta®                         | hepatitis a vaccine,<br>pediatric/adolescent dosage-<br>2 dose schedule, for<br>intramuscular injection                            | Indicated for active immunization against disease caused by hepatitis A virus (HAV). Approved for use in persons 12 months of age<br>and older. Primary immunization should be administered at least 2 weeks prior to expected exposure to HAV.  | 1 | 1 | 12 months | 18 years  | N/A | Ŷ          | N | 7/3/2018  |
| Vaccines | 90636 | Hepatitis A and Hepatitis<br>B Vaccine (HepA-HepB),   | 1 mL   | 1/1/2000 | Twinrix®                                | hepatitis a & hepatitis b<br>(recombinant) vaccine   | Indicated for active immunization against disease caused by hepatitis A virus and infection by all known subtypes of hepatitis B<br>virus. Twinrix is approved for use in persons 18 years of age or older.  | 1 | 3 | 18 years  | N/A       | N/A | Y          | Y | 9/12/2018 |
| Vaccines | 90647 | Haemophilus influenzae<br>type b vaccine (Hib), PRP-<br>OMP conjugate, 3-dose<br>schedule, for<br>intramuscular use                                   | 0.5 mL | 1/1/2000 | PedvaxHib®                              | haemophilus b conjugate<br>vaccine (meningococcal<br>protein conjugate)  | For routine vaccination against invasive disease caused by haemophilus influenzae type 8 in infants and children 2 – 71 months of age.   | 1 | 1 | 2 months  | 71 months | N/A | Y          | N | 7/2/2018  |
| Vaccines | 90648 | Haemophilus influenzae b<br>vaccine (Hib), PRP-T<br>conjugate, 4-dose<br>schedule, for<br>intramuscular use   | 0.5 mL | 1/1/2000 | ActHIB®                                 | haemophilus b conjugate<br>vaccine (tetanus toxoid<br>conjugate) solution for<br>intramuscular injection                           | Indicated for the prevention of invasive disease caused by Haemophilus influenzae type b. ActHIB vaccine is approved for use as a four dose series in infants and children 2 months through 5 years of age.  | 1 | 1 | 2 months  | 5 years   | N/A | Y          | N | 7/3/2018  |
| Vaccines | 90649 | Human Papillomavirus<br>vaccine, types 6, 11, 16,<br>18, quadrivalent (4HPV),<br>3 dose schedule, for<br>intramuscular use 0.5 mL                     | 0.5 mL | 1/1/2006 | Gardasil®                               | human papillomavirus<br>quadrivalent (types 6, 11, 16<br>and 18) vaccine, recombinant<br>suspension for intramuscular<br>injection | Gardasi Is indicated in girls and women 9 – 28 years of age for the prevention of the following diseases caused by human<br>papillomarius (PHV) types included in the vacance<br>• Cervical, vulvar, vaginal, and anal cancer caused by HPV types 16 and 18<br>• Genital warts (condydoma acuminata) caused by HPV types 6, 11, 16, and 18:<br>• And the following precancerous or dysplastic lesions caused by HPV types 6, 11, 16, and 18:<br>• Cervical intracphtelial neoplasia (CIN) grade 2, 3 and Cervical adenocarcinoma in situ (AIS)<br>• Cervical intracphtelial neoplasia (CIN) grade 2, 3 and Genita Cervical adenocarcinoma in situ (AIS)<br>• Vulvari intracphtelial neoplasia (VIN) grade 2 and grade 3<br>• Vaginal Intracepithelial neoplasia (MIN) grade 2, and 3.  | 1 | 1 | 9 years   | 26 years  | N/A | Y          | N | 7/3/2018  |
| Vaccines | 90651 | Human Papillomavirus<br>vaccine types 6, 11, 16,<br>18, 31, 33, 45, 52, 58<br>nonavalent (9xHPV), 2 or<br>3 dose schedule, for<br>intramuscular use   | 0.5 mL | 7/1/2017 | Gardasil® 9                             | human papiliomawirus 9-<br>valent vacine, recombinant<br>suspension for intramuscular<br>injection                                 | <ul> <li>And Intracentiesia neonassa JMNI rankes. J. J and.</li> <li>Indicated in griss and women 9 through 45 years of age for the prevention of the following diseases:</li> <li>Cervical, vulvar, vaginal, and anal cancer caused by MPV types 16, 113, 13, 34, 55, 22, and 58</li> <li>Central warts (condyloma acumatal caused) by MPV types 16, 111, 16, 18, 31, 33, 45, 52, and 58.</li> <li>Cervical intraceptiteal in coplasia (CIN) grade 23 and dervical adenocarcinoa in situ (AIS).</li> <li>Cervical intraceptiteal in coplasia (CIN) grade 2 and grade 3.</li> <li>Vulvar intraceptiteal incoplasia (NIN) grade 2 and grade 3.</li> <li>Valgina Intraceptiteal incoplasia (NIN) grade 2 and grade 3.</li> <li>Anal intraceptiteal incoplasia (NIN) grade 2 and grade 3.</li> <li>Indicated in boys and men 9 through 45 years of age for the prevention of the following diseases:</li> <li>Anal intraceptiteal incoplasia (NIN) grade 2 and grade 3.</li> <li>Indicated in boys and men 9 through 45 years of age for the prevention of the following diseases:</li> <li>Anal intraceptiteal incoplasia (NIN) grade 2 and grade 3.</li> <li>Anal intraceptiteal incoplasia (NIN) grade 2 and grade 3.</li> <li>Indicated in boys and men 9 through 45 years of age for the prevention of the following diseases:</li> <li>Anal intraceptiteal incoplasia (NIN) grade 5.</li> <li>And intraceptiteal incoplasia (NIN) grade 5.</li> <li>Anal intraceptiteal incoplasia (NIN) grade 5</li></ul> | 1 | 1 | 9 years   | 45 years  | N/A | Y          | N | 7/3/2018  |
| Vaccines | 90670 | Pneumococcal conjugate<br>vacine, 13 valent<br>(PCV13), for<br>intramuscular use  | 0.5 mL | 7/1/2009 | Prevnar 13*                             | pneumococcal 13-valent<br>conjugate vaccine (diphtheria<br>CRM197 protein) suspension<br>for intramuscular injection               | This indicates weeks through 5 years of age (prior to the 6th birthday), Prevnar 13 is indicated for: <ul> <li>Active immunization for the prevention of imasive disease caused by Streptococcus pneumoniae serotypes 1, 3, 4, 5, 6A, 6B, 7F, 9V, 14, 18C, 19F, and 23F. No ottis media efficacy data are available for serotypes 1, 3, 5, 6A, 7F, and 19A.</li> <li>In children 6 years through 5 years and a gene for into a set of the 18th birthday), Prevnar 13 is indicated for:</li> <li>Active immunization for the prevention of ottis media caused by S. pneumoniae serotypes 4, 6B, 9V, 14, 18C, 19F, and 23F. No ottis media efficacy data are available for serotypes 1, 3, 5, 6A, 7F, and 19A.</li> <li>In children 6 years through 17 years of age (prior to the 18th birthday), Prevnar 13 is indicated for:</li> <li>Active immunization for the prevention of invasive disease caused by S. pneumoniae serotypes 1, 3, 4, 5, 6A, 6B, 7F, 9V, 14, 18C, 19F, and 23F.</li> <li>In adults 18 years of age and older, Prevnar 13 is indicated for:</li> <li>Active immunization for the prevention of pneumonia and invasive disease caused by S. pneumoniae serotypes 1, 3, 4, 5, 6A, 6B, 7F, 9V, 14, 18C, 19F, and 23F.</li> </ul>   | 1 | 1 | 6 weeks   | N/A       | N/A | Y          | N | 7/3/2018  |

| Vaccines | 90672 | Influenza virus vaccine,<br>quadrivalent live (LAIV4),<br>for intranasal use   | 0.2 mL          | 1/1/2013 | FluMist <sup>e</sup><br>Quadrivalent  | influenza virus vaccine,<br>quadrivalent live, intranasal   | Indicated for the active immunization of persons 2–49 years of age for the prevention of influenza disease caused by influenza A subtype viruses and type B viruses contained in the vaccine.  | 1 | 2 | 2 years  | 49 years | N/A | ¥ | N | 9/21/2018 |
|----------|-------|--|-----------------|----------|---|---|--|---|---|----------|----------|-----|---|---|-----------|
| Vaccines | 90674 | Influenza virus vaccine,<br>quadrivalent (ccIIV4),<br>derived from cell<br>cultures, subunit,<br>preservative and<br>antibiotic free, 0.5mL<br>dosage, for intramuscular<br>use                                      | 0.5 mL          | 7/1/2016 | Flucelvax®<br>Quadrivalent  | influenza virus vaccine,<br>suspension for intramuscular<br>injection, preservative-free  | Indicated for active immunization for the prevention of influenza disease caused by influenza virus subtypes A and type B contained<br>in the vaccine.<br>Formulation specific information:<br>• FluceIvax Quadrivalent: Approved for use in persons 4 years of age and older  | 1 | 2 | 4 years  | N/A      | N/A | Y | N | 8/6/2018  |
| Vaccines | 90675 | Rabies vaccine, for<br>intramuscular use   | 1 mL            | 1/1/2000 | Imovax <sup>®</sup> Rabies<br>(Human Diploid-<br>Cell Vaccine) and<br>RabAvert <sup>®</sup><br>(Purified Chick<br>Embryo Cell<br>Culture) | -   | Indicated for pre-exposure and post-exposure prophylaxis against rabies in all age groups.   | 1 | 5 | N/A      | N/A      | N/A | ¥ | N | 7/3/2018  |
| Vaccines | 90680 | Rotavirus vaccine,<br>pentavalent (RV5), 3 dose<br>schedule, live, for oral<br>use   | 2 mL            | 7/1/2005 | RotaTeq®  | rotavirus vaccine, live, oral,<br>pentavalent   | Indicated for the prevention of rotavirus gastroenteritis in infants and children caused by types G1, G2, G3, G4, and G9 when<br>administered as a 3-dose series to infants between the ages of 6 to 32 weeks.   | 1 | 2 | 6 weeks  | 32 weeks | N/A | Y | N | 7/3/2018  |
| Vaccines | 90681 | Rotavirus vaccine,<br>human, attenuated (RV1),<br>2 dose schedule, live, for<br>oral use   | 1 mL            | 1/1/2008 | Rotarix   | rotavirus vaccine, live, oral   | Indicated for the prevention of rotavirus gastroenteritis caused by G1 and non-G1 types (G3, G4, and G9). Rotarix is approved for<br>use in infants 6 weeks to 24 weeks of age.  | 1 | 2 | 6 weeks  | 24 weeks | N/A | Y | N | 7/3/2018  |
| Vaccines | 90682 | Influenza virus vaccine,<br>quadrivalent (RIV4),<br>derived from<br>recombinant DNA,<br>hemagglutinin (HA)<br>protein only, preservative<br>and antibiotic free, for<br>intramuscular use                            | 1 dose (0.5 mL) | 1/1/2017 | Flublok®<br>Quadrivalent  | influenza virus vaccine,<br>quadrivalent (RIV4), derived<br>from recombinant DNA,<br>hemagglutinin (HA) protein<br>only, preservative and<br>antibiotic free, for<br>intramuscular use                              | Indicated for active immunization against disease caused by influenza A subtype viruses and type B viruses contained in the vaccine.<br>Formulation specific information:<br>- Flublok Quadrivalent: Approved for use in persons 18 years of age and older   | 1 | 1 | 18 years | N/A      | N/A | ¥ | N | 5/30/2019 |
| Vaccines | 90686 | Influenza virus vaccine,<br>quadrivalent (IIV4), split<br>virus, preservative free,<br>0.5 mL dosage, for<br>intramuscular use   | 0.5 mL          | 1/1/2013 | Afluria®<br>Quadrivalent,<br>Fluarix®<br>Quadrivalent,<br>FluLaval®<br>Quadrivalent,<br>Fluzone®<br>Quadrivalent                          | influenza vaccine suspension<br>for intramuscular injection,<br>preservative-free, 0.5 mL   | Indicated for active immunization against influenza disease caused by influenza A subtype viruses and type B viruses contained in<br>the vaccine.  | 1 | 2 | 6 months | N/A      | N/A | Y | N | 7/3/2018  |
| Vaccines | 90688 | Influenza virus vaccine,<br>quadrivalent (IIV4), split<br>virus, 0.5 mL dosage, for<br>intramuscular use   | 0.5 mL          | 1/1/2013 | Afluria®<br>Quadrivalent,<br>FluLaval®<br>Quadrivalent,<br>Fluzone®<br>Quadrivalent   | influenza vaccine suspension<br>for intramuscular injection,<br>0.5 mL  | Indicated for active immunization for the prevention of influenza disease caused by influenza A subtype viruses and type B viruses<br>contained in the vaccine.  | 1 | 2 | 6 months | N/A      | N/A | Y | N | 7/3/2018  |
| Vaccines | 90696 | Diphtheria, tetanus<br>toxoids, acellular<br>pertussis vaccine and<br>inactivated poliovirus<br>vaccine, (DTaP-IPV), when<br>administered to children<br>4 years through 6 years of<br>age, for intramuscular<br>use | 0.5 mL          | 1/1/2008 | Kinrix®,<br>QuadraceI™  | diphtheria and tetanus<br>toxoids, acellular pertussis<br>adsorbed and inactivated<br>poliovirus vaccine,<br>suspension for intramuscular<br>injection  | Kinrix: A single dose of Kinrix is indicated for active immunization against diphtheria, tetanus, pertussis, and poliomyelitis as the<br>fifth dose in the diphtheria, tetanus, and acellular pertussis (DTaP) vaccine series and the fourth dose in the inactivated poliovirus<br>vaccine (IPV) series in children 4 through 5 years of age whose previous DTaP vaccine doses have been with INFANRIX and/or<br>PEDIARIX for the first three doses and INFANRIX for the fourth dose.     • Quadracel: indicated for active immunization against diphtheria, tetanus, pertussis and poliomyelitis. A single dose of Quadracel is<br>approved for use in children 4 through syvaers of age as a fifth dose in the diphtheria, tetanus, pertussis vaccination (DTaP)<br>series, and as a fourth or fifth dose in the inactivated poliovirus vaccination (IPV) series, in children who have received four doses of<br>Pentacel and/or Daptacel vaccine. | 1 | 1 | 4 years  | б years  | N/A | Y | N | 7/2/2018  |
| Vaccines | 90698 | Diphtheria, tetanus<br>toxoids, acellular<br>pertussis vaccine,<br>Haemophilus influenzae<br>type b, and inactivated<br>poliovirus vaccine, (DTaP-<br>IPV / Hib), for<br>intramuscular use                           | 0.5 mL          | 1/1/2004 | Pentacel®   | diphtheria and tetanus<br>toxoids and acellular<br>pertussis adsorbed,<br>inactivated poliovirus and<br>haemophilus b conjugate<br>(tetanus toxoid conjugate)<br>vaccine, suspension for<br>intramuscular injection | Indicated for active immunization against diphtheria, tetanus, pertussis, poliomyelitis, and invasive disease due to Haemophilus<br>influenzae type b. Pentacel vaccine is approved for use as a four dose series in children 6 weeks through 4 years of age (prior to fifth<br>birthday).   | 1 | 1 | 6 weeks  | 4 years  | N/A | ¥ | N | 7/2/2018  |
| Vaccines | 90700 | Diphtheria, tetanus<br>toxoids, and acellular<br>pertussis vaccine (DTaP),<br>when administered to<br>individuals younger than<br>seven years, for<br>intramuscular use  | 0.5 mL          | 1/1/2004 | Daptacel®,<br>Infanrix®   | diphtheria, tetanus toxoids,<br>and acellular pertussis<br>vaccine adsorbed suspension<br>for intramuscular injection   | Indicated for active immunization against diphtheria, tetanus and pertussis as a five dose series in infants and children 6 weeks through 6 years of age (prior to 7th birthday).  | 1 | 1 | 6 weeks  | 6 years  | N/A | ¥ | N | 7/2/2018  |

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|----------|-------|--|---------|----------|--|---|--|---|---|------------------------------------|----------|-----|---|---|---|
| Vaccines | 90702 | Diphtheria and tetanus<br>toxoids adsorbed (DT)<br>when administered to<br>individuals younger than<br>7 years, for intramuscular<br>use.  | 0.5 mL  | 1/1/2000 | Diphtheria and<br>Tetanus Toxoids,<br>Adsorbed | diphtheria and tetanus<br>toxoids (DT), adsorbed, for<br>use in individuals younger<br>than seven years, for<br>intramuscular use.  | Indicated for active immunization against diphtheria and tetanus. Diphtheria and Tetanus Toxoids Adsorbed is approved for use in<br>children from 6 weeks through 6 years of age (prior to 7th birthday).  | 1 | 1 | 6 weeks                            | 6 years  | N/A | Ŷ | N | 7/2/2018  |
| Vaccines | 90707 | Measles, mumps and<br>rubella virus vaccine<br>(MMR), live, for<br>subcutaneous use  | 0.5 mL  | 1/1/2004 | M-M-R <sup>®</sup> II                          | measles, mumps, and rubella<br>virus vaccine, live  | Indicated for simultaneous vaccination against measles, mumps, and rubella in individuals 12 months of age or older.   | 1 | 1 | 12 months                          | N/A      | N/A | Y | N | 7/3/2018  |
| Vaccines | 90710 | Measles, mumps, rubella,<br>and varicella vaccine<br>(MMRV), live, for<br>subcutaneous use   | 0.5 mL  | 1/1/2000 | DreQued®                                       | measles, mumps, rubella and<br>varicella virus vaccine live<br>suspension for subcutaneous<br>injection   | Indicated for active immunization for the prevention of measles, mumps, rubella, and varicella in children 12 months through 12 years of age.  | 1 | 1 | 12 months                          | 12 years | N/A | Y | N | 7/3/2018  |
| Vaccines | 90713 | Poliovirus vaccine,<br>Inactivated (IPV), for<br>subcutaneous or<br>intramuscular use  | 0.5 mL  | 7/1/2005 | IPOL®  | poliovirus vaccine,<br>inactivated  | Indicated for active immunization of infants (as young as 6 weeks of age), children and adults for the prevention of poliomyelitis<br>caused by poliovirus types 1, 2, and 3.  | 1 | 2 | 6 weeks                            | N/A      | N/A | Y | Ν | 9/21/2018   |
| Vaccines | 90714 | Tetanus and diphtheria<br>toxoids adsorbed (Td),<br>preservative free, when<br>administered to<br>individuals 7 years or<br>older, for intramuscular<br>use  | 0.5 mL  | 7/1/2005 | Tenivac <sup>⊕</sup> s                         | tetanus and diphtheria<br>toxoids, adsorbed,<br>suspension for intramuscular<br>injection   | Indicated for active immunization for the prevention of tetanus and diphtheria in persons 7 years of age and older.  | 1 | 2 | 7 years                            | N/A      | N/A | Y | N | 7/3/2018  |
| Vaccines | 90715 | Tetanus, diphtheria<br>toxoids and acellular<br>pertussis vaccine (Tdap),<br>when administered to<br>individuals 7 years or<br>older, for intramuscular<br>use   | 0.5 mL  | 7/1/2005 | BOOSTRIX®                                      | tetanus toxoid, reduced<br>diphtheria toxoid and<br>acellular pertussis vaccine<br>adsorbed, suspension for<br>intramuscular injection  | Indicated for active booster immunization against tetanus, diphtheria, and pertussis as a single dose in people 10 years of age and<br>older. (Adacel brand is only indicated for patients 11-64 years of age.)  | 1 | 1 | Product Specific (see<br>comments) | 64 years | N/A | Ŷ | N | Product specific age<br>restrictions:<br>Boostrix is indicated in<br>individuals 10 years of age and<br>of Adacel is indicated in<br>persons 10 through 64 years of<br>age. |
| Vaccines | 90716 | Varicella virus vaccine<br>(VAR), Live, for<br>subcutaneous use  | 0.5 mL  | 1/1/2000 |  | varicella virus vaccine live<br>suspension for subcutaneous<br>injection  | Indicated for active immunization for the prevention of varicella in individuals 12 months of age and older.   | 1 | 2 | 12 months                          | N/A      | N/A | Y | Ν | 9/12/2018   |
| Vaccines | 90723 | Diphtheria, tetanus<br>toxoids, acellular<br>pertussis vaccine,<br>hepatitis B, and<br>inactivated poliovirus<br>vaccine,- (DTaP-HepB-<br>IPV) for intramuscular use                                   | 0.5 mL  | 1/1/2001 | F<br>Pediarix®                                 | diphtheria and tetanus<br>toxoids and acellular<br>pertussis adsorbed, hepatitis<br>b (recombinant) and<br>inactivated poliovirus<br>vaccine, suspension for<br>intramuscular injection | Indicated for active immunization against diphtheria, tetanus, pertussis, infection caused by all known subtypes of hepatitis B virus,<br>and poliomyelitis. Pediarix is approved for use as a three-dose series in infants born of hepatitis B surface antigen (HBSAg)-negative<br>mothers. Pediarix may be given as early as 6 weeks of age through 6 years of age (prior to the 7th birthday).  | 1 | 1 | 6 weeks                            | 6 years  | N/A | Y | N | 7/2/2018  |
| Vaccines | 90732 | Pneumococcal<br>polysaccharide vaccine,<br>23-valent (PPSV23), adult<br>or immunosuppressed<br>patient dosage, for use in<br>individuals 2 years or<br>older, for subcutaneous<br>or intramuscular use | 0.5 mL  | 1/1/2002 | Pneumovax* 23                                  | pneumococcal vaccine<br>polyvalent sterile, liquid<br>vaccine for intramuscular or<br>subcutaneous injection  | <ul> <li>Indicated for active immunization for the prevention of pneumococcal disease caused by the 23 serotypes contained in the vaccine (1, 2, 3, 4, 5, 68, 7F, 8, 9N, 9V, 10A, 11A, 12F, 14, 15B, 17F, 18C, 19A, 20, 22F, 23F, and 33F).</li> <li>Pneumovax 23 is approved for use in persons 50 years of age or older and persons aged greater than or equal to 2 years who are at increased risk for pneumococcal disease.</li> </ul> | 1 | 1 | 2 years                            | N/A      | N/A | Y | N | 7/3/2018  |
| Vaccines | 90734 | Meningococcal conjugate<br>vacine, serogroups A, C,<br>W, Y, guadrivalent,<br>digitheria toxoid carrier<br>(MenACWY-D) or<br>CRM197 carrier<br>(MenACWY-CRM), for<br>intramuscular use                 | 0.5 mL  | 1/1/2017 | У  | meningococcal (groups a, c,<br>y, and w-135) polyaaccharide<br>diphtheria toxoid conjugate<br>vaccine solution for<br>intramuscular injection   | Indicated for active immunization to prevent invasive meningococcal disease caused by Neisseria meningitidis serogroups A, C, Y<br>and W-135. Menactra is approved for use in individuals 9 months through 55 years of age. Menactra does not prevent N<br>meningitidis serogroup B disease.   | 1 | 1 | 9 months                           | 18 years | N/A | Y | Y | 7/18/2019   |
| Vaccines | 90736 | Zoster (shingles) vaccine<br>(HZV), live, for<br>subcutaneous injection  | 0.65 mL | 1/1/2006 | Zostavax® s                                    | zoster vaccine live<br>suspension for subcutaneous<br>injection   | Indicated for prevention of herpes zoster (shingles) in individuals 50 years of age and older.<br>Limitations of Use:<br>• Zostavax is not indicated for the treatment of zoster or postherpetic neuralgia (PHN).<br>• Zostavax is not indicated for prevention of primary varicella infection (Chickenpox).   | 1 | 1 | 50 years                           | N/A      | N/A | Y | N | 7/3/2018  |

| Vaccines    | 90739 | Hepatitis B vaccine<br>(HepB), adult dosage, 2<br>dose schedule, for<br>intramuscular use  | 0.5 mL | 1/1/2013 | Heplisav-B*   | hepatitis b vaccine<br>(recombinant), adjuvanted<br>solution for intramuscular<br>injection                        | Indicated for prevention of infection caused by all known subtypes of hepatitis B virus in adults 18 years of age and older.   | 1   | 2     | 18 years                              | N/A      | N/A | Y | N | 7/3/2018  |
|-------------|-------|--|--------|----------|---|--|--|-----|-------|---------------------------------------|----------|-----|---|---|---|
| Vaccines    | 90740 | Hepatitis B vaccine<br>(HepB), dialysis or<br>immunosuppressed<br>patient dosage, 3-dose<br>schedule, for<br>intramuscular use                               | 40 mcg | 1/1/2001 | Recombivax HB*<br>Dialysis<br>Formulation                                       | hepatitis b vaccine, dialysis<br>patient dosage (3 dose<br>schedule), for intramuscular<br>use                     | Recombivax HB Dialysis Formulation is approved for use in adult predialysis and dialysis patients 18 years of age and older for<br>prevention of infection caused by all known subtypes of hepatitis 8 virus.  | 1   | 2     | 18 years                              | N/A      | N/A | Y | N | 10/31/2018  |
| Vaccines    | 90744 | Hepatitis B vaccine<br>(HepB),<br>pediatric/adolescent<br>dosage, 3-dose schedule,<br>for intramuscular use  | 0.5 mL | 1/1/2000 | Engerix B <sup>®</sup><br>Pediatric,<br>Recombivax HB <sup>®</sup><br>Pediatric | hepatitis b vaccine,<br>pediatric/adolescent dosage<br>(3 dose schedule), for<br>intramuscular use                 | Hepatitis B vaccination is appropriate for people expected to receive human alpha-1 proteinase inhibitor that is produced from heat-<br>treated, pooled human plasma that may contain the causative agents of hepatitis and other viral diseases.  | 1   | 2     | N/A                                   | 19 years | N/A | Y | N | 10/31/2018  |
| Vaccines    | 90746 | Hepatitis B vaccine<br>(HepB), adult dosage, 3<br>dose schedule, for<br>intramuscular use  | 1 mL   | 1/1/2000 | Recombivax HB*,<br>Energix B*   | hepatitis b vaccine<br>(recombinant) suspension for<br>intramuscular injection for<br>adult use, 3 dose schedule   | Indicated for immunization against infection caused by all known subtypes of hepatitis B virus.  | 1   | 1     | 20 years                              | N/A      | N/A | Y | N | 9/21/2018   |
| Vaccines    | 90747 | Hepatitis B vaccine<br>(HepB), dialysis or<br>immunosuppressed<br>patient dosage, 4-dose<br>schedule, for<br>intramuscular use                               | 40 mcg | 1/1/2000 | Engerix B*  | hepatitis b vaccine, dialysis or<br>immunosuppressed patient<br>dosage (4 dose schedule), for<br>intramuscular use | This schedule is designed for certain populations (e.g. dialysis patients, neonates born of hepatitis B-infected mothers, others who<br>have or might have been recently exposed to the virus, certain travelers to high-risk areas) for immunization against infection<br>caused by all known subtypes of hepatitis B virus.  | 1   | 2     | N/A                                   | N/A      | N/A | Y | N | 10/31/2018  |
| Vaccines    | 90750 | Zoster (shingles) vaccine,<br>(HZV), recombinant, sub-<br>unit, adjuvanted, for<br>intramuscular injection   | 0.5 mL | 1/1/2017 | Shingrix  | zoster vaccine recombinant,<br>adjuvanted, suspension for<br>intramuscular injection                               | Indicated for prevention of herpes zoster (shingles) in adults aged 50 years and older.<br>Limitations of Use:<br>- Shingrix is not indicated for prevention of primary varicella infection (chickenpox).  | 1   | 1     | 50 years                              | N/A      | N/A | Y | N | 7/3/2018  |
| Vaccines    | 90756 | Influenza virus vaccine,<br>quadrivalent (cclIV4),<br>derived from cell<br>cultures, subunit,<br>antibiotic free, 0.5 mL<br>dosage, for intramuscular<br>use | 0.5 mL | 7/1/2017 | Flucelvax®<br>Quadrivalent  | influenza virus vaccine,<br>suspension for intramuscular<br>injection  | Indicated for active immunization for the prevention of influenza disease caused by influenza virus subtypes A and type B contained<br>in the vaccine.<br>Formulation specific information:<br>- FluceIvax Quadrivalent: Approved for use in persons 4 years of age and older  | 1   | 2     | 4 years                               | N/A      | N/A | Y | N | 8/6/2018  |
| Biologicals | J0129 | Injection, abatacept, 10<br>mg   | 10 mg  | 1/1/2007 | Orencia®  | abatacept injection, for<br>intravenous use  | Treatment of:<br>• Adult Rheumatoid Arthritis (RA): moderately to severely active RA in adults. Orencia may be used as monotherapy or<br>concomitantly with DMARDs other than TNF antagonists.<br>• Juvenile Idiopathic Arthritis: moderately to severely active polyarticular juvenile idiopathic arthritis in patients 2 years of age and<br>older. Orencia may be used as monotherapy or concomitantly with methotrexate.<br>• Active Psoriatic Arthritis (PA) in adults.<br>Important Limitations of Use:<br>• Should not be given concomitantly with TNF antagonists. | 100 | 300   | Indication Specific<br>(see comments) | N/A      | N/A | Y | ¥ | Indication specific age<br>restrictions:<br>* Adults Rheumatoli Arthritis:<br>19 years of age and older<br>* Active Pooriatic Arthritis: 18<br>years of age and older<br>* Active Pooriatic Arthritis: 18<br>years of age and older   |
| Biologicals | J0130 | Injection, abciximab,<br>10mg  | 10 mg  | 1/1/2000 | ReoPro®   | abciximab, for intravenous<br>use  | Indicated as an adjunct to percutaneous coronary intervention for the prevention of cardiac ischemic complications:<br>• in patients undergoing percutaneous coronary intervention<br>• in patients with unstable angina not responding to conventional medical therapy when percutaneous coronary intervention is<br>planned within 24 hours  | 5   | 5     | 18 years                              | N/A      | N/A | Y | Y | 6/6/2019  |
| Drugs       | J0133 | Injection, acyclovir, 5 mg   | 5 mg   | 1/1/2006 | N/A   | acyclovir sodium, for<br>injection, for intravenous<br>infusion  | Indicated for:<br>• Herpes simplex infections in immunocompromised patients<br>• Initial episodes of herpes genitalis<br>• Herpes simplex encephalitis<br>• Neonatial herpes implex virus infection<br>• Vancicella-zoster infections in immunocompromised patients  | 840 | 8,400 | Indication Specific<br>(see comments) | N/A      | N/A | Y | Y | Indication specific age<br>restrictions:<br>Herpes Simplex Infections:<br>Mucosal and Cutaneous<br>Herpes Simplex (HSV-1 and<br>HSV-2) Infections in<br>Immunocompromised<br>Patients: None<br>• Severe Initial Episodes of<br>age and older<br>• Ierpes Simplex Encephalitis:<br>• Nonontal Herpes Simplex<br>Virus Infections in<br>Immunocompromised<br>Patients: None |
| Drugs       | J0153 | Injection, adenosine, 1<br>mg, (not to be used to<br>report any adenosine<br>phosphate compounds)  | 1 mg   | 1/1/2015 | Adenoscan®,<br>Adenocard®   | adenosine injection, for<br>intravenous use  | Adenoscan: Adjunct to thallium-201 myocardial perfusion scintigraphy in patients unable to exercise adequately.<br>Adenocard: Conversion to sinus rhythm of paroxysmal supraventricular tachyarhythmias (PSVT) including that associated with<br>accessory byposs tracts (Wolff-Parkinson-Hint syndrome). When dinically advisable, appropriate vagal maneuvers (e.g., Valsalva<br>maneuver) should be attempted prior to administration.  | 118 | 118   | Indication Specific<br>(see comments) | N/A      | N/A | Y | Y | Product specific age<br>restrictions:<br>Adenoscan: 18 years of age 5/6/2019<br>and older<br>Adenocard: None  |
| Drugs       | J0171 | Injection, adrenalin,<br>epinephrine, 0.1 mg   | 0.1 mg | 1/1/2011 | Adrenalin®  | epinephrine injection, for<br>intramuscular or<br>subcutaneous use   | Indicated for emergency treatment of allergic reactions (Type 1), including anaphylaxis  | N/A | N/A   | N/A                                   | N/A      | N/A | Y | Y | 10/26/2018  |

| i.          |       | r  |              |          |   | 1   | Indicated for:   |       |       |          |     |     |   |   |            |
|-------------|-------|--|--------------|----------|---|---|--|-------|-------|----------|-----|-----|---|---|------------|
| Biologicals | J0178 | Injection, aflibercept, 1<br>mg  | 1 mg         | 1/1/2013 | Eylea*  | aflibercept injection for<br>intravitreal injection                                   | Indicated for:<br>Networscular (Wet) Age-Related Macular Degeneration (AMD)<br>Macular Edema Following Retinal Vein Occlusion (RVO)<br>Dishabiti Advance Edema (IME)   | 4     | 8     | 18 years | N/A | N/A | Y | Y | 7/2/2018   |
| Drugs       | J0180 | Injection, agalsidase beta,<br>1 mg  | 1 mg         | 1/1/2005 | Fabrazyme*  | agalsidase beta injection,<br>powder, lyophilized for<br>solution for intravenous use | Indicated for use in patients with Fabry disease.  | 140   | 420   | 8 years  | N/A | N/A | Y | Ŷ | 6/4/2019   |
| Drugs       | J0185 | Injection, aprepitant, 1<br>mg   | 1 mg         | 1/1/2019 | Cinvanti™   | aprepitant injectable<br>emulsion, for intravenous use                                | Indicated in adults, in combination with other antiemetic agents, for the prevention of:<br>• acute and delayed nause and vomiting associated with initial and repeat courses of highly emetogenic cancer chemotherapy<br>(HEC) Including high-dose capitalian.<br>• nauses and vomiting associated with initial and repeat courses of moderately emetogenic cancer chemotherapy (MEC).<br>• delayed nauses and vomiting associated with initial and repeat courses of moderately emetogenic cancer chemotherapy (MEC).<br>• delayed nauses and vomiting associated with initial and repeat courses of moderately emetogenic cancer chemotherapy (MEC) as<br>a single-doser regimen.<br>Limitations of Utse:<br>Crivanti has not been studied for treatment of established nausea and vomiting.  | 130   | 390   | 18 years | N/A | N/A | Y | Ŷ | 12/3/2019  |
| Biologicals | J0202 | injection, alemtuzumab, 1<br>mg  | 1 mg         | 1/1/2016 | Lemtrada®   | alemtuzumab injection, for<br>intravenous use   | Indicated for the treatment of patients with relapsing forms of multiple sclerosis (M5).   | 12    | 60    | 17 years | N/A | N/A | Y | ¥ | 7/2/2018   |
| Drugs       | J0207 | Injection, amifostine, 500<br>mg   | 500 mg       | 1/1/2000 | Ethyol®   | amifostine for injection  | Indicated to:<br>• Reduce the incidence of moderate to severe xerostomia in patients undergoing postoperative radiation treatment of head and<br>neck cancer.<br>• Reduce the cumulative renal toxicity associated with repeated administration of cisplatin in patients with advanced ovarian<br>cancer, where the radiation port includes a substantial portion of the postoid leands.   | 5     | 155   | 18 years | N/A | N/A | Y | Y | 9/25/2018  |
| Drugs       | J0210 | Injection, methyldopate<br>HCI, up to 250mg  | 250 mg       | 1/1/2000 | N/A   | methyldopate hydrochloride<br>injection   | Indicated for hypertension, when parenteral medication is indicated. The treatment of hypertensive crises may be initiated with<br>methyldopate HCI injection.   | 16    | 496   | N/A      | N/A | N/A | Y | Y | 10/26/2018 |
| Biologicals | J0221 | Injection, alglucosidase<br>alfa, (Lumizyme), 10 mg                                      | 10 mg        | 1/1/2012 | Lumizyme®   | alglucosidase alfa for<br>injection, for intravenous use                              | A hydrolytic lysosomal glycogen-specific enzyme indicated for patients with Pompe disease (GAA deficiency).  | 300   | 900   | N/A      | N/A | N/A | Y | Y | 6/4/2019   |
| Biologicals | J0256 | Injection, alpha 1-<br>proteinase inhibitor,<br>human, 10 mg, not<br>otherwise specified | 10 mg        | 1/1/2000 | Prolastin-C <sup>®</sup> ,<br>Aralast NP <sup>®</sup> ,<br>Zemaira <sup>®</sup> | alpha 1-proteinase inhibitor<br>(human) for intravenous use                           | Indicated for chronic augmentation therapy in adults with clinically evident emphysema due to severe congenital deficiency of<br>Alpha1-PI (alpha1-<br>antitrypsin deficiency).  | 1,000 | 5,000 | 18 years | N/A | N/A | Y | Y | 6/6/2019   |
| Biologicals | J0257 | Injection, alpha-1<br>proteinase inhibitor<br>(human), (Glassia), 10 mg                  | 10 mg        | 1/1/2012 | Glassia™  | alpha 1-proteinase inhibitor<br>(human) injection solution,<br>for intravenous use    | Indicated for chronic augmentation and maintenance therapy in adults with clinically evident emphysema due to severe hereditary<br>deficiency of Alpha1.P1 (Japha1.antitrypsin deficiency). Glassia increases antigenic and functional (anti-neutrophil elastase capacity,<br>ANEC) serum levels and antigenic lung epithelial lining fluid levels of alpha1.P1.<br>Limitations of Use:<br>The effect of augmentation therapy with any Alpha1-P1, including Glassia, on pulmonary exacerbations and on the progression of<br>emphysema in alpha1-antitrypsin deficiency hans to been conclusively demonstrated in randomized, controlled clinical trials.<br>• Clinical data demonstrating the long-term effects of chronic augmentation and maintenance therapy of individuals with Glassia<br>are not available.<br>• Glassia is not indicated as therapy for lung disease in patients in whom severe Alpha1.P1 deficiency has not been established. | 840   | 4,200 | 18 years | N/A | N/A | Y | ¥ | 9/25/2018  |
| Drugs       | J0278 | Injection, amikacin  | 100 mg       | 1/1/2006 | N/A   | amikacin sulfate injection,   | Indicated in the short-term treatment of serious infections due to susceptible strains of Gram-negative bacteria, including<br>Pseudomonas species, Escherichia coli, species of indole-positive and indole-negative Proteus, Providencia species, Klebsiella-<br>Enterobacter-Serata species, and Acinetobacter (Mima-Herellea) species.<br>Clinical studies have shown amiliacin sulfate injection to be effective in bacterial septicemia (including neonatal sepsis); in serious   | 15    | 150   | N/A      | N/A | N/A | Y | Y | 4/10/2019  |
|             |       | sulfate, 100 mg  |              |          |   | solution  | infections of the respiratory tract, bones and joints, central nervous system (including meningitis) and skin and soft tissue; intra-<br>abdominal infections (including peritonitis); and in burns and postoperative infections (including post-vascular surgery). Clinical<br>studies have shown amikacin also to be effective in serious complicated and recurrent urinary tract infections due to those<br>organisms.  |       |       | ,        |     | ,   |   |   |            |
| Drugs       | J0280 | Injection, aminophylline,<br>up to 250mg   | up to 250 mg | 1/1/2000 | N/A   | aminophylline injection   | Indicated as an adjunct to inhaled beta-2 selective agonists and systemically administered corticosteroids for the treatment of acute<br>exacerbations of the symptoms and reversible airflow obstruction associated with asthma and other chronic lung diseases, e.g.,<br>emphysema and tronic branchitis.  | 7     | 217   | N/A      | N/A | N/A | Y | Y | 9/25/2018  |
| Drugs       | J0285 | Injection, amphotericin B,<br>50 mg  | 50 mg        | 1/1/2000 | N/A   | amphotericin B for injection  | Amphotericin B for injection is specifically intended to treat potentially life-threatening fungal indexions: sapergillosis,<br>cryptococosis (torulosis), North American blastomycosis, systemic candidiasis, occidioidomycosis, histopiasmosis, zygomycosis<br>including mucomycosis due to susceptible species of the genera absida, mucor and rhizopus, and infectiona due to related<br>susceptible species of conditobolus and basidiobolus, and sportrichosis. May be useful to treat American mucocutaneous<br>leishmaniasis, but it is not the drug of choice as primary therapy.   | 4     | 93    | N/A      | N/A | N/A | Y | Y | 9/25/2018  |
| Drugs       | J0287 | Injection, amphotericin B<br>lipid complex, 10 mg  | 10 mg        | 1/1/2003 | Abelcet®  | amphotericin B lipid complex<br>injection   | Indicated for the treatment of invasive fungal infections in patients who are refractory to or intolerant of conventional amphotericin<br>B therapy.   | 70    | 2,170 | N/A      | N/A | N/A | Y | Y | 5/6/2019   |
| Drugs       | J0289 | Injection, amphotericin B<br>liposome, 10 mg   | 10 mg        | 1/1/2003 | AmBisome*   | amphotericin B liposome for<br>injection  | Indicated for:<br>• Empirical therapy for presumed fungal infection in febrile, neutropenic patients<br>• Treatment of patients with Aspergillus species, Candida species, and/or Cryptococcus species infections refractory to amphotericin<br>B desoxycholate, or in patients where renal impairment or unacceptable toxicity precludes the use of amphotericin B desoxycholate<br>• Treatment of Cryptococcal Meningitis in INV-infected patients<br>• Treatment of viscral leishmaniasis. In immunocompromised patients with visceral leishmaniasis treated with AmBisome, relapse<br>rates were high following initial clearance of parasites.  | 84    | 2,604 | 1 month  | N/A | N/A | Y | Y | 4/10/2019  |
| Drugs       | J0290 | Injection, ampicillin<br>sodium, 500 mg  | 500 mg       | 1/1/2000 | N/A   | ampicillin sodium for<br>injection, for intravenous or<br>intramuscular use           | Indicated in the treatment of infections caused by susceptible strains of the designated organisms in the following conditions:<br>= Respiratory Tract Infections caused by Steptococcus pneumoniae, Staphylococcus aureus (penicillinase and nonpenicillinase)<br>producing), H. influenzae, and Group A beta-hemolytic streptococci.<br>= Bacterial Meningitis caused by E. coli, Group B steptococci, and other Gram-negative bacteria (Listeria monocytogenes, N.<br>meningitids). The addition of an aminoglycoside with ampicilian may increase its effectiveness against Gram-negative bacteria.  | 56    | 1,736 | N/A      | N/A | N/A | Y | Y | 4/10/2019  |

| Drugs | J0295 | Injection, ampicillin<br>sodium/subactam<br>sodium, per 1.5 gm | per 1.5 gm   | 1/1/2000 | Unasyn®                 | ampicilin sodium and<br>sulbactam sodium injection,<br>powder, for solution   | Indicated for the treatment of infection due to susceptible strains of the designated microorganisms in the conditions listed below:<br>• Skin and skin structure infections caused by beta-lactamase producing strains of Staphylococcus aureus, Escherichia coli, Klebisella<br>spp. (including K, pneumoniae). Proteus mirabilis, Bacteroides fragilis, Enterobatetre spp., and Acinetobatetre calcoaceticus.<br>• Intra-abdominal infections: caused by beta-lactamase producing strains of Staphylococcus aureus, Escherichia coli, Klebisella go,<br>Indrading Bacteroides spp. (including R. fragilis), and Enterobater spp.<br>• Gynecological infections: caused by beta-lactamase producing strains of Escherichia coli, and Bacteroides spp. (including R.<br>• Gynecological infections: caused by beta-lactamase producing strains of Escherichia coli, and Bacteroides spp. (including R.<br>* Mile Unaxyn is indicated only for the conditions listed above, infections: caused by ampicillin-susceptible organisms and beta-lactamase producing organisms susceptible to Unaxyn should not reguire the addition of another ambiacterial.<br>• Appropriate culture and susceptibility tests should be performed before treatment in order to isolate and identify the organisms<br>causing infection: ausceptibility to Unasyn. | 12  | 168    | Indication Specific<br>(see comments) | N/A | N/A | Y | ¥ | Indication specific:<br>• Skin and skin structure<br>infections: 1 year of age and<br>older<br>• Intra-abdominal infections:<br>18 years of age and older | 6/7/2019  |
|-------|-------|--|--------------|----------|-------------------------|---|--|-----|--------|---------------------------------------|-----|-----|---|---|---|-----------|
| Drugs | J0300 | Injection, amobarbital, up<br>to 125mg                         | up to 125 mg | 1/1/2000 | Amytal®                 | amobarbital sodium for<br>injection   | Indicated for use as a:<br>• Sedative<br>• Hypnotic, for the short-term treatment of insomnia, since it appears to lose its effectiveness for sleep induction and sleep<br>maintenance after 2 weeks<br>• Preamesthetic  | 8   | 112    | 6 years                               | N/A | N/A | Ŷ | Y |   | 4/10/2019 |
| Drugs | J0330 | Injection, succinylcholine<br>chloride, up to 20mg             | up to 20 mg  | 1/1/2000 | Quelicin",<br>Anectine® | succinylcholine chloride<br>injection   | Indicated as an adjunct to general anesthesia, to facilitate tracheal intubation, and to provide skeletal muscle relaxation during<br>surgery or mechanical ventilation.   | 8   | 8      | N/A                                   | N/A | N/A | ¥ | ¥ |   | 9/21/2018 |
| Drugs | 10360 | Injection, hydralazine HCI,<br>up to 20mg                      | up to 20 mg  | 1/1/2000 | N/A                     | hydralazine hydrochloride<br>injection  | Indicated for severe essential hypertension when the drug cannot be given orally or when there is an urgent need to lower blood pressure.  | 15  | 75     | N/A                                   | N/A | N/A | Y | Y |   | 6/4/2019  |
| Drugs | J0401 | Injection, aripiprazole,<br>extended release, 1 mg             | 1 mg         | 1/1/2014 | Abilify<br>Maintena®    | use   | Indicated for the treatment of schizophrenia in adults.<br>Indicated for maintenance monotherapy treatment of bipolar i disorder in adults.  | 400 | 800    | 18 years                              | N/A | N/A | Y | Y |   | 5/20/2019 |
| Drugs | J0456 | Injection, azithromycin,<br>500 mg                             | 500 mg       | 1/1/2000 | Zithromax®              | azithromycin for intravenous<br>infusion  | Indicated for mild to moderate infections caused by designated, susceptible bacteria in community-acquired pneumonia in adults<br>and pelvic inflammatory disease.   | 1   | 10     | 16 years                              | N/A | N/A | Y | Y |   | 9/25/2018 |
| Drugs | J0461 | Injection, atropine<br>sulfate, 0.01 mg                        | 0.01 mg      | 1/1/2010 | N/A                     | atropine sulfate injection for<br>intravenous, intramuscular,<br>subcutaneous, intraosseous,<br>or endotracheal use |  | 900 | 27,900 | N/A                                   | N/A | N/A | Y | ¥ |   | 10/4/2018 |

| Drugs       | J0470 | Injection, dimercaprol,<br>per 100mg  | per 100 mg          | 1/1/2000 | BAL in oil**                           | dimercaprol injection   | Indicated in the treatment of:<br>• Arsenic, gold and mercury poisoning,<br>• Acute lead poisoning when used concomitantly with Edetate Calcium Disodium Injection.<br>Dimercaprol is effective for use in acute poisoning by mercury salts if therapy is begun within one or two hours following ingestion.<br>It is not very effective for chronic mercury poisoning. Dimercaprol is of questionable value in poisoning by other heavy metals such<br>as antimony and bismuth. It should not be used in roin, cadimui, or steelium poisoning because the resulting dimercaprol-metal<br>complexes are more toxic than the metal alone, especially to the kidneys.  | 36    | 252   | N/A      | N/A | N/A | v | ¥ | 6/7/2019  |
|-------------|-------|---|---------------------|----------|--|---|--|-------|-------|----------|-----|-----|---|---|-----------|
| Drugs       | J0475 | Injection, baclofen, 10 mg  | 10 mg               | 1/1/2000 | Lioresal®<br>Intrathecal,<br>Gablofen® | baclofen injection  | Indicated for use in the management of severe spasticity of cerebral or spinal origin in adult and pediatric patients age 4 years and<br>above.<br>• Baciofen intrathecal should be reserved for patients unresponsive to oral backofen therapy, or those who experience intolerable<br>central nervous system side effects at effective doses.<br>• Patients should first respond to a screening dose of intrathecal backofen prior to consideration for long term infusion via an<br>implantable jours.<br>• Spasticity due to traumatic brain injury: wait at least one year after injury before considering backofen intrathecal therapy.  | 1     | 3     | 4 years  | N/A | N/A | Y | Ŷ | 9/21/2018 |
| Drugs       | J0476 | Injection, baclofen, 50<br>mcg, for intrathecal trial                             | 50 mcg              | 1/1/2000 | Lioresal®<br>Intrathecal,<br>Gablofen® | baclofen injection, for<br>intrathecal trial                                | Management of severe spasticity caused by spinal cord lesions or multiple sclerosis. Badofen also is used intrathecally in patients<br>with spasticity of cerebral origin, including those with cerebral paby and acquired brain injury. Badofen injection is designated an<br>orphan drug by the TDA for the management of spasticity in patients with cerebral paby.   | 2     | 5     | N/A      | N/A | N/A | Y | Y | 5/21/2019 |
| Biologicals | J0485 | Injection, belatacept, 1<br>mg  | 1 mg                | 1/1/2013 | Nulojix®                               | belatacept for injection, for<br>intravenous use                            | Prophylaxis of organ rejection in adult patients receiving a kidney transplant. Use in combination with basiliximab induction,<br>mycophenolate mofetil, and corticosteroids.<br>Limitations of Use:<br>• Use only in patients who are EBV seropositive.<br>• Use has not been established for the prophylaxis of organ rejection in transplanted organs other than the kidney.  | 1,500 | 6,000 | 18 years | N/A | N/A | Y | Y | 6/6/2019  |
| Biologicals | J0490 | Injection, belimumab, 10<br>mg  | 10 mg               | 1/1/2012 | Benlysta*                              | belimumab injection, for<br>intravenous use                                 | Indicated for the treatment of patients aged 5 years and older with active, autoantibody-positive, systemic lupus erythematosus<br>who are receiving standard therapy.<br>Limitations of Use:<br>The efficacy of Benlysta has not been evaluated in patients with severe active lupus nephritis or severe active central nervous<br>system lupus. Benlysta has not been studied in combination with other biologics or intravenous cyclophosphamide. Use of Benlysta<br>is not recommended in thes situations.   | 140   | 420   | 5 years  | N/A | N/A | Y | Y | 6/3/2019  |
| Drugs       | J0500 | Injection, dicyclomine<br>HCl, up to 20mg   | up to 20 mg         | 1/1/2000 | Bentyl®                                | dicyclomine hydrochloride<br>injection for intramuscular<br>use             |  | 4     | 8     | 18 years | N/A | N/A | Y | Y | 4/10/2019 |
| Drugs       | J0558 | Injection, penicillin G<br>benzathine and penicillin<br>G proceine, 100,000 units | 100,000 units       | 1/1/2011 | Bicillin <sup>®</sup> C-R              | penicilin G benzathine and<br>penicilin G procaine<br>injectable suspension | Indicated for the treatment of moderately severe infections due to penicillin G-susceptible microorganisms that are susceptible to<br>indicated for the treatment of moderately severe infections due to penicillin G-susceptible microorganisms that are susceptible to<br>testing and by clinical response. Bicillin C-R is indicated in the treatment of the following in adults and pediatric patients:<br>Moderately severe to severe infections of the upper-respiratory tract, starlet fever, ensyleales, and skin and soft-issue infections<br>due to susceptible streptococci. NTE: Streptococci in Groups A, C, G, H, L and M are very sensitive to penicillin G. Other groups,<br>including Group D (enterococci), are resistant. Penicillin G sodium or potassium is recommended for streptococcal infections with<br>bacteremia.<br>• Moderately severe pneumonia and otitis media due to susceptible Streptococccal etiology are better treated with penicillin<br>G sodium or potassium during the acute stage.<br>• When high, sustained serum levels are required, penicillin G sodium or potassium, either IM or IV, should be used. This drug<br>should not be used in the treatment of venereal diseases, including synhilis, gonorrhea, yaws, bejel, and pinta. | 24    | 96    | N/A      | N/A | N/A | Y | ¥ | 8/24/2018 |
| Drugs       | J0561 | Injection, penicillin G<br>benzathine, 100,000 units                              | 100,000 units       | 1/1/2011 | Bicillin® L-A                          | penicillin G benzathine<br>injectable suspension                            | Indicated for the treatment of infections due to penicillin G-sensitive microorganisms that are susceptible to the low and very<br>prolonged serum levels common to this particular dosage form. Therapy should be guided by bacteriological studies (including<br>sensitivity tests) and by clinical response. The following infections will usually respond to adequate dosage of intramuscular<br>penicillin G benzithne: mild to moderate upper regristratory infections due to susceptible streptococci, venereal infections (syphilis,<br>yws, bejel, and pinta) and prophylaxis of rheumatic fever and chorea.  | 24    | 96    | N/A      | N/A | N/A | Y | Y | 8/24/2018 |
| Biologicals | J0565 | Injection, bezlotoxumab,<br>10 mg   | 10 mg               | 1/1/2018 | Zinplava™                              | bezlotoxumab injection, for<br>intravenous use                              | Indicated to reduce recurrence of Clostridium difficile infection (CDI) in patients 18 years of age or older who are receiving<br>antibacterial drug treatment of CDI and are high risk for CDI recurrence.<br>Limitation of use: Zinplava is not indicated for the treatment of CDI. Zinplava is not an antibacterial drug. Zinplava should only be<br>used in conjunction with antibacterial drug treatment of CDI.  | 140   | 140   | 18 years | N/A | N/A | Y | Y | 7/2/2018  |
| Biologicals | J0567 | Injection, cerliponase<br>alfa, 1 mg  | 1 mg                | 1/1/2019 | Brineura®                              | cerliponase alfa injection, for<br>intraventricular use                     | Indicated to slow the loss of ambulation in symptomatic pediatric patients 3 years of age and older with late infantile neuronal<br>ceroid lipofuscinosis type 2 (CLN2), also known as tripeptidyl peptidase 1 (TPP1) deficiency.  | 300   | 900   | 3 years  | N/A | N/A | Y | Y | 7/2/2018  |
| Drugs       | J0570 | aira, 1 mg<br>Buprenorphine implant,<br>74.2 mg                                   | 74.2 mg = 1 implant | 1/1/2017 | Probuphine®                            | buprenorphine implant for<br>subdermal administration<br>(CIII)             | Indicated for the maintenance treatment of opioid dependence in patients who have achieved and sustained prolonged clinical<br>stability on low-to-moderate doses of a transmucoaia buprenorphine-containing product (i.e., doses of no more than 8 mg per day<br>of Subutex* or Suboxone* sublingual tablet or generic equivalent).   | 4     | 4     | 16 years | N/A | N/A | Y | Y | 9/27/2018 |

| Biologicals | J0586 | Injection,<br>abobotulinumtoxinA, 5<br>units                              | 5 units       | 1/1/2010  | Dysport®                         | abobotulinumtoxinA for<br>injection, for intramuscular<br>use   | Treatment of adults with cervical dystonia.     The temporary improvement in the appearance of moderate to severe glabellar lines associated with procerus and corrugator muscle activity in adult patients 650 years of age.     The treatment of upper and lower limb spasticity in adults.     The treatment of lower limb spasticity in pediatric patients 2 years of age and older.     Treatment of upper limb spasticity in pediatric patients 2 years of age and older, excluding spasticity caused by cerebral palsy.   | 300 | 300                          | Indication Specific<br>(see comments) | N/A | N/A | Ŷ | Y | recommendations.<br>• Cervical Dystonia: 18 years of<br>age and older<br>• Glabellar Lines: 18 years of<br>age and older<br>• Upper Limb Spasticity: 2<br>years of age and older<br>• Lower Limb Spasticity: 2<br>years of age and older  | 10/28/2019 |
|-------------|-------|---|---------------|-----------|----------------------------------|---|--|-----|------------------------------|---------------------------------------|-----|-----|---|---|---|------------|
| Biologicals | J0585 | Injection,<br>onabotulinumtoxinA, 1<br>unit                               | 1 unit        | 1/1/2000  | Botox®                           | onabotulinumtoxinA for<br>injection, for intramuscular,<br>intradetrusor, or intradermal<br>use         | Indicated for:<br>• Treatment of overactive bladder (DAB) with symptoms of urge urinary incontinence, urgency, and frequency, in adults who have<br>an inadequate response to or are intolerant of an anticholinergic medication<br>• Treatment of urinary incontinence due to detrusor overactivity associated with a neurologic condition (e.g., spinal cord injury<br>(SC), multiple actives (IKB) in adults who have an inadequate response to or are intolerant of an anticholinergic medication<br>• Proghysis of headaches in adult patients, to adult patients<br>• Treatment of corcical dynation in adult patients, to educe the severity of abnormal head position and neck pain<br>• Treatment of corcical dynation in adult patients, to educe the severity of abnormal head position and neck pain<br>• Treatment of corcical dynation in adult patients, to area of degrad agents in adult patients<br>• Treatment of severe axillary hyperhidrosis that is inadequate ty managed by topical agents in adult patients, to<br>• Treatment of severe axillary hyperhidrosis that is inadequate by topical agents in adult patients<br>• Treatment of upper and limb spasticity in patient 2 to 17 years of age<br>• Treatment of upper and limb spasticity in patients 2 to 17 years of age<br>• Treatment of lower limb spasticity in patients 2 to 17 years of age, excluding spasticity caused by cerebral palsy<br>Important Limitations: Safety and effectiveness of flotts have not been established for:<br>• Prophysiks of epidocid mismain (14) headache days of rever per month.)<br>• Treatment of hyperhidrosis in body areas other than axiliary | 400 | 400 in a 3<br>month interval | Indication Specific<br>(see comments) | N/A | N/A | ¥ | ¥ | Indication specific:<br>• Bladder dysfunction,<br>prophytaxio f headaches in<br>chronic migrane, lower limb<br>spasicity and axillary<br>hyperhidrosis - 13 years and<br>older<br>• Cervical dystonia - 16 years<br>and older<br>• Biepharcopasm and<br>strabismus - 12 years and<br>older<br>• Upper limb spasicity - 2<br>years and older | 12/3/2019  |
| Drugs       | J0712 | Injection, ceftaroline<br>fosamil, 10 mg                                  | 10 mg         | 1/1/2012  | Teflaro®                         | ceftaroline fosamil for<br>injection, for intravenous use   | Indicated for the treatment of the following infection caused by designated susceptible bacteria:<br>• Community-acquired bacterial pneumonia (CABP) in adult and pediatric patients 2 months of age and older<br>• Acute bacterial skin and skin structure infections (ABSSSI) in adult and pediatric patients (at least 34 weeks gestational age and 12<br>days postnatal age)   | 120 | 1,680                        | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific:<br>CABP: 2 months of age and<br>older<br>ABSSSI: 34 weeks gestational<br>age and 12 days postnatal age<br>and older  | 10/28/2019 |
| Drugs       | J1943 | Injection, aripiprazole<br>lauroxil, (aristada initio),<br>1 mg           | 1 mg          | 10/1/2019 | Aristada Initio**                | aripiprazole lauroxil<br>extended-release injectable<br>suspension, for intramuscular<br>use            | Indicated for the initiation of Aristada when used for the treatment of schizophrenia in adults in combination with oral aripiprazole.   | 675 | 675                          | 18 years                              | N/A | N/A | Y | Y | <ul> <li>Cervical Dystonia: Safety and<br/>effectiveness in pediatric<br/>patients have not been<br/>established.</li> </ul>  | 9/27/2019  |
| Biologicals | J0588 | Injection,<br>incobotulinumtoxinA, 1<br>unit                              | 1 unit        | 1/1/2012  | Xeomin®                          | incobotulinumtoxinA for<br>injection, for intramuscular<br>or intraglandular use                        | Indicated for the treatment or improvement of adult patients with:<br>- Upper limb spasticity<br>- Cervical dystonia<br>- Temporary improvement in the appearance of moderate to severe glabellar lines with corrugator and/or procerus muscle activity<br>- Chronic salorthea<br>- Biepharospasm  | 400 | 400 in a 3<br>month interval | 18 years                              | N/A | N/A | Y | Y | Glabellar Lines: Dysport is<br>not recommended for use in<br>pediatric patients less than 18<br>years of age.   | 6/5/2019   |
| Drugs       | J0594 | Injection, busulfan, 1 mg   | 1 mg          | 1/1/2007  | Busulfex®                        | busulfan injection for<br>intravenous use   | Indicated for use in combination with cyclophosphamide as a conditioning regimen prior to allogeneic hematopoietic progenitor<br>cell transplantation for chronic myelogenous leukemia (CML).  | 328 | 1,312                        | N/A                                   | N/A | N/A | Y | Y | <ul> <li>Upper Limb Spasticity: Safety<br/>and effectiveness in pediatric<br/>patients below the age of 2<br/>years have not been<br/>established.</li> </ul>   | 9/27/2018  |
| Drugs       | 10595 | Injection, butorphanol<br>tartrate, 1mg                                   | 1 mg          | 1/1/2004  | N/A                              | butorphanol tartrate<br>injection   | Indicated:<br>• As a properative or pre-anesthetic medication<br>• As a supplement to balanced anesthesia<br>• For the relief of pain during labor, and<br>• For the management of pain severe enough to require an opioid analgesic and for which alternative treatments are inadequate<br>Limitations of Use:<br>Because of the risks of addiction, abuse, and misuse, with opioids, even at recommended doses, reserve butorphanol tartrate for<br>us in patients for whom alternative treatment option (e.g. non-opioid analgesics):<br>- Have no toben tolerated, or at not expected to be tolerate<br>- Have no trovide adequate analgesia, or are not expected to provide adequate analgesia  | 32  | 992                          | 18 years                              | N/A | N/A | Y | Y | <ul> <li>Lower Limb Spasticity: Safety<br/>and effectiveness in pediatric<br/>patients below the age of 2<br/>years have not been<br/>established.</li> </ul>   | 9/27/2018  |
| Biologicals | J0596 | Injection, c-1 esterase<br>inhibitor (recombinant),<br>Ruconest, 10 units | 10 units      | 1/1/2016  | Ruconest®                        | c1 esterase inhibitor<br>(recombinant) for<br>intravenous use, lyophilized<br>powder for reconstitution | Indicated for treatment of acute attacks in adult and adolescent patients with hereditary angioedema (HAE).  | 840 | 3,360                        | N/A                                   | N/A | N/A | Y | Y |   | 4/10/2019  |
| Biologicals | J0597 | Injection, C-1 esterase<br>inhibitor (human),<br>Berinert, 10 units       | 10 units      | 1/1/2011  | Berinert®                        | c1 esterase inhibitor (human)<br>for intravenous use  | Treatment of acute abdominal, facial, or laryngeal hereditary angioedema (HAE) attacks in adult and pediatric patients.  | 280 | 1,120                        | N/A                                   | N/A | N/A | Y | Y |   | 4/10/2019  |
| Biologicals | J0598 | Injection, C1 esterase<br>inhibitor (human),<br>Cinryze, 10 units         | 10 units      | 1/1/2010  | Cinryze®                         | for intravenous use   | Indicated for routine prophylaxis against angioedema attacks in adults, adolescents and pediatric patients (6 years of age and older)<br>with hereditary angioedema (HAE).   | 250 | 2,750                        | 6 years                               | N/A | N/A | Y | Y |   | 7/26/2018  |
| Drugs       | J0600 | Injection, edetate calcium<br>disodium, up to 1000 mg                     | up to 1000 mg | 1/1/2000  | Calcium<br>Disodium<br>Versanate | edetate calcium disodium<br>injection for intravenous or<br>intramuscular use                           | Indicated for the reduction of blood levels and depot stores of lead in lead poisoning (acute and chronic) and lead encephalopathy<br>in both pediatric populations and adults.  | 3   | 15                           | N/A                                   | N/A | N/A | Y | Y |   | 10/10/2018 |
| Drugs       | J0604 | Cinacalcet, oral, 1 mg,<br>(for ESRD on dialysis)                         | 1 mg          | 1/1/2018  | Sensipar*                        | cinacalcet tablets, for oral<br>use (for ESRD on dialysis)  | Indicated for:<br>- Secondary Hyperparathyroidism (HPT) in adult patients with chronic kidney disease (CKD) on dialysis.<br>Limitation of Use: Sensipar is not indicated for use in patients with CKD who are not on dialysis.<br>The following indications are FDA approved but should not be associated with this HCPCS code:<br>- Hypercalcemia in adult patients with Parathyroid Carcinoma (PC).<br>- Hypercalcemia in adult patients with Parathyroid Carcinoma (PC).  | 180 | 5,580                        | 18 years                              | N/A | N/A | Y | Y |   | 5/30/2019  |
| Drugs       | J0606 | Injection, etelcalcetide,<br>0.1 mg                                       | 0.1 mg        | 1/1/2018  | Parsabiv™                        | etelcalcetide injection, for<br>intravenous use   | Indicated for secondary hyperparathyroidism (HPT) in adult patients with chronic kidney disease (CKD) on hemodialysis.<br>Limitations of Use:<br>Parasibih Isan Oben studied in adult patients with parathyroid carcinoma, primary hyperparathyroidism or with CKD who are not<br>on hemodialysis and is not recommended for use in these populations.   | 150 | 2,250                        | 18 years                              | N/A | N/A | Y | Y |   | 6/4/2019   |

| Drugs       | J0610 | Injection, calcium gluconate, per 10 mL            | 10 mL   | 1/1/2000  | N/A   | calcium gluconate injection<br>for intravenous use                         | Indicated for pediatric and adult patients for the treatment of acute symptomatic hypocalcemia.<br>Umitations of Use:<br>The safety of calcium gluconate injection for long term use has not been established.   | 10  | 310   | N/A                                   | N/A | N/A | Y | Y |   | 10/4/2018 |
|-------------|-------|--|---------|-----------|---|--|--|-----|-------|---------------------------------------|-----|-----|---|---|---|-----------|
| Drugs       | J0636 | Injection, calcitriol, 0.1<br>mcg                  | 0.1 mcg | 1/1/2003  | N/A   | calcitriol injection   | Indicated in the management of hypocalcemia in patients undergoing chronic renal dialysis. It has been shown to significantly<br>reduce elevated parathyroid hormone levels. Reduction of PTH has been shown to result in an improvement in renal<br>osteodystrophy.   | 40  | 560   | 13 years                              | N/A | N/A | Y | Y |   | 9/27/2018 |
| Biologicals | J0638 | Injection, canakinumab, 1<br>mg                    | 1 mg    | 1/1/2011  | llaris*                                       | canakinumab for injection,<br>for subcutaneous use                         | Periodic Fever Syndromes:<br>• Cryopyrin-Associated Periodic Syndromes (CAPS), in adults and children 4 years of age and older including: Familial Cold<br>Autoinflammatory Syndrome (FCAS) and Muckle-Wells Syndrome (MWS).<br>• Turmor Necrosis Factor Receptor Associated Periodic Syndrome (TRAPS) in adult and pediatric patients.<br>• Hyperimmunoglobulin D Syndrome (HIDS)/Mevalonate Kinase Deficiency (MKD) in adult and pediatric patients.<br>• Familial Mediterranean Fever (FMF) in adult and pediatric patients.<br>Active Systemic Juvenile Idiopathic Arthritis (SIIA) in patients aged 2 years and older.  | 300 | 600   | Indication Specific<br>(see comments) | N/A | N/A | ¥ | ¥ | Indication specific age<br>restrictions:<br>Periodic Fever Syndromes:<br>- Cryopyin-Associated<br>Periodic Syndromes (CAPS): 4<br>years of age and older<br>- Tumor Necrosis Factor<br>Receptor Associated Periodic<br>Syndrome (TRAPS) in adult<br>and pediatric patients.<br>- Hyperimmunoglobulin D<br>Syndrome (TRAPS) in adult<br>and tediatric patients.<br>- Familial Mediterranean<br>Fever (FMP) in adult and<br>pediatric patients.<br>Active Systemic Juenite<br>Idiopathic Arthris (SIAI): 2<br>years and older | 7/2/2018  |
| Drugs       | J0640 | Injection, leucovorin<br>calcium, per 50 mg        | 50 mg   | 1/1/2000  | N/A   | leucovorin calcium for<br>injection for intravenous o<br>intramuscular use | Indicated:<br>• After high dose methotrexate therapy in osteosarcoma.<br>• To diminish the toxicity and counteract the effects of impaired methotrexate elimination and of inadvertent overdosages of folic<br>acid antagonists.<br>• In the treatment of megaloblastic anemias due to folic acid deficiency when oral therapy is not feasible.<br>• For use in combination with 3-fluorourcait to prolong survival in the palitative treatment of patients with advanced colorectal<br>cancer. Leucovorin should not be mixed in the same infusion as 5-fluorouracil because a precipitate may form.  | 40  | 80    | N/A                                   | N/A | N/A | Y | ¥ |   |           |
| Biologicals | J9269 | Injection, tagraxofusp-<br>erzs, 10 micrograms     | 10 mcg  | 10/1/2019 | Elzonris™                                     | tagraxofusp-erzs injection,<br>for intravenous use                         | Indicated for the treatment of blastic plasmacytoid dendritic cell neoplasm (BPDCN) in adults and in pediatric patients 2 years and older.   | 200 | 2,000 | 2 years                               | N/A | N/A | Y | Y |   | 10/3/2019 |
| Drugs       | J0670 | Injection, mepivacaine<br>hydrochloride, per 10 mL | 10 mL   | 1/1/2000  | Carbocaine™,<br>Polocaine®,<br>Polocaine® MPF | mepivacaine hydrochloride<br>injection                                     | Carbocaine, Polocaine and Polocaine MPF: Indicated for production of local or regional analgesia and anesthesia by local<br>infiltration, peripheral nerve block techniques, and central neural techniques including epidural and caudal blocks.   | 10  | 50    | N/A                                   | N/A | N/A | Y | Y |   | 4/10/2019 |
| Drugs       | 10690 | Injection, cefazolin<br>sodium, 500 mg             | 500 mg  | 1/1/2000  | N/A   | cefazolin sodium for injectic  | Indicated for the treatment of the following serious infections when due to susceptible organisms:<br>• Respiratory Tract Infections: Due to S. pneumoniae, Klebsiella species, H. Influenzae, S. aureus (penicillin-sensitive and penicillin-<br>resistant), and group A beta-hemolytic streptococci. Injectable benzahine penicillin is considered the drug of choice in treatment<br>and prevention of streptococci infections, including the prophylaxis of theumatic fever. Celtaolin is effective in the eraication of<br>streptococci from the nasopharynic, however, data establishing the effective of celtaolin in the subsequent prevention of Theumatic<br>fever are not available at present.<br>Urinary Tract Infections: Due to E. Coli, P. mirabilis, Klebsiella species, and some strains of enterobacter and enterococci.<br>• Sin and Skin Structure Infections: Due to S. aureus<br>streptococci not dother straina of streptococci.<br>• Bilary Tract Infections: Due to S. aureus<br>• One and Join dother straina of streptococci.<br>• Bilary Tract Infections: Due to S. aureus<br>• Denital Infections: Due to S. aureus<br>• epicial Infections: Due to S. aureus<br>• epicial Infections: Due to S. aureus<br>• epicial Infections: Due to S. aureus<br>• epiciania: Due to S. protantis, epicidymits) due to E. Coli, P. mirabilis, Klebsiella species, and some strains of enterococci.<br>• epicarmia: Due to S. pneumoniae, S. aureus (penicillin-sensitive and penicillin-resistant), P. mirabilis, E. coli, and Klebsiella<br>species.<br>• Endocarditis: Due to S. aureus (penicillin-sensitive and penicillin-resistant), P. mirabilis, E. coli, and klebsiella<br>species.<br>• Endocarditis: Due to S. aureus (penicillin-sensitive and penicillin-resistant), P. mirabilis, Klebsiella<br>species.<br>• Endocarditis: Due to S. aureus (penicillin-sensitive and penicillin-resistant) and group A betahemolytic streptococci.<br>Perioperative Prophylaxis: The prophylactic administration of cefazolin properatively, intraperatively, and postoparatively may<br>reduce the induce of certain postoperative infections in patients un | 24  | 744   | 1 month                               | N/A | N/A | Y | Y |   | 5/20/2019 |

| Drugs | J0692 | Injection, cefepime HCI,<br>500 mg                      | 500 mg | 1/1/2002 | Maxipime <sup>w</sup> | cefepime hydrochloride<br>Injection for intravenous or<br>intramuscular use | Indicated for the treatment of the following infections caused by susceptible strains of the designated miroorganisms:<br>• Moderate to severe pneumonia<br>• Empiric therapy for febrile neutropenic patients<br>• Uncomplicated and complicated urinary tract infections (including pyelonephritis)<br>• Uncomplicated sin and sin structure infections<br>• Complicated intra-abdominal infections (used in combination with metronidazole) in adults   | 12  | 120   | 2 months                              | N/A | N/A | ¥ | Y | 5/21/2019  |
|-------|-------|---|--------|----------|-----------------------|---|--|-----|-------|---------------------------------------|-----|-----|---|---|--|
| Drugs | 10694 | Injection, cefoxitin<br>sodium, 1 gram                  | ig     | 1/1/2000 | N/A                   | cefoxitin for injection   | Indicated for the treatment of serious infections caused by susceptible strains of the designated microorganisms in the diseases<br>listed below.<br>Lower respiratory tract infections: including pneumonia and lung abscess, caused by Streptococcus pneumoniae, other<br>streptococci (secluding enterococci e.g., Enterococcus faecial (formerly Streptococcus faecial), Staphylococcus aureus (including<br>pencillinase-producing strains), Escherichia coli, Rebsiella species, Foretus mirabilis, Morganella morgani, Proteus vulgaris and<br>Providencia species (including peritor).<br>Intra-abdomian Infections, including pencillinase producing strains), Bacteroides species (anduding peritor).<br>Sofwercological infections: including pencillinase-producing strains), Bacteroides species including scherichia coli,<br>Neisseria gonorrhoeae (including pencillinase-producing strains), Bacteroides species including scherichia coli,<br>Neisseria gonorrhoeae (including pencillinase-producing strains), Bacteroides species including scherichia coli,<br>Neisseria gonorrhoeae (including pencillinase-producing strains), Bacteroides species including scherichia coli,<br>Neisseria gonorrhoeae (including pencillinase-producing strains), Bacteroides species including scherichia coli,<br>Neisseria gonorrhoeae (including pencillinase-producing strains), Bacteroides species including scherichia<br>coli, Klebsiella species, and Streptococcus agalactiae. Cefoxith, like cephalosporins, has no activity against Chiamydia trachomatis. Interefore,<br>when cefoxitin scued in the tractement of patients with pelvic inflammatory disease and C. trachomatis is one of the suspected<br>asthogens, appropriate anti-chiamydial coverage should be added.<br>Septicentic: caused by Staphylococcus aneurus (including pencillinase producing strains), Staphylococcus<br>epidermidis, Streptococcus species: and bacteroides species including bencillinase producing strains), Staphylococcus<br>epidermidis, Streptococcus species: and bacteroides subaly staphylococcus aureus (including pencillinase producing strain  | 12  | 372   | 3 months                              | N/A | N/A | Ŷ | Ŷ | 9/27/2018  |
| Drugs | J0695 | Injection, ceftolozane 50<br>mg and tazobactam 25<br>mg | 75 mg  | 1/1/2016 | Zerbaxa*              | ceftolozane and tazobactam<br>for injection, for intravenous<br>use         | Hospital-acquired Bacterial Pneumonia and Ventilator-associated Bacterial Pneumonia (HABP/VABP)     To reduce the development of drug-resistant bacteria and maintain the effectiveness of Zerbaxa and other antibacterial drugs,     Zerbaxa should be used only to treat or prevent infections that are proven or strongly suspected to be caused by bacteria.   | 120 | 1,680 | 18 years                              | N/A | N/A | Y | Ŷ | 7/26/2019  |
| Drugs | J0696 | Injection, ceftriaxone<br>sodium, per 250 mg            | 250 mg | 1/1/2000 | Rocephin*             | ceftriaxone sodium injection  | Instrates for the treatment or the tonowing metchons when classes by susceptible organisms:<br>- Lower Registratory Tract Infections: Caused by Steptococcus pneumoniae, Staphylococcus aureus, Haemophilus influenzae,<br>Haemophilus parainfluenzae, Klebsiella pneumoniae, Escherichia coli, Enterobacter aerogenes, Proteus mitabilis or Serrata marcescens.<br>- Acute Bacterial Ottis: Media: Caused by Steptococcus pneumoniae, Haemophilus influenzae (including beta-lactamase producing strains)<br>or Moraudel catarhalis (including beta-lactamase producing strains).<br>- Skin and Skin Structure Infections: Caused by Staphylococcus aureus, Staphylococcus epidermidis, Streptococcus pyogenes,<br>Viridam group<br>streptococci, Sischerichia coli, Enterobacter cloacae, Klebsiella oncurse, Staphylococcus epidermidis, Streptococcus pyogenes,<br>- Uncomplicated Ganorthels (and the strain amrescense, Aclebsiella oncurse), Staphylococcus aureus, Staphylococcus<br>e Uniany Tract Infections: Caused by Escherichia coli, Proteus mirabilis, Proteus wilgaris, Morganella morganii or Klebsiella<br>pneumoniae, Proteus mirabilis, Morganella morganii or Klebsiella<br>- Uncomplicated Gonorthea (cervical/urethral and rectal): Caused by Neisseria gonorrhoeae, including both penicillinase-<br>and onopenicillinase-producing strains, and pharyngeal gonorrhoea: Certriacone sodium, like other cephalosporins, has no activity<br>against Chamydia trachomatis. Therefore, when cephalosporins are used in the treatment of patients with pelvic inflammatory<br>disease and Chamydia trachomatis. Toner of the strains of the strains of weither appropriate antichamydia coverage should be added.<br>- Bacterial Septicemia: Caused by Staphylococcus aureus, Streptococcus pneumoniae, Escherichia coli, Proteus mirabilis,<br>Klebsiella pneumoniae.<br>- Bone and Joint Infections:: Caused by Staphylococcus aureus, Streptococcus pneumoniae, Escherichia coli, Proteus mirabilis,<br>Klebsiella pneumoniae. Classificatory of Staphylococcus aureus, Streptococcus pneumoniae, Escherichia coli, Proteus mirabilis,<br>Kle | 16  | 496   | Indication Specific<br>(see comments) | N/A | N/A | Y | ¥ | See package insert for specific<br>neonate contraindication. 10/4/2018 |

| Drugs | J0697 | Injection, sterile<br>cefuroxime sodium, per<br>750 mg                                 | 750 mg | 1/1/2000 | Zinacef®                | cefuroxime for injection  | Indicated for the treatment of patients with infections caused by susceptible strains of the designated organisms in the following<br>diseases:  • Lower Respiratory Tract Infections: including pneumonia, caused by Streptococcus pneumoniae, Haemophilus influenzae<br>(Including ampioillin-resistant strains), Klebsiella spo, Staphylcoccus aureus (pencillinase- and non-pencillinase-producing<br>strains), Streptococcus pyogenes, and Escherichia coli.<br>• Urinary Tract Infections: caused by Escherichia coli.<br>• Urinary Tract Infections: caused by Staphylcoccus aureus (pencillinase- and non-pencillinase-producing strains),<br>Streptococcus pyogenes, Escherichia coli, Rebsiella spp.<br>• Solin and Silars Structure Infections: caused by Staphylcoccus aureus (pencillinase- producing strains), Streptococcus preumoniae,<br>Septicenia: caused by Staphylcoccus aureus (pencillinase- and non-pencillinase-producing strains), Streptococcus pneumoniae,<br>Escherichia coli, Haemophilus influenzae (Including ampicillin-resistant strains), and Klebsiella spp.<br>• Gonorrhoeae: Uncomplicated and disseminated gonococcal infections due to Neisseria gonorrhoeae (pencillinase- and non-pencillinase- producing strains], Neisseria<br>meningtidis, and Staphylococcus anerus (pencillinase- and non-pencillinase- groupicing strains).  | 12  | 372   | 3 months | N/A | N/A | ¥ | Y | 10/4/2018  |
|-------|-------|--|--------|----------|-------------------------|---|--|-----|-------|----------|-----|-----|---|---|------------|
| Drugs | 10698 | Cefotaxime sodium, per<br>gram   | 1g     | 1/1/2000 | Claforan*               | cefotaxime for injection  | Indicates for the treatment or patients with seriods intections caused by susceptione strains or the designated microorganisms in the<br>disease listed below.<br>• Lower respiratory tract infections: including pneumonia, caused by Steptococcus pneumoniae (formerly Diplococcus<br>pneumoniae), Steptococcus spoeses <sup>1</sup> (Group A streptococcil) and other streptococci (avoiding enterococci, e.g., Enterococcus<br>faecialis, Staphylococcus aurcus (penicillinase and non-penicillinase producing). Excherichia coli, Kobsiella species, Henophilus<br>and Inferenze (including ampicillin resistant strain), Heamophilus parainfluenze, Protus mizibilis, Serrata marcescens <sup>4</sup> .<br>Enterobacter species, Indole positive Proteus and Pseudomonas species (including P. aeruginosa).<br>Enterobacter species, Indole positive Proteus and Pseudomonas species (including P. aeruginosa).<br>Sendos and non-penicillinase producing), Citrobacter species, Enterobacter species, Scherichia coli, Kebsiella<br>species, Proteus mizbilis, Proteus valgaris <sup>4</sup> , Providenci stuartiji, Morganella morgani <sup>1</sup> , Providenci ar tettgeri <sup>4</sup> , Serata marcescens<br>e spidermidis, Streptococcus species, Enterococcus species, Enterobacter species <sup>4</sup> , Klabsiella species <sup>4</sup> , Escherichia coli, Kebsuella<br>species, Proteus mizbilis, Proteus valgaris <sup>4</sup> , Providenci stuartiji, Morganella morgani <sup>1</sup> , Providenci ar tettgeri <sup>4</sup> , Serata marcescens<br>e pidermidis, Streptococcus species, Enterococcus species, Enterobacter species <sup>4</sup> , Klabsiella species <sup>4</sup> , Escherichia coli, Proteus<br>mizbilis, Bacterolides species <sup>1</sup> (Including Bacterolides rights <sup>1</sup> ), Clatifiam species, and anaerobic cocci (including<br>Peptostreptocccus species and Peptocccus species and Fusboacterium species <sup>4</sup> , Klabsiella species <sup>4</sup> , Scherichia coli, Proteus<br>mizbilis, Bacterolide species <sup>1</sup> (Including Bacterolides rights <sup>1</sup> ), Clatifiam species, And anaerobic cocci (Including Pertusted<br>Patients with pelvic inflammatory disease and C trachomatis is one of the suspected pathogens, supropriate anti-thamydial<br>coverage should be add | 12  | 372   | N/A      | N/A | N/A | Y | ¥ | 5/20/2019  |
| Drugs | J0702 | Injection, betamethasone<br>acetate 3 mg and<br>betamethasone sodium<br>phosphate 3 mg | 1 mL   | 1/1/2000 | Celestone*<br>Soluspan* | betamethasone sodium<br>phosphate and<br>betamethasone acktate<br>injectable suspension | When or al therapy is not teasible, the intramuscular use of Celestone a Soluspan is indicated as follows:<br>• Allergic States: Control of severe or incapacitating allergic conditions intractable to adequate trials of conventional treatment in<br>satima, atopic dematitis, contact dematitis, drug hypersensitivity reactions, perennial or seasonal allergic rinhitis, serum sickness,<br>transfusion reactions.<br>• Dermatologic Diseases: Bullous dermatitis horpetitormis, exfoliative erythroderma, mycosis fungoides, pemphigus, severe<br>erythema multiforme (Stevens-Johnson syndrome).<br>• Endocrine Disorders: Congenital adrenal hyperplasia, hypercalcenia associated with cancer, nonsuppurative thyroiditis.<br>Hydrocortisone or cortisone is the drug of choice in primary or secondary adrencortical insufficiency. Synthetic analogs may be<br>used in conjunction with mineralocorticoids where applicable; in infancy mineralocorticoid supplementation is of particular<br>importance.<br>• Gastrointestinal Diseases: To tide the patient over a critical period of the disease in regional enteritis and ulcerative colitis.<br>+ Hematologic Disorders: Acquired (autoimmune) hemolytic anemia, Diamond-Blackfan anemia, pure red cell aplasia, selected cases<br>of secondary thrombocytopenia.<br>• Miscellaneous: Trichinois with neurologic or myocardial involvement, tuberculous meningitis with subarachnoid block or<br>impending block when used with appropriate antituberculous chemotherapy.<br>• Nerous System: Acute exacethations of multiple sciences, carebraf deema associated with primary or metastatic brain tumor or<br>cranitoromy.<br>• Onthalmic Diseases: Stropathetic ophthalmia. Temporal arteritis. usetis and ouclar inflammatory conditions unresonsive to  | 5   | 155   | N/A      | N/A | N/A | Y | v | 9/25/2018  |
| Drugs | J3490 | Unclassified drugs   | 1 mg   | 1/1/2000 | Xenleta™                | lefamulin injection, for<br>intravenous use   | Indicated for the treatment of adults with community-acquired bacterial pneumonia (CABP) caused by the following susceptible<br>microorganisms: Streptococcus pneumoniae, Staphylococcus aureus (methicillin-susceptible isolates), Haemophilus influenzae,<br>Legionella pneumophila, Mycoplasma pneumoniae, and Chlamydophila pneumoniae.<br>To reduce the development of drug resistant bacteria and maintain the effectiveness of Xenleta and other antibacterial drugs,<br>Xenleta should be used only to treat or prevent infections that are proven or strongly suspected to be caused by bacteria.   | 300 | 2,100 | 18 years | N/A | N/A | Ŷ | Ŷ | 10/28/2019 |

| Drugs       | J0713 | Injection, ceftazidime, per<br>500 mg                             | per 500 mg            | 1/1/2000 | Tazicef®              | ceftazidime for injection, for<br>intravenous or intramuscula<br>use   | Indicated for the treatment of patients with infections caused by susceptible strains of the designated organisms in the following<br>diseases:<br>Lower Respiratory Tract Infections: including pneumonia, caused by Pseudomonas aeruginosa and other Pseudomonas spp.;<br>Haemophilus influenzae, including ampicillin-resistant strains; Klebsiella spp.; Enterobacter spp.; Proteus mirabilis; Escherichia coli;<br>Serrata spp.; Clrobacter spp.; Streptococcus pneumoniae; and Staphylococcus aureus (methicillin-susceptible strains).<br>Solin and Silns Tructure Infections: caused by Pseudomonas aeruginosa; Klebsiella spp.; Escherichia coli; Starins); and Streptococcus pogenes (group A bet-hemohylic streptococc).<br>• Urinary Tract Infections: both complicated and uncomplicated, caused by Pseudomonas aeruginosa; Enterobacter spp.; Proteus<br>spp., including Proteus mirabilis and indole positive Proteus; (Mebsiella spp.; Jataphylococcus aureus (methicillin-susceptible<br>strains); and Streptococcus pogenes (group A beta-hemohylic streptococc).<br>• Urinary Tract Infections: both complicated and uncomplicated, caused by Pseudomonas aeruginosa; Enterobacter spp.; Proteus<br>spp., including Proteus mirabilis and indole positive roteus; (Mebsiella spp.; anterohas cline).<br>• Bacterial Septicemia: caused by Pseudomonas aeruginosa, Klebsiella spp., Laternophilus influenzae, Escherichia coli, Serratia spp.;<br>• Streptococcus pogenes unit Infections: caused by Pseudomonas aeruginosa, Klebsiella spp., Enterobacter spp., and Staphylococcus aureus<br>(methicillin-usceptible strains), and<br>• Sone and Joint Infections: including entonitis; pelvic cellulitis, and other infections of the female genital tract caused by<br>Escherichia coli.<br>• Intra-abdominal Infections: including peritonitis caused by Escherichia coli, Klebsiella spp., and Staphylococcus aureus (methicillin-<br>suceptible strains) and polymicrobial infections : including meningitis, caused by Haemophilus influenzae and Bacteroider spp. (many strains of<br>Bacteroider Snglis are resistant).<br>• Central Nerv | 12           | 372          | N/A                                   | N/A | N/A | ¥ | ¥ | иканакан ургансаде   | 5/21/2019 |
|-------------|-------|---|-----------------------|----------|-----------------------|--|--|--------------|--------------|---------------------------------------|-----|-----|---|---|--|-----------|
| Drugs       | J0714 | Injection, ceftazidime and avibactam, 0.5 g/0.125 g               | 0.625 g               | 1/1/2016 | Avycaz*               | ceftazidime and avibactam<br>for injection, for intravenous<br>use   | Indicated for the treatment of the following infections:<br>• Complicated intra-abdominal infection (IAI) caused by the following susceptible Gram-negative microorganisms, in combination<br>with metronidazole, in adult and pediatric patients 3 months and older. Escherichia coli, Klebsiella pneumoniae, Proteus mirabilis,<br>Enterobacter cloacae, Klebsiella oxytoca, Cirobacter freundi complex, and Pseudomonas aeruginosa.<br>• Complicated unirary trac infections (CUTI), including pyelonephrits, caused by the following susceptible Gram-negative<br>microorganisms in adult and pediatric patients 3 months and older: Escherichia coli, Klebsiella pneumoniae, Enterobacter cloacae,<br>Cirobacter freundii complex, Proteus mirabilis, and Pseudomonas aeruginosa.<br>• **New indication 2/1/2018***<br>• Hospital-acquired bacterial pneumonia and ventilator-associated bacterial pneumonia (HABP/VABP) caused by the following<br>susceptible Gram-negative microorganisms: Klebsiella pneumoniae, Enterobacter cloacae, Escherichia coli, Serratia marcescens,<br>Proteus mirabilis, Pseudomonas aeruginosa, and Haemophilus influenzae.   | 12           | 168          | Indication Specific<br>(see comments) | N/A | N/A | Y | ¥ | restrictions:<br>• Complicated intra-abdominal<br>infection (AL): a months and<br>older<br>• Complicated winary tract<br>infections (cUTI): 3 months<br>and older<br>+ Hospital-acquired bacterial<br>pneumonia and ventilator-<br>associated bacterial<br>pneumonia (HABP/VABP): 18 | 5/1/2019  |
| Biologicals | J0716 | Injection, centruroides<br>immune f(ab)2, up to 120<br>milligrams | Up to 120 mg (1 vial) | 1/1/2013 | Anascorp*             | centruroides (scorpion)<br>immune F(ab') <sup>2</sup> (equine)<br>injection lyophilized for<br>solution, for intravenous use<br>only | Antivenom indicated for treatment of clinical signs of scorpion envenomation.  | N/A          | N/A          | N/A                                   | N/A | N/A | Y | ¥ |  | 4/10/2019 |
| Biologicals | J0717 | Injection, certolizumab<br>pegol, 1 mg                            | 1 mg                  | 1/1/2014 | Cimzia®               | certolizumab pegol for<br>injection, for subcutaneous<br>use   | Indicated for:<br>• Reducing signs and symptoms of Crohn's disease and maintaining clinical response in adult patients with moderately to severely<br>active disease who have had an inadequate response to conventional therapy.<br>• Treatment of adults with moderately to severely active rheumatoid arthritis.<br>• Treatment of adults with active anyloging spondylitis.<br>• Treatment of adults with active anyloging spondylitis.<br>• Treatment of adults with active anyloging spondylitis.<br>• Treatment of adults with active network and a spondyloging spondylitis.   | 400          | 1,200        | 18 years                              | N/A | N/A | Y | ¥ |  | 5/1/2019  |
| Drugs       | J0720 | Injection,<br>chloramphenicol sodium<br>succinate, up to 1 g      | up to 1g              | 1/1/2000 | N/A                   | chloramphenicol sodium<br>succinate for injection, for<br>intravenous administration   | **Chloramphenicol must be used only in those serious infections for which less potentially dangerous drugs are ineffective or<br>contraindicated. (See package insert for recommendations and warnings associated with chloramphenicol.)<br>Indicated for:<br>• Acute infections caused by Salmonella typhi. In treatment of typhoid fever some authorities recommend that chloramphenicol<br>be administered at<br>therapeutic levels for 8 to 10 days after the patient has become afebrile to lessen the possibility of relapse. It is not recommended<br>for the routine reatment of the typholic arrier state.<br>• Serious infections caused by susceptible strains in accordance with the concepts expressed in the package insert:<br>- Salmonella species<br>+ I. Influenza, specifially meningeal infections<br>- Rickettsia<br>- Lymphogranuloma-psittacosis group<br>- Various gram-negative bacteria causing bacteremia, meningitis or other serious gram-negative infections.<br>- Other succeptibe organisms which have been demonstrated to be resistant to all other appropriate antimicrobial agents.<br>- Cystic fibrosis regimens  | 7            | 217          | N/A                                   | N/A | N/A | Y | ¥ |  | 10/4/2018 |
| Drugs       | J0725 | Injection, chorionic<br>gonadotropin, per 1,000<br>USP units      | 1,000 USP units       | 1/1/2000 | Novarel®,<br>Pregnyl® | chorionic gonadotropin for<br>injection  | Indicated for:<br>• Prepubertal cryptorchidism not due to anatomic obstruction. In general, HCG is thought to induce testicular descent in situations<br>when descent would have occurred at puberty. HCG thus may help to predict whether or not orchiopexy will be needed in the<br>future. Although, in some cases, descent following HCG administration is permanent, in most cases the response is temporary.<br>Therapy is usually instituted between the ages of 4 and 9.<br>• Selected cases of hypogonadorropic hypogonadism (hypogonadism secondary to a pituitary deficiency) in males.<br>• Induction of ovulation and pregnary in the anovulatory, infertile woman in whom the cause of anovulation is secondary and not<br>due to primary vorian failure, and who has been appropriately pretreated with human menotropins.  | 5            | 60           | 4 years                               | N/A | N/A | Y | Ŷ |  | 9/27/2018 |
| Drugs       | J0735 | Injection, clonidine<br>hydrochloride, 1 mg                       | 1 mg                  | 1/1/2000 | Duraclon <sup>®</sup> | clonidine hydrochloride<br>injection solution  | Indicated in combination with opiates for the treatment of severe pain in cancer patients that is not adequately relieved by opioid<br>analgesics alone. Epidural clonidine is more likely to be effective in patients with neuropathic pain than somatic or visceral pain.  | See Comments | See Comments | N/A                                   | N/A | N/A | Y | Y | Maximum daily and monthly<br>doses are individualized and<br>patient specific.   | 10/4/2018 |
| Drugs       | J0740 | Injection, cidofovir, 375<br>mg                                   | 375 mg                | 1/1/2000 | Vistide®              | cidofovir injection for<br>intravenous infusion  | Indicated for the treatment of cytomegalovirus (CMV) retinitis in patients with acquired immunodeficiency syndrome (AIDS).   | 2            | 6            | 18 years                              | N/A | N/A | Y | Y |  | 9/27/2018 |

| Drugs       | J0743 | Injection, cilastatin<br>sodium; imipenem, per<br>250 mg                | 250 mg             | 1/1/2000 | Primaxin®        | imipenem and cilastatin for<br>injection, for intravenous use  | Indicated for the treatment of the following serious infections caused by designated susceptible bacteria:<br>• Lurinary tract infections<br>• Lurinary tract infections<br>• Gynecologic infections<br>• Bacterial septicemia<br>• Some and joint infections<br>• Skin and skin structure infections<br>• Londocardits<br>Lumitations of Use:<br>• Not indicated in patients with meningitis because safety and efficacy have not been established.<br>• Not recommended in pediatric patients with CNS infections because of the risk of seizures.<br>• Not recommended in pediatric patients weighing less than 30 ke with impaired renal function.   | 16  | 496    | N/A      | N/A | N/A | Y | Y | 9/27/2018  |
|-------------|-------|---|--------------------|----------|------------------|--|--|-----|--------|----------|-----|-----|---|---|------------|
| Drugs       | J0744 | Injection, ciprofloxacin<br>for intravenous infusion,<br>200 mg         | 200 mg             | 1/1/2002 | Cipro IV®        | ciprofloxacin injection for<br>intravenous use   | Indicated in adults (p 18 years of age) with the following infections caused by designated, susceptible bacteria and in pediatric patients where indicated:<br>5 Sin and skin structure infections<br>6 Done and joint infections<br>1 Complicated intra-abdominal infections<br>1 Noscomial pneumonia<br>1 Empirical therapy for febril enutropenic patients<br>1 Inhalational anthrax post-exposure in adult and pediatric patients<br>1 Chronic bacterial prostatis<br>2 Chronic bacterial prostatis<br>4 Unary tract infections<br>4 Unary tract infections<br>1 Unary tract infections<br>1 Complicated U11 and pyelonephritis in pediatric patients<br>4 Acute sinustifis  | 6   | 186    | N/A      | N/A | N/A | Y | ¥ | 4/9/2019   |
| Drugs       | J0770 | Injection, colistimethate<br>sodium, up to 150 mg                       | up to 150 mg       | 1/1/2000 | Coly-Mycin® M    | colistimethate for injection   | Indicated for the treatment of acute or chronic infections due to sensitive strains of certain gram-negative bacilli. Particularly<br>indicated when the infection is caused by sensitive strains of P. aeruginosa. Clinically effective in treatment of infections due to the<br>following gram-negative organisms: Enterobacter aerogenes, Escherichia coli, Klebsiella pneumoniae and Pseudomonas aeruginosa.   | 4   | 124    | N/A      | N/A | N/A | Y | Y | 6/4/2019   |
| Biologicals | J0775 | Injection, collagenase,<br>clostridium histolyticum,<br>0.01 mg         | 0.01 mg            | 1/1/2011 | Xiaflex®         | collagenase clostridium<br>histolyticum  | <ul> <li>Treatment of adult patients with Dupuytren's contracture with a palpable cord.</li> <li>Treatment of adult men with Peyronie's disease with a palpable plaque and curvature deformity of at least 30 degrees at the start of therapy.</li> </ul>  | 180 | 360    | 18 years | N/A | N/A | Y | Y | 6/6/2019   |
| Drugs       | J0780 | Injection,<br>prochlorperazine, up to<br>10 mg                          | up to 10 mg        | 1/1/2000 | N/A              | injection  | Indicated to control severe nausea and vomiting and for the treatment of schizophrenia. Prochlorperazine has not been shown<br>effective in the management of behavioral complications in patients with mental retardation.  | 4   | 124    | 2 years  | N/A | N/A | Y | Y | 8/24/2018  |
| Drugs       | J0800 | Injection, corticotropin,<br>up to 40 units                             | up to 40 units     | 1/1/2000 | H.P. Acthar® Gel | injection, gel for<br>intramuscular or<br>subcutaneous use   | <ul> <li>Indicated as monotherapy for the treatment of infantile spasms in infants and children under 2 years of age.</li> <li>Indicated for the treatment of exacerbations of multiple sclerosis in adults.</li> <li>May be used for the following disorders and diseases: rheumatic, collagen, dermatologic, allergic states, ophthalmic, respiratory, and edematous state.</li> </ul>   | 3   | 63     | N/A      | N/A | N/A | Y | Y | 10/4/2018  |
| Drugs       | J0834 | Injection, cosyntropin,<br>0.25 mg                                      | 0.25 mg            | 1/1/2010 | Cortrosyn™       | cosyntropin injection for<br>diagnostic use  | Intended for use as a diagnostic agent in the screening of patients presumed to have adrenocortical insufficiency.   | 3   | 3      | N/A      | N/A | N/A | Y | Y | 2/4/2019   |
| Biologicals | J0840 | Injection, crotalidae<br>polyvalent immune fab<br>(Ovine), up to 1 gram | up to 1 g (1 vial) | 1/1/2012 | CroFab*          | crotalidae polyvalent<br>immune fab (ovine)<br>lyophilized powder for  | Indicated for the management of adult and pediatric patients with North American crotalid envenomation. The term crotalid is used<br>to describe the Crotalinae subfamily (formerly known as Crotalidae) of venomous snakes which includes rattlesnakes, copperheads<br>and cottonmouths/water moccasins.  | N/A | N/A    | N/A      | N/a | N/A | Y | N | 1/4/2019   |
| Biologicals | J0841 | Injection, crotalidae<br>immune f(ab')2 (equine),<br>120 mg             | 120 mg             | 1/1/2019 | Anavip®          | crotalidae immune f(ab')2<br>(equine), lyophilized powder<br>for solution for injection for<br>intravenous use | Indicated for the management of adult and pediatric patients with North American rattlesnake envenomation.   | N/A | N/A    | N/A      | N/A | N/A | Y | Y | 12/28/2018 |
| Drugs       | J0875 | Injection, dalbavancin, 5   | 5 mg               | 1/1/2016 | Dalvance®        |  | Indicated for acute bacterial skin and skin structure infections (ABSSSI) caused by designated susceptible strains of Gram-positive<br>microorganisms.   | 300 | 300    | 18 years | N/A | N/A | Y | Y | 10/4/2018  |
| Drugs       | J0878 | Injection, daptomycin, 1  | 1 mg               | 1/1/2005 | Cubicin®         | daptomycin injection, for  | Indicated for the treatment of:<br>- Complicated sin and sin structure infections (<5SSI) in adult and pediatric patients (1 to 17 years of age).<br>- Staphylococcus aureus bloodstream infections (bacteremia), in adult patients including those with right-sided infective<br>endocarditis.<br>***Approved 9/1/2017***<br>- Indicated for the treatment of Staphylococcus aureus bloodstream infections (bacteremia) in pediatric patients (1 to 17 years of<br>age).<br>Limitations of Use:<br>- Oublicin is not indicated for the treatment of pneumonia.<br>- Oublicin is not indicated for the treatment of left-sided infective endocarditis due to S. aureus.<br>- Oublicin is not indicated for the treatment of left-sided infective endocarditis due to S. aureus.<br>- Oublicin is not recommended in pediatric patients younger than one year of age due to the risk of potential effects on muscular,<br>neuromuscular, and/or nervous systems (either peripheral and/or century) observed in neonalal dogs. | 840 | 26,040 | 1 year   | N/A | N/A | Y | Y | 10/4/2018  |

| Biologicals | J0881 | Injection, darbepoetin<br>alfa, 1 microgram (non-<br>ESRD use)        | 1 mcg       | 1/1/2006 | Aranesp <sup>®</sup>   | darbepoetin alfa injection,<br>for intravenous or<br>subcutaneous use (non-ESRD<br>use)                                  | Indicated for the treatment of anemia due to:<br>• Orronic Kidney Diesee (CKD) in patients on dialysis and patient not on dialysis.<br>• The effects of concomitant myelosuppressive chemotherapy, and upon initiation, there is a minimum of two additional months of<br>planned chemotherapy.<br>Limitations of Use: Aranesp has not been shown to improve quality of life, fatigue, or patient well-being.<br>Aranesp is not indicated for use:<br>• In patients with cancer receiving hormonal agents, biologic products, or radiotherapy, unless also receiving concomitant<br>myelosuppressive chemotherapy.<br>• In patients with cancer receiving myelosuppressive chemotherapy when the anticipated outcome is cure.<br>• In patients with cancer receiving myelosuppressive chemotherapy whon the ment and be managed by transfusion.<br>• As a substitute for RBC transfusions in patients who require immediate correction of anemia.  | 500 | 1,575 | Indication Specific<br>(see comments) | N/A | N/A | Ŷ | Ŷ | Indication specific age<br>restrictions:<br>• CKD: None 4/10/2019<br>• Cancer: 18 years of age and<br>older   |
|-------------|-------|---|-------------|----------|------------------------|--|--|-----|-------|---------------------------------------|-----|-----|---|---|---|
| Biologicals | J0882 | Injection, darbepoetin<br>alfa, 1 microgram (for<br>ESRD on dialysis) | 1 mcg       | 1/1/2006 | Aranesp*               | darbepoetin alfa injection,<br>for intravenous or<br>subcutaneous use (SSD use<br>on dialysis)                           | Indicated for the treatment of anemia due to:<br>• Chronic Kidney Disease (CK) in patients on diajosis and patients not on diajosis.<br>• The effects of concomitant myelosuppressive chemotherapy, and upon initiation, there is a minimum of two additional months of<br>planned<br>chemotherapy.<br>Limitations of Use: Aranesp has not been shown to improve quality of life, fatigue, or patient well-being.<br>Aranesp is not indicated for use:<br>• In patients with cancer receiving hormonal agents, biologic products, or radiotherapy, unless also receiving concomitant<br>myelosuppressive<br>chemotherapy.<br>• In patients with cancer receiving myelosuppressive chemotherapy when the anticipated outcome is cure.<br>• In patients with cancer receiving myelosuppressive chemotherapy in whom the anemia can be managed by transfusion.<br>• As a substitute for RR L'ransfusion in patients who require immediate correction of anemia.   | 105 | 315   | N/A                                   | N/A | N/A | Y | Ŷ | 4/10/2019   |
| Biologicals | J0885 | Injection, epoetin alfa,<br>(for non-ESRD use), 1000<br>units         | 1,000 units | 1/1/2006 | Epogen®, ,<br>Procrit® | epoetin alfa for injection, for<br>intravenous or subcutaneous<br>use (for non ESRD use)                                 | Indicated for treatment of anemia due to Chronic Kidney Disease (CKD) in patients on dialysis and not on dialysis. Zidovucine in patients with Hi-invection. The effects of concomitant myelosuppressive chemotherapy, and upon initiation, there is a minimum of two additional months of planned chemotherapy. Reduction of allogeneic RBC transfusions in patients undergoing elective, noncardiac, nonvascular surgery. Limitations of Use: Epoetin alfa has not been shown to improve quality of life, fatigue, or patient wellbeing. Not indicated for use: In patients with Cancer receiving hormonal agents, biologic products, or radiotherapy, unless also receiving concomitant myelosuppressive chemotherapy in whon the anticipated outcome is cure. In patients with cancer receiving myelosuppressive chemotherapy in whom the anemia can be managed by transfusion. In patients with cancer receiving myelosuppressive chemotherapy in whom the memia can be managed by transfusion. In patients scheduled for Surgery who are willing to donate autologous blood. As a substitute of RBC transfusions in patients who require immediate correction of anemia. | 84  | 630   | N/A                                   | N/A | N/A | Y | Y | 6/4/2019  |
| Biologicals | J0887 | Injection, epoetin beta, 1<br>microgram, (for ESRD on<br>dialysis)    | 1 mcg       | 1/1/2015 | Mircera®               | methoxy polyethylene glycol-<br>epoetin beta injection, for<br>intravenous or subcutaneous<br>use (for ESRD on dialysis) |  | 360 | 720   | 5 years                               | N/A | N/A | Y | Y | 10/10/2018  |
| Biologicals | J0888 | Injection, epoetin beta, 1<br>microgram, (for non-<br>ESRD use)       | 1 mcg       | 1/1/2015 | Mircera*               | methaxy polyethylene glycol-<br>epoetin beta injection, for<br>intravenous or subcutaneous<br>use (for non-ESRD use)     | Indicated for the treatment of anemia associated with chronic kidney disease (CKD) in:<br>• Adult patients on caliayis and adult patients not on dialayisi.<br>• Pediatric patients 5 to 17 years of age on hemodialysis who are converting from another ESA after their hemoglobin level was<br>stabilized with an ESA.   | 360 | 720   | Indication Specific<br>(see comments) | N/A | N/A | Y | Ŷ | Indication specific age<br>restrictions:<br>• Adult patients with CKD - 18<br>years of age and older<br>• Pediatric patients on<br>hemodialysis who are<br>converting from another ESA-<br>5 years of age and older |
| Drugs       | J0894 | Injection, decitabine, 1<br>mg  | 1 mg        | 1/1/2007 | N/A                    | decitabine for injection, for<br>intravenous infusion  | Indicated for treatment of patients with myelodysplastic syndromes (MDS) including previously treated and untreated, de novo and<br>secondary MDS of all French-American-British subtypes (refractory anemia, refractory anemia with ringed sideroblasts, refractory<br>anemia with excess blasts, refractory<br>anemia with excess blasts in transformation, and chronic myelomonocytic leukemia) and intermediate-1, Intermediate-2, and high-<br>risk International Prognostic Scoring System groups.   | 150 | 450   | 18 years                              | N/A | N/A | Y | Ŷ | 10/4/2018   |
| Drugs       | J0895 | Injection, deferoxamine<br>mesylate, 500 mg                           | 500 mg      | 1/1/2000 | Desferal®              | deferoxamine mesylate for<br>injection   | Indicated for the treatment of acute iron intoxication and of chronic iron overload due to transfusion-dependent anemias.  | 12  | 372   | 3 years                               | N/A | N/A | Y | Y | 10/4/2018   |

|             |       |  | l.         | 1        | T                            |  |  |       |       |                                       |     | I            |   |   |  |            |
|-------------|-------|--|------------|----------|------------------------------|--|--|-------|-------|---------------------------------------|-----|--------------|---|---|--|------------|
| Biologicals | J0897 | Injection, denosumab, 1<br>mg (Xgeva, Prolia)      | İmg        | 1/1/2012 | Prolia®, Xgeva®              | denosumab injection, for<br>subcutaneous use               | Prola<br>Indicated for:<br>• The treatment in postmenopausal women with osteoporosis at high risk for fracture<br>• The treatment to increase bone mass in men with osteoporosis at high risk for fracture<br>• The treatment to increase bone mass in men at high risk for fracture receiving androgen deprivation therapy for nonmetastatic<br>prostate cancer.<br>• The treatment of glucocorticoid-induced osteoporosis in men and women at high risk for fracture.<br>Xgeva<br>Indicated for:<br>• The prevention of skeletal-related events in patients with multiple myeloma and in patients with bone metastases from solid<br>tumors<br>• The treatment of adults and skeletally mature adolescents with giant cell tumor of bone that is unresectable or where surgical<br>resection is likely to result in severe morbidity<br>• The treatment of hypercalemical of analignancy refractory to bisphosphonate therapy<br>•   | 120   | 360   | Indication Specific<br>(see comments) | N/A | N/A          | ¥ | ¥ | Product/indication specific age<br>restrictions:<br>• Prolia: 18 years of age and<br>older<br>• Xgeva: Indication specific.<br>O Giant cell tumor of bone:<br>Only use in skeletally mature<br>adolescents.<br>• All other indications: 18<br>years of age and older | 10/31/2018 |
| Drugs       | J1000 | Injection, depo-estradiol<br>cypionate, up to 5 mg | up to 5 mg | 1/1/2000 | Depo <sup>®</sup> -Estradiol | estradiol cypionate injection                              | The creatment or hypertakemia or manganity renacion to upprosphorate menapy     Indicated in the treatment of hypoestrogenism caused by hypogonadism and moderate to severe vasomotor symptoms associated     with the menopause.  | 1     | 2     | 18 years                              | N/A | Females Only | Y | Y |  | 10/4/2018  |
| Drugs       | J1020 | Injection,<br>methylprednisolone<br>acetate, 20 mg | 20 mg      | 1/1/2000 | Depo-Medrol*                 |  | Intramuscula Administration Allergic States: Control of severe or incapacitating allergic conditions intractable to adequate trials of conventional treatment in asthma, atopic dermatitis, contact dermatitis, drug hyperensitivity reactions, seasonal or perennial allergic rhinitis, serum sickness, trainfusion reactions. Dermatologic Diseases: Bullous dermatitis, therpetiformis, exfoliative dermatitis, mycosis fungoides, pemphigus, severe erythema multiforms (Exsens-iohnson syndrome). Endocrine Disorders: Primary or secondary adrenocortical insufficiency (hydrocortisone or cortisone is the drug of choice; synthetic analogs may be used in conjunction with mineralocorticoid where applicable; in infancy, mineralocorticoid where applicable; infancy, mineralocorticoid where applicable; infancy, mineralocorticoid wheread uncertain inducement in associated with cancer, nonsupportive thyroidits. Hematologic Disorders: Acquired (autoimnune) hemolytic anemia, congenital (erythroid) hypoplastic anemia (Diamond BlacKfan anemia), pure red cell aplasia, select cases of secondary thrombocytoperia. Neolosisto Dissesse: For palialier management of Lieutemias and themphomas. Neolosisto Dissesse: For palieture management of Lieutemias and themphomas. Neolosis System: Acute caserbations of multiple sclerosis, cerebral edema associated with primary or metastatic brain tumor or craniotomy. Ophthalmic Diseases: To indice diuresis or remission of proteinuria in idiopathic nephrotic syndrome, or that due to lupus erythematous. Negritory Diseases: Berylilosis, fulminat | 1     | 31    | N/A                                   | N/A | N/A          | Y | Y |  | 10/26/2018 |
| Drugs       | J1030 | Injection,<br>methylprednisolone<br>acetate, 40 mg | 40 mg      | 1/1/2000 | Depo-Medrol®                 | methylprednisolone acetate injection, suspension, 40 mg    | nucrativits himses when the d'afforder's hot reastlies and factor and data a cond. Min excitate estimate data and other<br>Intramucular Administration<br>- Allergis Clatters Control of severe or incapacitating allergic conditions intractable to adequate trials of conventional treatment in<br>asthma, atopic dermatitis, contact dermatitis, drug hypersensitivity reactions, seasonal or perennial allergic rhinitis, serum sickness,<br>transfusion reactions.<br>- Dermatologic Diseases: Bullous dermatitis herpetiformis, exfoliative dermatitis, mycosis fungoides, pemphigus, severe erythema  | 1     | 31    | N/A                                   | N/A | N/A          | Y | Y |  | 10/26/2018 |
| Drugs       | 31040 | Injection,<br>methylprednisolone<br>acetate, 80 mg | 80 mg      | 1/1/2000 | Depo-Medrol®                 | methylprednisolone acetate<br>injection, suspension, 80 mg | Indifator a triansour when the oral roude is not reasour:<br>Intramuscular Administration<br>Allergic States: Control of severe or incapacitating allergic conditions intractable to adequate trials of conventional treatment in<br>asthma, atopic dermatits, contact dermatits, drug hypersensitivity reactions, seasonal or perennial allergic finitis, serum sickness,<br>translusion reactions.<br>• Dermatologic Diseases: Bullous dermatitis herpetiformis, exfoliative dermatits, mycosis fungoides, pemphigus, severe erythema<br>multiforme (Stevens-Johnson syndrome).<br>• Endocrine Disorders: Primary or secondary adrenocortical insufficiency (hydrocortisone or cortisone is the drug of choice;<br>synthetic analogs may be used in conjunction with mineralcocorticoid where applicable; in infancy, mineralcocorticoid where<br>supplementation is of particular importance), congenital adrenal hyperplasia, hypercalcemia associated with cancer, nonsupportive<br>thyroidits.<br>• Genetorinetstinal Diseases: To tide the patient over a critical period of the disease in regional enteritis (systemic therapy) and<br>ulcerative colitis.<br>• Hematologic Disorders: Trichinosis with neurologic or myocardial involvement, tuberculous meningitis with subarachnoid block or<br>impending block when used concurrently with appropriate antibuberculous chemotherapy.<br>• Neoplastic Diseases: For plailative amagement of: Leukemias and Hymphomas.<br>• Nevosis System: Acute eaveerbatons of multiple sclerosis, cerebral edem associated with primary or metastatic brain tumor or<br>crianiotomy.<br>• Ophthalmic Diseases: Sympathetic ophthalimia, temporal arteritis, uveitis, ocular inflammatory conditions unresponsive to topical<br>• Renal Diseases: To indice durings or remission of proteinuria in idiopathic nephrotic syndrome, or that due to lupus<br>erythematoxis.<br>• Regulatory Diseases: Evon patilation proteinuria in idiopathic nephrotic syndrome, or an acute episode or<br>• Antibuberculous chemotherapy.   | 2     | 31    | N/A                                   | N/A | N/A          | Y | ¥ |  | 10/26/2018 |
| Drugs       | J1050 | Injection,<br>medroxyprogesterone<br>acetate, 1 mg | 1 mg       | 1/1/2013 | Depo-Provera®                | medroxyprogesterone<br>acetate, injectable<br>suspension   | Indicated for prevention of pregnancy in females and adjunctive therapy and palliative treatment of inoperable, recurrent, and metastatic endometrial or renal carcinoma.  | 1,000 | 5,000 | Indication Specific<br>(see comments) | N/A | N/A          | Y | Y | Indication specific age<br>restrictions:<br>• Endometrial and renal<br>carcinoma: 18 years and older<br>• Prevention of pregnancy:<br>Use after menarche.  | 10/26/2018 |

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|-------|--------|--|--------------|----------|------------------------|---|--|-------|-------|---------------------------------------|-----|--|---|---|--|------------|
| Drugs | J1071  | Injection, testosterone<br>cypionate, 1 mg             | 1 mg         | 1/1/2015 | Depo®-<br>Testosterone | testosterone cypionate<br>injection, USP  | Indicated for replacement therapy in the male in conditions associated with symptoms of deficiency or absence of endogenous<br>testosterone.<br>1. Primary hysogonadism (congenital or acquired)-testicular failure due to cryptorchidism, bilateral torsion, orchitis, vanishing testis<br>syndrome, or orchidectomy.<br>2. Hysogonadoropic hysogonadism (congenital or acquired)- gonadotropin or LHRH deficiency, or pituitary-hypothalamic injury<br>from tumors, trauma, or radiation.  | 400   | 1,200 | 12 years                              | N/A | Males Only                               | Y | Y |  | 4/10/2019  |
| _     | 14 005 | Injection, dexamethasone                               |              | 1/1/2019 |                        | dexamethasone intraocular   | Safety and efficacy of Depo-Testosterone (testosterone cypionate) in men with "age-related hypogonadism" (also referred to as<br>"late-onset hypogonadism") have not been established.   | 1,034 |       |                                       |     |  |   |   |  | 3/26/2019  |
| Drugs | J1095  | 9 percent, intraocular, 1<br>microgram                 | 1 mcg        | 1/1/2019 | Dexycu™                | suspension 9%, for<br>intraocular administration  | Indicated for the treatment of postoperative inflammation.   | 1,034 | 1,034 | 18 years                              | N/A | N/A                                      | Ŷ | Y |  | 3/26/2019  |
| Drugs | J1100  | Injection, dexamethasone<br>sodium phosphate, 1 mg     | 1 mg         | 1/1/2000 | N/A                    | dexamethasone sodium<br>phosphate injection   | administration of the drug reasonably lend the preparation to the treatment of the condition, those products labeled for<br>intrarenous or intramuscular use are indicated as follows:<br>6-fodorine Disorders: Primary or secondary adrenocottical insufficiency (hydrocortisone or cortisone is the drug of choice;<br>synthetic analogs may be used in conjunction with mineralocorticoids where applicable; in infancy, mineralocorticoid<br>synthetic analogs may be used in conjunction with mineralocorticoids where applicable; in infancy, mineralocorticoid<br>synthetic analogs may be used in conjunction with mineralocorticoids where applicable; in infancy, mineralocorticoid<br>supplementation is of particular inportance), Acute advectory, particularly when synthetic analogs are used). Prooperatively, and in the<br>event of sensor trauma or illness, in patients with houron adrenal insufficiency or when advectorocitical advecal hyperplasia,<br>Nonsuppurate Hypoittis, Hypercellamia associated with cancer.<br>• Rheumatic Disorders: As adjunctive therapy for short-term administration (to tide the patient over an acute episode or<br>exacerbation) in post-traumatic corearbitis, synothesis do stocarbitis, horumatio advectis, geicondylitis, acute nonspecific<br>troosynovitis, acute cousy arthritis, sporialic arthritis, severe porsias, and mycois fungoods.<br>• Oellapen Diseases: During an exacerbation or as maintenance therapy in selected cases of systemic lupus erythematosus and<br>acute theumatic carditis.<br>• Dematologic Diseases: Pemphigus, severe erythema multforme (Stevens-Johnson Syndrone), exfoliative dermatitis, bullous<br>dematotis heroincial attratistics, severe porsias, and mycois fungoles.<br>• Allergic States: control of severe or incapacitating allergic conditions intractable to adequate trials of conventional treatment in<br>bronchial attrative, notacyclitis, choircematits, guergic consult ary processes involving the eye, such a sherpes soster<br>ophthalmicus, irits, indocyclitis, choircematins, dinferic conjunctivity, and proverensitivity in<br>• Ophth | 10    | 310   | N/A                                   | N/A | ŊA                                       | ¥ | Y |  | 10/4/2018  |
| Drugs | J1110  | Injection,<br>dihydroergotamine<br>mesylate, per 1 mg  | 1 mg         | 1/1/2000 | DHE 45®                | dihydroergotamine mesylate<br>injection   | Indicated for the acute treatment of migraine headaches with or without aura and the acute treatment of cluster headache<br>episodes.  | 3     | 30    | 18 years                              | N/A | N/A                                      | Y | Y |  | 10/10/2018 |
| Drugs | J1120  | Injection, acetazolamide<br>sodium, up to 500 mg       | up to 500 mg | 1/1/2000 | Diamox*                | acetazolamide sodium<br>injection, powder,<br>lyophilized, for solution                   | Indicated for the adjunctive treatment of:<br>• Edema due to congestive heart failure<br>• Drug-induced edema<br>• Centencepablic epilepsies (petit mal, unlocalized seizures)<br>• Chronic simple (open-angle) glaucoma<br>• Secondary gaucoma<br>• Secondary gaucoma<br>• Preoperatively in acute angle-closure glaucoma where delay of surgery is desired in order to lower intraocular pressure  | 2     | 62    | 18 years                              | N/A | N/A                                      | Y | Ŷ |  | 10/31/2018 |
| Drugs | J1160  | Injection, digoxin, up to<br>0.5 mg                    | up to 0.5 mg | 1/1/2000 | Lanoxin®               | digoxin injection, for<br>intravenous or intramuscular<br>use                             | Indicated for:<br>• Treatment of mild to moderate heart failure in adults.<br>• Increasing mycanical contractility in pediatric patients with heart failure. (Indication added to the portal 10/4/2018)<br>• Control of resting ventricular rate in adults with chronic atrial fibrillation.   | 4     | 35    | Indication Specific<br>(see comments) | N/A | N/A                                      | Y | Y | Indication specific age<br>restrictions:<br>• Mild to moderate heart<br>failure and control of resting<br>ventricular rate in chronic<br>atrial fibrillation: 18 years of<br>age and older<br>• Increasing myocardial<br>contractility: None | 10/10/2018 |
| Drugs | J1165  | Injection, phenytoin<br>sodium, per 50 mg              | per 50 mg    | 1/1/2000 | N/A                    | phenytoin sodium injection,<br>for intravenous or<br>intramuscular use                    | Indicated for the treatment of generalized tonic clonic status epilepticus and prevention and treatment of seizures occurring during<br>neurosurgery. Intravenous phenytoin can also be substituted, as short-term use, for oral phenytoin. Parenteral phenytoin should be<br>used only when oral phenytoin administration is not possible.<br>Indicated for the management of pain severe enough to require an opioid analgesic and for which alternate treatments are  | 48    | 288   | N/A                                   | N/A | N/A                                      | Y | Y |  | 6/8/2019   |
| Drugs | J1170  | Injection,<br>hydromorphone, up to 4<br>mg             | up to 4 mg   | 1/1/2000 | Dilaudid®              | hydromorphone<br>hydrochloride for<br>intravenous, intramuscular,<br>and subcutaneous use | nadequate.<br>Limitations of Use: Because of the risks of addiction, abuse, and misuse with opioids, even at recommended doses, reserve<br>hydromorphone injection for use in patients for whom alternative treatment options (e.g., nonopioid analgesics or opioid<br>combination products):<br>- Have not been tolerated, or are not expected to be tolerated<br>- Have not provide adequate analgesia, or are not expected to provide adequate analgesia  | 6     | 186   | 18 years                              | N/A | N/A                                      | Y | ¥ |  | 10/26/2018 |
| Drugs | J1190  | Injection, dexrazoxane<br>hydrochloride, per 250<br>mg | 250 mg       | 1/1/2000 | Zinecard®,<br>Totect®  | dexrazoxane for injection   | Zinecard: indicated for reducing the incidence and severity of cardiomyopathy associated with doxorubicin administration in<br>women with metastatic breast cancer who have received a cumulative doxorubicin dose of 300 mg/m <sup>2</sup> and who will continue to<br>receive doxorubicin therapy to maintain tumor control. Do not use with doxrubicin initiation, m <sup>2</sup> and who will continue to<br>Totect: indicated for the treatment of extravasation resulting from IV anthracycline chemotherapy.  | 8     | 20    | 18 years                              | N/A | Zinecard:<br>Females Only<br>Totect: N/A | Y | Y |  | 10/4/2018  |
| Drugs | J1200  | Injection,<br>diphenhydramine HCl, up<br>to 50 mg      | 50 mg        | 1/1/2000 | N/A                    | diphenhydramine<br>hydrochloride injection  | Diphenhydramine in the injectable form is effective in adults and pediatric patients, other than premature infants and neonates, for<br>the following conditions when diphenhydramine in the oral form is impractical:<br>Anthistiamic: For amelioration of allergic reactions to blood or plasma, in anaphydaxia s an adjunct to epinephrine and other<br>standard measures after the acute symptoms have been controlled, and for other uncomplicated allergic conditions of the<br>immediate type when oral therapy is impossible or contraindicated.<br>Motion Sickness: For active treatment of motion sickness.<br>• Antiparkinsonism: For use in parkinsonism, when oral therapy is impossible or contraindicated, as follows: parkinsonism in the<br>elderly who are unable to tolerate more potent agents; mild cases of parkinsonism in other age groups, and in other cases of<br>parkinsonism in combination with centrally acting anticholinergic agents.   | 8     | 248   | Indication Specific<br>(see comments) | N/A | N/A                                      | Y | Y | Contraindicated in newborns<br>or premature infants.   | 10/4/2018  |
| Drugs | J1205  | Injection, chlorothiazide<br>sodium, per 500 mg        | 500 mg       | 1/1/2000 | N/A                    | chlorothiazide sodium for<br>injection  | Indicated as adjunctive therapy in edema associated with congestive heart failure, hepatic cirrhosis, and corticosteroid and estrogen therapy.   | 4     | 100   | 18 years                              | N/A | N/A                                      | Y | Y |  | 9/27/2018  |
| Didgs |        |  |              |          |                        |   |  |       |       |                                       |     |  |   |   |  |            |

|             | 1     |   |             |          |                     | 1  | Indicated for:   |     |       |                                       |     |     | 1 |   |  |            |
|-------------|-------|---|-------------|----------|---------------------|--|--|-----|-------|---------------------------------------|-----|-----|---|---|--|------------|
| Drugs       | J1230 | Injection, methadone<br>HCI, up to 10 mg              | up to 10 mg | 1/1/2000 | N/A                 | methadone hydrochloride<br>injection                           | Inducated out.<br>Inducated out.<br>Intrations of Use: Because of the risks of addiction, abuse, and misuse with opioids, even at recommended doses, reserve<br>methadone injection for use in patients for whom alternative treatment options (e.g. non-opioid analgesics or opioid combination<br>products):<br>O Have not been tolerated, or are not expected to be tolerated.<br>O Have not provide adequate analgesia, or not expected to be tolerated.<br>I was in temporary treatment of opioid dependence in patients unable to take oral medication.<br>Unitations of Use: Discussion, parenteral methadone products are not approved for the outpatient treatment of opioid dependence. In this<br>patient population, parenteral methadone is to be used only for patients unable to take oral medication, such as hospitalized<br>patients.  | 4   | 93    | 18 years                              | N/A | N/A | Ŷ | Y |  | 10/26/2018 |
| Drugs       | J1240 | Injection,<br>dimenhydrinate, up to 50<br>mg          | up to 50 mg | 1/1/2000 | N/A                 | dimenhydrinate injection                                       | Indicated for prevention and treatment of nausea, vomiting and vertigo of motion sickness.   | 12  | 372   | N/A                                   | N/A | N/A | Y | Y |  | 6/10/2019  |
| Drugs       | J1245 | Injection, dipyridamole, per 10 mg                    | per 10 mg   | 1/1/2000 | N/A                 | dipyridamole injection   | As an alternative to exercise in thallium myocardial perfusion imaging for the evaluation of coronary artery disease in patients who<br>cannot exercise adequately.  | 6   | 6     | 18 years                              | N/A | N/A | Y | Y |  | 6/10/2019  |
| Drugs       | J1250 | Injection, dobutamine<br>hydrochloride, per 250<br>mg | 250 mg      | 1/1/2000 | N/A                 | dobutamine injection   | Indicated:<br>• When parenteral therapy is necessary for inotropic support in the short-term treatment of adults with cardiac decompensation<br>due to depressed contractility resulting either from organic heart disease or from cardiac surgical procedures.<br>• In patients who have atrial fibrillation with rapid ventricular response, a digitalis preparation should be used prior to institution of<br>therapy with dobutamine.  | 30  | 930   | 18 years                              | N/A | N/A | Y | Y |  | 10/4/2018  |
| Drugs       | J1265 | Injection, dopamine<br>hydrochloride, 40 mg           | 40 mg       | 1/1/2006 | N/A                 | dopamine hydrochloride   | Indicated for the correction of hemodynamic imbalances present in the shock syndrome due to myocardial infarction, trauma,<br>endotoxic septicemia, open-heart surgery, renal failure, and chronic cardiac decompensation as in congestive failure.  | 205 | 6,355 | 18 years                              | N/A | N/A | Y | Y |  | 10/4/2018  |
| Drugs       | J1267 | Injection, doripenem, 10<br>mg                        | 10 mg       | 1/1/2009 | Doribax®            | doripenem for injection, for<br>intravenous use                | Indicated for the treatment of the following infections caused by susceptible bacteria:<br>• Complicated intra-abdominal infections<br>• Complicated uniary tract infections, including pyelonephritis   | 150 | 2,100 | 18 years                              | N/A | N/A | Y | Y |  | 10/4/2018  |
| Drugs       | J1270 | Injection, doxercalciferol,<br>1 mcg                  | 1 mcg       | 1/1/2002 | Hectorol®           | doxercalciferol injection                                      | Indicated for the treatment of secondary hyperparathyroidism in adult patients with chronic kidney disease on dialysis.  | 6   | 90    | 18 years                              | N/A | N/A | ¥ | Y |  | 10/4/2018  |
| Drugs       | J1290 | Injection, ecallantide, 1<br>mg                       | 1 mg        | 1/1/2011 | Kalbitor®           | ecallantide injection for<br>subcutaneous use                  | Indicated for treatment of acute attacks of hereditary angioedema in patients 12 years of age and older.   | 60  | 120   | 12 years                              | N/A | N/A | Y | Y |  | 10/10/2018 |
| Biologicals | J1300 | Injection, eculizumab, 10<br>mg                       | 10 mg       | 1/1/2008 | Soliris®            | eculizumab injection, for<br>intravenous use                   | Indicated for:<br>• Treatment of patients with paroxysmal nocturnal hemoglobinuria (PNH) to reduce hemolysis.<br>• Treatment of patients with atypical hemolytic uremic syndrome (aHUS) to inhibit complement-mediated thrombotic<br>microangiopathy.<br>• Treatment of adult patients with generalized Myasthenia Gravis (gMG) who are anti-acetylcholine receptor (AchR) antibody<br>positive.<br>• Treatment of neuromyelitis optica spectrum disorder (NMOSD) in adult patients who are anti-aquaporin-4 (AQP4) antibody<br>positive.<br>• Treatment of neuromyelitis optica spectrum disorder (NMOSD) in adult patients who are anti-aquaporin-4 (AQP4) antibody<br>positive.<br>Limitation of Use: Soliris is not indicated for the treatment of patients with Shiga toxin E. coli related hemolytic uremic syndrome<br>(STEC+US).   | 120 | 480   | Indication Specific<br>(see comments) | N/A | N/A | Ŷ | Y | Indication specific age<br>restrictions:<br>• PNH: 18 years of age and<br>older<br>• aHUS: None<br>• Myasthenia Gravis: 18 years<br>of age and older | 7/26/2019  |
| Drugs       | J1301 | Injection, edaravone, 1<br>mg                         | 1 mg        | 1/1/2019 | Radicava®           | edaravone injection, for<br>intravenous use                    | Indicated for the treatment of amyotrophic lateral sclerosis (ALS).  | 60  | 1,020 | 18 years                              | N/A | N/A | Y | Y |  | 10/10/2018 |
| Biologicals | J1322 | Injection, elosulfase alfa,<br>1 mg                   | 1 mg        | 1/1/2015 | Vimizim®            | elosulfase alfa injection, for<br>intravenous use              | Indicated for patients with Mucopolysaccharidosis type IVA (MPS IVA; Morquio A syndrome).  | 280 | 1,400 | 5 years                               | N/A | N/A | Y | Y |  | 6/8/2019   |
| Drugs       | J1325 | Injection, epoprostenol,<br>0.5 mg                    | 0.5 mg      | 1/1/2000 | Flolan®, Veletri®   | epoprostenol for injection,<br>for intravenous use             | Indicated for the treatment of pulmonary arterial hypertension (PAH) (WHO Group I) to improve exercise capacity. Studies<br>establishing effectiveness included predominantly (97%) patients with WHA Functional Class III-IV symptoms and etiologies of<br>uliopathic or herbalbe PAH (98%) er PAH associated with in connective tissue disease (51%).  | 8   | 248   | 18 years                              | N/A | N/A | Y | Y |  | 6/4/2019   |
| Drugs       | J1335 | Injection, ertapenem<br>sodium, 500 mg                | 500 mg      | 1/1/2004 | Invanz <sup>e</sup> | ertapenem injection for<br>intravenous or intranuscular<br>use | Indicated in adult patients and pediatric patients (3 months of age and older) for the treatment of the following moderate to severe<br>infections caused by susceptible bacteria:<br>- Compilicated intra-abdominal infections, including diabetic foot infections without osteomyelitis.<br>- Compilicated skin and skin structure infections, including diabetic foot infections without osteomyelitis.<br>- Compilicated units of the composition of th | 2   | 28    | 3 months                              | N/A | N/A | Ŷ | Y |  | 10/10/2018 |

|             |       |  |          |                          |   | Indicated in the treatment of infections caused by susceptible strains of the designated organisms in the diseases listed below when   |       |        |          |     |              |     |            |
|-------------|-------|--|----------|--------------------------|---|--|-------|--------|----------|-----|--------------|-----|------------|
| Drugs       | J1364 | Injection, erythromycin<br>lactobionate, per 500 mg                                  | 1/1/2000 | Erythrocin™              | erythromycin lactobionate<br>for injection  | oral administration is not possible or when the severity of the infection requires immediate high serum levels of erythromycin.<br>Intravenous therapy should be replaced by oral administration at the appropriate time.<br>I upper respiratory tract infections of mild to moderate degree caused by Streptococcus progenes (Group A beta-hemolytic<br>streptococci). Streptococcus pneumoniale, (Diptococcus pneumoniale). Hemophilus influenze (kneu used concomitantly with<br>adequate doses of sulforamides, since many strains of H. influenzae are not susceptible to the erythromycin concentrations<br>ordinarily achieved).<br>• Lower respiratory tract infections of mild to moderate severity caused by Streptococcus progenes (Group A beta-hemolytic<br>streptococci). Streptococcus pneumoniale, (Diptococcus pneumoniale).<br>• Sins and sins tracture infections due to Mycoplasma pneumoniale.<br>• Diptheria: As an adjunct to antitosin firetions due to Corynebacterium minutissimum.<br>• Diptheria: As an adjunct to antitosin infections due to Corynebacterium minutissimum.<br>• Erythrama: in the tracture of infections due to Corynebacterium minutissimum.<br>• Acter pekic inflammatory disease caused by Kiserate coreally caused by Streptococcus presentes of a uter pekic<br>inflammatory disease caused by Kiserate or erythromycin base orally, as an atternative drug in tractment of forming the pekic<br>inflammatory disease caused by Kiserate or erythromycin base orally, as an atternative drug in trattment of artifeits before a cavity for a binding to a ministrator or the pekic<br>inflammatory disease caused by Kiserate or erythromycin adming shore yoral with y to pencilling.<br>• Befort treatment of genorrhea, patients who are suspected d also having sphilis should have a microscopic examinator of rup<br>palidum (b) ministrator by cases caused by Kiserate or erythromycin and monthy to pencilling to a minimum of 4<br>months thereafter. | 8     | 248    | N/A      | N/A | N/A          | v v | 10/10/2018 |
| Drugs       | J1380 | Injection, estradiol<br>valerate, up to 10 mg  | 1/1/2000 | ) Delestrogen®           | estradiol valerate injection  | Indicated in the treatment of:<br>• Moderate-to-severe vasomotor symptoms associated with the menopause<br>• Hypoestrogenism caused by hypogenadism, castration or primary ovarian failure<br>• Advanced androgen-dependent carcinoma of the prostate (for palliation only)<br>• Vulval and vaginal atrophy associated with the menopause. When prescribing solely for the treatment of symptoms of vulvar and<br>vaginal atrophy topical vaginal products should be considered.   | 4     | 20     | 18 years | N/A | N/A          | Y Y | 6/10/2019  |
| Drugs       | J1410 | Injection, estrogens,<br>conjugated, per 25 mg                                       | 1/1/2000 | Premarin <sup>®</sup> IV | conjugated estrogens for<br>injection for intravenous and<br>intramuscular use                                      | Indicated in the treatment of abnormal uterine bleeding caused by hormonal imbalance in the absence of organic pathology.<br>Indicated for short-term use only, to provide a rapid and temporary increase in estrogen levels.  | 2     | 62     | N/A      | N/A | Females Only | Y Y | 10/10/2018 |
| Drugs       | J1439 | Injection, ferric 1 mg   | 1/1/2015 | Injectafer®              | ferric carboxymaltose<br>injection for intravenous use  | Indicated for the treatment of iron deficiency anemia in adult patients:<br>- Who have intolerance to oral iron or have had unsatifactory response to oral iron.<br>- Who have eno-dialysis dependent thronic kidney disease.  | 750   | 1,500  | 18 years | N/A | N/A          | Y Y | 10/26/2018 |
| Biologicals | J1442 | Injection, filgrastim (G-<br>CSF), excludes 1 mcg<br>biosimilars, 1 microgram        | 1/1/2016 | 5 Neupogen*              | filgrastim injection, for<br>subcutaneous or intravenous<br>use   | Indicated to:<br>Decrease the incidence of infection, as manifested by febrile neutropenia, in patients with nonmyeloid malignancies receiving<br>myelosyppressive<br>anti-cancer drugs associated with a significant incidence of severe neutropenia with fever.<br>Reduce the time to neutrophil recovery and the duration of fever, following induction or consolidation chemotherapy treatment<br>of patients with acute<br>myelod several (AML).<br>Reduce the duration of neutropenia and neutropenia-related clinical sequelae, e.g., febrile neutropenia, in patients with<br>nonmyeloid<br>malignancies undergoing myeloablative chemotherapy followed by bone marrow transplantation (BMT).<br>Mobilize autologous hematopoietic progenitor cells into the peripheral blood for collection by leukapheresis.<br>Reduce the incidence and duration of sequelae of severe neutropenia (e.g., fever, infections, oropharyngeal ulcers) in<br>symptomatic patients with<br>congenital neutropenia, cycli neutropenia, or idiopathic neutropenia.<br>Increase survival in patients acutely exposed to myelosuppressive doses of radiation (Hematopoietic Syndrome of Acute Radiation<br>Syndrome).  | 1,920 | 59,520 | N/A      | N/A | N/A          | Y Y | 6/6/2019   |
| Drugs       | J1443 | Injection, ferric<br>pyrophosphate dtrate 0.1 mg of iron<br>solution, 0.1 mg of iron | 1/1/2016 | : Triferic*              | ferric pyrophosphate citrate<br>solution, for hemodialysis<br>use, and powder for solution,<br>for hemodialysis use | Indicated for the replacement of iron to maintain hemoslobin in adult patients with hemofisiksis-dependent chronic kidney disease  | 2,720 | 38,080 | 18 years | N/A | N/A          | v v | 7/26/219   |

| Biologicals         | J1447 | Injection, tbo-filgrastim, 1<br>microgram   | 1 mcg              | 1/1/2016 | Granix*                     | tbo-filgrastim injection, for<br>subcutaneous use  | Indicated in adult and pediatric patients 1 month and older for reduction in the duration of severe neutropenia in patients with non-<br>myeloid malignancies receiving myelosuppressive anti-cancer drugs associated with a clinically significant incidence of febrile<br>neutropenia.   | 780 | 10,920 | 1 month                               | N/A | N/A | Y | ¥ | 5/20/2019   |
|---------------------|-------|---|--------------------|----------|-----------------------------|--|--|-----|--------|---------------------------------------|-----|-----|---|---|---|
| Drugs               | J1453 | Injection, fosaprepitant, 1<br>mg   | 1 mg               | 1/1/2009 | Emend®                      | fosaprepitant for injection,<br>for intravenous use  | Indicated in adults and pediatric patients 6 months of age and older, in combination with other antiemetic agents, for the<br>prevention of:   | 150 | 450    | 6 months                              | N/A | N/A | Y | Y | 10/10/2018  |
| Drugs               | J1454 | Injection, fosnetupitant<br>235 mg and palonosetron<br>0.25 mg  | 235.25 mg (1 vial) | 1/1/2019 | Akynzeo®                    | fosnetupitant and<br>palonosetron for injection,<br>for intravenous use  | <ul> <li>ancte and delayed nauses and vomiting associated with initial and repeat courses of highly empteaperic racycr chemotherany.<br/>Indicated in combination with desamethasione in adults for the prevention of acute and delayed nauses and vomiting associated<br/>with initial and repeat courses of highly emetogenic cancer chemotherapy.<br/>Limitations of Use:</li> <li>Alymace for injection has not been studied for the prevention of nausea and vomiting associated with anthracycline plus<br/>colcaboenhamic hemotheramy.</li> </ul>   | 1   | 3      | 18 years                              | N/A | N/A | Y | Y | 10/31/2018  |
| Drugs               | J1455 | Injection, foscarnet<br>sodium, per 1,000 mg  | 1,000 mg           | 1/1/2000 | Foscavir®                   | foscarnet sodium injection   | Indicated for the treatment of:<br>• CMV retinitis in patients with acquired immunodeficiency syndrome (AIDS). Combination therapy with Foscavir and ganciclovir is<br>indicated for patients who have relapsed atter monotherapy with either drug. Safety and efficacy of foscavir have not been<br>established for treatment of other CMV infections (e.g. penumonits, gastroenteritis); compeniatior neonatal CMV disease, or<br>nonimmunocompromised individuals.<br>• Acyclovir-restant mucocctaneous HSV infections (e.g. retinitis, encephalitis), congenital or neonatal HSV disease, or HSV in<br>nonimmunocompromised individuals. | 36  | 996    | 18 years                              | N/A | N/A | Y | Y | 6/4/2019  |
| Biologicals         | J1458 | Injection, galsulfase, 1 mg   | 1 mg               | 1/1/2007 | Naglazyme®                  | galsulfase injection for<br>intravenous use  | Indicated for patients with Mucopolysaccharidosis VI (MPS VI; Maroteaux-Lamy syndrome). Naglazyme has been shown to improve<br>walking and stair-climbing capacity.  | 140 | 700    | N/A                                   | N/A | N/A | Y | Y | 7/2/2018  |
| Immune<br>Globulins | J1575 | Injection, immune<br>globulin/hyaluronidase,<br>(Hyqvia), 100 mg immune<br>globulin                       | 100 mg             | 1/1/2016 | HyQvia                      | immune globulin infusion<br>10% (human) with<br>recombinant human<br>hyaluronidase solution for<br>subcutaneous administration | Indicated for treatment of primary immunodeficiency (PI) in adults.<br>Limitations of Use: Safety and efficacy of chronic use of Recombinant Human Hyaluronidase in HyQvia have not been established in<br>conditions other than PI.   | 840 | 840    | 18 years                              | N/A | N/A | Y | Ŷ | 7/3/2018  |
| Immune<br>Globulins | J1460 | Injection, gamma<br>globulin, intramuscular, 1<br>cc  | 1 cc               | 1/1/2000 | GamaSTAN® S/D,<br>GamaSTAN® | immune globulin (human),<br>solution for intramuscular<br>injection, less than 10 cc   | Indicated:<br>• For prophylaxis following exposure to hepatitis A.<br>• To prevent or modify measles in a susceptible person exposed fewer than 6 days previously.<br>• To modify varicella.   | 10  | 10     | 18 years                              | N/A | N/A | Y | Y | 10/25/2018  |
| Immune<br>Globulins | J1555 | Injection, immune<br>globulin (Cuvitru), 100 mg   | 100 mg             | 1/1/2018 | Cuvitru                     | immune globulin<br>subcutaneous (human), 20%<br>solution   | Indicated as replacement therapy for primary humoral immunodeficiency (PI) in adult and pediatric patients two years of age and<br>older.  | 480 | 14,880 | 2 years                               | N/A | N/A | Y | Y | 9/12/2018   |
| Immune<br>Globulins | J1556 | Injection, immune<br>globulin (Bivigam), 500<br>mg  | 500 mg             | 1/1/2014 | Bivigam®                    | immune globulin intravenous<br>(human), 10% liquid   | Indicated for the treatment of primary humoral immunodeficiency (PI).  | 224 | 224    | 6 years                               | N/A | N/A | Y | Y | 9/12/2018   |
| Immune<br>Globulins | J1557 | Injection, immune<br>globulin, (Gammaplex),<br>intravenous, non-<br>lyophilized, (e.g. liquid),<br>500 mg | 500 mg             | 1/1/2012 | Gammaplex®                  | immune globulin intravenous<br>(human), 5% and 10% liquid,<br>for intravenous use  | Gammaplex 5%: Indicated for the treatment of:<br>• Chronic immune thrombocytopenic purpurg (TIP).<br>• Primary humoral immundeficiency (PI) in adults and pediatric patients 2 years of age and older.<br>Gammaplex 10%: Indicated for the treatment of:<br>• Primary humoral immunodeficiency (PI) in adults.<br>• Chronic immune thrombocytopenic purpurg (TIP) in adults.   | 280 | 560    | Indication Specific<br>(see comments) | N/A | N/A | Y | Ŷ | Product specific age<br>restrictions:<br>Gammaplex 5%: 2 years of age<br>and older<br>Gammaplex 10%: 18 years of<br>age and older |
| Immune<br>Globulins | J1559 | Injection, immune<br>globulin (Hizentra), 100<br>mg   | 100 mg             | 1/1/2011 | Hizentra®                   | immune globulin<br>subcutaneous (human), 20%<br>liquid   | <ul> <li>Indicated as replacement therapy for primary immunodeficiency (PI) in adults and pediatric patients 2 years of age and older. This includes, but is not limited to, the humoral immune defect in congenital agammaglobulinemia, common variable immunodeficiency.</li> <li>Xinked agammaglobulinemia, WcistrAldrich syndrome and severe combined immunodeficiencies.</li> <li>Indicated as maintenance therapy for the treatment of adult patients with chronic inflammatory demyelinating polyneuropathy (CDP) to prevent relapse of neuromuscular disability and impairment.</li> </ul>   | 560 | 2,800  | Indication Specific<br>(see comments) | N/A | N/A | Y | Ŷ | Indication specific age<br>restrictions:<br>• PI - 2 years of age and older<br>• CDIP - 18 years of age and<br>older              |

|                     | 1     |  |        |          |                                |  |   |  |   |                                       |     |     |   |   |  |           |
|---------------------|-------|--|--------|----------|--------------------------------|--|---|--|---|---------------------------------------|-----|-----|---|---|--|-----------|
| Immune<br>Globulins | J1560 | Injection, gamma<br>globulin, intramuscular,<br>over 10 cc (always use for<br>any amount injected over<br>10cc and place number of<br>units) | 10 cc  | 1/1/2000 | GamaSTAN® S/D,<br>GamaSTAN®    | immune globulin (human),<br>solution for intramuscular<br>injection greater than 10 cc                           | Indicated:<br>For prophysisis following exposure to hepatitis A.<br>• To prevent or modify measles in a susceptible person exposed fewer than 6 days previously.<br>• To modify varicella.<br>• To modify rubella in exposed women who will not consider a therapeutic abortion.<br>• Not indicated for routine prophylaxis or treatment of viral hepatitis type B, rubella, poliomyelitis, mumps or varicella.   | 17   | 17  | 18 years                              | N/A | N/A | Y | Y |  | 9/21/2018 |
| Immune<br>Globulins | J1561 | Injection, immune<br>globulin, (Gamunex-<br>C/Gammaked), non-<br>hyophilized (e.g. liquid),<br>500 mg  | 500 mg | 1/1/2013 | Gamunex®-C,<br>Gammaked™       | immune globulin injection<br>(human), 10%<br>caprylate/chromatography<br>purified                                | Gamunex-C is indicated for:<br>Primary Humoral Immunodeficiency (PI) in patients 2 years of age and older<br>I idiopathic Thrombocytopenic Purpura (ITP) in adults and children<br>Chronic Inflammatory Demyelinating Pohyneuropathy (CIDP) in adults<br>Gammaked is indicated for:<br>Primary Humoral Immunodeficiency (PI) in patients 2 years of age and older<br>I diopathic Thrombocytopenic Purpura (ITP)<br>Chronic Inflammatory Demyelinating Pohyneuropathy (CIDP)   | 280  | 840   | Indication Specific<br>(see comments) | N/A | N/A | Y | ¥ | Indication specific age<br>restrictions:<br>• Primary Humoral<br>Immunodeficiency (PI): 2 years<br>of age and older<br>• Idiopathic<br>Thrombocytopenic Purpura<br>(ITP): None<br>• Chronic Inflammatory<br>Demyelinating Polyneuropathy<br>(CIDP): 13 years of age and<br>older | 9/12/2018 |
| Immune<br>Globulins | J1566 | Injection, immune<br>globulin, intravenous,<br>lyophilized (e.g. powder),<br>not otherwise specified,<br>500mg                               | 500 mg | 1/1/2006 | Carimune NF®,<br>Gammagard S/D | (human), lyophilized,<br>nanofiltered - Carimune NF<br>immune globulin intravenous<br>(human), solvent detergent | Carimune NF: Indicated for the maintenance treatment of patients with primary immunodeficiencies (PID), e.g., common variable<br>immunodeficiency, X-linked agammaglobulinemia, severe combined immunodeficiency.<br>Gammagard SD:: Indicated for the treatment of Primary immunodeficiency (P) in adults and pediatric patients two years of age or<br>older, prevention of bacteral infections in hypogammaglobulinemia and/or recurrent bacterial infections associated with A-cell<br>Chronic Lymphopytic Leukemia (CLL), prevention and/or control of bleeding in adult Chronic Hopphopytic Leukemia (CLL), prevention ad/or control of bacterial in adult chronic Hopphotychepenic Purpura<br>(ITP) patients and prevention of coronary artery aneurysms associated with Kawasaki syndrome in pediatric patients. | 280  | 952   | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific age<br>restrictions:<br>• Carimune NF: None<br>• Gammagard 5/0:<br>• Primary Immunodeficiency:<br>15 years of age and older<br>• Chronic Idiopathic<br>Thrombocytopenic Purpura:<br>13 years of age and older<br>• Kawasaki Disease: None                    | 9/21/2018 |
| Immune<br>Globulins | J1568 | Injection, immune<br>globulin, (Octagam),<br>intravenous, non-<br>lyophilized (e.g. liquid),<br>500 mg                                       | 500 mg | 1/1/2008 | Octagam®                       | immune globulin intravenous<br>(human) liquid solution for<br>intravenous administration                         | Octagam 5%: Indicated for the treatment of primary humoral immunodeficiency.<br>Octagam 10%: Indicated for the treatment of chronic immune thrombocytopenic purpura (ITP) in adults.  | <ul> <li>Octagam 5%:</li> <li>168 units</li> <li>Octagam 10%</li> <li>280 units</li> </ul> | Octagam 5%:<br>336 units<br>Octagam 10%:<br>560 units | Product Specific (see comments)       | N/A | N/A | Y | Y | Product specific age<br>restrictions:<br>• Octagam 5%: 6 years of age<br>and older.<br>• Octagam 10%: 18 years of<br>age and older.  | 9/21/2018 |
| Immune<br>Globulins | J1459 | Injection, immune<br>globulin (Privigen),<br>intravenous, non-<br>hyophilized (e.g., liquid),<br>500 mg                                      | 500 mg | 1/1/2009 | Privigen*                      | immune globulin intravenous<br>(human), 10% liquid   | Indicated for the treatment of:<br>• Primary humoral immunodeficiency (PI)<br>• Chronic immunet thrombocytopenic purpura (ITP) in patients age 15 years and older<br>• Chronic inflamatory demyelinating polyneuropathy (CIDP) in adults<br>Limitations of Use:<br>Privigen maintenance therapy in CIDP has not been studied beyond 6 months.   | 280  | 840   | Indication Specific<br>(see comments) | N/A | N/A | Ŷ | Ŷ | Indication specific age<br>restrictions:<br>• Primary Humoral<br>Immunodeficiency: 3 years of<br>age and older   | 7/3/2018  |
| Drugs               | J1570 | Injection, ganciclovir<br>sodium, 500 mg   | 500 mg | 1/1/2000 | Cytovene®-IV                   | ganciclovir sodium for<br>injection, for intravenous use   | Indicated for:<br>• Treatment of CMV retinitis in immunocompromised individuals, including patients with acquired immunodeficiency syndrome<br>(ADS).   | 3  | 77  | 18 years                              | N/A | N/A | Y | Y |  | 6/4/2019  |
| Immune<br>Globulins | J1571 | Injection, hepatitis B<br>immune globulin<br>(Hepagam B),<br>intramuscular, 0.5 mL   | 0.5 mL | 1/1/2008 | Hepagam B®                     | hepatitis b immune globulin<br>intramuscular (human)   |   | 17   | 34  | N/A                                   | N/A | N/A | Y | Y |  | 9/12/2018 |
| Immune<br>Globulins | J1569 | Injection, immune<br>globulin, (Gammagard<br>liquid), non-Iyophilized,<br>(e.g. liquid), 500 mg  | 500 mg | 1/1/2008 | Gammagard<br>Liquid            | immune globulin infusion<br>(human), 10% solution, for<br>intravenous and<br>subcutaneous administration         | Indicated as replacement therapy for primary humoral immunodeficiency (PI) in adult and pediatric patients two years of age or<br>older and as a maintenance therapy to improve muscle strength and disability in adult patients with Multifocal Motor Neuropathy<br>(MMN).   | 672  | 672   | Indication Specific<br>(see comments) | N/A | N/A | Y | ¥ | Indication specific age<br>restrictions:<br>• Primary humoral<br>immunodeficiency : 2 years<br>and older<br>• Multifocal motor neuropathy<br>: 18 years and older  | 9/12/2018 |
| Immune<br>Globulins | J1573 | Injection, hepatitis B<br>immune globulin<br>(Hepagam B),<br>intravenous, 0.5 mL   | 0.5 mL | 1/1/2008 | HepaGam B®                     | hepatitis b immune globulin<br>intravenous (human)   | Indicated for the prevention of hepatitis 8 virus recurrence after liver transplantation in HBsAg-positive transplant patients<br>(HepaGam B) – IV only.  | 129  | 1,290   | N/A                                   | N/A | N/A | у | ¥ |  | 7/3/2018  |
| Immune<br>Globulins | J1572 | Injection, immune<br>globulin,<br>(Flebogamma/Flebogam<br>ma DIF), intravenous, non-<br>lyophilized (e.g. liquid),<br>500 mg                 | 500 mg | 1/1/2008 | Flebogamma®                    | immune globulin intravenous<br>(human) for intravenous<br>administration, 10% liquid<br>preparation              | Indicated for the treatment of:<br>• Primary (inherited) Immunodeficiency (PI).<br>• Chronic Primary Immune Thrombocytopenia (ITP) in patients 2 years of age and older.  | 280  | 560   | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific age<br>restrictions:<br>• Primary (inherited)<br>Immunodeficiency (PI): None<br>• Chronic Primary Immune<br>Thrombocytopenia (ITP): In<br>patients 2 years of age and<br>older.  | 7/3/2018  |

| Drugs               | J1580 | Injection, garamycin,<br>gentamicin, up to 80 mg  | up to 80 mg | 1/1/2000 | N/A                       | gentamicin sulfate injection,<br>for intravenous infusion or<br>intramuscular injection | <ul> <li>Indicated in the treatment of serious infections caused by susceptible strains of the following microorganisms: Pseudomonas aeruginosa, Proteus species (indolepositive and indole-negative), Escherichia coli, Klebsiella-Enterobater-Serratia species, Citrobater species, and Staphylococcis species (coagulase-ngstive and cogulase-ngstive).</li> <li>Clinical studies have shown gentamicin to be effective in batterial neonatal sepsity, batterial septicemia; and serious bacterial infections of the central nervous system (meningits), urinary tract, respiratory tract, gastrointestinal tract (including periontic), sion, bone and soft tissue (including burn).</li> <li>Gentamicin sultate may be considered as initial therapy in suspected or confirmed gram-negative infections, and therapy may be instituted before obtaining results of susceptibility testing. The decision to continue therapy with this drug should be based on the results of susceptibility testing, the severity of the infection, and the important additional concepts. If the causative organisms are resistant to gentamicin, other appropriate therapy should be instituted.</li> <li>In serious infections when the causative organisms are uninown, gentamicin sulfate may be administered as initial therapy in conjunction with pentamicin. Following identification of the organism and its susceptibility, appropriate attractions, about be based on the causative organisms. A subjected as actively in combination with carbenicillin for the treatment of life-threatening infections caused by Pseudomonas aeruginosa. It has also been found effective with cardenical torque for the treatment of adminisma and the properties and therapy in a conjunction with a penicillin-type drug for the treatment of barcarditis audition doncerditis caused by group D streptococci.</li> <li>Gentamicin sha also been studies for engative and the subjective data as antimicrobia therapy subjective data secondarditis caused by group D streptococci.</li> <li>Gentamicin sha alo</li></ul> | 9     | 279    | N/A                                   | N/A | N/A | Y | Ŷ |   | 6/4/2019   |
|---------------------|-------|---|-------------|----------|---------------------------|---|--|-------|--------|---------------------------------------|-----|-----|---|---|---|------------|
| Immune<br>Globulins | J1599 | Injection, immune<br>globulin, intravenous,<br>non-lyophilized (e.g.<br>liquid), not otherwise<br>specified, 500 mg | 500 mg      | 1/1/2011 | Panzyga*                  | immune globulin<br>intravenous, human - ifas  | Indicated for the treatment of:<br>• Primary humoral immunodeficiency (PI) in patients 2 years of age and older.<br>• Chronic immune thrombocytopenia (ITP) in adults.   | 280   | 560    | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific age<br>restrictions:<br>• Primary humoral<br>immunodeficiency (PI) - 2<br>years of age and older<br>• Chronic immune<br>thrombocytopenia (ITP) - 18<br>years of age and older | 12/28/2018 |
| Biologicals         | J1602 | Injection, golimumab, 1<br>mg. for intravenous use  | 1 mg        | 1/1/2014 | Simponi Aria*             | golimumab injection, for<br>intravenous use   | Indicated for treatment of adult patients with:<br>• Moderately to severely active Rheumatoid Arthritis (RA) in combination with methotrexate.<br>• Active Psoriatic Arthritis (PA).<br>• Active Ankylosing Spondylitis (AS).  | 280   | 560    | 18 years                              | N/A | N/A | v | Y |   | 7/2/2018   |
| Drugs               | J1610 | Injection, glucagon<br>hydrochloride, per 1 mg  | 1 mg        | 1/1/2000 | GlucaGen®                 | glucagon for injection, for<br>subcutaneous, intramuscular,<br>or intravenous use       | Indicated for:   | 2     | 10     | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific age<br>estrictions:<br>• Treatment of severe<br>hypoglycemia: None<br>• Diagnostic aid: 18 years of<br>age and old  | 10/26/2018 |
| Drugs               | J1626 | Injection, granisetron<br>hydrochloride, 100 mcg  | 100 mcg     | 1/1/2000 | N/A                       | granisetron hydrochloride<br>injection, for intravenous use                             | <ul> <li>Prevention and treatment of postoperative nausea and vomiting in adults.</li> </ul>   | 14    | 294    | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific:<br>• Chemotherapy Induced<br>Nausea and Vomiting: 2 years<br>of age and older<br>• Postoperative Nausea and<br>Vomiting: 18 years of age and<br>older                        | 6/4/2019   |
| Drugs               | J1627 | Injection, granisetron,<br>extended-release, 0.1 mg   | 0.1 mg      | 1/1/2018 | Sustol®                   | granisetron extended-release<br>injection, for subcutaneous<br>use                      | Indicated in combination with other antiennetics in adults for the prevention of acute and delayed nausea and vomiting associated<br>with initial and repeat courses of moderately emetogenic chemotherapy (MEC) or anthracycline and cyclophosphamide (AC)<br>combination chemotherapy regimens   | 100   | 500    | 18 years                              | N/A | N/A | Y | Y |   | 10/26/2018 |
| Drugs               | J1630 | Injection, haloperidol, up<br>to 5 mg   | up to 5 mg  | 1/1/2000 | Haldol®                   | haloperidol lactate injection   |  | 4     | 124    | 18 years                              | N/A | N/A | Ŷ | Y |   | 10/26/2018 |
| Drugs               | J1631 | Injection, haloperidol decanoate, per 50 mg   | per 50 mg   | 1/1/2000 | Haldol®<br>Decanoate      | haloperidol decanoate<br>injection, for intramuscular<br>use                            | Indicated for the treatment of schizophrenic patients who require prolonged parenteral antipsychotic therapy.  | 9     | 18     | 18 years                              | N/A | N/A | Y | Y |   | 6/4/2019   |
| Drugs               | J1640 | Injection, hemin, 1 mg  | 1 mg        | 1/1/2006 | Panhematin®               | hemin for injection   | Indicated for amelioration of recurrent attacks of acute intermittent porphyria temporally related to the menstrual cycle in<br>susceptible women, after initial carbohydrate therapy is known or suspected to be inadequate.<br>Limitations of Use:<br>• Before administering Panhematin, consider an appropriate period of carbohydrate loading (i.e., 400 g glucose/day for 1 to 2 days).<br>• Panhematin is not effective in repairing neuronal damage due to progression of porphyria attacks.  | 1,050 | 14,700 | 16 years                              | N/A | N/A | Y | Ŷ |   | 6/6/2019   |
| Drugs               | J1642 | Injection, heparin sodium<br>(heparin lock flush), per<br>10 units  | 10 units    | 1/1/2000 | Hep-Lock®, Hep-<br>Flush® | heparin sodium injection<br>(heparin lock flush)  | Intended to maintain patency of an indwelling venipuncture device designed for intermittent injection or infusion therapy or blood<br>sampling. Heparin lock flush solution may be used following initial placement of the device in the vein, after each injection of a<br>medication or after withdrawal of blood for laboratory tests. Heparin lock flush solution is not to be used for anticoagulant therapy.   | 150   | 4,500  | N/A                                   | N/A | N/A | Y | Ŷ |   | 10/26/2018 |

| Drugs       | J1644 | Injection, heparin<br>sodium, per 1,000 units                                    | per 1,000 units | 1/1/2000 | N/A                  |   | Indicated for:<br>• Prophylaxis and treatment of venous thrombosis and pulmonary embolism.<br>• Prevention of postoperative deep venous thrombosis and pulmonary embolism in patients undergoing major abdominothoracic<br>surgery or who, for other reasons, are at risk of developing thromboembolic disease.  | 60                                 | 465                                | N/A       | N/A | N/A  | Y | Ŷ | 6/4/2019  |
|-------------|-------|--|-----------------|----------|----------------------|---|--|------------------------------------|------------------------------------|-----------|-----|--|---|---|---|
| Drugs       | J1645 | Injection, dalteparin<br>sodium, per 2,500 IU                                    | per 2,500 IU    | 1/1/2000 | Fragmin®             | dalteparin sodium injection,<br>for subcutaneous use  | Artial fibrillation with embilization.<br>Indicated for:<br>Prophylasis of ischemic complications of unstable angina and non-Q-wave myocardial infarction.<br>Prophylasis of leep vien thrombosis (IVT) in abdominal surgery, hip replacement surgery or medical patients with severely<br>retricted mobility during acute illness.<br>Extended treatment of symptomatic venous thromboembolism (VTE) to reduce the recurrence in patients with cancer. In these<br>patients, the Fragmin therapy begins with the initial VTE treatment and continues for six months.<br>Treatment of symptomatic venous thromboembolism (VTE) to reduce the recurrence in pediatric patients 1 month of age and<br>older.<br>Limitations of Use: Fragmin is not indicated for the acute treatment of VTE.   | 14                                 | 372                                | 1 month   | N/A | N/A  | Y | ¥ | 6/4/2019  |
| Drugs       | J1650 | Injection, enoxaparin<br>sodium, 10 mg   | 10 mg           | 1/1/2000 | Lovenox®             | enoxaparin sodium injection,<br>for subcutaneous and<br>intravenous use                                 | Indicated for:   | 30                                 | 930                                | 18 years  | N/A | N/A  | Y | Y | 6/5/2019  |
| Drugs       | J1652 | Injection, fondaparinux<br>sodium, 0.5 mg  | 0.5 mg          | 1/1/2003 | Arixtra®             | fondaparinux sodium<br>injection solution for<br>subcutaneous injection                                 | Indicated for:<br>• Prophylaxis of deep vein thrombosis (DVT) in patients undergoing hip fracture surgery (including extended prophylaxis), hip<br>replacement surgery, knee replacement surgery, or abdominal surgery.<br>• Treatment of DVT or acute pulmonary embolism (PE) when administered in conjunction with Coumadin.<br>When oral Therapy is not feasible, and the strength, docage form, and route of administration of the drug reasonably lend the  | 20                                 | 520                                | 18 years  | N/A | N/A  | Y | Y | 10/10/2018  |
| Drugs       | J1720 | Injection, hydrocortisone<br>sodium succinate, up to<br>100 mg                   | up to 100 mg    | 1/1/2000 | Solu-Cortef*         | hydrocortisone sodium<br>succinate for injection, for<br>intravenous or intramuscular<br>administration | When oral therapy is not reasible, and the strength, dosage form, and route of administration of the drug reasonably lend the<br>preparation to the treatment of the condition, the intravenous or intransucular use of Solu-Cortel's indicated as follows:<br>• Allergic States: Control of severe or incapacitating allergic conditions intractable to adequate trials of conventional treatment in<br>sathma, atopic demathis, contact dermatitis, drug hypersensitivity reactions, perennial or seasonal allergic rhinitis, serum sickness,<br>transfusion reactions.<br>• Dermatologic Diseases: Bullous dermatitis herpetiformis, exfoliative erythroderma, mycosis fungoides, pemphigus, severe<br>erythream autificame (Stevens-Johnson syndrome).<br>• Indocrine Disorders: Primary or secondary adrenocortical insufficiency (hydrocortisone or cortisone is the drug of choice;<br>synthetic analogs may be used in conjunction with mineralcoorticolds where applicable; in findary, mineralcorticold<br>supplementation is of particular importance), congenital adrenal hyperplasa, hypercalcemia associated with cancer,<br>nonsuppurative thrydidits.<br>• Gastrointestimal Diseases: To tide the patient over a critical period of the disease in regional enteritis (systemic therapy) and<br>diversitien available. | 60                                 | 155                                | N/A       | N/A | N/A  | Ŷ | Y | 10/26/2018  |
| Drugs       | J1726 | Injection,<br>hydroxyprogesterone<br>caproate, (Makena), 10<br>mg                | 10 mg           | 1/1/2018 | Makena®              | hydroxyprogesterone<br>caproate injection for<br>intramuscular or<br>subcutaneous use                   | Indicated to reduce the risk of preterm birth in women with a singleton pregnancy who have a history of singleton spontaneous<br>preterm birth.<br>Limitations of Use: Makena is not intended for use in women with multiple gestations or other risk factors for preterm birth.   | Product Specific<br>(see comments) | Product Specific<br>(see comments) | 16 years  | N/A | Females Only                                     | Y | Y | Product specific max daily<br>units:<br>• Makena single: and multi-<br>dose vials:<br>o For billing prior to 7/1/17:<br>250 units; assumption 1 unit = 1<br>mg<br>o For billing on or after<br>7/1/17: 250 units; assumption 1<br>unit = 10 mg<br>• Makena auto-injector: 27.5<br>units; assumption 1 unit = 10<br>mg<br>o For billing on or after<br>7/1/17: 251 units; assumption 1 unit<br>= 1 mg<br>o For billing on or after<br>7/1/17: 251 units; assumption<br>1 unit = 10 mg<br>• Makena auto-injector: 37.5<br>units; assumption 1 unit = 10<br>me |
| Drugs       | J1729 | Injection,<br>hydroxyprogesterone<br>caproate, Not Otherwise<br>Specified, 10 mg | 10 mg           | 1/1/2018 | N/A                  | hydroxyprogesterone<br>caproate injection   | Indicated in non-pregnant women:<br>• For the treatment of advanced adenocarcinoma of the uterine corpus (Stage III or IV)<br>• In the maragement of amenorhnea (primary and secondary) and abnormal uterine bleeding due to hormonal imbalance in the<br>absence of organic pathology, such as submucus Birboris or uterine carcer<br>• As a test for endogemous estrogen production and for the production of secretory endometrium and desguamation.  | 100                                | 3,100                              | N/A       | N/A | Indicated only<br>for non-<br>pregnant<br>women. | Y | Ŷ | 6/4/2019  |
| Drugs       | J1740 | Injection, ibandronate<br>sodium, 1 mg   | 1 mg            | 1/1/2007 | Boniva <sup>®</sup>  | ibandronate injection, for<br>intravenous use   | Indicated for the treatment of osteoporosis in postmenopausal women.<br>Limitations of Use:<br>Optimal duration of use has not been determined. For patients at low-risk form fracture, consider drug discontinuation after 3 to 5   | 3                                  | 3                                  | 40 years  | N/A | Females Only                                     | Y | Y | 10/18/2018  |
| Drugs       | J1742 | Injection, ibutilide<br>fumarate, 1 mg   | 1 mg            | 1/1/2000 | Corvert <sup>®</sup> | ibutilide fumarate injection,<br>for intravenous infusion   | years of use.<br>Indicated for the rapid conversion of atrial fibrillation or atrial flutter of recent onset to sinus rhythm. Patients with atrial<br>arrhythmias of longer duration are less likely to respond to ibutilide. The effectiveness of ibutilide has not been determined in<br>patients with arrhythmias of more than 90 days in duration.   | 2                                  | 10                                 | 18 years  | N/A | N/A  | Y | Y | 10/18/2018  |
| Drugs       | J1743 | Injection, idursulfase, 1<br>mg  | 1 mg            | 1/1/2008 | Elaprase®            | idursulfase injection, for<br>intravenous use   | Indicated for patients with Hunter syndrome (Mucopolysaccharidoss II, MPS II). Elaprase has been shown to improve walking<br>capacity in patients 5 years and older. In patients 16 months to 5 years of age, no data are available to demonstrate improvement in<br>disease-related symptoms or long term dinical outcome, however, treatment with Elaprase has reduced spitem volume similarly to<br>that of adults and children 5 years of age and older. The safety and efficacy of Elaprase have not been established in pediatric<br>patients fest sthan 16 months of age.   | 72                                 | 360                                | 16 months | N/A | N/A  | Y | Y | 6/4/2019  |
| Biologicals | J1744 | Injection, icatibant, 1 mg   | 1 mg            | 1/1/2013 | Firazyr®             | icatibant injection, for<br>subcutaneous use  | Indicated for the treatment of acute attacks of hereditary angioedema (HAE).   | 90                                 | 2700                               | 18 years  | N/A | N/A  | Y | Y | 6/4/2019  |

| Biologicals | J1745 | Injection, infliximab,<br>excludes biosimilar, 10<br>mg                 | 10 mg       | 1/1/2017  | Remicade <sup>®</sup>    | infliximab lyophilized<br>concentrate for injection, for<br>intravenous use                  | Indicated for:<br>Crohn's Disease: reducing signs and symptoms and inducing and maintaining clinical remission in adult patients with moderately<br>to severely active disease who have had an inadequate response to conventional therapy and reducing the number of draining<br>enterootaneous and recovagrinal fistulas and maintaining fistula dosure in adult patients with fistulizing disease.<br>Pediatric Crohn's Disease: reducing signs and symptoms and inducing and maintaining diricular lemission in pediatric patients with<br>moderately to severely active disease who have had an inadequate response to conventional therapy.<br>Ulcravity Collis: reducing signs and symptoms, inducing and maintaining clinical remission in pediatric patients with<br>moderately to severely active disease who have had an inadequate response to convention and therapy.<br>Pediatric Ulcravity Collis: reducing signs and symptoms, inducing and maintaining clinical remission in pediatric patients with<br>moderately to severely active disease who have had an inadequate response to conventional therapy.<br>Pediatric Ulcravity Collis: reducing signs and symptoms and inducing and maintaining clinical remission in pediatric patients with<br>moderately to severely active disease who have had an inadequate response to conventional therapy.<br>Pediatric Ulcravite Collis: reducing signs and symptoms and inducing and maintaining clinical remission in pediatric patients with<br>moderately to severely active disease who have had an inadequate response to conventional therapy.<br>Pediatric Ulcravite Collis: reducing signs and symptoms in patients with active disease.<br>Payonita: Arthritis: reducing signs and symptoms in patients with active disease.<br>Payonita: Arthritis: reducing signs and symptoms in patients with active disease.<br>Providita: Arthritis: reducing signs and symptoms in patients with active disease.<br>Payonita: Arthritis: reducing signs and symptoms in patients with active disease.<br>Payonita: Arthritis: reducing signs and symptoms in patients with active disease.<br>Payonita: | 140   | 140    | 6 years  | N/A      | N/A          | ¥ | Ą | 6/6/2019   |
|-------------|-------|---|-------------|-----------|--------------------------|--|--|-------|--------|----------|----------|--------------|---|---|------------|
| Biologicals | J1746 | Injection, ibalizumab-<br>uiyk, 10 mg                                   | 10 mg       | 1/1/2019  | Trogarzo™                | ibalizumab-uiyk injection, for<br>intravenous use  | Indicated for use in combination with other antiretroviral(s), for the treatment of human immunodeficiency virus type 1 (HIV-1)<br>infection in heavily treatment-experienced adults with multidrug resistant HIV-1 infection failing their current antiretroviral<br>regimen.   | 200   | 360    | 18 years | N/A      | N/A          | Y | Y | 7/2/2018   |
| Drugs       | J1750 | Injection, iron dextran, 50<br>mg                                       | 50 mg       | 1/1/2009  | INFeD*                   | iron dextran injection   | Indicated for treatment of patients with documented iron deficiency in whom oral administration is unsatisfactory or impossible.   | 2     | 62     | 4 months | N/A      | N/A          | Y | Y | 10/26/2018 |
| Drugs       | J1756 | Injection, iron sucrose, 1<br>mg  | 1 mg        | 1/1/2003  | Venofer*                 | iron sucrose injection for<br>intravenous use  | Indicated for the treatment of iron deficiency anemia in patients with chronic kidney disease (CKD).   | 500   | 1,000  | 2 years  | N/A      | N/A          | Y | Y | 10/10/2018 |
| Drugs       | J1786 | Injection, imiglucerase,<br>10 units                                    | 10 units    | 1/1/2011  | Cerezyme®                | imiglucerase for injection   | Indicated for long-term enzyme replacement therapy for pediatric and adult patients with a confirmed diagnosis of Type 1 Gaucher<br>disease that results in one or more of the following conditions:<br>• anemia<br>• thrombocytopenia<br>• bone disease<br>• hepatomegaly or splenomegaly   | 840   | 2,520  | 2 years  | N/A      | N/A          | Y | Y | 10/31/2018 |
| Drugs       | J1790 | Injection, droperidol, up<br>to 5 mg                                    | up to 5 mg  | 1/1/2000  | N/A                      | droperidol injection for<br>intravenous or intramuscular<br>use                              | Indicated to reduce nausea and vomiting associated with surgical and diagnostic procedures.  | 1     | 5      | 2 years  | N/A      | N/A          | Y | Y | 10/4/2018  |
| Drugs       | J1800 | Injection, propranolol<br>HCl, up to 1 mg                               | up to 1 mg  | 1/1/2000  | N/A                      | propranolol hydrochloride<br>injection, solution   | Indicated for supraventricular arrhythmias, ventricular tachycardias, tachyarrhythmias of digitalis intoxication and resistant<br>tachyarrhythmias due to excessive catecholamine action during anesthesia.  | N/A   | N/A    | 18 years | N/A      | N/A          | Y | Y | 8/29/2018  |
| Drugs       | J1815 | Injection, insulin, per 5<br>units                                      | 5 units     | 1/1/2003  | Various brand<br>names   | insulin, injectable suspension   | Indicated to improve glycemic control in adults and pediatric patients with diabetes mellitus.   | 100   | 3,100  | N/A      | N/A      | N/A          | Y | Y | 10/4/2018  |
| Biologicals | J1826 | Injection, interferon beta-<br>1a, 30 mcg                               | 30 mcg      | 1/1/2011  | Avonex*                  | interferon beta-1a injection,<br>for intramuscular injection,<br>30 mcg                      | Indicated for the treatment of patients with relapsing forms of multiple sclerosis (MS) to slow the accumulation of physical disability<br>and decrease the frequency of clinical exacerbations.   | 1     | 5      | 18 years | N/A      | N/A          | Y | Y |            |
| Biologicals | J1830 | Injection, interferon beta-<br>1B, 0.25 mg                              | 0.25 mg     | 1/1/2000  | Extavia®,<br>Betaseron®  | interferon beta-1b for<br>injection, for subcutaneous<br>use                                 | Indicated for the treatment of relapsing forms of multiple sclerosis to reduce the frequency of clinical exacerbations. Patients with<br>multiple sclerosis in whom efficacy has been demonstrated include patients who have experienced a first clinical episode and have<br>MRI features consistent with multiple sclerosis.   | 1     | 16     | 18 years | N/A      | N/A          | Y | Y | 6/4/2019   |
| Drugs       | J1833 | Injection,<br>isavuconazonium sulfate,<br>1 mg                          | 1 mg        | 1/1/2016  | Cresemba®                | injection for intravenous<br>administration  | Indicated for use in the treatment of:<br>• Invasive aspergillosis<br>• Invasive mucormycosis  | 1,116 | 13,020 | 18 years | N/A      | N/A          | Y | Y | 6/4/2019   |
| Drugs       | J1885 | Injection, ketorolac<br>tromethamine, per 15 mg                         | 15 mg       | 1/1/2000  | N/A                      | ketorolac tromethamine<br>injection for intravenous or<br>intramuscular use                  | Indicated for the short-term management (5 5 days) of moderately-severe acute pain requiring analgesia at the opioid level in adults, usually in a postoperative setting.  | 8     | 40     | 17 years | N/A      | N/A          | Y | Y | 4/9/2019   |
| Drugs       | J1930 | Injection, lanreotide, 1<br>mg  | 1 mg        | 1/1/2009  | Somatuline®<br>Depot     | lanreotide injection, for<br>subcutaneous use  | Indicated for the long-term treatment of acromegalic patients who have had an inadequate response to or cannot be treated with<br>surgery and/or radiotherapy.<br>Indicated for the treatment of adult patients with unresectable, well- or moderately-differentiated, locally advanced or metastatic<br>gastoenteropancreatic neuroendocrine tumors (GEP-AETs) to improve progression-free survival.<br>Indicated for the treatment of adults with carcinoid syndrome; when used, it reduces the frequency of short-acting somatostatin<br>analogue rescue therapy.   | 120   | 240    | 18 years | N/A      | N/A          | Y | Ŷ | 10/26/2018 |
| Biologicals | J1931 | Injection, laronidase, 0.1<br>mg  | 0.1 mg      | 1/1/2005  | Aldurazyme®              | laronidase solution for<br>intravenous infusion only   | Indicated for patients with Hurler and Hurler-Scheie forms of Mucopolysaccharidosis I (MPS I) and for patients with the Scheie form<br>who have moderate to severe symptoms. The risks and benefits of treating mildly affected patients with the Scheie form have not<br>been established. Advaryme has been shown to improve pulmonary function and walking capacity. Alduraryme has not been<br>evaluated for effects on the central nervous system manifestations of the disorder.   | 812   | 4,050  | 6 months | N/A      | N/A          | Y | Y | 4/10/2019  |
| Drugs       | J1940 | Injection, furosemide, up<br>to 20 mg                                   | up to 20 mg | 1/1/2000  | Lasix®                   | furosemide injection   | Indicated for the treatment of edema associated with congestive heart failure, cirrhosis of the liver, and renal disease, including the<br>nephrotic syndrome. Furosemide is particularly useful when an agent with greater diuretic potential is desired. As an adjunct in the<br>treatment of pulmonary edema. The intravenous administration of furosemide is indicated when a rapid onset of diuresis is<br>desired. If gastruinestinal absorption is impaired or or al medication is not practical for any reason, furosemide is indicated by the<br>intravenous or intramuscular route. Parenteral use should be replaced with oral furosemide as soon as practical.   | 10    | 310    | N/A      | N/A      | N/A          | Y | Y | 10/26/2018 |
| Drugs       | J1944 | Injection, aripiprazole<br>lauroxil, (aristada), 1 mg                   | 1 mg        | 10/1/2019 | Aristada®                | aripiprazole lauroxil<br>extended-release injectable<br>suspension, for intramuscular<br>use | Indicated for the treatment of schizophrenia.  | 1,054 | 1,064  | 18 years | 65 years | N/A          | Y | Y | 9/27/2019  |
| Drugs       | J1950 | Injection, leuprolide<br>acetate (for depot<br>suspension), per 3.75 mg | per 3.75 mg | 1/1/2000  | Lupron Depot®<br>3.75 mg | leuprolide acetate for depot<br>suspension, for intramuscular<br>use, 3.75 mg                |  | 1     | 2      | 18 years | N/A      | Females Only | Y | Y | 6/4/2019   |

| Drugs | J1953 | Injection, levetiracetam,<br>10 mg                             | 10 mg         | 1/1/2009 | Keppra*     | levetiracetam injection, for<br>intravenous use   | Indicated as an adjunctive therapy, as an alternative when oral administration is temporarily not feasible, for the treatment of:<br>• Partial onset seizures in patients 1 month of age and older with epilepsy<br>• Myodonic seizures in patients 12 years of age and older with juvenile myoconic epilepsy<br>• Primary generalized tonic-clonic seizures in patients 6 years of age and older with idiopathic generalized epilepsy   | 300 | 9,300 | Indication Specific<br>(see comments) | N/A                             | N/A          | Ŷ | Y | Indication specific age<br>restrictions:<br>• Partial Onset Seizures: 1<br>month of age and older<br>• Myoclonic Seizures in<br>Patients with Juvenile<br>Myoclonic Epilepsy: 12 years<br>of age and older<br>• Primary Generalized Tonic-<br>Clonic Seizures: 6 years of age<br>and older |
|-------|-------|--|---------------|----------|-------------|---|--|-----|-------|---------------------------------------|---------------------------------|--------------|---|---|--|
| Drugs | J1955 | Injection, levocarnitine,<br>per 1 g                           | 1 g           | 1/1/2000 | Carnitor®   | levocarnitine injection for<br>intravenous use  | Indicated for:<br>• the acute and chronic treatment of patients with an inborn error of metabolism which results in secondary carnitine deficiency.<br>• the prevention and treatment of carnitine deficiency in patients with end stage renal disease who are undergoing dialysis.  | 42  | 1,302 | N/A                                   | N/A                             | N/A          | Y | Y | 4/10/2019  |
| Drugs | J1956 | Injection, levofloxacin,<br>250 mg                             | 250 mg        | 1/1/2000 | Levaquin®   | levofloxacin injection for<br>intravenous use   | Indicated in adults (>=18 years of age) with infections caused by designated, susceptible bacteria:<br>• Pneumonia: Nosocomial and Community Acquired<br>• Skin and Skin Structure Infections: Complicated and Uncomplicated<br>• Chronic bacterial prostatitis<br>• Inhalational Anthrax, Post-Exposure<br>• Plague<br>• Unnary Tract Infections: Complicated and Uncomplicated<br>• Acute Peleonephritis<br>• Acute Paleonephritis<br>• Acute Bacterial Exacerbation of Chronic Bronchitis<br>• Acute Bacterial Sinusitis<br>Usage: To reduce the development of drug-resistant bacteria and maintain the effectiveness of Levaquin and other antibacterial<br>Usage: Jo reduce the development of drug-resistant bacteria and maintain the effectiveness of Levaquin and other antibacterial<br>Usage: To reduce the development of prevent infections that are proven or strongly suspected to be caused by bacteria.  | 3   | 62    | Indication Specific<br>(see comments) | N/A                             | N/A          | Y | Y | Indication specific:<br>Inhalation Anthrax (Post-<br>Exposure): 6 months and<br>older. 6/5/2019<br>Plague: 6 months and older.<br>All other indications: 18 years<br>of age and older.   |
| Drugs | J1980 | Injection, hyoscyamine<br>sulfate, up to 0.25 mg               | up to 0.25 mg | 1/1/2000 | Levsin*     | hyoscyamine sulfate injection   | <ul> <li>Is effective as adjunctive therapy in the treatment of peptic ulcer.</li> <li>In acute episodes, Levsin injection can be used to control gastri secretion, visceral spasm and hypermotility in spastic colitis, spastic bladder, cytitis, pylorospasm, and associated adbominal camps.</li> <li>For use as adjunctive therapy in the treatment of irritable bowel syndrome (irritable colon, spastic colon, mucous colitis) and functional gastrointestinal disorders.</li> <li>Also as adjunctive therapy in the treatment of inritable bowel syndrome (irritable colon, spastic colon, mucous colitis) and functional gastrointestinal disorders.</li> <li>Por use as adjunctive therapy in the treatment of neurogenic bladder and neurogenic bowel disturbances (including the splenic flexure syndrome and neurogenic colon).</li> <li>Parenterally administered Levsin is also effective in reducing gastrointestinal motility to facilitate diagnostic procedures such as endoscopy or hypotonic duodenography.</li> <li>Levsin may be used to reduce pain and hypersecretion in pancreatitis, in certain cases of partial heart block associated with vagal activity, and as an antidote for poisoning by anticholinesteras agents.</li> <li>indicated as a pre-operative antimuscarinic to reduce salivary, tracheobronchial, and pharyngeal secretions, to reduce the volume and activity of gastric secretions, and to block cardia vagal inhibitory reflexes during induction of anesthesia and intubation.</li> <li>May also be used intravenously to improve radiologic visibility of the kidneys.</li> <li>Indicated along with morphine or other narcotics in symptomatic reflet of bilany and enal colic.</li> </ul> | 8   | 248   | N/A                                   | N/A                             | N/A          | Y | Y |  |
| Drugs | J2001 | Injection, lidocaine HCL<br>for intravenous infusion,<br>10 mg | 10 mg         | 1/1/2004 | N/A         | lidocaine hydrochloride<br>injection, solution  | <ul> <li>Administered intravenously or intramuscularly, is specifically indicated in the acute management of ventricular arrhythmias such<br/>as those occurring in relation to acute myocardial infarction, or during cardiac manipulation, such as cardiac surgery.</li> <li>Indicated for production of local or regional anesthesia by infiltration techniques such as percutaneous lipication and intravenous<br/>regional anesthesia by peripheral nerve block techniques such as brachial plecus and intercostal and by central neural techniques<br/>such as lumbar and caudal epidural blocks, when the accepted procedures for these techniques as described in standard textbooks<br/>are observed.</li> </ul>  | 35  | 35    | N/A                                   | N/A                             | N/A          | Y | Y | 10/31/2018   |
| Drugs | J2010 | Injection, lincomycin HCl,<br>up to 300 mg                     | 300 mg        | 1/1/2000 | Lincocin®   | lincomycin hydrochloride<br>injection, solution   | Indicated for the treatment of serious infections due to susceptible strains of streptococci, pneumococci, and staphylococci. Its use<br>should be reserved for penicillin-allergic patients or other patients for whom, in the judgment of the physician, a penicillin is<br>inappropriate.   | 27  | 837   | 1 month                               | N/A                             | N/A          | Y | Y | 10/26/2018   |
| Drugs | J2020 | Injection, linezolid, 200<br>mg                                | 200 mg        | 1/1/2002 | Zyvox®      | linezolid injection, solution   | Indicated in adults and children for the treatment of the following infections caused by susceptible Gram-positive bacteria:<br>nosocomial pneumonia; community-acquired pneumonia, complicated skin and skin structure infections, including diabetic foot<br>infections, without concomitant osteomyelitis, uncomplicated skin and skin structure infections, vancomycin-resistant Enterococus<br>faecium infections.<br>To reduce the development of drug-resistant bacteria and maintain the effectiveness of Zyvox formulations and other antibacterial<br>drugs, Zyvox should be used only to treat infections that are proven or strongly suspected to be caused by bacteria.   | 6   | 168   | N/A                                   | N/A                             | N/A          | Y | Ŷ | 10/26/2018   |
| Drugs | J2060 | Injection, lorazepam, 2<br>mg                                  | 2 mg          | 1/1/2000 | Ativan®     | lorazepam injection for<br>intravenous or intramuscular<br>use                                    | Indicated:<br>• In adult patients for preanesthetic medication, producing sedation (sleepiness or drowsiness), relief of anxiety and a decreased<br>ability to recall events related to the day of surgery.<br>• For treatment of status gelipelicus.  | 4   | 124   | 18 years                              | N/A                             | N/A          | Y | Y | 4/10/2019  |
| Drugs | J2150 | Injection, mannitol, 25%<br>in 50 mL                           | 50 mL         | 1/1/2000 | N/A         | mannitol injection  | Indicated for the:<br>• Promotion of diuresis, in the prevention or treatment of the oliguric phase of acute renal failure before irreversible renal failure<br>becomes established.<br>• Reduction of intracranial pressure and treatment of cerebral edema by reducing brain mass.<br>• Reduction of elevated intraccular pressure when the pressure cannot be lowered by other means.<br>• Promotion of uniary excretion of toxis substances.   | 23  | 713   | 12 years                              | N/A                             | N/A          | Y | Y | 6/10/2019  |
| Drugs | J2175 | Injection, meperidine<br>hydrochloride, per 100<br>mg          | 100 mg        | 1/1/2000 | Demerol™    | meperidine hydrochloride<br>injection, for subcutaneous,<br>intramuscular, and<br>intravenous use | Indicated for preoperative medication, support of anesthesia, obstetrical analgesia, and for the management of pain severe enough<br>to require an opioid analgesic and for which alternative treatments are inadequate.<br>Limitations of Use:<br>Because of the risks of addiction, abuse, and misuse with opioids, even at recommended doses, reserve for use in patients for<br>whom alternative treatment options (e.g., non-opioid analgesics or opioid combination products) have not been tolerated, or are<br>not expected to be tolerated or have not provided adequate analgesia, or are not expected to provide adequate analgesia.  | 12  | 124   | N/A                                   | N/A                             | N/A          | Ŷ | ¥ | 10/26/2018   |
| Drugs | J2186 | Injection, meropenem<br>and vaborbactam,<br>10mg/10mg (20mg)   | 1 vial        | 1/1/2019 | Vabomere™   | meropenem and<br>vaborbactam for injection,<br>for intravenous use                                | Indicated for the treatment of patients 18 years and older with complicated urinary tract infections (cUTI) including pyelonephritis<br>caused by<br>designated susceptible bacteria. To reduce the development of drug-resistant bacteria and maintain the effectiveness of Vabomere<br>and other antibacterial drugs, Vabomere should be used only to treat or prevent infections that are proven or strongly suspected to<br>be caused by susceptible bacteria.   | 600 | 8,400 | 18 years                              | N/A                             | N/A          | Y | Y | 10/26/2018   |
| Drugs | J2210 | Injection,<br>methylergonovine<br>maleate, up to 0.2 mg        | up to 0.2 mg  | 1/1/2000 | Methergine® | methylergonovine maleate<br>injection   | Indicated<br>• Following delivery of the placenta, for routine management of uterine atony, hemorrhage, and subinvolution of the uterus.<br>• For control of uterine hemorrhage in the second stage of labor following delivery of the anterior shoulder.  | 5   | 5     | Women of childbearing age             | Women of<br>childbearing<br>age | Females Only | Y | Y | 10/31/2018   |

|             |       |  |             |          |                                      | i.   |  |     | 1   |          |     |     |   |   |   |            |
|-------------|-------|--|-------------|----------|--------------------------------------|--|--|-----|-----|----------|-----|-----|---|---|---|------------|
| Drugs       | J2250 | Injection, midazolam<br>hydrochloride, per 1 mg  | 1 mg        | 1/1/2000 | N/A                                  | midazolam hydrochloride<br>injection for intravenous or<br>intramuscular use | Indicated:<br>• Intravenously as an agent for sedation/anxiolysis/amnesia prior to or during diagnostic, therapeutic or endoscopic procedures,<br>such as bronchoscopy, gastroscopy, cystoscopy, coronary angiography, cardiac catheterization, oncology procedures, saidologic<br>procedures, such as bronchoscopy, gastroscopy, cystoscopy, coronary angiography, cardiac catheterization, oncology procedures, saidologic<br>procedures, such of ducer total other procedures either alone or in combination with other CNS depressants;<br>• Intravenously for induction of general anesthesia, before administration of other anesthetic agents. With the use of narcotic<br>premedication, induction of anesthesia can be attained within a relatively narrow dose range and in a short period of time.<br>Intravenous midazolam can also be used as a component of Intravenous supplementation of nitrous oxide and oxygen (balanced<br>anesthesia);<br>• Continuous intravenous infusion for seation of intubated and mechanically ventilated patients as a component of anesthesia or<br>during treatment in a critical care setting.   | 5   | 25  | N/A      | N/A | N/A | Y | Y |   | 10/31/2018 |
| Drugs       | J2260 | Injection, milrinone   | per 5 mg    | 1/1/2000 | N/A                                  | milrinone lactate injection  |  | 32  | 64  | 18 years | N/A | N/A | Y | Y |   | 6/6/2019   |
| Drugs       | J2270 | lactate, per 5 mg  | up to 10 mg | 1/1/2000 | N/A                                  | morphine sulfate injection,<br>up to 10 mg                                   | Indicated for the management of pain severe enough to require an opioid analgesic and for which alternative treatments are<br>inadequate. Umitations of Use: Because of the risks of addiction, abuse, and misuse with opioids, even at recommended doses, reserve<br>Morphine Sulfate Injection, for use in patients for whom alternative treatment options [e.g., non-opioid analgesics or opioid<br>combination products]:<br>Have not been tolerated, or are not expected to be tolerated,<br>Have not been tolerated, or are not expected to be tolerated,<br>Hore: Indicated for:<br>the relief of severe acute and chronic pain<br>to relieve preoperative apprehension<br>to facilitate ansthesis induction<br>to to facilitate ansthesis induction<br>analgesia during labor<br>analgesia during labor<br>anathesia during labor<br>anothesia   | 17  | 527 | N/A      | N/A | N/A | ¥ | ¥ |   | 6/7/2019   |
|             |       |  |             |          |                                      |  | anestnesia     to control postoperative pain.  |     |     |          |     |     |   |   |   |            |
| Drugs       | J2274 | Injection, morphine<br>sulfate, preservative-free<br>for epidural or intrathecal<br>use, 10 mg | 10 mg       | 1/1/2015 | Duramorph*,<br>Infumorph*,<br>Mitigo | morphine sulfate injection<br>preservative-free                              | Mitigo: for use in continuous microinfusion devices and indicated only for intrathecal or epidural infusion in the management of<br>intractable chronic pain severe enough to require an opioid analgesic and for which alternative treatments are inadequate.     Infumorph: for use in continuous microinfusion devices and indicated only for intrathecal or epidural infusion in the management of intractable chronic pain severe enough to require an opioid analgesic and for which alternative treatments are inadequate.     Ouramorph: Indicated for:     othe management of pain severe enough to require use of an opioid analgesic by intravenous administration and for which alternative treatments are not expected to be adequate.     othe optional or intrathecal management of pain without attendant loss of motor, sensory, or sympathetic function.     O ilmitation of Use: Duramorph: Into the ruse incontinuous microinfluxion devices.     Prior to 10/30/2018: Morphine sulfate (preservative-free sterile solution) is a systemic narcotic analgesic for administration by the  intravenous, epidural, or intrathecal routes. It is used for the management of pain not responsive to non-narcotic analgesics.     Morphine sulfate (preservative-free sterile solution) is a systemic narcotic analgesic.     Indynphine sulfate (preservative-free sterile solution) is a systemic narcotic analgesic.     Infumorph <sup>®</sup> is indicated only for intrathecal or epidural infusion in the treatment of intractable chronic pain relief for extended  periods without attendant loss of motor, sensory, or sympathetic function.     Infumorph <sup>®</sup> is indicated only for intrathecal or epidural infusion in the treatment of intractable chronic pain. It is not recommended  for single-dose intravenous, intramuscular, or subcutaneous administration due to the large amount of morphine in the ampule and  the associated risk of overdosage. | 3   | 93  | 18 years | N/A | N/A | v | ¥ |   | 6/10/2019  |
| Drugs       | J2278 | Injection, ziconotide, 1<br>microgram  | 1 mcg       | 1/1/2006 | Prialt®                              | ziconotide solution,<br>intrathecal infusion                                 | Indicated for the management of severe chronic pain in patients for whom intrathecal therapy is warranted, and who are intolerant<br>of or refractory to other treatment, such as systemic analgesics, adjunctive therapies, or intrathecal morphine.  | 20  | 620 | 18 years | N/A | N/A | Y | Y |   | 9/21/2018  |
| Drugs       | J2300 | Injection, nalbuphine<br>hydrochloride, per 10 mg  | 10 mg       | 1/1/2000 | N/A                                  | nalbuphine hydrochloride<br>injection, solution                              | Indicated for management of pain severe enough to require an opioid analgesic and for which alternative treatments are<br>inadequate. Also can be used as a supplement to balanced anesthesia, for pre/post operative analgesia and obstetrical analgesia<br>during labor and delivery.<br>Limitations of Use: Because of the risks of addiction, abuse, and misuse with opioids, even at recommended doses, reserve<br>nalbuphine injection for use in patients for whom alternative treatment options (e.g. non-opioid analgesics):<br>• have not been tolerated, or are not expected to be tolerated.<br>• have not provide adequate analgesia, or are not expected to provide adequate analgesia.  | 16  | 248 | 18 years | N/A | N/A | Y | ¥ |   | 10/26/2018 |
| Drugs       | J2310 | Injection, naloxone<br>hydrochloride, per 1 mg   | 1 mg        | 1/1/2000 | Narcan®                              | naloxone hydrochloride<br>injection  | Indicated for the complete or partial reversal of opioid depression, including respiratory depression, induced by natural and<br>synthetic opioids including: propoxyphene, methadone, nalbuphine, butorphanol and pentazocine; It is also indicated for the<br>diagnosis of suspected opioid tolerance or acute opioid overdose.  | N/A | N/A | N/A      | N/A | N/A | Y | Y |   | 10/26/2018 |
| Drugs       | J2315 | Injection, naltrexone,<br>depot form, 1 mg   | 1 mg        | 1/1/2007 | Vivitrol®                            | naltrexone for extended-<br>release injectable suspension                    | Indicated for the treatment of active build open dense in patients who are able to abstain from alcohol in an outpatient setting prior<br>to initiation of treatment with 'Writrol. Patients should not be achively drinking at the time of initial Vivitrol administration.<br>Indicated for the prevention of relapse to opioid dependence, following opioid detoxification.<br>Vivitrol should be part of a comprehensive management program that includes psychosocial support.  | 380 | 760 | 18 years | N/A | N/A | Y | Y |   | 10/26/2018 |
| Biologicals | J2323 | Injection, natalizumab, 1<br>mg  | 1 mg        | 1/1/2008 | Tysabri®                             | natalizumab injection, for<br>intravenous use                                | Indicated for treatment of:<br>Multiple Sciencesis (MS)<br>• Typabri is indicated as monotherapy for the treatment of patients with relapsing forms of multiple sciencesis. Tysabri increases the<br>risk of PML When<br>initiating and continuing treatment with Tysabri, physicians should consider whether the expected benefit of Tysabri is sufficient to<br>offset this risk. See important information regarding the risk of PML with Tysabri.<br>Crohn's Disease (CD)<br>• Tysabri is indicated for inducing and maintaining clinical response and remission in adult patients with moderately to severely<br>active Crohn's disease with evidence of inflammation who have had an inadequate response to, or are unable to tolerate,<br>conventional CD therapies and inhibitors of TM-a.<br>In OQ. Tysabri should not be used in combination with immunosuppressants or inhibitors of TM-a.  | 300 | 600 | 18 years | N/A | N/A | ¥ | ¥ |   | 10/26/2018 |
| Drugs       | J2326 | Injection, nusinersen, 0.1<br>mg   | 0.1 mg      | 1/1/2018 | Spinraza®                            | nusinersen injection, for<br>intrathecal use                                 | Indicated for the treatment of spinal muscular atrophy (SMA) in pediatric and adult patients.  | 120 | 360 | N/A      | N/A | N/A | Y | Y | Only for inpatient or<br>outpatient hospital use. | 8/14/2018  |
| Drugs       | J2353 | Injection, octreotide,<br>depot form for<br>intramuscular injection, 1<br>mg                   | 1 mg        | 1/1/2004 | Sandostatin® LAR<br>Depot            |  | Indicated for treatment in patients who have responded to and tolerated sandostatin injection subcutaneous injection for:<br>• Accomegaly<br>• Severe diarnhea/flushing episodes associated with metastatic carcinoid tumors<br>• Profuse watery diarnhea associated with VIP-secreting tumors   | 20  | 40  | 18 years | N/A | N/A | Y | Y |   | 7/16/2018  |

|             |       |  |             |          |                                | 1   |  |     |       |                                       |     |     |   |   |  | ,         |
|-------------|-------|--|-------------|----------|--------------------------------|---|--|-----|-------|---------------------------------------|-----|-----|---|---|--|-----------|
| Drugs       | J2354 | Injection, octreotide, non-<br>depot form for<br>subcutaneous or<br>intravenous injection, 25<br>mcg | 25 mcg      | 1/1/2004 | Sandostatin®                   | octreotide acetate, injection   | Indicated:<br>• To reduce blood levels of growth hormone and IGF-I (somatomedin C) in acromegaly patients who have had inadequate response<br>to or cannot be treated with surgical resection, pituitary irradiation, and bromocriptine merylate at maximally tolerated doses.<br>• For the symptomatic treatment of patients with metastatic carinoid tumors where it suppresses or inhibits the severe diarrhea<br>and flushing episodes associated with the disease.<br>• For the treatment of the profuse watery diarrhea associated with VIP-secreting tumors. Sandostatin studies were not designed to<br>show an effect on the size, rate of growth or development of metastases.   | 60  | 1,860 | 18 years                              | N/A | N/A | Ŷ | Ŷ |  | 7/16/2018 |
| Drugs       | J2355 | Oprelvekin, 5 mg,<br>injection   | 5 mg        | 1/1/2000 | Neumega®                       | oprelvekin  | Prevention of severe thrombocytopenia and the reduction of the need for platelet transfusions following myelosuppressive<br>chemotherapy.  | 1   | 27    | N/A                                   | N/A | N/A | Y | Y |  | 5/30/2019 |
| Drugs       | J2358 | Injection, olanzapine,<br>long-acting, 1 mg  | 1 mg        | 1/1/2011 | Zyprexa®<br>Relprevv™          | olanzapine pamoate for<br>extended release injectable<br>suspension                           | Indicated for the treatment of schizophrenia.  | 405 | 900   | 18 years                              | N/A | N/A | Y | Y |  | 9/21/2018 |
| Drugs       | J2360 | Injection, orphenadrine<br>citrate, up to 60 mg  | up to 60 mg | 1/1/2000 | Norflex®                       | orphenadrine citrate<br>injection   | Indicated as an adjunct to rest, physical therapy, and other measures for the relief of discomfort associated with acute painful<br>musculoskeletal conditions.  | 2   | 20    | 18 years                              | N/A | N/A | Y | Y |  | 7/16/2018 |
| Drugs       | J2370 | Injection, phenylephrine<br>HCl, up to 1 mL  | 1 mL        | 1/1/2000 | Vazculep*                      | phenylephrine hydrochloride<br>injection for intravenous use                                  | Indicated for the treatment of clinically important hypotension resulting primarily from vasodilation in the setting of anesthesia.  | 1   | 31    | 18 years                              | N/A | N/A | Y | Y |  | 5/21/2019 |
| Drugs       | J2400 | Injection, chloroprocaine<br>hydrochloride, per 30 mL  | 30 mL       | 1/1/2000 | Nesacaine®,<br>Nesacaine® -MPF | chloroprocaine HCl injection  | Multidose vial with preservatives: Indicated for the production of local anesthesia by infiltration and peripheral nerve block.<br>Single dose vial without preservatives and without EDTA: Indicated for the production of local anesthesia by infiltration, peripheral,<br>and central nerve block, including lumbar and caudal epidural blocks.   | 2   | 2     | N/A                                   | N/A | N/A | Y | Y |  | 9/27/2018 |
| Drugs       | J2405 | Injection, ondansetron<br>hydrochloride, per 1 mg  | 1 mg        | 1/1/2000 | Zofran®                        |   | Indicated for the prevention of:<br>Nausea and vomiting associated with initial and repeat courses of emetogenic cancer chemotherapy.<br>Postoperative nausea and/or vomiting.   | 48  | 720   | Indication Specific<br>(see comments) | N/A | N/A | Ŷ | ¥ | Indication specific age<br>restrictions:<br>• Prevention of nausea and<br>vomiting associated with<br>emetogenic chemotherapy: 6<br>months of age and older<br>• Prevention of postoperative<br>nausea and vomiting: 1 month<br>of age and older | 9/27/2018 |
| Drugs       | J2407 | Injection, oritavancin, 10<br>mg   | 10 mg       | 1/1/2016 | Orbactiv <sup>®</sup>          | oritavancin for injection, for<br>intravenous use   | Indicated for the treatment of adult patients with acute bacterial skin and skin structure infections caused or suspected to be<br>caused by susceptible isolates of designated Gram-positive microorganisms.  | 120 | 120   | 18 years                              | N/A | N/A | Y | Y |  | 7/16/2018 |
| Drugs       | J2425 | Injection, palifermin, 50<br>micrograms  | 50 mcg      | 1/1/2006 | Kepivance <sup>®</sup>         | palifermin injection, for<br>intravenous use  | Indicated to decrease the incidence and duration of severe oral mucositis in patients with hematologic malignancies receiving<br>myelotoxic therapy in the setting of autologous hematopoietic stem cell support. Kepivance is indicated as supportive care for<br>preparative regimens predicted to result in 2 WHO Grade 3 mucositis in the majority of patients.<br>Limitations of Use:<br>The safety and efficacy of Kepivance have not been established in patients with non-hematologic malignancies.<br>• Kepivance was not effective in decreasing the incidence of severe mucositis in patients with hematologic malignancies receiving<br>myelotoxic therapy in the setting of allogeneic hematopoietic stem cell support. | 168 | 1,008 | 18 years                              | N/A | N/A | Y | Ŷ |  | 4/9/2019  |
| Drugs       | J2426 | Injection, paliperidone<br>palmitate extended<br>release, 1 mg                                       | 1 mg        | 1/1/2011 | Invega<br>Sustenna®            | paliperidone palmitate<br>extended-release injectable<br>suspension, for intramuscular<br>use | Indicated for:<br>• Treatment of schizophrenia in adults.<br>• Treatment of schizoaffective disorder in adults as monotherapy and as an adjunct to mood stabilizers or antidepressants.  | 234 | 624   | 18 years                              | N/A | N/A | Y | Y |  | 7/16/2018 |
| Drugs       | J2430 | Injection, pamidronate<br>disodium, per 30 mg  | 30 mg       | 1/1/2000 | Aredia®                        | pamidronate disodium for<br>injection for intravenous<br>infusion                             | Indicated for:<br>• Hypercalemia of malignancy<br>• Paget's disease<br>• Osteohytic bone metastases of breast cancer and osteohytic lesions of multiple myeloma  | 3   | 6     | 18 years                              | N/A | N/A | Y | Y |  | 9/21/2018 |
| Drugs       | J2440 | Injection, papaverine HCl,<br>up to 60 mg  | up to 60 mg | 1/1/2000 | N/A – various<br>generics      | papaverine hydrochloride<br>injection, solution   | Indicated in various conditions accompanied by spasm of smooth muscle, such as vascular spasm associated with acute myocardial<br>infarction (coronary occlusion), angina pectoris, peripheral and pulmonary embolism, peripheral vascular disease in which there is a<br>vasospastic element, or certain cerebral angiospastic tates; and visceral spasm, as in ureteral, billiary, or gastrointestinal colic.  | 16  | 80    | 18 years                              | N/A | N/A | Y | Y |  | 7/16/2018 |
| Drugs       | J2469 | Injection, palonosetron<br>HCl, 25 mcg   | 25 mcg      | 1/1/2005 | Aloxi®                         | palonosetron HCl injection<br>for intravenous use   | Indicated in adults for:<br>• Moderately emetogenic cancer chemotherapy prevention of acute and delayed nausea and vomiting associated with initial and<br>repeat courses.<br>• Fighly emetogenic cancer chemotherapy prevention of acute nausea and vomiting associated with initial and repeat courses.<br>• Prevention of postoperative nausea and vomiting (PONV) for up to 24 hours following surgery. Efficacy beyond 24 hours has not<br>been demonstrated.<br>Indicated in pediatric patients aged 1 month to less than 17 years for:<br>• Prevention of acute nausea and vomiting associated with initial and repeat courses of emetogenic cancer chemotherapy, including<br>highly emetogenic cancer chemotherapy.         | 10  | 50    | 1 month                               | N/A | N/A | Y | Ŷ |  | 7/16/2018 |
| Drugs       | J2501 | Injection, paricalcitol, 1<br>mcg  | 1 mcg       | 1/1/2003 | Zemplar®                       | paricalcitol injection  | Indicated for the prevention and treatment of secondary hyperparathyroidism associated with stage 5 chronic kidney disease (CKD).  | 30  | 420   | 18 years                              | N/A | N/A | Y | Ŷ |  | 7/16/2018 |
| Drugs       | J2502 | Injection, pasireotide<br>long acting, 1 mg  | 1 mg        | 1/1/2016 | Signifor® LAR                  | pasireotide for injectable<br>suspension, for intramuscular<br>use                            | Indicated for the treatment of:<br>• Patients with acromegaly who have had an inadequate response to surgery and/or for whom surgery is not an option.<br>• Patients with Cushing's disease for whom pituitary surgery is not an option or has not been curative.  | 60  | 120   | 18 years                              | N/A | N/A | Y | Y |  | 7/26/2018 |
| Drugs       | J2503 | Injection, pegaptanib<br>sodium, 0.3 mg  | 0.3 mg      | 1/1/2006 | Macugen <sup>®</sup>           | pegaptanib sodium injection,<br>intravitreal injection  | Indicated for the treatment of neovascular (wet) age-related macular degeneration.   | 1   | 1     | 18 years                              | N/A | N/A | Y | Y |  | 8/24/2018 |
| Biologicals | J2505 | Injection, pegfilgrastim, 6<br>mg  | 6 mg        | 1/1/2004 | Neulasta®                      | pegfilgrastim injection, for<br>subcutaneous use  | Indicated to:<br>- To decrease the incidence of infection, as manifested by febrile neutropenia, in patients with nonmyeloid malignancies receiving<br>myelosuppressive anticancer drugs associated with a clinically significant incidence of febrile neutropenia.<br>- Increase survival in patients acutely exposed to myelosuppressive doses of radiation (Hematopoietic Subsyndrome of Acute<br>Radiation Syndrome).<br>Limitations of Use:   | 1   | 3     | N/A                                   | N/A | N/A | Y | ¥ |  | 1/9/2020  |
|             |       |  |             |          |                                |   | <ul> <li>Neulasta is not indicated for the mobilization of peripheral blood progenitor cells for hematopoietic stem cell transplantation.</li> </ul>   |     |       |                                       |     |     |   |   |  |           |
| Biologicals | J2507 | Injection, pegloticase, 1<br>mg  | 1 mg        | 1/1/2012 | Krystexxa®                     | pegloticase injection, for<br>intravenous infusion  | Indicated for the treatment of chronic gout in adult patients refractory to conventional therapy.  | 8   | 24    | 18 years                              | N/A | N/A | Y | Y |  | 6/4/2019  |

| J2510<br>J2515<br>J2540 | Injection, penicillin G<br>procaine, aqueous, up to<br>600,000 units<br>Injection, pentobarbital<br>sodium, per 50 mg<br>Injection, penicillin G<br>potassium, up to 600,000 | up to 600,000 units   | 1/1/2000  | N/A   | penicillin G procaine<br>injectable suspension  | Indicated in the treatment of moderately severe infections in both adults and pediatric patients due to penicillin-6-susceptible<br>microorganisms that are susceptible to the low and persistent serum levels common to this particular dosage form. Therapy should<br>be guided by bacteriological studies (including susceptibility tests) and by clinical response. See package insert for list of infections  | 4   | 52  | N/A  | N/A   | N/A  | Y   | Y  | 8/24/2018   |
|-------------------------|--|---|---|---|---|--|---|---|--|---|--|---|--|---|
|                         | sodium, per 50 mg  | 50 mg   |   |   |   | and microorganisms.  |   |   |  |   |  | ļ   |  |   |
| J2540                   |  |   | 1/1/2000  | Nembutal®   | pentobarbital sodium<br>injection, USP  | Indicated for use as:<br>• Sedatives<br>• Hyponcics, for the short-term treatment of insomnia, since they appear to lose their effectiveness for sleep induction and sleep<br>maintenance after 2 weeks<br>• Preamsthetics<br>• Anticonvulsant, in anesthetic doses, in the emergency control of certain acute convulsive episodes, e.g., those associated with<br>status epilepticus, cholera, eclampsia, meningitis, tetanus, and toxic reactions to strychnine or local anesthetics   | 10  | 150   | N/A  | N/A   | N/A  | Y   | Y  | 8/24/2018   |
|                         | units  | 600,000 units   | 1/1/2000  | Pfizerpen®  | penicillin G potassium for<br>injection   | Indicated in the therapy of severe infections caused by pencillin G-susceptible microorganisms when rapid and high pencillin levels<br>are required. Therapy should be guided by bacteriological studies (including susceptibility tests) and by clinical response. See<br>package insert for full list of microorganisms.   | 40  | 1,240   | N/A  | N/A   | N/A  | Y   | Y  | 8/24/2018   |
| J2543                   | Injection, piperacillin<br>sodium/tazobactam<br>sodium, 1 g/0.125 g<br>(1.125 g)   | 1.125 g   | 1/1/2000  | Zosyn®  | piperacillin and tazobactam<br>for injection, for intravenous<br>use  | Indicated for treatment of:<br>• Intra-abdominal infections<br>• Skin and skin structure infections  | 16  | 224   | 2 months   | N/A   | N/A  | Y   | Y  | 4/10/2019   |
| J2545                   | Pentamidine isethionate,<br>inhalation solution, FDA-<br>approved final product,<br>non-compounded,<br>administered through<br>DME, unit dose form, per<br>300 mg            | 300 mg  | 1/1/2000  | NebuPent®   | pentamidine isethionate<br>inhalant (DME) for oral<br>inhalation only   | Indicated for the prevention of Pneumocystis jiroveci pneumonia (PJP) in high-risk, HIV-infected patients defined by one or both of<br>the following criteria:<br>• a history of one or more episodes of PJP<br>• a peripheral CD4+ (T4 helper/inducer) hymphocyte count less than or equal to 200/mm3   | 1   | 2   | 16 years   | N/A   | N/A  | Y   | ¥  | 8/24/2018   |
| J2547                   | Injection, peramivir, 1 mg   | 1 mg  | 1/1/2016  | Rapivab*  | peramivir injection, for<br>intravenous use   | Indicated for the treatment of acute uncomplicated influenza in patients 2 years and older who have been symptomatic for no more<br>than two days.<br>Limitations of Use:<br>• Efficacy based on clinical trials in which the predominant influenza virus type was influenza A; a limited number of subjects<br>infected with influenza B virus were enrolled.<br>• Consider available information on influenza drug susceptibility patterns and treatment effects when deciding whether to use.<br>• Efficacy toud not be established in patients with serious influenza requiring hospitalization.   | 600   | 600   | 2 years  | N/A   | N/A  | Y   | Ŷ  | 8/24/2018   |
| J2550                   | Injection, promethazine<br>HCl, up to 50 mg  | up to 50 mg   | 1/1/2000  | Phenergan   | promethazine hydrochloride<br>injection   | Indicated for the following conditions:<br>• Amelioration of allergic reactions to blood or plasma.<br>• In anaphylasis as an adjunct to epinephrine and other standard measures after the acute symptoms have been controlled.<br>• For other uncomplicated allergic conditions of the immediate type when oral therapy is impossible or contraindicated.<br>• For sedation and relief of apprehension and to produce light sleep from which the patient can be easily aroused.<br>• Active treatment of motion sidsness.<br>• Prevention and control of nausea and vomiting associated with certain types of anesthesia and surgery.<br>• As an adjunct to analgesics for the control of postoperative pain.<br>• Prevenerative, postoperative, and obstetric (during labor) sedation.<br>• Intravenously in special surgical stuations, such as repeated bronchoscopy, ophthalmic surgery, and poor-risk patients, with<br>reduced amounts of meperidine or other narcotic analgesic as an adjunct to anesthesia and analgesia.   | 3   | 93  | 2 years  | N/A   | N/A  | ¥   | ¥  | 8/24/2018   |
| J2560                   | Injection, phenobarbital<br>sodium, up to 120 mg   | up to 120 mg  | 1/1/2000  | N/A   | phenobarbital sodium<br>injection   | Indicated for use as:<br>• Sedative. Sedation is obtainable within an hour, and in adequate dosage, the duration of action is more than six hours. Included in<br>the more common conditions in which the sedative action of this class of drugs is desired are anxiety-tension states,<br>hyperthyroidism, seensial hypertension, nausea and wonking of functional origin, motion scheess, acte labayirinthitis, pylorospasm<br>in infants, chorea and cardiac failure. Phenobarbital is also a useful adjunct in treatment of hemorrhage from the respiratory or<br>gastrointestinal tract. Phenobarbital contols anxiety, decreases muscular activity and lessons nervous excitability in hyperthyroid<br>patients. However, thyrotoxic individuals occasionally react poorly to barbiturates.<br>• Hypnotic, for the bort-term treatment of insomnia, since it appears to lose its effectiveness for sleep induction and sleep<br>maintenance after 2 weeks.<br>• Preaenstetic.<br>• Long-term anticonvulsant, (phenobarbital, mephobarbital and metharbital) for the treatment of generalized twich status<br>spliepticus, cholera, eclampsia, cerebra hemorrhage, meningits, tetanus, and toxic reactions to strychnine or local anesthetics.<br>Phenobarbital solution may be administered intranucultry or intravenously as an anticonvulsant for emergency cuse. When<br>administered intravenously, it may require 15 or more minutes before reaching peak concentrations in the brain. Therefore,<br>injecting phenobarbital solution with the convulsions on may cause the brain level to exceed that required to control the<br>convulsions and lead to severe barbiturate-induced depression.<br>• Phenobarbital is lindicated in pediatric patients as an anticonvulsant and as a sedative, including its preoperative and<br>postoperative use.  | N/A   | N/A   | N/A  | N/A   | N/A  | ¥   | Y  | 8/29/2018   |
| J2562                   | Injection, plerixafor, 1 mg  | 1 mg  | 1/1/2010  | Mozobil®  | plerixafor injection, solution<br>for subcutaneous use  | Indicated in combination with granulocyte-colony stimulating factor (G-CSF) to mobilize hematopoletic stem cells (HSCs) to the<br>peripheral blood for collection and subsequent autologous transplantation in patients with non-Hodgkin's lymphoma and multiple<br>myeloma.   | 40  | 160   | 18 years   | N/A   | N/A  | Y   | Y  | 6/6/2019  |
| J2590                   | Injection, oxytocin, up to<br>10 units   | up to 10 units  | 1/1/2000  | Pitocin®  | oxytocin injection, USP<br>synthetic  | Indicated for:<br>- Antepartum<br>- The initiation or improvement of uterine contractions, where there is desirable and considered suitable for reasons of fetal or<br>maternal concern, in order to achieve vaginal delivery.<br>- Induction of labor in patients with a medical indication for the initiation of labor.<br>- Stimulation or reinforcement of labor, as in selected cases of uterine inertia.<br>- Adjunctive therapy in the management of incomplete or inevitable abortion.<br>- Portuntum  | 6   | 12  | N/A  | N/A   | Females Only   | Y   | Y  | 7/16/2018   |
|                         | J2550<br>J2550<br>J2560  | Image: | Image: | Image: Instant of the section ate, imbalation solution, FDA-approved final product, approved final product, non-compounded, DME, unit does form, per 300 mg     300 mg     1/1/2000       12547     Injection, peramivir, 1 mg     1 mg     1/1/2016       12550     Injection, peramivir, 1 mg     1 mg     1/1/2016       12550     Injection, promethazine HCI, up to 50 mg     1/1/2000       12560     Injection, promethazine HCI, up to 50 mg     1/1/2000       12560     Injection, phenobarbital Sodium, up to 120 mg     1/1/2000       12560     Injection, phenobarbital Sodium, up to 120 mg     1/1/2000       12562     Injection, plerixafor, 1 mg     1 mg     1/1/2010       12563     Injection, plerixafor, 1 mg     1 mg     1/1/2000 | Image: Instruction of the instruction solution, FDA-<br>approved final product,<br>approved final product,<br>DMC, uncompounded,<br>DMC, uncompounded,<br>DMC, unit does form, per<br>300 mg     300 mg     1/1/2000     NebuPent*       12547     Injection, peramivir, 1 mg     1 mg     1/1/2016     Rapivab*       12550     Injection, peramivir, 1 mg     1 mg     1/1/2000     Phenergan       12547     Injection, peramivir, 1 mg     1 mg     1/1/2000     Phenergan       12550     Injection, peramivir, 1 mg     1 mg     1/1/2000     Phenergan       12560     Injection, peramivir, 1 mg     up to 50 mg     1/1/2000     Phenergan       12560     Injection, peramivir, 1 mg     up to 50 mg     1/1/2000     N/A       12560     Injection, phenobarbital<br>sodium, up to 120 mg     1/1/2000     N/A       12560     Injection, pleinkafor, 1 mg     1 mg     1/1/2010     Mozobi# | 1254     Implementation solution, FDA-<br>approved final product,<br>approved final product,<br>solution, peramivir, 1 mg     300 mg     1/1/2000     NebuPent*     pertamidine isethionate<br>inhalatif (DME for oral<br>inhalatif (DME for oral<br>inhalatif (DME for oral<br>inhalatif (DME for oral<br>inhalatif (DME for oral<br>inhalation only       12547     Injection, peramivir, 1 mg     1 mg     1/1/2016     Rapivab*     peramivir injection, for<br>intravenous use       12548     Injection, peramivir, 1 mg     1 mg     1/1/2016     Rapivab*     peramivir injection, for<br>intravenous use       12549     Injection, peramivir, 1 mg     1 mg     1/1/2000     Phenergan     promethaline hydrochloride<br>injection       12550     Injection, peramivir, 1 mg     up to 50 mg     1/1/2000     Phenergan     promethaline hydrochloride<br>injection       12560     Injection, phenobarbital<br>sodium, up to 120 mg     1/1/2000     N/A     phenobarbital sodium<br>injection       12562     Injection, pleitoafor, 1 mg     1 mg     1/1/2000     Mozobi*     pleritoafor injection, solution<br>for subcutaneous use <td>Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<br/>10:00Liss<b< 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<b< td=""><td>1.138 gr1.138 g</td><td>Initial Subserve     Initial Subserve<td>Interaction       Interaction       Interaction</td><td>Instance       Instance       <th< td=""><td><math>(1) \cdot 2 \cdot 3 \cdot 4</math><math>(1) \cdot 2 \cdot 4 \cdot 4</math><math>(1) \cdot 2 \cdot 4 /math></td><td>(1, 1, 2, 4] <math>(1, 1, 2]</math> <math>(1, 2]</math></td><td>Integr     Integr     Integr</td></th<></td></td></b<> | 1.138 gr1.138 g | Initial Subserve     Initial Subserve <td>Interaction       Interaction       Interaction</td> <td>Instance       Instance       <th< td=""><td><math>(1) \cdot 2 \cdot 3 \cdot 4</math><math>(1) \cdot 2 \cdot 4 \cdot 4</math><math>(1) \cdot 2 \cdot 4 /math></td><td>(1, 1, 2, 4] <math>(1, 1, 2]</math> <math>(1, 2]</math></td><td>Integr     Integr     Integr</td></th<></td> | Interaction       Interaction | Instance       Instance <th< td=""><td><math>(1) \cdot 2 \cdot 3 \cdot 4</math><math>(1) \cdot 2 \cdot 4 \cdot 4</math><math>(1) \cdot 2 \cdot 4 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| Drugs               | J2597 | Injection, desmopressin<br>acetate, per 1 mcg   | 1 mcg             | 1/1/2000 | DDAVP®   | desmopressin acetate<br>injection   | Indicated for patients with hemophilia A with factor VIII coagulant activity levels greater than 5%, patients with mild to moderate<br>classic won Willebrand's disease (Type 1) with factor VIII levels greater than 5%, as a natidiuretic replacement therapy in the<br>management of central (crania) diseless insipuldus and for the management of the temporary polyurian ad polydipsia following<br>head trauma or surgery int he pituitary region. DDAVP is ineffective for the treatment of neptrogenic diabetes insipuldus.   | 44    | 660     | Indication Specific<br>(see comments) | N/A | N/A                       | Ŷ | Ŷ | Indication specific:<br>Hemophilia A and von<br>Willebrand's Disease: 3<br>months of age and older<br>Diabetes Insipidus: 12 years of<br>age and older |            |
|---------------------|-------|---|-------------------|----------|--|---|--|-------|---------|---------------------------------------|-----|---------------------------|---|---|--|------------|
| Drugs               | J2675 | Injection, progesterone,<br>per 50 mg   | per 50 mg         | 1/1/2003 | N/A  | progesterone injection, in<br>sesame oil for intramuscular<br>use only                  | Indicated in amenorrhea and abnormal uterine bleeding caused by hormonal imbalance in the absence of organic pathology, such<br>as submucous fibroids or uterine cancer.   | 1     | 2       | 18 years                              | N/A | Females Only              | Y | Y | up and order   | 6/6/2019   |
| Drugs               | J2680 | Injection, fluphenazine decanoate, up to 25 mg  | up to 25 mg       | 1/1/2000 | N/A  | fluphenazine decanoate<br>injection   | Intended for use in the management of patients requiring prolonged parenteral neuroleptic therapy (e.g. chronic schizophrenics).<br>Fluphenazine decanoate has not been shown effective in the management of behavioral complications in patients with mental<br>retardation.  | 4     | 8       | 12 years                              | N/A | N/A                       | Y | Y |  | 6/4/2019   |
| Drugs               | J2690 | Injection, procainamide<br>HCI, up to 1 g   | up to 1 g         | 1/1/2000 | N/A  | procainamide hydrochloride<br>injection, solution                                       | Indicated for the treatment of documented ventricular arrhythmias, such as sustained ventricular tachycardia, that, in the<br>judgement of the physician, are life-threatening. Because of the proarrhythmic effects of procainamide, its use with lesser<br>arrhythmias is generally not recommended. Treatment of patients with asymptomatic ventricular premature contractions should be<br>awnided   | 7     | 7       | 18 years                              | N/A | N/A                       | Y | Y |  | 6/6/2019   |
| Drugs               | J2700 | Injection, oxacillin<br>sodium, up to 250 mg  | up to 250 mg      | 1/1/2000 | N/A, various generics  | oxacillin sodium injection,<br>powder, for solution for<br>intramuscular or intravenous | anotecu-<br>Indicated for the treatment of infections caused by penicillinase-producing staphylococci which have demonstrated susceptibility to<br>the drug. Cultures and susceptibility tests should be performed initially to determine the causative organism and their susceptibility<br>to the drug.  | 24    | 744     | N/A                                   | N/A | N/A                       | Y | Y |  | 9/21/2018  |
| Drugs               | J2710 | Injection, neostigmine<br>methylsulfate, up to 0.5<br>mg                              | up to 0.5 mg      | 1/1/2000 | Bloxiverz®   | use<br>neostigmine methylsulfate<br>injection, for intravenous use                      | Indicated for the reversal of the effects of nondepolarizing neuromuscular blocking agents (NMBAs) after surgery.  | 10    | 50      | N/A                                   | N/A | N/A                       | Y | Y |  | 4/10/2019  |
| Drugs               | J2720 | Injection, protamine<br>sulfate, per 10 mg  | 10 mg             | 1/1/2000 | N/A  | protamine sulfate injection,<br>solution for intravenous use                            | Indicated for the treatment of heparin overdosage.   | 5     | 5       | 18 years                              | N/A | N/A                       | Y | Y |  | 8/29/2018  |
| Biologicals         | J2724 | Injection, protein C<br>concentrate, intravenous,<br>human, 10 IU                     | 10 IU             | 1/1/2008 | Ceprotin   | protein c concentrate<br>(human) lyophilized power<br>for solution for injection        | Indicated for pediatric and adult patients with severe congenital Protein C deficiency for the prevention and treatment of venous<br>thrombosis and purpura fulminans.   | 5,040 | 105,840 | N/A                                   | N/A | N/A                       | Y | Y |  | 6/4/2019   |
| Drugs               | J2730 | Injection, pralidoxime chloride, up to 1 g  | up to 1 g         | 1/1/2000 | Protopam®  | pralidoxime chloride for<br>injection   | Indicated as an antidote:<br>• In the treatment of poisoning caused by those pesticides and chemicals of the organophosphate class which have<br>anticholinesterase activity.<br>• In the control of overdosage by anticholinesterase drugs used in the treatment of myasthenia gravis.  | 4     | 20      | N/A                                   | N/A | N/A                       | Y | Y |  | 8/24/2018  |
| Drugs               | J2760 | Injection, phentolamine<br>mesylate, up to 5 mg                                       | up to 5 mg        | 1/1/2000 | Regitine <sup>®</sup>  | phentolamine mesylate<br>injection, powder,<br>lyophilized, for suspension              | Indicated for:<br>• The prevention or control of hypertensive episodes that may occur in a patient with pheochromocytoma as a result of stress or<br>manipulation during preoperative preparation and surgical excision.<br>• The prevention or treatment of dermal necrosis and sloughing following intravenous administration or extravasation of<br>norepinephrine.<br>• The diagnosis of pheochromocytoma by the phentolamine mesylate for injection blocking test.  | 12    | 372     | N/A                                   | N/A | N/A                       | Y | Ŷ |  | 8/24/2018  |
| Drugs               | J2765 | Injection,<br>metoclopramide HCI, up<br>to 10 mg                                      | up to 10 mg       | 1/1/2000 | N/A  | metoclopramide<br>hydrochloride injection   | Indicated for:<br>• The relief of symptoms associated with acute and recurrent diabetic gastric stasis<br>• The prophydasis of vomiting associated with emetogenic cancer chemotherapy<br>• The prophydasis of postoperative nausea and vomiting in those circumstances where nasogastric suction is undesirable<br>• Facilitating small bowel intubation in adults and pediatric patients in whom the tube does not pass the pylorus with conventions<br>maneuvers<br>• Stimulating gastric emptying and intestinal transit of barium in cases where delayed emptying interferes with radiological<br>examination of the stomach and/or small intestinal  | 112   | 560     | Indication Specific<br>(see comments) | N/A | N/A                       | Y | Y | Indication specific:<br>• Facilitating Small Bowel<br>Intubation: 18 years of age<br>and older<br>• All other indications: None                        | 6/6/2019   |
| Biologicals         | J2778 | Injection, ranibizumab,<br>0.1 mg   | 0.1 mg            | 1/1/2008 | Lucentis <sup>®</sup>  | ranibizumab injection for<br>intravitreal injection                                     | Indicated for the treatment of patients with:<br>• Neovascular (Wet) Age-Related Macular Degeneration (AMD)<br>• Macular Edema Following Retrainal Vein Occusion (RVO)<br>• Diabetic Macular Edema (DME)<br>• Diabetic Retinopathy (DR)<br>• Myopic Chronicial Neovascularization (mCNV)   | 10    | 20      | 18 years                              | N/A | N/A                       | Y | Ŷ |  | 10/31/2018 |
| Drugs               | J2780 | Injection, ranitidine<br>hydrochloride, 25 mg   | 25 mg             | 1/1/2000 | Zantac®  | ranitidine hydrochloride<br>injection   | Indicated in some hospitalized patients with pathological hypersecretory conditions or intractable duodenal ulcers, or as an<br>alternative to the oral dosage form for short-term use in patients who are unable to take oral medication.   | 16    | 496     | 1 month                               | N/A | N/A                       | Y | Y |  | 6/7/2019   |
| Biologicals         | J2783 | Injection, rasburicase, 0.5   | 0.5 mg            | 1/1/2004 | Elitek®  | rasburicase for injection, for<br>intravenous use                                       | Indicated for the initial management of plasma uric acid levels in pediatric and adult patients with leukemia, lymphoma, and solid tumor malimonacies, who are considered the case the case stars are considered to case the case of plasma uric.  | 56    | 280     | N/A                                   | N/A | N/A                       | Ŷ | Ŷ |  | 6/4/2019   |
| Biologicals         | J2786 | Injection, reslizumab, 1<br>mg  | 1 mg              | 1/1/2017 | Cinqair®   | reslizumab injection, for<br>intravenous use  | Lumitation of USE: Eiters is indicated for a single course of treatment.<br>Indicated for add-on maintenance treatment of patients with severe asthma aged 18 years and older, and with an eosinophilic<br>phenotype.<br>Limitations of Use: Cinqair is not indicated for:<br>• Treatment of other eosinophilic conditions.<br>Relief of actue tornchospasm or status asthmaticus.   | 420   | 840     | 18 years                              | N/A | N/A                       | Y | Y |  | 7/2/2018   |
| Immune<br>Globulins | J2788 | Injection, Rho d immune<br>globulin, human,<br>minidose, 50 micrograms<br>(250 IU)    | 50 mcg            | 1/1/2003 | HyperRHO® S/D<br>Mini Dose,<br>MICRhoGAM®,                     | rho(D) immune globulin<br>(human), mini dose  | HyperRHO S/D Mini Dose: recommended to prevent the isoimmunization of Rho(D) negative women at the time of spontaneous or<br>induced abortion of up to 12 week' gestation provided the following criteria are met:<br>1. The mother must be Rho(D) negative.<br>3. Gestation is not more than 12 weeks at termination.<br>**See package insert for ful usage criteria.**<br>MICRhoGAM: For use in preventing Rh immunization.<br>Pregnancy and ther bosterical conditions in Rh-negative women unless the father or baby are conclusively Rh-negative, e.g.<br>delivery of an Rh-positive baby irrespective of the ABO groups of the mother and baby, any antepartum fetal-maternal hemorrhage<br>(suppeted or proven), actual or threatened pregnancy loss at any stage of gestation and ectopic pregnancy.<br>* Prevention of Rh immunization in any Rh-negative person after incompatible transfusion of Rh-positive blood or blood products. | 1     | 1       | N/A                                   | N/A | HyperRHO:<br>Females Only | Y | Ŷ |  | 7/3/2018   |
| Immune<br>Globulins | J2790 | Injection, Rho d immune<br>globulin, human, full<br>dose, 300 micrograms<br>(1500 IU) | 300 mcg (1500 IU) | 1/1/2003 | HyperRho <sup>®</sup> S/D<br>Full Dose,<br>RhoGAM <sup>®</sup> | rho(d) immune globulin<br>(human), full dose  | Indicated for use in preventing Rh immunization:<br>• In pregnancy and other obstetrical conditions (see full prescribing information).<br>• In any Rh-negative person after incompatible transfusion of Rh-positive blood or blood products.  | 1     | 1       | N/A                                   | N/A | N/A                       | Y | Y |  | 7/3/2018   |

|                     |       |  |             | 1         |                       |  |  |       |       |   |  | 1 1          | 1 |   |   |           |
|---------------------|-------|--|-------------|-----------|-----------------------|--|--|-------|-------|---|--|--------------|---|---|---|-----------|
| Immune<br>Globulins | J2791 | Injection, Rho(D) immune<br>globulin (human),<br>(Rhophylac),<br>intramuscular or<br>intravenous, 100 IU | 100 IU      | 1/1/2008  | Rhophylac*            | rho(d) immune globulin<br>intravenous (human) 1500 IU<br>(300 mcg) solution for<br>intravenous (IV) or<br>Intramuscular (IM) injection | Indicated for:<br>Suppression of Rhesus (Rh) Isoimmunization in:<br>• Pregnancy and obstetric conditions in non-sensitized, Rho (D)-negative women with an Rh-incompatible pregnancy, including:<br>• Rhorpshylaxis in obstetric complications or invasive procedures<br>• Incompatible transfusions in Rho (D)-negative individuals transfused with blood components containing Rho (D)-positive red<br>blood cells (RBCs).<br>Immune Thrombocytopenic Purpura (ITP)<br>= Raising platedic counts in Rho (D)-positive, non-splenectomized adults with chronic ITP.  | 350   | 350   | 18 years                                  | N/A                                      | N/A          | Y | Y |   | 9/12/2018 |
| Immune<br>Globulins | J2792 | Injection, rho D immune<br>globulin, intravenous,<br>human, solvent<br>detergent, 100 IU                 | 100 IU      | 1/1/2000  | WinRho SDF®           | rho(D) immune globulin<br>intravenous (human) solution<br>for intravenous or<br>intramuscular injection                                | Indicated for:<br>Immune Thromboortopenic Purgura (ITP)<br>Raising platelet counts in Rho(D) positive, non-splenectomized:<br>• Children with chronic ITP and<br>• Children and adults with ITP secondary to HIV infection<br>Suppression of Rhesus (Rh) Isoimmunization<br>• Pregnancy and other obstetric conditions in non-sensitized, Rho(D)-negative women with an Rh-incompatible pregnancy<br>including:<br>0 Routine antepartum and postpartum Rh prophylaxis<br>0 Rh prophylaxis In obstetric complications or imaxive procedures<br>• Incompatible transfusions in Rho(D)-negative individuals transfused with blood components containing Rho(D)-positive red blood<br>cells (RBC3).  | 1,500 | 1,500 | N/A                                       | N/A                                      | N/A          | Y | Ŷ |   | 9/12/2018 |
| Biologicals         | J2793 | Injection, rilonacept, 1<br>mg   | 1 mg        | 1/1/2010  | Arcalyst <sup>®</sup> | rilonacept injection for<br>subcutaneous use   | Indicated for the treatment of patients with Cryopyrin-Associated Periodic Syndromes (CAPS), including Familial Cold<br>Autoinflammatory Syndrome (FACS) and Muckle-Wells Syndrome (MWS) in adults and children 12 years of age and older.   | 320   | 960   | 12 years                                  | N/A                                      | N/A          | Y | Y |   | 4/10/2019 |
| Biologicals         | J3111 | Injection, romosozumab-<br>aqqg, 1 mg  | 1 mg        | 10/1/2019 | Evenity™              | romosozumab-aqqg<br>injection, for subcutaneous<br>use   | Indicated for the treatment of osteoporosis in postmenopausal women at high risk for fracture, defined as a history of osteoporotic<br>fracture, or multiple risk factors for fracture; or patients who have failed or are intolerant to other available osteoporosis therapy.<br>Limitations of Use: Limit duration of use to 12 monthly doses. If osteoporosis therapy remains warranted, continued therapy with<br>an anti-resorptive agent should be considered  | 210   | 420   | Not for use in<br>premenopausal<br>women. | N/A                                      | Females Only | Y | Ŷ |   | 10/3/2019 |
| Drugs               | J2795 | Injection, ropivacaine<br>hydrochloride, 1 mg  | 1 mg        | 1/1/2001  | Naropin®              | ropivacaine HCl injection  | Indicated for the production of local or regional anesthesia for surgery and for acute pain management.<br>Surgical Anesthesia: epidural block for surgery including cesarean section; major nerve block; local infiltration.<br>Acute pain management: epidural continuous infivion or intermittent bolus, eg. postoperative or labor; local infiltration.  | 770   | 2,166 | 18 years                                  | N/A                                      | N/A          | Y | Y |   | 8/29/2018 |
| Drugs               | J2796 | Injection, romiplostim, 10<br>micrograms   | 10 mcg      | 1/1/2010  | Nplate*               | romiplostim for injection, for<br>subcutaneous use   | Indicated for the treatment of thrombocytopenia in:<br>• Adult patients with immune thrombocytopenia (ITP) who have had aninsufficient response to corticosteroids, immunoglobulins,<br>or splenectomy.<br>• Pediatric patients 1 year of age and older with ITP for at least 6 months who have had an insufficient response to corticosteroids,<br>immunoglobulins, or splenectomy.<br>Limitations of Use:<br>• Nplate is not indicated for the treatment of thrombocytopenia due to myelodysplastic syndrome (MDS) or any cause of<br>thrombocytopenia other than ITP.<br>• Nplate should be used only in patients with ITP whose degree of thrombocytopenia and clinical condition increases the risk for<br>bleeding.  | 140   | 700   | 1 year                                    | N/A                                      | N/A          | Y | Y |   | 12/3/2019 |
| Drugs               | J2797 | Injection, rolapitant, 0.5   | 0.5 mg      | 1/1/2019  | Varubi®               |  |  | 333   | 999   | 18 years                                  | N/A                                      | N/A          | Y | Y |   | 8/29/2018 |
| Drugs               | J2800 | mg<br>Injection,<br>methocarbamol, up to 10<br>mL  | up to 10 mL | 1/1/2000  | Robaxin®              | for intravenous use<br>methocarbamol injection for<br>intravenous or intramuscular<br>use  |  | 12    | 54    | Indication Specific<br>(see comments)     | N/A                                      | N/A          | Y | Y | Indication specific.<br>Relief of discomfort associated<br>with acute, painful,<br>musculoskeletal conditions: 18<br>years of age and older.<br>Tetanus: None   | 6/8/2019  |
| Drugs               | J2805 | Injection, sincalide, 5<br>micrograms  | 5 mcg       | 1/1/2006  | Kinevac <sup>®</sup>  | sincalide for injection  | Indicated for gallbladder contraction stimulation, pancreatic secretion stimulation, and barium meal transit time acceleration.  | 4     | 4     | 18 years                                  | N/A                                      | N/A          | Y | Y |   | 9/21/2018 |
| Biologicals         | J2820 | Injection, sargramostim<br>(GM-CSF), 50 mcg  | 50 mcg      | 1/1/2000  | Leukine*              | sargramostim injection, for<br>subcutaneous or intravenous<br>use  | Indicated:<br>• To shorten time to neutrophil recovery and to reduce the incidence of severe and life-threatening infections and infections<br>resulting in death following<br>induction chemotherary in adult patients 55 years and older with acute myeloid leukemia (AML).<br>• For the mobilization of hematopoietic progenitor cells into peripheral blood for collection by leukapheresis and autologous<br>transplantation in adult and pediatric patients 2 years of age and older.<br>• For the acceleration of myeloid reconstitution following autologous bone marrow or peripheral blood progenitor cell<br>transplantation in adult and pediatric patients 2 years of age and older.<br>• For the acceleration of myeloid reconstitution following allogeneic bone marrow transplantation in adult and pediatric patients 2<br>years of age and<br>older.<br>• For interativent 2 years of age and older.<br>• To increase survival in adult and pediatric patients from birth to 17 years of age acutely exposed to myelosuppressive doses of<br>radiation (Hematopoietic Syndrome of Acute Radiation Syndrome [H-ARS]). | 20    | 620   | Indication Specific<br>(see comments)     | Indication<br>Specific (see<br>comments) | N/A          | ¥ | Y | Inducation specific age<br>restrictions:<br>• To shorten time to<br>neutrophil recovery and to<br>reduce the incidence of severe<br>and life threathing infections<br>and infections resulting in<br>death following induction<br>chemotherapy in adult<br>patients 55 years and older<br>with acute myeloid leukemia<br>(AML).<br>• For the mobilization of<br>hematopoietic progenitor cells<br>into peripheral blood for<br>collection by leukapheresis<br>and autologous<br>transplantation in adults.<br>• For the acceleration of<br>myeloid reconstitution<br>in adult and pediatric patients<br>2 years of age and older.<br>• For the acceleration of<br>induced and pediatric patients<br>2 years of age and older. | 8/29/2018 |
|                     |       | Injection, sebelipase alfa,  |             |           |                       | sebelipase alfa injection, for   |  |       |       |   |  |              | 1 |   |   |           |

| 1           |       |  |              | 1 1      |                                     |  | Indicated for treatment of patients with multicentric Castleman's disease (MCD) who are human immunodeficiency virus (HIV)  |     | 1     | 1        |     |     | <u>т</u> т |   | ,          |
|-------------|-------|--|--------------|----------|-------------------------------------|--|---|-----|-------|----------|-----|-----|------------|---|------------|
| Biologicals | J2860 | Injection, siltuximab, 10<br>mg                                      | 10 mg        | 1/1/2016 | Sylvant®                            | siltuximab for injection, for<br>intravenous use                       | indicated of treatment of patients with multicentric Lasternan's disease (MCLJ) who are numain immunodenciency virus (HV)<br>negative and human herpsvirus?a (HHV-3) negative.<br>Limitations of Use: Sylvant was not studied in patients with MCD who are HIV positive or HHV-8 positive because Sylvant did not   | 200 | 400   | 18 years | N/A | N/A | Y          | Y | 6/7/2019   |
|             |       | Injection, sodium ferric   |              |          |                                     | sodium ferric gluconate  | bind to virally produced IL-6 in a non-clinical study.  |     |       |          |     |     |            |   |            |
| Drugs       | J2916 | gluconate complex in<br>sucrose injection, 12.5<br>mg                | 12.5 mg      | 1/1/2003 | Ferrlecit <sup>®</sup>              | complex in sucrose injection,<br>for intravenous (IV) use              | Indicated for the treatment of iron deficiency anemia in patients 6 years of age and older with chronic kidney disease receiving<br>hemodialysis who are receiving supplemental epoetin therapy.  | 10  | 80    | 6 years  | N/A | N/A | Y          | Y | 9/21/2018  |
| Drugs       | J2920 | Injection,<br>methylprednisolone<br>sodium succinate, up to<br>40 mg | up to 40 mg  | 1/1/2000 | Solu-Medrol®                        | methylprednisolone sodium<br>succinate for injection, up to<br>40 mg   | when or all netrapy is not reasonic, and the surging, obsige form, and rotice or administration or the orug reasonably rent or<br>perparation to the treatment of the condition, the intravenous or intravenous and intravenous or intrave | 3   | 93    | N/A      | N/A | N/A | Y          | Y | 10/26/2018 |
| Drugs       | J2930 | Injection,<br>methylprednisolone<br>sodium sucinate, up to<br>125 mg | up to 125 mg | 1/1/2000 | Solu-Medrol®                        | methylprednisolone sodium<br>succinate for injection, up to<br>125 mg  | when brit inhing y thor testandi, situ the strength, toggef form, and rouce un softmissuration or the diug feasonably entry the<br>perparation to the treatment of the condition, the intravenous or infrancesular used 50.00000000000000000000000000000000000  | 24  | 360   | N/A      | N/A | N/A | ¥          | Ą | 10/31/2018 |
| Biologicals | J2993 | Injection, reteplase, 18.1<br>mg                                     | 18.1 mg      | 1/1/2002 | Retavase <sup>®</sup>               | reteplase for injection, for<br>intravenous use                        | Indicated for treatment of acute ST-elevation myocardial infarction (STEMI) to reduce the risk of death and heart failure.<br>Limitation of Use: The risk of stroke may outweigh the benefit produced by thrombolytic therapy in patients whose STEMI puts<br>them at low risk for death or heart failure.  | 2   | 2     | 18 years | N/A | N/A | Y          | Y | 10/31/2018 |
| Drugs       | J2997 | Injection, alteplase<br>recombinant, 1 mg                            | 1 mg         | 1/1/2001 | Activase®,<br>Cathflo®<br>Activase® | alteplase for injection, for<br>intravenous use                        | Cathflo Activase: Indicated for the restoration of function to central venous access devices as assessed by the ability to withdraw<br>blood.<br>Activase: Indicated for the treatment of:<br>• Acute Ischemic Stroke (AIS)<br>• Acute Myocardial Infarction (AIM) to reduce mortality and incidence of heart failure. Limitation of use in AMI: The risk of stroke<br>may be greater than the benefit in patients at low risk of death from cardiac causes.<br>• Acute Myocardial Infarction (File Ministry Processon)   | 100 | 3,100 | 18 years | N/A | N/A | ¥          | ¥ | 9/25/2018  |
| Drugs       | 13000 | Injection, streptomycin,<br>up to 1 gram                             | up to 1 g    | 1/1/2000 | N/A                                 | streptomycin for injection for<br>intramuscular use                    | Indicated for the treatment of individuals with moderate to severe infections caused by susceptible strains of microorganisms in the<br>specific conditions of Mycobacterium tuberculosis and Non-tuberculosis infections: Mycobacterium tuberculosis, and other<br>sensitive non tuberculosis pathogens including Pasteurella pastis [plaque]; Francibal tubarensis [tularemis]; Bircuela;<br>Calymmatobacterium granulomatis (donovanosis, granuloma inguinale); H. ducreyi (chancroid); H. Influenzae (in respiratory,<br>endocardia], and meningea infections, concomitantly with another antibacterial agent]; F. pneumoniae penumonia (concomitantly<br>with another antibacterial agent); E. coli, Proteus, A. aerogenes, K. pneumoniae, and Enterococcus facacilis in urinary tract<br>infections; Strendoccus virians; Interococcus facacilis (in endocardial infections, concomitantly with penicillin); Gram-negative<br>bacillary bacteremia (concomitantly with another antibacterial agent).  | 2   | 62    | N/A      | N/A | N/A | Y          | Y | 6/7/2019   |
| Drugs       | J3010 | Injection, fentanyl citrate,<br>0.1 mg                               | 0.1 mg       | 1/1/2000 | N/A                                 | fentanyl citrate injection, for<br>intravenous or intramuscular<br>use | Indicated for:<br>analgesic action of short duration during the anesthetic periods, premedication, induction and maintenance, and in the<br>immediate postoperative period (recovery room) as the need arises.<br>use as an optioid analgesic supplement in general or regional anesthesia.<br>administration with a neuroleptic as an anesthetic premedication, for the induction of anesthesia and as an adjunct in the<br>maintenance of general and regional anesthesia.<br>• use as an anesthetic agent with oxygen in selected high risk patients, such as those undergoing open heart surgery or certain<br>complicated neurological or orthopedic procedures.   | 210 | 210   | 2 years  | N/A | N/A | Y          | Y | 6/4/2019   |

| Drugs       | J3030 | Injection, sumatriptan,<br>succinate, 6 mg                          | 6 mg         | 1/1/2000 | lmitrex <sup>®</sup> | sumatriptan succinate<br>injection, for subcutaneous<br>use    | Indicated for:<br>• Acute treatment of migraine with or without aura in adults<br>• Acute treatment of cluster headache in adults<br>Umitations of Use:<br>Use only if a clear diagnosis of migraine or cluster headache has been established. Not indicated for the prophylactic therapy of<br>migraine or cluster headache atacks.   | 2   | 8     | 18 years | N/A | N/A        | Ŷ | Ŷ | 9/21/2018 |
|-------------|-------|---|--------------|----------|----------------------|--|--|-----|-------|----------|-----|------------|---|---|-----------|
| Biologicals | J3060 | Injection, taliglucerase<br>alfa, 10 units                          | 10 units     | 1/1/2014 | Elelyso®             | taliglucerase alfa for<br>injection, for intravenous use       | Indicated for the treatment of patients with a confirmed diagnosis of Type 1 Gaucher disease.  | 840 | 2,520 | 4 years  | N/A | N/A        | Y | Y | 6/4/2019  |
| Drugs       | J3090 | Injection, tedizolid phosphate, 1 mg                                | 1 mg         | 1/1/2016 | Sivextro®            | tedizolid phosphate for<br>injection, for intravenous use      | Indicated in adults for the treatment of acute bacterial skin and skin structure infections (ABSSSI) caused by designated susceptible bacteria.  | 200 | 1,200 | 18 years | N/A | N/A        | Y | Y | 8/24/2018 |
| Drugs       | 13095 | Injection, telavancin, 10<br>mg                                     | 10 mg        | 1/1/2011 | Vibativ®             | telavancin for injection, for intravenous use                  | Indicated for the treatment of the following infections in adult patients caused by designated susceptible bacteria:<br>• Complicated skin and skin structure infections (SSSI)<br>• Hospital-acquired and ventilator-associated bacterial pneumonia (HABP/VABP) caused by susceptible isolates of Staphylococcus<br>aureus. Vibativ should be reserved for use when alternative treatments are not suitable.  | 150 | 3,150 | 18 years | N/A | N/A        | Y | Y | 6/8/2019  |
| Drugs       | J3105 | Injection, terbutaline<br>sulfate, up to 1 mg                       | up to 1 mg   | 1/1/2000 | N/A                  | terbutaline sulfate injection,<br>solution                     | Indicated for the prevention and reversal of bronchospasm in patients 12 years of age and older with asthma and reversible<br>bronchospasm associated with bronchitis and emphysema.   | 3   | 45    | 12 years | N/A | N/A        | Y | Y | 9/12/2018 |
| Drugs       | J3121 | Injection, testosterone<br>enanthate, 1 mg                          | 1 mg         | 1/1/2015 | N/A                  | testosterone enanthate<br>injection, solution                  | Indicated for replacement therapy in conditions associated with a deficiency or absence of endogenous testosterone including<br>primary hypogenadism (congenital or acquired), hypogenadotropic hypogenadism (congenital or acquired), and delayed puberty.<br>Testosterone Enanthate injection may be used secondarily in women with advancing inoperable metastatic (skeletal) mammary<br>cancer who are 1 - 5 years postmenopausal.   | 400 | 1,200 | N/A      | N/A | N/A        | Y | Y | 9/12/2018 |
| Drugs       | J3145 | Injection, testosterone<br>undecanoate, 1mg                         | 1 mg         | 1/1/2015 | Aveed*               | testosterone undecanoate<br>injection for intramuscular<br>use | Indicated for testosterone replacement therapy in adult males for conditions associated with a deficiency or absence of endogenous<br>testosterone:<br>primary hypogonadism (congenital or acquired) or hypogonadotropic hypogonadism (congenital or acquired).<br>Umitations of Use:<br>• Safety and efficacy of Aveed in men with "age-related hypogonadism" have not been established.<br>• Safety and efficacy of Aveed in males less than 18 years old have not been established.   | 750 | 1,500 | 18 years | N/A | Males Only | Ŷ | Ŷ | 9/21/2018 |
| Drugs       | J3230 | Injection, chlorpromazine<br>HCl, up to 50 mg                       | 50 mg        | 1/1/2000 | N/A                  | chlorpromazine<br>hydrochloride injection                      | Indicated for the treatment of schizophrenia; to control nausea and vomiting; for relief of restlessness and apprehension before<br>surgery, for acute intermittent porphyria; as an adjunct in the treatment of tetanus; to control the manifestations of the manis type<br>of manic-depressive illness; for relief of intractable hiccups; for the treatment of severe behavioral problems in children (1 to 12<br>waars of age) marked by combativeness and/or explosive hyperexcitable behavior (out of proportion to immediate provocations),<br>and in the short-term treatment of hyperactive children who show excessive motor activity with accompanying conduct disorders<br>consisting of some or all of the following symptoms: impulsivity, difficulty sustaining attention, aggressivity, mod lability, and poor<br>frustration tolerance.   | 8   | 248   | 6 months | N/A | N/A        | Y | Y | 9/27/2018 |
| Drugs       | J3240 | Injection, thyrotropin<br>alpha, 0.9 mg, provided<br>in 1.1 mg vial | 0.9 mg       | 1/1/2003 | Thyrogen®            | thyrotropin alfa for injection,<br>for intramuscular injection | Indicated for:<br>• Diagnostic: Use as an adjunctive diagnostic tool for serum thyroglobulin (Tg) testing with or without radioiodine imaging in the<br>follow-up of<br>setients with well-differentiated thyroid cancer who have previously undergone thyroidectomy.<br>• Ablation: Use as an adjunctive treatment for radioiodine ablation of thyroid tissue remnants in patients who have undergone a<br>near-total or total<br>thyroidectomy for well-differentiated thyroid cancer and who do not have evidence of distant metastatic thyroid cancer.<br>Limitations of Use:<br>• Diagnostic:<br>• Thyrogen-stimulated Tg levels are generally lower than, and do not correlate with Tg levels after thyroid hormone withdrawal.<br>• Even when Thyrogen-Tg testing is performed in combination with radioidnie imaging , there remains a risk of missing a diagnosis<br>of thyroid<br>cancer or underestimating the extent of the disease.<br>• Ahl: Tg Antholdes may confound the Tg assay and render Tg levels uninterpretable.<br>• Ablation:<br>• The effect of Thyrogen on long term thyroid cancer outcomes has not been determined. | 1   | 2     | 18 years | N/A | N/A        | ¥ | ¥ | 9/21/2018 |
| Drugs       | J3243 | Injection, tigecycline, 1<br>mg                                     | 1 mg         | 1/1/2007 | Tygacil®             | tigecycline for injection, for<br>intravenous use              | Indicated in patients 18 years of age and older for:<br>• Complicated sin and sins structure infections<br>• Complicated sins abominal infections<br>• Community-acquired bacterial pneumonia<br>Umitations of Use: Tygaci is not indicated for treatment of diabetic foot infection or hospital-acquired pneumonia, including<br>ventilator-ascouted on pneumonia.  | 150 | 1,450 | 18 years | N/A | N/A        | Y | Y | 9/21/2018 |
| Drugs       | J3250 | Injection,<br>trimethobenzamide HCI,                                | up to 200 mg | 1/1/2000 | Tigan®               | trimethobenzamide<br>hydrochloride                             | Indicated for the treatment of postoperative nausea and vomiting and for nausea associated with gastroenteritis.   | 4   | 124   | 18 years | N/A | N/A        | Y | Y | 9/12/2018 |
| Drugs       | J3260 | up to 200 mg<br>Injection, tobramycin<br>sulfate, up to 80 mg       | up to 80 mg  | 1/1/2000 | N/A                  | tobramycin sulfate injection                                   | Indicated for the treatment of serious bacterial infections caused by susceptible strains of the designated microorganisms in the<br>diseases listed below:<br>• Septicemia in the neonate, child, and adult caused by P. aeruginosa, E. coli, and Klebsiella sp.<br>• Lower regristroty tract infections caused by P. aeruginosa, Klebsiella sp. Enterobacter sp. Serratia sp. E. coli, and S. aureus<br>(pencillinase and non-pencillinase producing strains)<br>• Serious central nervous system infections (meningitis) (caused by susceptible organisms<br>• Intra-abdomian Infections, incluing peritonitis, caused by F. coli, Klebsiella sp, and Enterobacter sp<br>• Intra-abdomian Infections, incluing peritonitis, caused by F. coli, Klebsiella sp, and Enterobacter sp.<br>• Skin, bone, and skin-structure infections caused by P. aeruginosa, Proteus sp, E. coli, Klebsiella sp, Enterobacter sp, and S. aureus   | 18  | 558   | N/A      | N/A | N/A        | Y | Ŷ | 9/12/2018 |

| Biologicals | J3262 | Injection, tocilizumab, 1<br>mg   | img     | 1/1/2011 | Actemra®                                    | tocilizumab injection, for<br>intravenous use  | Indicated for the treatment of:<br>• Adult patients with moderately to severely active rheumatoid arthritis (RA) who have had an inadequate response to one or more<br>Disease-Modifying Anti-Rheumatic Drugs (DMARDs).<br>• Active systemic yournel idiopathic arthritis in patients two years of age and older.<br>• Active polyarticular juvenile idiopathic arthritis in patients two years of age and older.<br>• Adult and pediritir patients 2 years of age and older with chimeric antigen receptor (CAR) T cell-induced severe or life-<br>threatening cytokine release syndrome.   | 2,400 | 3,200 | Indication Specific<br>(see comments) | N/A | N/A        | ¥ | ¥ | Indication specific age<br>restrictions:<br>• Active systemic juvenile<br>idiopathic arthritis: 2 years of<br>age and older<br>• Active polyarizotical juvenile<br>idiopathic arthritis: 2 years of<br>age and older<br>• Severe or life-threatening<br>CART cell-induced cytokine<br>release syndrome: 2 years of<br>age and older<br>• Moderately to severely<br>active rheumatoid arthritis<br>who have had an inadequate<br>response to one or more<br>DMARDS: 18 years of age and<br>older | 4/9/2019  |
|-------------|-------|---|---------|----------|---|--|--|-------|-------|---------------------------------------|-----|------------|---|---|---|-----------|
| Drugs       | J3285 | Injection, treprostinil, 1<br>mg  | 1 mg    | 1/1/2006 | Remodulin*                                  | treprostinil injection, for<br>subcutaneous or intravenous<br>use                                | Indicated for treatment of pulmonary arterial hypertension (PAH) (WHO Group 1) to diminish symptoms associated with exercise<br>and to reduce the rate of clinical deterioration in patients requiring transition from epoprostenol.   | 59    | 1,813 | 17 years                              | N/A | N/A        | Y | Y |   | 5/14/2019 |
| Drugs       | J3300 | Injection, triamcinolone<br>acetonide, preservative<br>free, 1 mg   | 1 mg    | 1/1/2009 | Triesence®                                  | triamcinolone acetonide<br>injectable suspension   | Indicated for:<br>• Treatment of the following ophthalmic diseases: sympathetic ophthalmia, temporal arteritis, uveitis, and ocular inflammatory<br>conditions unresponsive to topical corticosteroids.<br>• Visualization during vitrectomy   | 8     | 8     | N/A                                   | N/A | N/A        | Y | Y |   | 6/7/2019  |
| Drugs       | J3301 | Injection, triamcinolone<br>acetonide, Not Otherwise<br>Specified, per 10 mg  | 10 mg   | 1/1/2000 | Kenalog-10*,<br>Kenalog-40*                 |  | <ul> <li>Kenange 40</li> <li>Indicated for intramuscular use as follows:</li> <li>Allergic states: Control of severe or incapacitating allergic conditions intractable to adequate trials of conventional treatment in asthma, atopic dematilis, contrad dematilis, general hypersensitivity reactions, perennial or seasonal allergic rhinitis, serum sickness, translusion reactions.</li> <li>Dematologic diseases: Bullous dematitis herpetformis, exfoliative erythroderma, mycosis fungoides, pemphigus, severe erythema multiforme (Stevens-Johnson syndrome).</li> <li>Endocrine discoders: Primary or scondary adrenocortical insufficiency (hydrocortisone or cortisone is the drug of choice; synthetic analogs may be used in conjunction with mineralocorticoids where applicable; in infancy, mineralocorticoid supplementation is of particular inportance), congenital adrenal hyperplasia, hypercalcemia associated with cancer, nonsuppurative thyroiditis.</li> <li>Hernatologic disorders: Acquired daucimmuch hemolytic anemia, Diamond-Blackfan anemia, pure red cell aplasia, selected cases of secondary thromosorpopenia.</li> <li>Miscellaneous: Trichhoosis with neurologic or myocardial involvement, tuberculous meningitis with subarachnoid block or impending block when used with appropriate antituberculous chemotherapp.</li> <li>Neoplast Casease: Sorp apaliative management of leukemias and lymphonas.</li> <li>Reventable: Trichhoosis or mession of proteinuria in diopathic nephrotic syndrome or that due to lopus erythematorus.</li> <li>Ophthalmic disease: Sriphathetic ophthalmia, temporal arteritis, uveitis, and ocular inflammatory conditions unresponsive to topical corticoteroids.</li> <li>Renal disease: Servidiosis, climinating or diseminated pulmonary tuberculosis when used concurrently with appropriate antituberculos syndrom or that due to lopus erythematoxus.</li> <li>Reprintatory disease: Servidiosis, camoinghilic pneumonias, symptomatic sarcoidosis.</li> <li>Renal disease: Singliosis, fu</li></ul> | 10    | 150   | N/A                                   | N/A | N/A        | ¥ | ¥ |   | 9/12/2018 |
| Drugs       | J3304 | Injection, triamcinolone<br>acetonide, preservative-<br>free, extended-release,<br>microsphere formulation,<br>1 mg | 1 mg    | 1/1/2019 | Zilretta™                                   | triamcinolone acetonide<br>extended-release injectable<br>suspension, for intra-articular<br>use | Indicated as an intra-articular injection for the management of osteoarthritis pain of the knee.<br>Limitation of Use: Zilretta is not intended for repeat administration.   | 64    | 64    | 18 years                              | N/A | N/A        | Y | Y |   | 9/12/2018 |
| Drugs       | J3315 | Injection, triptorelin<br>pamoate, 3.75 mg  | 3.75 mg | 1/1/2003 | Trelstar®                                   | triptorelin pamoate for<br>injectable suspension   | Indicated for the palliative treatment of advanced prostate cancer.  | 6     | 6     | 18 years                              | N/A | Males Only | Y | Y |   | 9/12/2018 |
| Drugs       | J3316 | Injection, triptorelin,<br>extended-release, 3.75<br>mg   | 3.75 mg | 1/1/2019 | Triptodur™                                  | triptorelin for extended-<br>release injectable<br>suspension, for intramuscular<br>use          | Indicated for the treatment of pediatric patients 2 years and older with central precocious puberty.   | 6     | 6     | 2 years                               | N/A | N/A        | Y | Y |   | 9/12/2018 |
| Biologicals | J3357 | Ustekinumab, for<br>subcutaneous injection, 1<br>mg   | 1 mg    | 1/1/2017 | Stelara® for<br>subcutaneous<br>use         | ustekinumab injection, for<br>subcutaneous use   | Indicated for the treatment of:<br>Adult patients with:<br>Moderate to severe plaque psoriasis (Ps) who are candidates for phototherapy or systemic therapy<br>• Active psoriatic arthritis (PsA), alone or in combination with methotrexate<br>• Moderately to severely active (Cohris' disease (CD)<br>• Moderately to severely active (Carative colitis<br>Adolescent patients (12 years or older) with:<br>• Moderate to severe plaque psoriasis, who are candidates for phototherapy or systemic therapy.   | 90    | 180   | Indication Specific<br>(see comments) | N/A | N/A        | Y | Ŷ | Indication specific age<br>restrictions.<br>Moderate to severe plaque<br>psoriasis, who are candidates<br>for phototherapy or systemic<br>therapy: 12 years of age and<br>older<br>•All other indications: 18 years<br>of age and older   | 12/3/2019 |
| Biologicals | J3358 | Ustekinumab, for<br>intravenous injection, 1<br>mg  | 1 mg    | 1/1/2018 | Stelara <sup>®</sup> for<br>intravenous use | ustekinumab injection, for<br>intravenous use  | Indicated for the treatment of adult patients with:<br>• Moderately to severely actic Control sitesase (CD)<br>• Moderately to severely active ucerative collisis  | 520   | 520   | 18 years                              | N/A | N/A        | Y | Y |   | 12/3/2019 |

| Drugs       | J3360          | Injection, diazepam, up to<br>5 mg         | up to 5 mg      | 1/1/2000 | N/A       | diazepam injection  | Indizated:<br>For the management of anxiety disorders or for the short-term relief of the symptoms of anxiety. Anxiety or tension associated<br>with the stress of everyday life usually does not require treatment with an anxiolytic.<br>• In acute alcohol withdrawal, diazepam may be useful in the symptomatic relief of acute agitation, tremor, impending or acute<br>deliminm termes and halucinosis.<br>• As an adjunct prior to endoscopic procedures if apprehension, anxiety or acute stress reactions are present, and to diminish the<br>patient's recall of the procedures.<br>• As a useful adjunct for the relief of skeletal muscle spasm due to reflex spasm to local pathology (such as inflammation of the<br>muscles or joints, or secondary to trauma); spasticity caused by upper motor neuron disorders (such as crebral palsy and<br>paralegia); athetosis, stiff-man syndrome; and tetanus.<br>• As a useful adjunct in status epilepticus and severe recurrent convulsive seizures.<br>• As a useful adjunct in status epilepticus and severe recurrent convulsive asitures.<br>• As a useful adjunct in status epilepticus and severe recurrent convulsive asitures.<br>• As a useful adjunct in status epilepticus and severe necurrent convulsive asitures.  | 16  | 250   | 31 days  | N/A | N/A | Y | ¥ | 10/10/2018 |
|-------------|----------------|--|-----------------|----------|-----------|---|---|-----|-------|----------|-----|-----|---|---|------------|
| Drugs       | J3370          | Injection, vancomycin<br>HCI, 500 mg       | 500 mg          | 1/1/2000 | N/A       | vancomycin hydrochloride<br>for injection, USP for<br>intravenous use | Indicated for the treatment of serious or severe infections caused by susceptible strains of methicillin-resistant (8-lactam-resistant)<br>staphylococci. It is indicated for penicillin-altergic patients, for patients who canon receive or who have failed to respond to other<br>drugs, including the penicillins or cephalosporins, and for infection is indicated by vancomycin-susceptible organisms that are resistant<br>to other antimicrobial drugs. Vancomycin hydrochloride for injection is indicated for inhital therapy when methicillin-resistant<br>staphylococci are suspected, but after susceptibility data are available, therapy hould be adjusted accordingly.<br>To reduce the development of drug-resistant bacteria and maintain the effectiveness of vancomycin hydrochloride for injection USP<br>and other antibacterial drugs, vancomycin hydrochloride for injection should be used only to treat or prevent infections are available, they<br>should be considered in selecting or modifying antibacterial therapy. The absence of such data, local epidemiology and<br>susceptibility patterns may contribute to the empiric selection of therapy.<br>See package insert for list of infections.  | 4   | 124   | N/A      | N/A | N/A | Y | v | 6/8/2019   |
| Biologicals | J3380          | Injection, vedolizumab, 1<br>mg            | 1 mg            | 1/1/2016 | Entyvio®  | vedolizumab for injection, for<br>intravenous use                     | Indicated for:<br>• Adult patients with moderately to severely active ulcerative colitis (UC) who have had an inadequate response with, lost response<br>to, or were inolerant to a tumor necrosis factor (TMF) blocker or immunomodulators; or had an inadequate response with, were<br>intolerant to, or demonstrated dependence on corticosteroids:<br>o Induring and maintaining clinical remoission<br>o Induroing and maintaining clinical remoission<br>o Induroing and maintaining clinical remoission<br>o Adult patients with moderately to severely active crohn's disease (CD) who have had an inadequate response with, lost response<br>to, or were intolerant to a TNF blocker or immunomodulators; or had an inadequate response with, lost response<br>to, or were intolerant to a TNF blocker or immunomodulators; or had an inadequate response with, were intolerant to, or<br>demonstrated dependence on corticosteroids:<br>o Achieving clinical response<br>o Achieving clinical response<br>o Achieving clinical response   | 300 | 600   | 18 years | N/A | N/A | ¥ | Y | 7/16/2018  |
| Biologicals | J3385          | Injection, velaglucerase alfa, 100 units   | 100 units       | 1/1/2011 | VPRIV®    | velaglucerase alfa for<br>injection, for intravenous use              | Indicated for long-term enzyme replacement therapy (ERT) for patients with type 1 Gaucher disease.  | 84  | 252   | 4 years  | N/A | N/A | Y | Y | 6/8/2019   |
| Drugs       | J3396          | Injection, verteporfin, 0.1 mg             | 0.1 mg          | 1/1/2005 | Visudyne® | verteporfin for injection, for intravenous use                        | Indicated for the treatment of patients with predominantly classic subfoveal choroidal neovascularization due to age-related<br>macular degeneration, pathologic myopia or presumed ocular histoplasmosis.  | 150 | 150   | 18 years | N/A | N/A | Y | Y | 9/12/2018  |
| Biologicals | J3397          | Injection, vestronidase                    | 1 mg            | 1/1/2019 | Mepsevii™ | vestronidase alfa-vjbk  | Indicated in pediatric and adult patients for the treatment of Mucopolysaccharidosis VII (MPS VII, Sly syndrome).   | 560 | 1,680 | N/A      | N/A | N/A | Y | Y | 7/16/2018  |
| Drugs       | J3410          | Injection, hydroxyzine<br>HCl, up to 25 mg | up to 25 mg     | 1/1/2000 | Vistaril® | hydroxyzine hydrochloride<br>injection for intramuscular<br>use       | • The total management of anxiety, tension, and psychomotor agitation in conditions of emotional stress requires in most instances a combined approach of psychotherapy and chemotherapy. Hydroxynic has been found to be particularly useful for this latter plase of therapy in its ability to render the disturbed patient more amenable to psychotherapy in long term treatment of the psychotherapy in long term treatment of the psychotherapy in alcong term treatment of the save of therapy in alcong term instances are useful in alleviating the manifestations of anxiety and tension as in the preparation for dental procedures and in acute emotional problems. It has also been recommended for the management of anxiety associated with organic disturbances and as adjunctive therapy in alcoholism and allergic conditions with strong emotional overlay, such as in asthma, chronic urticaria, and pruritus. • Hydroxynine hydrocholride intramuscular solution is useful in treating the following types of patients when intramuscular administrations in indicated: • The acute of chronic alcoholic with anxiety withdrawal symptoms or delirium tremes. • As ore-and postoperative and pre- and postpartum adjunctive medication to permit reduction in narcotic dosage, allay anxiety and control emesis. • Hydroxynine hydrocholride has also demonstrated effectiveness in controlling nausea and vomiting, excluding nausea and vomiting of pregnancy. • Hydroxynine hydrocholride has also demonstrated effectiveness in controlling nausea and womiting excluding nausea and vomiting of pregnancy. | 24  | 240   | N/A      | N/A | N/A | ¥ | v | 10/26/2018 |
|             |                | Injection, vitamin B-12                    |                 |          | N/A       | cyanocobalamin injection,<br>USP (vitamin 8-12)                       | Indicated for vitamin B12 deficiencies due to malabsorption which may be associated with the following conditions:<br>• Addisonian (perruicious) anemia<br>• Gastrointestinal pathology, dysfunction, or surgery, including gluten enteropathy or sprue, small bowel bacteria overgrowth, total<br>or partial gastrectomy<br>• Fish tapeworm infestation<br>• Malignancy of parcreas or bowel   | 1   | 10    | N/A      | N/A | N/A | Y | Y | 9/27/2018  |
| Drugs       | J3420          | cyanocobalamin, up to<br>1,000 mcg         | up to 1,000 mcg | 1/1/2000 |           |   | Folic acid deficiency Cyanocobalamin injection is also suitable for the vitamin B12 absorption test (Schilling test).   |     |       |          |     |     |   |   |            |
| Drugs       | J3420<br>J3430 | cyanocobalamin, up to                      | up to 1,000 mcg | 1/1/2000 | Mephyton* | phytonadione injectable<br>emulsion, USP                              | Folic acid deficiency   | 50  | 50    | N/A      | N/A | N/A | Y | v | 6/5/2019   |

| ·           |       |  |                            |           |                                   | T.  |  |       |         |          |     |     |   |   |            |
|-------------|-------|--|----------------------------|-----------|-----------------------------------|---|--|-------|---------|----------|-----|-----|---|---|------------|
| Drugs       | J3473 | Injection, hyaluronidase,<br>recombinant, 1 USP unit             | 1 USP unit                 | 1/1/2007  | Hylenex®                          | hyaluronidase human<br>injection, for infiltration use,<br>for interstitial use, for<br>intramuscular use, for<br>intraocular use, for<br>peribulbar use, for soft tissue | Indicated as an:<br>• Adjuvant to increase the dispersion and absorption of other injected drugs.<br>• In subcutaneous Bluid administration for achieving hydration.<br>• In subcutaneous urography for improving resorption of radiopaque agents.   | 450   | 2,250   | N/A      | N/A | N/A | Y | Ŷ | 6/4/2019   |
| Drugs       | J3475 | Injection, magnesium<br>sulfate, per 500 mg                      | 500 mg                     | 1/1/2000  | N/A                               | magnesium sulfate injection   | Indicated for replacement therapy in magnesium deficiency, especially in acute hypomagnesemia accompanied by signs of tetany<br>similar to those observed in hypocalcemia. In such cases, the serum magnesium level is usually below the lower limit of normal (1.5<br>to 2.5 mGr/11 and the serum calcium level is normal (4.3 to 5.3 mGr/10 or elevated. Manesium sulfate interiorin is also indicated for   | 80    | 560     | N/A      | N/A | N/A | Y | Y | 6/5/2019   |
| Drugs       | J3480 | Injection, potassium<br>chloride, per 2 mEq                      | 2 mEq                      | 1/1/2000  | N/A                               | potassium chloride injection  | Indicated for the treatment or prevention of hypokalemia when oral treatment is not feasible.  | 200   | 1,240   | N/A      | N/A | N/A | Y | Y | 8/24/2018  |
| Drugs       | J3489 | Injection, zoledronic acid,<br>1 mg                              | 1 mg                       | 1/1/2014  | Reclast®;<br>Zometa®              | zoledronic acid injection, for<br>intravenous use   | Reclast is indicated for:<br>• Treatment in circrease bone mass in men with osteoporosis<br>• Treatment in circrease bone mass in men with osteoporosis<br>• Treatment and prevention of glucocorticoid-induced osteoporosis<br>• Treatment of Pager's disease of bone in men and women<br>Limitations of Use: Optimal duration of use has not been determined. For patients at low-risk for fracture, consider drug<br>discontinuation after 3 to 5 years of use.<br>Zometa is indicated for the treatment of:<br>• Hypercalcemia of malignancy.<br>• Patients with multiple myeloma and patients with documented bone metastases from solid tumors, in conjunction with standard<br>antineoplastic therapy. Prostate cancer should have progressed after treatment with at least one hormonal therapy.<br>Limitations of Use: The safety and efficacy of Zometa has not been established for use in hyperparathyroidism or non-tumor-related<br>hypercalcemia.   | 5     | 20      | 18 years | N/A | N/A | Y | Y | 9/21/2018  |
| Drugs       | J3490 | Unclassified drugs   | 1 mg                       | 1/1/2000  | Depacon <sup>®</sup>              | valproate sodium, for<br>intravenous injection  | Indicated as an intravenous alternative in patients in whom oral administration of valproate products is temporarily not feasible in the following conditions:   | 8,500 | 119,000 | 2 years  | N/A | N/A | Y | Y | 5/30/2019  |
| Drugs       | J1096 | Dexamethasone, lacrimal ophthalmic insert, 0.1 mg                | 0.1 mg                     | 10/1/2019 | Dextenza®                         | dexamethasone ophthalmic<br>insert 0.4 mg, for<br>intracanalicular use  | Indicated for the treatment of ocular inflammation and pain following ophthalmic surgery.  | 8     | 8       | 18 years | N/A | N/A | Y | Y | 9/27/2019  |
| Drugs       | J3490 | Unclassified drugs   | 1 mg                       | 1/1/2000  | Baxdela™                          | delafloxacin for injection, for<br>intravenous use  | Indicated in adults for the treatment of acute bacterial skin and skin structure infections (ABSSSI) caused by susceptible isolates of<br>the following:<br>- Gram positive organisms: Staphylococcus augures (including methicillin-resistant (MRSA) and methicillin-susceptible (MSSA)<br>isolates), Staphylococcus anginosus Group<br>(including streptococcus anginosus, Streptococcus outpetilatus), Streptococcus anginosus Group<br>(including streptococcus anginosus, Streptococcus acealis.<br>- Gram-negative organisms: Escherichia coli, Enterobacter cloacea, Klebsiella pneumoniae, and Pseudomonas aeruginosa.<br>Indicated in adults for the treatment of community-acquired bacterial pneumonia (CABP) caused by the following susceptible<br>microorganisms: Steptococcus angenuonas, arenginosa, Haemophilus influenzae, Haemophilus parainfluenzae, Chiamydia<br>pneumoniae, Escherichia coli, Pseudomonas aeruginosa, Haemophilas influenzae, Haemophilus parainfluenzae, Chiamydia  | 600   | 8,400   | 18 years | N/A | N/A | Y | Y | 12/3/2019  |
| Drugs       | J3490 | Unclassified drugs   | 1 mg                       | 1/1/2000  | Cleviprex <sup>®</sup>            | clevidipine injectable<br>emulsion, for intravenous use   | Indicated for the reduction of blood pressure when oral therapy is not feasible or not desirable.  | 500   | 1,500   | 18 years | N/A | N/A | Y | Y | 10/4/2018  |
| Drugs       | J3490 | Unclassified drugs   | 1 mg                       | 1/1/2000  | Invega Trinza®                    | paliperidone palmitate<br>extended-release injectable<br>suspension, for intramuscular<br>use   | Indicated for the treatment of schizophrenia in patients after they have been adequately treated with Invega Sustenna <sup>®</sup> (1-month paliperidone palmitate extended-release injectable suspension) for at least four months.   | 819   | 819     | 18 years | N/A | N/A | Y | Y | 7/16/2018  |
| Drugs       | J0641 | Injection, levoleucovorin,<br>not otherwise specified,<br>0.5 mg | 0.5 mg                     | 1/1/2009  | Fusilev*                          | levoleucovorin injection<br>solution for intravenous use  | Indicated for:<br>• Rescue after high-dose methotrexate therapy in osteosarcoma.<br>• Diminishing the toxicity and counteracting the effects of impaired methotrexate elimination and of inadvertent overdosage of<br>folic acid antagonist.<br>• Use in combination chemotherapy with 5-fluorouracil in the palliative treatment of patients with advanced metastatic colorectal<br>cancer.<br>Limitations of Use:<br>Fusilev is not approved for pernicious anemia and megaloblastic anemias. Improper use may cause a hematologic remission while<br>neurologic manifestations continue to progress.<br>Indicated for production of anexthesia of accessible mucous membranes of the oropharym. It is also useful as an anesthetic  | 2,000 | 10,000  | N/A      | N/A | N/A | Y | Ŷ | 10/3/2019  |
| Drugs       | J3490 | Unclassified drugs   | 1 mg lidocaine USP<br>base | 1/1/2000  | (various topical<br>formulations) | lidocaine (various topical<br>formulations)   | Indicated for production of anestnesia of accessible mucous memoranes of the oropharyms. It is also userul as an anestnetic<br>lubricant for intubation and for the temporary relief of pain associated with minor burns, including sunburn, abrasions of the skin,<br>and insect bites.   | 1,000 | 31,000  | N/A      | N/A | N/A | Y | Y | 10/26/2018 |
| Biologicals | J9119 | Injection, cemiplimab-<br>rwlc, 1 mg                             | 1 mg                       | 10/1/2019 | Libtayo®                          | cemiplimab-rwlc injection,<br>for intravenous use   | Indicated for the treatment of patients with metastatic curaceous squamous cell carcinoma (CSCC) or locally advanced CSCC who<br>are not candidates for curative surgery or curative radiation.  | 350   | 700     | 18 years | N/A | N/A | Y | Y | 9/27/2019  |
| Drugs       | J3490 | Unclassified drugs   | 50 mL                      | 1/1/2000  | N/A                               | sodium bicarbonate<br>injection, solution   | Indicated in:  • The treatment of metabolic acidosis which may occur in severe renal disease, uncontrolled diabetes, circulatory insufficiency due to shock or severe dehydration, extracorporeal circulator of block, cardiac arrest and severe primary lactic acidosis. • The treatment of certain drug intoxications, including barbiturates (where dissociation of the barbiturate-protein complex is disrely, in positoning by salicylates or methyl alcohol and in hemolytic reactions requiring alkalinization of the urine to diminish nephrotoxicity of blood pigments. • Severe diarrhea which is often accompanie by a significant loss of bicarbonate. • Treatment of methodic acidosis should, if possible, be superimposed on measures designed to control the basic cause of the addosis = e.g., insulin in uncomplicated diabetes, blood volume restoration in shock. Burs since an appreciable sme interval may elapse before all of the ancillary effects are brought about, bicarbonate therapy is indicated to the tablic acidosis test. • Vigorous bicarbonate therapy is required in any form of metabolic acidosis were dehydration, and in severe primary lactic acidosis or severe diabetic acidosis. | 13    | 403     | N/A      | N/A | N/A | Y | ¥ | 10/31/2018 |

| Biologicals | J9313 | Injection, moxetumomab<br>pasudotox-tdfk, 0.01 mg                                | 0.01 mg          | 10/1/2019 | Lumoxiti™            | moxetumomab pasudotox-<br>tdfk for injection, for<br>intravenous use   | Indicated for the treatment of adult patients with relapsed or refractory hairy cell leukemia (HCL) who received at least two prior<br>systemic therapies, including treatment with a purine nucleoside analog (PNA).<br>Umitations of Use:<br>Not recommended in patients with severe renal impairment (CrCl ≤ 29 mL/min).   | 600    | 3,000  | 18 years | N/A | N/A          | Y | Y | 4/9/2019   |
|-------------|-------|--|------------------|-----------|----------------------|--|---|--------|--------|----------|-----|--------------|---|---|------------|
| Drugs       | J7313 | Injection, fluocinolone<br>acetonide, intravitreal<br>implant (Iluvien), 0.01 mg | 0.01 mg          | 1/1/2016  | lluvien®             | fluocinolone acetonide<br>intravitreal implant   | Indicated for the treatment of diabetic macular edema in patients who have been previously treated with a course of<br>corticosteroids and did not have a clinically significant rise in intraocular pressure.  | 38     | 38     | 18 years | N/A | N/A          | Ŷ | Y | 10/16/2019 |
| Drugs       | J3490 | Unclassified drugs   | 1 vial           | 1/1/2000  | Prevymis™            | letermovir injection, for<br>intravenous use   | Indicated for prophylaxis of cytomegalovirus (CMVV) infection and disease in adult CMV-seropositive recipients [R+] of an allogeneic hematopoietic stem cell transplant (HSCT).   | 1      | 31     | 18 years | N/A | N/A          | Y | Y | 10/26/2018 |
| Biologicals | Q5117 | Injection, trastuzumab-<br>anns, biosimilar,<br>(kanjinti), 10 mg                | 10 mg            | 10/1/2019 | Kanjinti™            | trastuzumab-anns for<br>injection, for intravenous use   | Indicated for:<br>• The treatment of HER2 overexpressing breast cancer.<br>• The treatment of HER2 overexpressing metastatic gastric or gastroesophageal junction adenocarcinoma.   | 126    | 252    | 18 years | N/A | N/A          | Ŷ | Ŷ | 10/3/2019  |
| Drugs       | J3490 | Unclassified drugs   | 1 device (28 mg) | 1/1/2000  | Spravato™            | esketamine nasal spray   | Select patients for therapy based on an FDA-approved companion diagnostic for at trasturumab product.<br>Indicated, in conjunction with an oral antidepressant, for the treatment of treatment-resistant depression (TRD) in adults.<br>Limitations of Use: Spravato is not approved as an anesthetic agent. The safety and effectiveness of Spravato as an anesthetic agent<br>have not been established.  | 3      | 26     | 18 years | N/A | N/A          | Ŷ | Ŷ | 5/14/2019  |
| Biologicals | J9204 | Injection,<br>mogamulizumab-kpkc, 1<br>mg  | 1 mg             | 10/1/2019 | Poteligeo*           | mogamulizumab-kpkc<br>injection, for intravenous use   | Indicated for the treatment of adult patients with relapsed or refractory mycosis fungoides or Sézary syndrome after at least one<br>prior systemic therapy.  | 140    | 700    | 18 years | N/A | N/A          | Y | Y | 9/27/2019  |
| Drugs       | J0642 | Injection, levoleucovorin<br>(khapzory), 0.5 mg                                  | 0.5 mg           | 10/1/2019 | Khapzory™            | levoleucovorin for injection,<br>for intravenous use   | Indicated for:<br>• Rescue after high-dose methotrexate therapy in patients with osteosarcoma.<br>• Diminishing the toxicity associated with overdosage of folic acid antagonists or impaired methotrexate elimination.<br>• Treatment of patients with metastatic colorectal cancer in combination with fluorouracil.<br>Umitations of Use:<br>Khapzory is not indicated for the treatment of pernicious anemia and megaloblastic anemia secondary to lack of vitamin B12<br>because of the risk of progression of neurologic manifestations despite hematologic remission.  | 2,400  | 4,800  | N/A      | N/A | N/A          | Y | Ŷ | 10/3/2019  |
| Drugs       | J3490 | Unclassified drugs   | 1 mL             | 1/4/2000  | Provayblue®          | methylene blue injection, for<br>intravenous use   | Indicated for the treatment of pediatric and adult patients with acquired methemoglobinemia. This indication is approved under<br>accelerated approval. Continued approval for this indication may be contingent upon verification of clinical benefit in subsequent<br>trials.   | 60     | 60     | N/A      | N/A | N/A          | Y | Y | 6/6/2019   |
| Drugs       | J3490 | Unclassified drugs   | 10 mg            | 1/1/2000  | Vimpat <sup>®</sup>  | lacosamide injection, for<br>intravenous use   | As the safety of Vimpat injection has not been established in pediatric patients, Vimpat injection is indicated for the treatment of partial-onset seizures only in adult patients (17 years of age and older).   | 40     | 1,240  | 17 years | N/A | N/A          | Y | Y | 6/8/2019   |
| Drugs       | J3490 | Unclassified drugs   | 10 mg            | 1/4/2000  | Revatio <sup>®</sup> | sildenafil injection, for intravenous use  | Indicated for the treatment of pulmonary arterial hypertension (PAH) (WHO Group I) in adults to improve exercise ability and delay<br>clinical worsening. Studies establishing effectiveness were short-term (12 to 16 weeks), and included predominately patients with<br>NYHA Functional Class II-III symptoms. Etiologies were idiopathic (71%) or associated with connective tissue disease (25%).  | 3      | 93     | 3 years  | N/A | N/A          | Y | Y | 6/7/2019   |
| Drugs       | J3490 | Unclassified drugs   | 1 mL             | 1/1/2000  | Defitelio®           | defibrotide sodium injection,<br>for intravenous use   | Limitation of Use: Adding sildenafil to bosentan therapy does not result in any beneficial effect on exercise capacity.<br>Indicated for the treatment of adult and pediatric patients with hepatic veno-occlusive disease (VOD), also known as sinusoidal<br>obstruction syndrome (SOS), with renal or outmonary disyndrich followine hematopoietic stem-cell translantation (HSCT).   | 45     | 1,395  | 18 years | N/A | N/A          | Y | Y | 6/10/2019  |
| Drugs       | J3490 | Unclassified drugs   | 1 mg             | 1/1/2000  | Noxafil®             | posaconazole injection, for<br>intravenous use   | Indicated for the prophylaxis of invasive Aspergillus and Candida infections in patients who are at high risk of developing these<br>infections due to being severely immunocompromised, such as HSCT recipients with GVHD or those with hematologic malignancies   | 600    | 9,600  | 18 years | N/A | N/A          | Y | Y | 8/24/2018  |
| Drugs       | J7401 | Mometasone furoate<br>sinus implant, 10  | 10 mcg           | 10/1/2019 | Sinuva™              | mometasone furoate sinus<br>implant  | with prolonged neutropenia from chemotherapy.<br>Indicated for the treatment of nasal polyps in patients greater than or equal to 18 years of age who have had ethmoid sinus surgery.   | 270    | 270    | 18 years | N/A | N/A          | Y | Y | 10/26/2018 |
| Drugs       | J3490 | micrograms<br>Unclassified drugs   | 250 mg           | 1/1/2000  | N/A                  | 17 alpha<br>hydroxyprogesterone<br>caproate (17P)<br>*Compounded*  | This drug is an investigational compounded drug with no current FDA approved indications.   | 1      | 5      | N/A      | N/A | Females Only | Y | Ŷ | 5/22/2019  |
| Biologicals | J3590 | Unclassified biologics   | 1 mg             | 1/1/2002  | Andexxa®             | coagulation factor Xa<br>(recombinant), inactivated-<br>zhzo lyophilized powder for<br>solution for intravenous<br>injection | Indicated for patients treated with rivaroxaban and apixaban, when reversal of anticoagulation is needed due to life-threatening or<br>uncontrolled bleeding.   | 1,800  | 1,800  | 18 years | N/A | N/A          | Y | Y | 6/13/2019  |
| Biologicals | J3590 | Unclassified biologics   | 11 mg (1 kit)    | 1/1/2002  | Cablivi®             | caplacizumab-yhdp for<br>injection, for intravenous or<br>subcutaneous use   | Indicated for the treatment of adult patients with acquired thrombotic thrombocytopenic purpura (aTTP), in combination with<br>plasma exchange and immunosuppressive therapy.   | 2      | 32     | 18 years | N/A | N/A          | Y | Y | 3/26/2019  |
| Biologicals | J3590 | Unclassified biologics   | 150 mg           | 1/1/2002  | Cosentyx®            | secukinumab injection, for<br>subcutaneous use   | Indicated for the treatment of:<br>- Moderate to severe plaque psoriasis in adult patients who are candidates for systemic therapy or phototherapy.<br>- Adults with active psoriatic arthritis (PsA).<br>- Adults with active anklyosing spondylitis (AS).   | 2      | 10     | 18 years | N/A | N/A          | Y | Y | 6/4/2019   |
| Drugs       | J2798 | Injection, risperidone,<br>(perseris), 0.5 mg                                    | 0.5 mg           | 10/1/2019 | Perseris™            | risperidone for extended-<br>release injectable<br>suspension, for subcutaneou:<br>use                                       | Indicated for the treatment of schizophrenia in adults.   | 240    | 480    | 18 years | N/A | N/A          | Y | Y | 10/3/2019  |
| Biologicals | J3590 | Unclassified biologics   | 1 IU             | 1/1/2002  | Kcentra®             | prothrombin complex<br>concentrate (human) for<br>intravenous use, lyophilized<br>powder for reconstitution                  | Indicated for the urgent reversal of acquired coagulation factor deficiency induced by Vitamin K antagonist (VKA, e.g., warfarin) therapy in adult patients with acute major bleeding or need for an urgent surgery/invasive procedure.   | 5,000  | 5,000  | 18 years | N/A | N/A          | Ŷ | Y | 7/2/2018   |
| Biologicals | J3590 | Unclassified biologics   | 0.5 mL           | 1/1/2002  | Plegridy™            | peginterferon beta-1a<br>injection, for subcutaneous<br>injection  | Indicated for the treatment of patients with relapsing forms of multiple sclerosis.   | 1      | 3      | 18 years | N/A | N/A          | Y | Y | 6/6/2019   |
| Biologicals | J3590 | Unclassified biologics   | 50 mL            | 1/1/2002  | Praxbind®            | idarucizumab injection, for<br>intravenous use   | Indicated in patients treated with Pradaxa when reversal of the anticoagulant effects of dabigatran is needed:<br>• For emergency surgery/urgent procedures<br>• In life-threatening or uncontrolled bleeding   | 4      | 4      | 18 years | N/A | N/A          | Y | Y | 7/16/2018  |
| Biologicals | J3590 | Unclassified biologics   | 1 IU             | 1/1/2002  | Recothrom®           | thrombin topical<br>(recombinant) lyophilized<br>powder for solution - for<br>topical use only                               | - In memory of uncertained or uncontrol of the operation of the operati | 20,000 | 80,000 | 1 month  | N/A | N/A          | Ŷ | Y | 4/10/2019  |
| Biologicals | J3590 | Unclassified biologics   | 1 mg             | 1/1/2002  | Revcovi™             | elapegademase-lvlr injection<br>for intramuscular use  | Indicated for the treatment of adenosine deaminase severe combined immune deficiency (ADA-SCID) in pediatric and adult<br>patients.   | 28.8   | 288    | N/A      | N/A | N/A          | Y | Y | 12/28/2018 |

|             |       |   |                |          |                        | asfotase alfa injection, for  |  |        |         |          |     |     |   |   |  |
|-------------|-------|---|----------------|----------|------------------------|---|--|--------|---------|----------|-----|-----|---|---|--|
| Biologicals | J3590 | Unclassified biologics  | 1 mg           | 1/1/2002 | Strensiq®              | subcutaneous use<br>peginterferon alfa-2b for   | Treatment of patients with perinatal/infantile-onset and juvenile-onset hypophosphatasia (HPP).  | 420    | 5,460   | N/A      | N/A | N/A | Ŷ | Ŷ | 4/10/2019  |
| Biologicals | J3590 | Unclassified biologics  | 1 mcg          | 1/1/2002 | Sylatron™              | injection, for subcutaneous<br>use  | Indicated for the adjuvant treatment of melanoma with microscopic or gross nodal involvement within 84 days of definitive surgical<br>resection including complete lymphadenectomy.  | 900    | 4,500   | 18 years | N/A | N/A | Y | Y | 6/7/2019   |
| Drugs       | J2794 | Injection, risperidone<br>(risperdal consta), 0.5 mg  | 0.5 mg         | 1/1/2005 | Risperdal<br>Consta®   | risperidone long-acting<br>injection  | Indicated:<br>• for the treatment of schizophrenia.<br>• as monotherapy or as adjunctive therapy to lithium or valproate for the maintenance treatment of Bipolar I Disorder.  | 100    | 300     | N/A      | N/A | N/A | Y | Y | 10/3/2019  |
| Drugs       | J7030 | Infusion, normal saline<br>solution, 1,000 cc   | 1,000 cc       | 1/1/2000 | N/A                    | normal saline solution 1,000<br>cc (sodium chloride injection)  | Indicated as a source of water and electrolytes. Also indicated for use as a priming solution in hemodialysis procedures.  | N/A    | N/A     | N/A      | N/A | N/A | Y | Y | 10/26/2018   |
| Drugs       | J7040 | Infusion, normal saline solution, sterile   | 500 mL         | 1/1/2000 | N/A                    | normal saline solution 500 cc<br>(sodium chloride injection)  | Indicated as a source of water and electrolytes. Also indicated for use as a priming solution in hemodialysis procedures.  | 6      | 186     | N/A      | N/A | N/A | Y | Y | 6/7/2019   |
| Drugs       | J7042 | 5% Dextrose/normal<br>saline (500 mL = 1 unit)  | 500 mL         | 1/1/2000 | N/A                    | dextrose 5% / normal saline   | Indicated for use in adults and pediatric patients as sources of calories and water for hydration.   | 15     | 200     | N/A      | N/A | N/A | Y | Y | 10/10/2018   |
| Drugs       | J7050 | Infusion, normal saline solution, 250 cc  | 250 cc         | 1/1/2000 | N/A                    | normal saline solution 250 cc<br>(sodium chloride injection)  | Indicated as a source of water and electrolytes. Also indicated for use as a priming solution in hemodialysis procedures.  | 6      | 186     | N/A      | N/A | N/A | Y | Y | 6/7/2019   |
| Drugs       | J7060 | 5% Dextrose/water (500<br>mL = 1 unit)  | 500 mL         | 1/1/2000 | N/A                    | dextrose 5% / water   | Indicated for use in adults and pediatric patients as sources of calories and water for hydration.   | 15     | 200     | N/A      | N/A | N/A | Y | Y | 10/10/2018   |
| Drugs       | J7070 | Infusion, D5W, 1,000 cc   | 1,000 cc       | 1/1/2000 | N/A                    | D5W (dextrose injection)  | Indicated for parenteral replenishment of fluid and minimal carbohydrate calories as required by clinical condition of the patient.  | 8      | 124     | N/A      | N/A | N/A | Y | Y | 10/4/2018  |
| Drugs       | J7120 | Ringer's lactate infusion,<br>up to 1,000 cc  | up to 1,000 cc | 1/1/2000 | N/A                    | lactated ringer's infusion  | Indicated as a source of water and electrolytes or as an alkalinizing agent.   | 8      | 124     | N/A      | N/A | N/A | Y | Y | 8/29/2018  |
| Drugs       | J7121 | 5% dextrose in lactated<br>ringers infusion, up to<br>1,000 cc  | up to 1,000 cc | 1/1/2016 | N/A                    |   | Indicated for parenteral replacement of extracellular losses of fluid and electrolytes, with or without minimal carbohydrate calories,<br>as required by the clinical condition of the patient.  | 8      | 124     | N/A      | N/A | N/A | Y | Y | 10/4/2018  |
| Biologicals | J7170 | Injection, emicizumab-<br>kxwh, 0.5 mg  | 0.5 mg         | 1/1/2019 | Hemlibra®              | emicizumab-kxwh injection,<br>for subcutaneous use  | Indicated for routine prophylaxis to prevent or reduce the frequency of bleeding episodes in adult and pediatric patients ages<br>newborn and older with hemophilia A (congenital factor VIII deficiency) with or without factor VIII inhibitors.  | 1,680  | 5,040   | N/A      | N/A | N/A | Y | Y |  |
| Biologicals | J7175 | Injection, factor X,<br>(human), 1 IU   | 1 IU           | 1/1/2017 | Coagadex®              | coagulation factor X (human)<br>lyophilized powder for<br>solution for intravenous<br>injection                                   | ***Expanded Indications Approved 9/21/2018***<br>Indicated In adults and children with hereditary Factor X deficiency for:<br>• Ondemand treatment and control of bleeding episodes<br>* Perioperative management of bleeding in patients with mild and moderate hereditary Factor X deficiency<br>***New Indicated In adults and children with thereditary Factor X deficiency for:<br>* Routine prophylaxis to reduce the frequency of bleeding episodes<br>Limitation of Use:<br>Perioperative management of bleeding in major surgery in patients with severe hereditary Factor X deficiency has not been studied. | 8,400  | 84,000  | N/A      | N/A | N/A | Y | ¥ | 9/25/2018  |
| Biologicals | J7177 | Injection, human<br>fibrinogen concentrate<br>(fibryga), 1 mg   | 1 mg           | 1/1/2019 | Fibryga®               | fibrinogen concentrate<br>(human) lyophilized powder<br>for reconstitution  | Indicated for the treatment of acute bleeding episodes in adults and adolescents with congenital fibrinogen deficiency, including<br>afibrinogenemia and hypofibrinogenemia. Fibryga is not indicated for dysfibrinogenemia.   | 9,800  | 9,800   | 12 years | N/A | N/A | Y | Y | 2/5/2019   |
| Biologicals | J7178 | Injection, human<br>fibrinogen concentrate,<br>not otherwise specified, 1<br>mg                             | 1 mg           | 1/1/2013 | RiaSTAP®               | fibrinogen concentrate<br>(human) for intravenous use,<br>lyophilized powder for<br>reconstitution                                | Indicated for the treatment of acute bleeding episodes in patients with congenital fibrinogen deficiency, including afibrinogenemia and hypofibrinogenemia.  | 9,800  | 9,800   | N/A      | N/A | N/A | Y | Y | 6/8/2019   |
| Biologicals | J7179 | Injection, Von Willebrand<br>factor (recombinant),<br>(Vonvendi), 1IU VWF:RCo                               | 1 IU           | 1/1/2017 | Vonvendi®              | von Willebrand factor<br>(recombinant) lyophilized<br>powder for solution, for<br>intravenous injection                           | Indicated for on-demand treatment and control of bleeding episodes in adults diagnosed with von Willebrand disease.     Indicated for perioperative management of bleeding in adults age 18 and older with von Willebrand disease.   | 28,000 | 254,800 | 18 years | N/A | N/A | Y | Y | 9/21/2018  |
| Biologicals | J7180 | Injection, factor XIII<br>(antihemophilic factor,<br>human), 1 IU   | 1 IU           | 1/1/2012 | Corifact               | factor XIII concentrate<br>(human) injection for<br>intravenous use   | Indicated for adult and pediatric patients with congenital Factor XIII deficiency for:<br>• Routine prophylactic treatment<br>• Per-operative management of surgical bleeding.   | 5,000  | 10,000  | N/A      | N/A | N/A | Y | Y | 10/10/2018   |
| Biologicals | J7181 | Injection, factor XIII A-<br>subunit, (recombinant),  | per IU         | 1/1/2015 | Tretten®               | coagulation factor XIII a-<br>subunit (recombinant)   | Indicated for routine prophylaxis of bleeding in patients with congenital factor XIII A-subunit deficiency.  | 4,900  | 9,800   | N/A      | N/A | N/A | Y | Y | 6/8/2019   |
| Biologicals | J7182 | per IU<br>Injection, factor VIII,<br>(antihemophilic factor,<br>recombinant),<br>(Novoeight), per IU        | 1 IU           | 1/1/2015 | Novoeight <sup>®</sup> | antihemophilic factor<br>(recombinant) for<br>intravenous injection<br>lyophilized powder for<br>solution                         | Not for use in patients with congenital factor XIII B-subunit deficiency.<br>Adults and children with hemophilia A for: Control and prevention of bleeding; Perioperative management; Routine prophylaxis to<br>prevent or reduce the frequency of bleeding episodes.  | 7,000  | 168,000 | N/A      | N/A | N/A | Y | Y | 6/6/2019   |
| Biologicals | J7183 | Injection, Von Willebrand<br>factor complex (human),<br>Wilate, 1 IU VWF:RCO                                | 1 IU VWF:RCO   | 1/1/2012 | Wilate®                | von willebrand  | Indicated in children and adults with yon Wilebrand disease for:<br>• On-demand treatment and control of bleeding episodes.<br>• Peroperative management of bleeding.<br>Indicated in adolescents and adults with hemophilia A for:<br>• Routine prophylaxis to reduce the frequency of bleeding episodes.<br>• On-demand treatment and control of bleeding episodes.  | 21,000 | 147,000 | N/A      | N/A | N/A | Y | Y | 10/28/2019   |
| Biologicals | J7185 | Injection, factor VIII<br>(antihemophilic factor,<br>recombinant) (Xyntha),<br>per IU                       | 1 IU           | 1/1/2010 | Xyntha®                | factor VIII (antihemophilic<br>factor, recombinant) for<br>intravenous injection  | <ul> <li>Indicated in adults and children with hemophilia A for control and prevention of bleeding episodes and for perioperative<br/>management.</li> <li>Ymtha is not indicated in patients with von Willebrand's disease.</li> </ul>  | 6,000  | 54,000  | N/A      | N/A | N/A | Y | Y | 10/10/2018   |
| Biologicals | J7186 | Injection, antihemophilic<br>factor VIII/Von<br>Willebrand factor<br>complex (human), per<br>factor VIII IU | 1 IU           | 1/1/2009 | Alphanate®             | antihemophilic factor/von<br>Willebrand factor complex<br>(human) lyophilized powder<br>for solution for intravenous<br>injection | Indicated for:<br>• Control and prevention of bleeding in adult and pediatric patients with hemophilia A.<br>• Surgical and/or invasive procedures in adult and pediatric patients with von Willebrand Disease in whom desmopressin (DDAVP)<br>is either ineffective or contraindicated. It is not indicated for patients with severe VWD (Type 3) undergoing major surgery.   | 20,500 | 133,250 | N/A      | N/A | N/A | Y | ¥ | Max Units: Although the<br>monthly dose can exceed this<br>amount, use of higher doses<br>administered by a provider<br>must be supported with<br>adequate documentation<br>supplied to DMA and<br>established in the medical<br>record. |

|             |       |  |        |          |  |   |   |         |         |                                       |     |     |   |   | Indication specific age  |            |
|-------------|-------|--|--------|----------|--|---|---|---------|---------|---------------------------------------|-----|-----|---|---|--|------------|
| Biologicals | J7187 | Injection, Von Willebrand<br>factor complex (Humate-<br>P), per IU, VWF:RCO                        | 1 IU   | 1/1/2007 | Humate-P*  | antihemophilic factor/von<br>Wilebrand factor complex<br>(human), kophilized powder<br>for reconstitution for<br>intravenous use only | Indicated for:<br>• Hemophilia A – Treatment and prevention of bleeding in adults.<br>• von Wilderand disease (VWD) – in adults and pediatric patients in the<br>(1) Treatment of soontaneous and trauma-induced bleeding episodes, and<br>(2) Prevention of excessive bleeding during and after surgery.<br>This applies to patients with severe VWD as well as patients with mild to moderate VWD where the use of desmopressin is known<br>or suspected to be inadequate. Humate-P is not indicated for the prophylaxis of spontaneous bleeding episodes in VWD.   | 27, 250 | 136,250 | Indication Specific<br>(see comments) | N/A | N/A | ¥ | Ŷ | restrictions:<br>- Hemophilas A: 13 years of<br>age and older<br>• Von Willebrand disease<br>(VWD): None<br>Max Units: Although the daily<br>dose can exceed this amount,<br>use of higher doses<br>administered by a provider<br>must be supported with<br>adequate documentation<br>supplied to DMA and<br>established in the medical<br>record. | 9/21/2018  |
| Biologicals | J7188 | Injection, factor VIII<br>(antihemophilic factor,<br>recombinant), (Obizur),<br>per IU             | 1 IU   | 1/1/2016 | Obizur®  | antihemophilic factor<br>(recombinant), porcine<br>sequence lyophilized powder<br>for solution for intravenous<br>injection           | Treatment of bleeding episodes in adults with acquired hemophilia A.  | 168,000 | 630,000 | 18 years                              | N/A | N/A | Y | Y |  | 4/10/2019  |
| Biologicals | J7189 | Factor VIIa<br>(antihemophilic factor,<br>recombinant), per 1<br>microgram                         | 1 mcg  | 1/1/2006 | NovoSeven®,<br>NovoSeven® RT   | coagulation factor VIIa<br>(recombinant) for<br>intravenous use   | Indicated for:<br>• Treatment of bleeding episodes and peri-operative management in adults and children with hemophilia A or B with inhibitors,<br>congenital Factor VII [FVII] deficiency, and Gianzmann's thrombasthenia with refractoriness to platelet transfusions, with or without<br>antibodies to platelets.<br>• Treatment of bleeding episodes and peri-operative management in adults with acquired hemophilia.  | 48,000  | 96,000  | N/A                                   | N/A | N/A | Y | Y |  | 10/10/2018 |
| Biologicals | J7190 | Factor VIII<br>(antihemophilic factor<br>[human]) per IU   | 1 IU   | 1/1/2000 | Hemofil® M,<br>Koate®-DVI,<br>Monoclate-P®   | factor VIII (antihemophilic<br>factor, human) for<br>intravenous injection  | Koate: Indicated for the control and prevention of bleeding episodes or in order to perform emergency and elective surgery in<br>patients with hemophilia A (hereditary Factor VIII deficiency).<br>Limitation of Use: Koate is not indicated for the treatment of von Willebrand disease.<br>Monoctate -P: Indicated for treatment of classical hemophilia (Hemophilia A). Affected individuals frequently require therapy<br>following minor accidents. Surgery, when required in such individuals, must be preceded by temporary corrections of the clotting<br>abnormality. Surgical prophylaxis in severe AHF<br>deficiency can be accomplished with an appropriately-dosed pre-surgical IV bolus of Monoclate -P followed by intermittent<br>maintenance doses. Monoclate P is not effective in controlling the bleeding of patients with von Willebrand disease.<br>Hemofil M: Indicated in hemophilia A (classical hemophilia) for the prevention and control of hemorrhagic episodes. Hemofil M is<br>not indicated in on Willebrand disease.  | 6,000   | 24,000  | N/A                                   | N/A | N/A | ¥ | ¥ |  | 10/10/2018 |
| Biologicals | J7192 | Factor VIII<br>(antihemophilic factor,<br>recombinand) per IU, not<br>otherwise specified          | 110    | 1/1/2000 | Advate*,<br>Heixate*FS,<br>Kogenate*FS,<br>Recombinate*,<br>ReFacto*,<br>Bioclate* | factor VIII (antihemophilic<br>factor, recombinant) for<br>intravenous use  | Advectional and a set of the set | 6,000   | 54,000  | N/A                                   | N/A | N/A | Y | ¥ |  | 10/10/2018 |
| Biologicals | J7193 | Factor IX (antihemophilic<br>factor, purified, non-<br>recombinant) per IU                         | 1 IU   | 1/1/2002 | Mononine <sup>®</sup> ,<br>AlphaNine <sup>®</sup> SD                               | coagulation factor IX (human)   |   | 6,000   | 42,000  | N/A                                   | N/A | N/A | Y | Y |  | 10/10/2018 |
| Biologicals | J7194 | Factor IX, complex, per IU   | per IU | 1/1/2000 | Bebulin <sup>®</sup> VH,<br>Profilnine <sup>®</sup> SD,<br>Profilnine <sup>®</sup> | factor IX complex for<br>intravenous administration   | Bebulin: Indicated for the prevention and control of bleeding episodes in adult patients with hemophilia B (congenital Factor IX<br>deficiency or Christmas disease). Bebulin is not indicated for use in the treatment of Factor VII deficiency. No clinical studies have<br>been conducted to show benefit from this product for treating deficiencies other than Factor IX deficiency.<br>Profinine: Indicated for the prevention and control of bleeding in patients with factor IX deficiency (hemophilia B). Profinine<br>contains non-therapeutic levels of factor VII and is not indicated for use in the treatment of factor VII deficiency.   | 8,500   | 59,500  | 18 years                              | N/A | N/A | Y | Y |  | 10/26/2018 |
| Biologicals | J7195 | Injection factor IX<br>(antihemophilic factor,<br>recombinant) per IU, not<br>otherwise specified  | 1 IU   | 1/1/2002 | BeneFIX*   | coagulation factor IX<br>(recombinant) for<br>intravenous use   | Indicated for:<br>• Control and prevention of bleeding episodes in adult and pediatric patients with hemophilia B.<br>• Peri-operative management in adult and pediatric patients with hemophilia B.<br>Limitations of Use: Benefix is not indicated for the treatment of other factor deficiencies (e.g. factors II, VII, VIII, and X), hemophilia<br>A patients with inhibitors to factor VIII, reversal of coumarin-induced anticoagulation, and bleeding due to low levels of liver-<br>dependent coagulation factors.  | 6,000   | 42,000  | N/A                                   | N/A | N/A | Y | Ŷ |  | 10/10/2018 |
| Biologicals | J7195 | Injection factor IX<br>(antihemophilic factor,<br>recombinant), per IU, not<br>otherwise specified | 1 IU   | 1/1/2002 | lxinity®   | coagulation factor IX<br>(recombinant) lyophilized<br>powder for solution for<br>intravenous injection                                | Indicated in adults and children greater than or equal to 12 years of age with hemophilia B for control and prevention of bleeding episodes and perioperative management.   | 11,500  | 322,000 | 12 years                              | N/A | N/A | Y | Y |  | 7/2/2018   |
| Biologicals | J7196 | Injection, antithrombin<br>recombinant, 50 IU  | 50 IU  | 1/1/2011 | ATryn®   | antithrombin (recombinant)<br>lyophilized powder for<br>reconstitution  | Indicated for the prevention of peri-operative and peri-partum thromboembolic events in hereditary antithrombin deficient<br>patients.  | 300     | 1,100   | 18 years                              | N/A | N/A | Y | Y |  | 9/25/2018  |
| Biologicals | J7197 | Antithrombin III (human),<br>per IU  | 1 IU   | 1/1/2000 | Thrombate III®   | antithrombin III (human)<br>lyophilized powder for<br>solution for intravenous<br>injection   | Indicated in patients with hereditary antithrombin deficiency for:<br>• Treatment and prevention of thromboembolism<br>• Prevention of peri-operative and peri-partum thromboembolism   | 5,000   | 40,000  | 18 years                              | N/A | N/A | Y | Y |  | 9/25/2018  |

| Biologicals   | J7198 | Anti-inhibitor, per IU   | per IU                | 1/1/2000 | Feiba                | anti-inhibitor coagulant<br>complex, for intravenous use,<br>lyophilized powder for<br>solution                               | Indicated for use in hemophilia A and B patients with inhibitors for:<br>• Control and prevention of bleeding episodes<br>> Perioperative management<br>• Routine prophylaxis to prevent or reduce the frequency of bleeding episodes.<br>Feiba is not indicated for the treatment of bleeding episodes resulting from coagulation factor deficiencies in the absence of<br>inhibitors to factor VIII or<br>factor IX.   | 56,000 | 560,000 | N/A                | N/A | N/A          | Ŷ | Ŷ | 9/21/2018  |
|---------------|-------|--|-----------------------|----------|----------------------|---|--|--------|---------|--------------------|-----|--------------|---|---|------------|
| Biologicals   | J7208 | Injection, factor viii,<br>(antihemophilic factor,<br>recombinant), pegylated-<br>aucl, (jivi), 1 i.u. | 1 IU                  | 7/1/2019 | Jivi*                | antihemophilic factor<br>(recombinant) PEGylated-<br>aucl, for intravenous use  | Indicated for use in previously treated adults and adolescents (12 years of age and older) with hemophilia A (congenital Factor VIII<br>deficiency) for:<br>• On demand treatment and control of bleeding episodes<br>• Perioperative management of bleeding<br>• Routine prophylaxis to reduce the frequency of bleeding episodes<br>Elimitations of use:<br>- Jivis in on tindicated for use in children < 12 years of age due to a greater risk for hypersensitivity reactions.<br>- Jivis in on tindicated for use in previously untreated patients (PUPs).<br>- Jivis in on tindicated for the reatment of von Wilderand disease. | 18,000 | 180,000 | 12 years           | N/A | N/A          | Ŷ | ¥ | 9/25/2018  |
| Biologicals   | J7200 | Injection, factor IX,<br>(antihemophilic factor,<br>recombinant), Rixubis,<br>per IU                   | 1 IU                  | 1/1/2015 | Rixubis <sup>®</sup> | coagulation factor IX<br>(recombinant) for<br>intravenous injection   | Indicated in adults and children with hemophilia B for control and prevention of bleeding episodes, perioperative management, and<br>routine prophylaxis. Rixubis is not indicated for induction of immune tolerance in patients with Hemophilia B.  | 6,700  | 60,300  | N/A                | N/A | N/A          | Y | Y | 10/10/2018 |
| Biologicals   | J7201 | Injection, factor IX, Fc<br>fusion protein,<br>(recombinant), Alprolix, 1<br>IU                        | 1 IU                  | 1/1/2017 | Alprolix®            | coagulation factor IX<br>(recombinant), Fc fusion<br>protein, lyophilized powder<br>for solution for intravenous<br>injection | Indicated for adults and children with hemophilia B for:<br>• On-demand treatment and control of bleeding, episodes.<br>• Perioperative management of bleeding.<br>• Routine prophylaxis to reduce the frequency of bleeding episodes.<br>Limitations of Use: Alprolix is not indicated for induction of immune tolerance in patients with hemophilia B.   | 24,000 | 72,000  | N/A                | N/A | N/A          | Y | Y | 4/10/2019  |
| Biologicals   | J7202 | Injection, factor IX,<br>albumin fusion protein,<br>(recombinant), Idelvion, 1<br>IU                   | 1 IU                  | 1/1/2017 | Idelvion*            | coagulation factor IX<br>(recombinant), albumin<br>fusion protein lyophilized<br>powder for solution for<br>intravenous use   | Indicated in children and adults with hemophilia B (congenital Factor IX deficiency) for:<br>• On-demand treatment and control and prevention of bleeding episodes<br>• Perioperative management of bleeding<br>• Routine prophylaxis to reduce the frequency of bleeding episodes   | 10,769 | 96,921  | N/A                | N/A | N/A          | Y | Y | 6/6/2019   |
| Biologicals   | J7203 | Injection factor ix,<br>(antihemophilic factor,<br>recombinant),<br>glycopegylated, (rebinyn),<br>1 iu | 1 IU                  | 1/1/2019 | Rebinyn®             | coagulation factor IX<br>(recombinant),<br>glycoPEGylated, lyophilized<br>powder for solution for<br>intravenous injection    | Limitations of Use: Idekion is not indicated for immune tolerance induction in patients with Hemophilia B.<br>Indicated for use in adults and ubiliter with hemophilia B for:<br>• On-demand treatment and control of bleeding episodes<br>• Perioperative management of bleeding<br>Limitations of Use: Rebinyn is not indicated for routine prophylaxis in the treatment of patients with hemophilia B or for immune<br>tolerance induction in patients with hemophilia B.   | 16,800 | 67,200  | N/A                | N/A | N/A          | Y | Y | 7/2/2018   |
| Biologicals   | J7205 | Injection, factor VIII Fc<br>fusion protein<br>(recombinant), per IU                                   | 1 IU                  | 1/1/2016 | Eloctate®            | antihemophilic factor<br>(recombinant) Fc fusion<br>protein lyophilized powder<br>for solution for intravenous<br>injection   | Indicated in adults and children with Hemophilia A (congenital Factor VIII deficiency) for:<br>• On-demand traitment and control of bleeding episodes.<br>• Perioperative management of bleeding.<br>• Routine prophylaxis to reduce the frequency of bleeding episodes.   | 14,000 | 140,000 | N/A                | N/A | N/A          | Y | Y | 7/2/2018   |
| Biologicals   | J7207 | Injection, factor VIII,<br>(antihemophilic factor,<br>recombinant), pegylated,<br>1 IU                 | 110                   | 1/1/2017 | Adynovate®           | antihemophilic factor<br>(recombinant), PEGylated<br>lyophilized powder for<br>solution for intravenous<br>injection          | Limitation of Use: Eloctate is not indicated for the treatment of von Willebrand disease.<br>Indicated in children and adult patients with hemophilia A (congenital factor VIII deficiency) for:<br>• On-demand treatment and control of bleeding episodes<br>• Periognerative management<br>• Routine prophylaxis to reduce the frequency of bleeding episodes<br>Adynovate is not indicated for the treatment of von Willebrand disease.   | 21,000 | 210,000 | N/A                | N/A | N/A          | Y | Y | 9/25/2018  |
| Biologicals   | J7209 | Injection, factor VIII,<br>(antihemophilic factor,<br>recombinant), (Nuwiq), 1<br>IU                   | 1 IU                  | 1/1/2017 | Nuwiq®               | antihemophilic factor<br>(recombinant), lyophilized<br>powder for solution for<br>intravenous injection                       | Indicated in adults and children with Hemophilia A for:<br>• On demand treatment and control of bleeding episodes<br>> Perioperative management of bleeding<br>• Routine prophylaxis to reduce the frequency of bleeding episodes<br>Nuwig is not indicated for the treatment of von Willebrand Disease.   | 21,000 | 210,000 | N/A                | N/A | N/A          | Y | Y | 4/10/2019  |
| Biologicals   | J7210 | Injection, factor VIII,<br>(antihemophilic factor,<br>recombinant), (Afstyla), 1<br>IU                 | 1 IU                  | 1/1/2018 | Afstyla®             | antihemophilic factor<br>(recombinant), single chain<br>for intravenous injection,<br>lyophilized powder for<br>solution      | Italia ta in unitated of the beament of Von Witted and Notester.<br>Indicated in adults and children with hemophila A (congenital Factor VIII deficiency) for:<br>• On demand treatment and control of bleeding episodes.<br>• Perioperative management of bleeding.<br>Limitation of Use:<br>Atsyla is not indicated for the treatment of von Willebrand disease.   | 21,000 | 210,000 | N/A                | N/A | N/A          | Y | Ŷ | 4/10/2019  |
| Biologicals   | J7211 | Injection, factor VIII,<br>(antihemophilic factor,<br>recombinant), (Kovaltry),<br>1 IU                | 1 IU                  | 1/1/2018 | Kovaltry®            | factor VIII (antihemophilic<br>factor, recombinant) for<br>intravenous injection  | Indicated for use in adults and children with hemophilia A (congenital Factor VIII deficiency) for:<br>• On-demand treatment and control of bleeding episodes<br>> Perioperative management of bleeding<br>• Routine prophylaxis to reduce the frequency of bleeding episodes<br>Kovaltry is not indicated for the treatment of von Willebrand disease.  | 21,000 | 210,000 | N/A                | N/A | N/A          | Y | Y | 10/10/2018 |
| Drugs         | J7296 | Levonorgestrel-releasing<br>intrauterine<br>contraceptive system,<br>(Kyleena), 19.5 mg                | 19.5 mg               | 1/1/2018 | Kyleena®             | levonorgestrel-releasing<br>intrauterine system   | Indicated for prevention of pregnancy for up to 5 years.   | 1      | 1       | After menarche     | N/A | Females Only | Y | Y | 10/26/2018 |
| Drugs         | J7297 | Levonorgestrel-releasing<br>intrauterine<br>contraceptive system<br>(Liletta), 52mg                    | 52 mg                 | 1/1/2017 | Liletta*             | levonorgestrel-releasing<br>intrauterine system   | Indicated for the prevention of pregnancy for up to 6 years.   | 1      | 1       | After menarche     | N/A | Females Only | Y | Y | 12/3/2019  |
| Drugs         | J7298 | Levonorgestrel-releasing<br>intrauterine<br>contraceptive system<br>(Mirena), 52 mg                    | 52 mg                 | 1/1/2017 | Mirena®              | levonorgestrel-releasing<br>intrauterine system   | Indicated for:<br>Intrauterine contraception for up to 5 years.<br>Freatment of heavy menstrual bleeding in women who choose to use intrauterine contraception as their method of<br>contraception.  | 1      | 1       | After menarche     | N/A | Females Only | Y | Y | 10/26/2018 |
| Miscellaneous | J7300 | Intrauterine copper<br>contraceptive   | 1 intrauterine device | 1/1/2000 | Paragard®            | intrauterine copper<br>contraceptive  | Indicated for intrauterine contraception for up to 10 years.   | 1      | 1       | 16 years           | N/A | Females Only | Y | Y | 7/16/2018  |
| Drugs         | J7301 | Levonorgestrel-releasing<br>intrauterine<br>contraceptive system<br>(Skyla), 13.5 mg                   | 13.5 mg               | 1/1/2017 | Skyla®               | levonorgestrel-releasing intrauterine system  | Indicated for the prevention of pregnancy for up to 3 years.   | 1      | 1       | After menarche     | N/A | Females Only | Y | Y | 10/26/2018 |
| Drugs         | J7307 | Etonogestrel<br>(contraceptive) implant<br>system, including implant<br>and supplies                   | 1 implant             | 1/1/2008 | Nexplanon®           | etonogestrel implant for<br>subdermal use   | Indicated for use by women to prevent pregnancy.   | 1      | 1       | Use after menarche | N/A | Females Only | Y | Y | 10/10/2018 |

| Drugs               | J7308 | Aminolevulinic acid HCl<br>for topical administration,<br>20%, single unit dosage<br>form (354 mg) | 354 mg                | 1/1/2004  | Levulan®<br>Kerastick® | aminolevulinic acid HCl for<br>topical solution, 20%  | Indicated for photodynamic therapy (treatment) of minimally to moderately thick actinic keratoses of the face or scalp, or actinic<br>keratoses of the upper extremities. FDA approval of upper extremity treatment approved 3/6/2018.  | 1     | 1     | 18 years                              | N/A | N/A | Y | Ŷ | 9/25/2018  |
|---------------------|-------|--|-----------------------|-----------|------------------------|---|---|-------|-------|---------------------------------------|-----|-----|---|---|--|
| Drugs               | J7311 | Injection, fluocinolone<br>acetonide, intravitreal<br>implant (retisert), 0.01<br>mg               | 0.01 mg               | 1/1/2007  | Retisert <sup>®</sup>  | fluocinolone acetonide<br>intravitreal implant  | Indicated for the treatment of chronic noninfectious uveitis affecting the posterior segment of the eye.  | 118   | 118   | 12 years                              | N/A | N/A | Y | Y | 10/10/2018   |
| Drugs               | J7312 | Injection,<br>dexamethasone,<br>intravitreal implant, 0.1<br>mg                                    | 0.1 mg                | 1/1/2011  | Ozurdex®               | dexamethasone intravitreal<br>implant   | Indicated for the treatment of macular edema following branch retinal vein occlusion (BRVO) or central retinal vein occlusion (CRVO), non-infectious uveitis affecting the posterior segment of the eye and diabetic macular edema.   | 14    | 14    | 18 years                              | N/A | N/A | Y | Y | 6/6/2019   |
| Drugs               | J0122 | Injection, eravacycline, 1<br>mg   | 1 mg                  | 10/1/2019 | Xerava™                | eravacycline for injection, for<br>intravenous use  | Indicated for the treatment of complicated intra-abdominal infections in patients 18 years of age and older.<br>Limitations of Use:<br>Xerava is not indicated for the treatment of complicated urinary tract infections (cUTI).  | 500   | 7,000 | 18 years                              | N/A | N/A | Y | Y | 9/27/2019  |
| Drugs               | J7316 | Injection, ocriplasmin,<br>0.125 mg  | 0.125 mg              | 1/1/2014  | Jetrea®                | ocriplasmin injection, for<br>intravitreal injection  | Indicated for the treatment of symptomatic vitreomacular adhesion.  | 2     | 2     | 18 years                              | N/A | N/A | Y | Y | 7/16/2018  |
| Drugs               | J7336 | Capsaicin 8% patch, per  | per square centimeter | 1/1/2015  | Qutenza®               | capsaicin 8% patch  | Indicated for the management of neuropathic pain associated with postherpetic neuralgia (PHN).  | 1,120 | 1,120 | 18 years                              | N/A | N/A | Y | Y | 6/6/2019   |
| Drugs               | J7342 | square centimeter<br>Installation, ciprofloxacin<br>otic suspension, 6 mg                          | 6 mg                  | 1/1/2017  | Otiprio*               |   | <ul> <li>Indicated for the treatment of pediatric patients (age 6 months and older) with bilateral otitis media with effusion undergoing<br/>tympanostomy tube placement.</li> <li>Indicated for the treatment of acute otitis externa in patients 6 months of age and older due to Pseudomonas aeruginosa and<br/>Staphylococcus aureus.</li> </ul>  | 10    | 10    | 6 months                              | N/A | N/A | Y | Y | 9/27/2018  |
| Immune<br>Globulins | J7504 | Lymphocyte immune<br>globulin, anti-thymocyte<br>globulin, equine,<br>parenteral, 250 mg           | 250 mg                | 1/1/2000  | Atgam®                 | lymphocyte immune<br>globulin, anti-thymocyte<br>globulin (equine), sterile<br>solution for intravenous use<br>only | Indicated for:<br>•Renal transplant rejection.<br>•Aplastic anemia (moderate to severe) in patients unsuitable for bone marrow transplantation.<br>L'imitations of Use: The usefulness of Atgam has not been demonstrated in patients with aplastic anemia who are suitable<br>candidates for bone marrow transplantation or in patients with aplastic anemia secondary to neoplastic disease, storage disease,<br>myelofibrosis, Fanconi's syndrome, or in patients known to have been exposed to myelotoxic agents or radiation.  | 11.2  | 235.2 | N/A                                   | N/A | N/A | Y | Ŷ | 9/12/2018  |
| Drugs               | J9000 | Injection, doxorubicin<br>hydrochloride, 10 mg   | 10 mg                 | 1/1/2000  | Adriamycin®            | doxorubicin hydrochloride<br>for injection, for intravenous<br>use  | Indicated:<br>- As a component of multiagent adjuvant chemotherapy for treatment of women with axillary lymph node involvement following<br>resection of primary breast cancer.<br>- For the treatment of: acute lymphoblastic leukemia, acute myeloblastic leukemia, Hodgkin lymphoma, Non-Hodgkin lymphoma,<br>metastatic breast cancer, metastatic Wilm's tumor, metastatic neuroblastoma, metastatic soft tissue sarcoma, metastatic bone<br>sarcomas, metastatic ovarian carcinoma, metastatic transitional cell bladder carcinoma, metastatic thyroid carcinoma, metastatic<br>gastric carcinoma, metastatic bronchagenic carcinoma.  | 19    | 38    | N/A                                   | N/A | N/A | Y | Y | 4/10/2019  |
| Drugs               | J9015 | Injection, aldesleukin, per<br>single-use via  | per single use vial   | 1/1/2000  | Proleukin®             | aldesleukin for injection, for<br>intravenous infusion  | Indicated for the treatment of adults with metastatic renal cell carcinoma and metastatic melanoma.   | 12    | 112   | 18 years                              | N/A | N/A | Y | Y | 6/6/2019   |
| Drugs               | J9017 | Injection, arsenic trioxide,<br>1 mg   | 1 mg                  | 1/1/2000  | Trisenox®              | arsenic trioxide injection, for<br>intravenous use  | <ul> <li>Indicated for induction of remission and consolidation in patients with acute promyelocytic leukemia (APL) who are refractory to,<br/>or have relapsed from, retinoid and anthracycline chemotherapy, and whose APL is characterized by the presence of the (15,17)<br/>translocation or PML/RAR alpha gene expression.</li> <li>Indicated in combination with tretion for treatment of adults with newly-diagnosed low-risk acute promyelocytic leukemia (APL)<br/>whose APL is characterized by the presence of the t(15,17) translocation or PML/RAR-alpha gene expression.</li> </ul>  | 21    | 651   | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific age<br>restrictions:<br>• In combination with<br>tretinoin: 18 years of age and<br>older<br>• As a single agent: 5 years of<br>age and older |
| Drugs               | J9019 | Injection, asparaginase<br>(Erwinaze), 1,000 IU  | 1,000 units           | 1/1/2013  | Erwinaze®              | asparaginase erwinia<br>chrysanthemi for injection,<br>for intramuscular (IM) or<br>intravenous (IV) use            | Indicated as a component of a multi-agent chemotherapeutic regimen for the treatment of patients with acute lymphoblastic<br>leukemia (ALL) who have developed hypersensitivity to E. coli-derived asparaginase.  | 70    | 420   | 1 year                                | N/A | N/A | Y | Y | 6/4/2019   |
| Biologicals         | J9022 | Injection, atezolizumab,<br>10 mg  | 10 mg                 | 1/1/2018  | Tecentriq®             | atezolizumab injection, for<br>intravenous use  | Indicated for the treatment of patients with:<br>• Locally advanced or metastatic urothelial carcinoma who:<br>O Are not eligible for cisplath-containing chemotherapy, and whose tumors express PD-L1 (PD-L1 stained tumor-infiltrating immune<br>cells [C] covering<br>greater than or equal to 5% of the tumor area), or<br>O Are not eligible for any platinum-containing chemotherapy regardless of level of tumor PD-L1 expression, or<br>O Have disease progression during or following any platinum-containing chemotherapy, or within 12 months of neoadjuvant or<br>adjuvant chemotherapy.<br>• Non-Small Cell Lung Cancer (NSCLC)<br>O Metastati cnon-small cell lung cancer (was and carboplatin, for the first-line treatment of patients with metastatic non-<br>squarmous NSCL with no EGFR or ALK genomic tumor aberrations.<br>0 in combination with beviacitumab, pacitasel, and carboplatin, for the first-line treatment of patients with metastatic non-<br>squarmous NSCL with no EGFR or ALK genomic tumor aberrations.<br>0 in combination with pacitasel protein-bound and carboplatin for the first-line treatment of adult patients with metastatic non-<br>squarmous NSCL with no EGFR or ALK genomic tumor aberrations.<br>0 in combination with pacitasel protein-bound for the treatment of adult patients with metastatic non-<br>squarmous NSCL with no EGFR or ALK genomic tumor aberrations.<br>0 in combination with pacitasel protein-bound for the treatment of adult patients with metastatic non-<br>squarmous NSCL with no EGFR or ALK genomic tumor aberrations.<br>1 in combination with pacitasel protein-bound for the treatment of adult patients with unresectable locally advanced or metastatic<br>TMBC Movae tumors express PD-11 (PD-11 stained tumor-infiltrating immune cells [[C] of any intensity covering 2.1% of the tumor<br>area), a determined by an FDA approved test.<br>Small Cell Lung Cancer [SLCL]<br>• in combination with carboplatin and etoposide, for the first-line treatment of adult patients with extensive-stage small cell lung<br>cancer [FS-SCLC]. | 168   | 336   | 18 years                              | N/A | N/A | Y | Y | 5/1/2019   |
| Biologicals         | J9023 | Injection, avelumab, 10<br>mg  | 10 mg                 | 1/1/2018  | Bavencio®              | avelumab injection, for<br>intravenous use  | <ul> <li>Indicated for the treatment of adults and pediatric patients 12 years and older with metastatic Merkel cell carcinoma (MCC).</li> <li>Indicated for patients with locally advanced or metastatic urothelial carcinoma (UC) who have disease progression during or following platinum-containing chemotherapy or have disease progression within 12 months of neoadjuvant or adjuvant treatment with platinum-containing chemotherapy.</li> <li>First-line treatment, in combination with axitinib, of patients with advanced renal cell carcinoma (RCC).</li> </ul>  | 80    | 240   | 12 years                              | N/A | N/A | Y | Y | 7/2/2018   |
| Drugs               | J9025 | Injection, azacitidine, 1<br>mg  | 1 mg                  | 1/1/2006  | Vidaza®                | azacitidine for injection, for subcutaneous or intravenous use  | Indicated for the treatment of patients with the following FAB myelodysplastic syndrome (MDS) subtypes: refractory anemia (RA) or<br>refractory anemia with ringed sideroblasts (RARS) (if accompanied by neutropenia or thrombocytopenia or requiring transfusions),<br>refractory anemia with excess blasts (RAEB), refractory anemia with excess blasts in transformation (RAEB-T) and chronic<br>myelomonocytic leukemia (CMMoL).   | 250   | 2,500 | 18 years                              | N/A | N/A | Y | Y | 9/25/2018  |

| Biologicals | J9030 | Bcg live intravesical instillation, 1 mg                     | per installation | 1/1/2000 | Tice BCG®             | BCG Live (intravesical)                                      | Indicated for the treatment and prophylaxis of carcinoma in situ (CIS) of the urinary bladder, and for the prophylaxis of primary or<br>recurrent stage Ta and/or T1 papillary tumors following transurethral resection (TUR). Tice BCG is not recommended for stage<br>TaG1 papillary tumors, unless they are judged to be at high risk of tumor recurrence. Tice BCG is not indicated for papillary tumors<br>of stages higher than T1.  | 1   | 5     | 18 years | N/A | N/A        | Y | Y | 6/8/2019  |
|-------------|-------|--|------------------|----------|-----------------------|--|--|-----|-------|----------|-----|------------|---|---|-----------|
| Drugs       | J9032 | Injection, belinostat, 10                                    | 10 mg            | 1/1/2016 | Beleodaq®             | belinostat for injection, for<br>intravenous use             | Indicated for the treatment of patients with relapsed or refractory peripheral T-cell lymphoma (PTCL).   | 250 | 2,500 | 18 years | N/A | N/A        | Y | Y | 4/10/2019 |
| Drugs       | J9033 | Injection, bendamustine<br>HCI (Treanda), 1 mg               | 1 mg             | 1/1/2017 | Treanda®              | bendamustine hydrochloride<br>injection, for intravenous use | Indicated for treatment of patients with:<br>• Chronic lymphocytic leukemia (CLL). Efficacy relative to first line therapies other than chlorambucil has not been established.<br>• Indicent S-cell non-Hodgkin lymphoma (NHL) that has progressed during or within six months of treatment with rituximab or a<br>rituximab-containing regimen.   | 300 | 1,200 | 18 years | N/A | N/A        | Y | Y | 9/25/2018 |
| Drugs       | J9034 | Injection, bendamustine<br>HCI (Bendeka), 1 mg               | 1 mg             | 1/1/2017 | Bendeka®              |  | Indicated for treatment of patients with:<br>• Chronic lymphocytic leukemia (CLU). Efficacy relative to first line therapies other than chlorambucil has not been established.<br>• Indolent 8-cell non-Hodgkin lymphoma (NHL) that has progressed during or within six months of treatment with rituximab or a<br>rituximab-containing regimen.   | 300 | 1,200 | 18 years | N/A | N/A        | Y | Y | 9/25/2018 |
| Biologicals | J9035 | Injection, bevacizumab,<br>10 mg                             | 10 mg            | 1/1/2005 | Avastin*              | bevacizumab injection, for<br>intravenous use                | Indicated for the treatment of:<br>• Metastatic colorectal cancer, in combination with intravenous 5-fluorouracil-based chemotherapy for first- or second-line<br>treatment.<br>• Metastatic colorectal cancer, in combination with fluoropyrimidine-influoropyrimidine-onaliplatin-based<br>chemotherapy for second-line treatment in patients who have progressed on a first-line Avatin-containing regimen.<br>• Unresctable, locally advanced, recurrent or metastatic non-squamous non-small cell lung cancer, in combination with carboplatin<br>and pacitized for first-line treatment.<br>• Recurrent globlastoma in adults.<br>• Recurrent globlastoma in adults.<br>• Recurrent globlastoma in combination with interferon alfa.<br>• Persistent, recurrent, or metastatic cervical cancer, in combination with pacitaxel and cisplatin, or pacitaxel and topotecan.<br>• Epithelial ovaria, fallopian thue, or primary periloneal cancer:<br>• In combination with carboplatin and pacitized or carboplatin and gencitabine, followed by Avastin as a single agent, for platinum<br>sensitive recurrent disease.<br>• In combination with carboplatin and pacitized or carboplatin and gencitabine, followed by Avastin as a single agent, for platenum<br>sensitive recurrent disease. | 210 | 420   | 18 years | N/A | N/A        | ¥ | ¥ | 7/26/2018 |
|             |       |  |                  |          |                       |  | Limitation of Use: Avastin is not indicated for adjuvant treatment of colon cancer.  |     |       |          |     |            |   |   |           |
| Biologicals | J9039 | Injection, blinatumomab,<br>1 mcg                            | 1 mcg            | 1/1/2016 | Blincyto®             |  | Treatment of adults and children with:<br>• Relapsed or refractory 8-cell precursor acute lymphoblastic leukemia (ALL).<br>• 8-cell precursor acute lymphoblastic leukemia (ALL) in first or second complete remission with minimal residual disease (MRD) ≥<br>0.1%   | 28  | 784   | N/A      | N/A | N/A        | Y | Y | 4/9/2019  |
| Drugs       | J9040 | Injection, bleomycin<br>sulfate, 15 units                    | 15 units         | 1/1/2000 | N/A                   | bleomycin for injection                                      | Considered a palliative treatment shown to be useful in the management of:<br>• Squamous Cell Carcinoms: Head and neck (including mouth, tongue, tonsil, nasopharymx, oropharymx, sinus, palate, lip, buccal<br>mucosa, gingivae, explicitus, skin, larymx), penis, cervix, and vulva. The response to bleomycin is poorer in patients with previously<br>irradiated head and neck cancer.<br>• Lymphomas: Hodgkin's disease, non-Hodgkin's disease<br>• Testicular Carcinoma: Embryonal cell, choriocarcinoma, and teratocarcinoma<br>• Malignant Pleural Effusions: Bleomycin is effective as a sclerosing agent for the treatment of malignant pleural effusion and<br>orevention of recurrent locaral effusions.   | 5   | 27    | N/A      | N/A | N/A        | Y | ¥ | 4/10/2019 |
| Drugs       | J9041 | Injection, bortezomib<br>(velcade), 0.1 mg                   | 0.1 mg           | 1/1/2005 | Velcade®              | subctuaneous or intravenous                                  | Indicated for treatment of patients with:  | 35  | 245   | 18 years | N/A | N/A        | Y | Y | 6/8/2019  |
| Biologicals | J9042 | Injection, brentuximab<br>vedotin, 1 mg                      | 1 mg             | 1/1/2013 | Adcetris <sup>®</sup> | brentuximab vedotin for<br>injection, for intravenous use    | Indicated for:<br>• Previously untreated Stage III or IV classical Hodgkin lymphoma (cHL), in combination with doxorubicin, vinblastine, and<br>darachasine.   | 180 | 360   | 18 years | N/A | N/A        | Y | Y | 5/14/2019 |
| Drugs       | J9043 | Injection, cabazitaxel, 1<br>mg                              | 1 mg             | 1/1/2012 | Jevtana®              |  | Indicated in combination with prednisone for treatment of patients with hormone-refractory metastatic prostate cancer previously<br>treated with a docetaxel-containing treatment regimen.   | 120 | 240   | 18 years | N/A | Males Only | Y | ¥ | 9/27/2018 |
| Drugs       | J9044 | Injection, bortezomib,<br>not otherwise specified,<br>0.1 mg | 0.1 mg           | 1/1/2019 | N/A                   | bortezomib for injection, for intravenous use                | Indicated for:<br>• treatment of patients with multiple myeloma<br>• treatment of patients with mantle cell lymphoma who have received at least 1 prior therapy  | 35  | 245   | 18 years | N/A | N/A        | Y | Y | 2/5/2019  |
| Drugs       | J9045 | Injection, carboplatin, 50<br>mg                             | 50 mg            | 1/1/2000 | N/A                   | carboplatin injection for<br>intravenous use                 | Indicated for the initial treatment of advanced ovarian carcinoma in established combination with other approved<br>chemotherapeutic agents and for the palliative treatment of patients with ovarian carcinoma recurrent after prior chemotherapy,<br>including patients who have previously been treated with cisplatin.   | 18  | 36    | 18 years | N/A | N/A        | Y | Y | 4/10/2019 |
| Drugs       | J9047 | Injection, carfilzomib, 1<br>mg                              | 1 mg             | 1/1/2014 | Kyprolis®             | carfilzomib for injection, for<br>intravenous use            | Indicated:<br>in combination with dexamethasone or with lenalidomide plus dexamethasone for the treatment of patients with relapsed or<br>refractory multiple myeloma who have received one to three lines of therapy.<br>A sa single agent for the treatment of patients with relapsed or refractory multiple myeloma who have received one or more lines<br>of therapy.  | 154 | 992   | 18 years | N/A | N/A        | Y | Ŷ | 6/5/2019  |
| Drugs       | J9050 | Injection, carmustine, 100<br>mg                             | 100 mg           | 1/1/2000 | BiCNU®                | carmustine for injection                                     | Indicated as palliative therapy as a single agent or in established combination therapy with other approved chemotherapeutic<br>agents in the following:<br>8 Farian tumors - gioblastoma, brainstem glioma, medulloblastoma, astrocytoma, ependymoma, and metastatic brain tumors.<br>• Multiple myeloma - in combination with prednisone.<br>• Multiple myeloma - in combination with other approved drugs in patients who relapse while being treated<br>with primary therapy, or who fail to respond to primary therapy.<br>• Non-todgkirs' disease - as secondary therapy in combination with other approved drugs for patients who relapse while being<br>treated with primary therapy, or who fail to respond to primary therapy.   | 5   | 5     | 18 years | N/A | N/A        | Y | ¥ | 5/20/2019 |

| 19055 | Injection, cetuximab, 10<br>mg   | 10 mg   | 1/1/2005  | Erbitux*   | cetuvimab injection, for<br>intravenous use  | Indicated for:<br>• Squamous Cell Carcinoma of the Head and Neck (SCCHN):<br>• Jocally or regionally advanced squamous cell carcinoma of the head and neck in combination with radiation therapy.<br>- Jocally or regional disease or metastatic squamous cell carcinoma of the head and neck in combination with platinum-based<br>therapy with fluorouracil.<br>- Recurrent or metastatic squamous cell carcinoma of the head and neck progressing after platinum-based therapy.<br>• K-Ras Wild-type, EGFR-expressing Colorectal Cancer (CRC) as determined by an FDA-approved test:<br>- In combination with Finfin for first-line treatment,<br>- In combination with Finfin for first-line treatment,<br>- As a single agent in patients who are refractory to irinotecan-based chemotherapy or who are intolerant to irinotecan.<br>Limitations of Use: Erbitux is not indicated for treatment of Ras-mutant colorectal cancer or when the results of the Ras mutation<br>tests are unknown.   | 100  | 380   | 18 years   | N/A   | N/A   | Y   | Y   | 6/4/2019  |
|-------|--|---|---|--|--|---|--|---|--|---|---|---|---|---|
| J9057 | Injection, copanlisib, 1<br>mg   | 1 mg  | 1/1/2019  | Aliqopa™   | copanlisib injection, for<br>intravenous use   | Indicated for the treatment of adult patients with relapsed follicular lymphoma (FL) who have received at least two prior systemic<br>therapies. Accelerated approval was granted for this indication based on overall response rate. Continued approval for this<br>indication may be contingent upon verification and description of clinical benefit in a confirmatory trial.  | 60   | 240   | 18 years   | N/A   | N/A   | Y   | Ŷ   | 10/4/2018   |
| J9060 | Injection, cisplatin,<br>powder or solution, per<br>10 mg  | 10 mg   | 1/1/2000  | N/A  | cisplatin injection  | Indicated as therapy for:<br>• Metastatic Testicular Tumors: In established combination therapy with other approved chemotherapeutic agents in patients with<br>metastatic Testicular tumors who have already received appropriate surgical and/or radiotherapeutic agents in patients with<br>metastatic testical tumors. In established combination therapy with other approved chemotherapeutic agents in patients with<br>metastatic tovarian Tumors. In established combination therapy with other approved chemotherapeutic agents in patients with<br>metastatic ovarian tumors who have already received appropriate surgical and/or radiotherapeutic agents in patients with<br>metastatic ovarian tumors who have already received appropriate surgical and/or radiotherapeutic procedures. An established<br>combination consists of displatin and cyclophosphamide. Cisplatin Injection, as a single agent, is indicated as secondary therapy in<br>patients with metastatic ovarian tumors refractory to standard chemotherapy who have not previously received Cisplatin Injection<br>therapy.<br>• Advanced Bladder Cancer: Indicated as a single agent for patients with transitional cell bladder cancer which is no longer<br>amenable to local treatments, such as surgery and/or radiotherapy.                              | 25   | 50  | 18 years   | N/A   | N/A   | Y   | Y   | 9/27/2018   |
| J9065 | Injection, cladribine, per   | 1 mg  | 1/1/2000  | N/A  | cladribine injection   | Indicated for the treatment of active Hairy Cell Leukemia as defined by clinically significant anemia, neutropenia, thrombocytopenia,   | 13   | 91  | 18 years   | N/A   | N/A   | Y   | Y   | 6/4/2019  |
| J9070 | L mg<br>Cyclophosphamide, 100<br>mg  | 100 mg  | 1/1/2000  | N/A  | cyclophosphamide for<br>injection, for intravenous use   | Indicated for the treatment of:<br>Malignant Diseases: malignant lymphomas: Hodgkin's disease, lymphocytic lymphoma, mixed-cell type lymphoma, histiocytic<br>lymphoma, Burkitt's lymphoma; multiple myeloma, leukemias, mycosis fungoides, neuroblastoma, adenocarcinoma of ovary,   | 35   | 105   | N/A  | N/A   | N/A   | Y   | Ŷ   | 6/4/2019  |
| J9098 | Injection, cytarabine<br>liposome, 10 mg   | 10 mg   | 1/1/2004  | DepoCyt*   | cytarabine liposome injection<br>for intrathecal use   | Indicated for the intrathecal treatment of lymphomatous meningitis.   | 5  | 15  | 18 years   | N/A   | N/A   | Y   | Y   | 10/4/2018   |
| J9100 | Injection, cytarabine, 100<br>mg   | 100 mg  | 1/1/2000  | N/A  | cytarabine injection   | In combination with other approved anticancer drugs, is indicated for remission induction in acute non-lymphocytic leukemia of<br>adults and pediatric patients. It has also been found useful in the treatment of acute lymphocytic leukemia and the blast phase of<br>chronic myelocytic leukemia. Intrathecal administration of cytarabine injection (preservative-free preparations only) is indicated in<br>the conshivation and treatment of menineeal leukemia.  | 5  | 35  | N/A  | N/A   | N/A   | Y   | Y   |   |
| J9120 | Injection, dactinomycin,<br>0.5 mg   | 0.5 mg  | 1/1/2000  | Cosmegen®  | dactinomycin for injection,<br>for intravenous use   | Indicated for the treatment of:<br>• adult and pediatric patients with Wilns tumor, as part of a multi-phase, combination chemotherapy regimen<br>• adult and pediatric patients with chabdomyosarcoma, as part of a multi-phase, combination chemotherapy regimen<br>• adult and pediatric patients with Kimg sarcoma, as part of a multi-phase, combination chemotherapy regimen<br>• adult and pediatric patients with metastatic, nonseminomatous testicular cancer, as part of a multi-phase, combination<br>chemotherapy regimen<br>• post-menarchal patients with gestational trophoblastic neoplasia, as a single agent or as part of a combination chemotherapy<br>• adult aptients with locally recurrent or locoregional solid malignancies, as a component of palliative or adjunctive regional<br>perfusion  | 14   | 42  | N/A  | N/A   | N/A   | Y   | Y   | 9/25/2018   |
| J9130 | Dacarbazine, 100 mg  | 100 mg  | 1/1/2000  | N/A  | dacarbazine for injection  | Indicated for the treatment of metastatic malignant melanoma and as secondary-line therapy when used in combination with other offective appent for Hodking' discase  | 10   | 91  | N/A  | N/A   | N/A   | Y   | Y   | 6/10/2019   |
| J9145 | injection, daratumumab,<br>10 mg   | 10 mg   | 1/1/2017  | Darzalex®  | daratumumab injection, for<br>intravenous use  | enclosed agents of motivation subsets. Indicated for the treatment of adults patients with multiple myeloma: In combination with lenalidomide and dexamethasone in patients with relapsed or refractory multiple myeloma who have received at least one prior therapy. In combination with bortzeomib and dexamethasone in patients who have received at least one prior therapy. As monotherapy, in patients who have received at least three prior inters of therapy including a proteasome inhibitor (PI) and an immunomodulatory agent or who are double-refractory to a PI and an immunomodulatory agent. In combination with pomaldomide and dexamethasone in patients who have received at least three prior induces of therapy including a proteasome inhibitor (PI) and an immunomodulatory agent. In combination with pomaldomide and dexamethasone in newly diagnosed patients who are ineligible for autologous stem cell transplant. In combination with bortzeomib, thalidomide, and dexamethasone in newly diagnosed patients who are ineligible for autologous stem cell transplant.  | 224  | 1,120   | 18 years   | N/A   | N/A   | Ŷ   | Ŷ   | 10/28/2019  |
| J9150 | Injection, daunorubicin,<br>10 mg  | 10 mg   | 1/1/2000  | N/A  | daunorubicin hydrochloride<br>injection  | In combination with other approved anticancer drugs, daunorubicin is indicated for remission induction in acute nonlymphocytic<br>leukemia (myelogenous, monocytic, erythroid) of adults and for remission induction in acute lymphocytic leukemia of children and<br>adults.   | 12   | 60  | N/A  | N/A   | N/A   | Y   | Y   | 6/10/2019   |
| J9151 | Injection, daunorubicin<br>citrate, liposomal<br>formulation, 10 mg                                      | 10 mg   | 1/1/2000  | DaunoXome®   | daunorubicin citrate<br>liposome injection   | Indicated as first-line cytotoxic therapy for advanced HIV-associated Kaposi sarcoma. DaunoXome is not recommended in patients<br>with less than advanced HIV-related Kaposi's sarcoma.   | 10   | 30  | 18 years   | N/A   | N/A   | Y   | Y   | 10/4/2018   |
| J9153 | Injection, liposomal, 1 mg<br>daunorubicin and 2.27<br>mg cytarabine                                     | 1 mg/2.27 mg  | 1/1/2019  | Vyxeos™  | daunorubicin and cytarabine<br>liposome injection, for<br>intravenous use  | Indicated for the treatment of adults with newly-diagnosed therapy-related acute myeloid leukemia (t-AML) or AML with<br>myelodysplasia-related changes (AML-MRC).  | 132  | 660   | 18 years   | N/A   | N/A   | Y   | Y   | 2/5/2019  |
| J9155 | Injection, degarelix, 1 mg   | 1 mg  | 1/1/2010  | Firmagon®  | degarelix for injection for subcutaneous administration  | Indicated for the treatment of patients with advanced prostate cancer.  | 240  | 320   | 18 years   | N/A   | Males Only  | Y   | Y   | 10/4/2018   |
|       | 19057<br>19060<br>19065<br>19070<br>19098<br>19100<br>19120<br>19120<br>19130<br>19145<br>19151<br>19153 | J90053         mg           J90054         Injection, copanilsib, 1           J90050         Injection, cisplatin, mg           J90060         Injection, cisplatin, mg           J90060         Injection, cisplatin, mg           J90070         Cyclophosphamide, 100           J90080         Injection, ciarabine           J90070         Cyclophosphamide, 100           J90100         Injection, ciarabine           J91010         Injection, ciarabine, 100           J91020         Injection, ciarabine, 100           J91030         Dacarbazine, 100 mg           J9130         Dacarbazine, 100 mg           J9131         Injection, daratumumab, 10 mg           J9132         Injection, daratumumab, 10 mg           J9134         Injection, daunorubicin, 10 mg           J9135         Injection, daunorubicin, 10 mg           J9135         Injection, daunorubicin, 20 mg           J9135         Injection, inpocomal, 11 mg           J9135         Injection, inpocomal, 12 mg           J9136         Injection mg | J9055     mg     LU mg       19057     Injection, copanisib, 1     1 mg       J9050     Injection, cisplatin,<br>powder or solution, per<br>10 mg     10 mg       J9050     Injection, cladribine, per<br>1 mg     1 mg       J9070     Cyclophosphamide, 100<br>mg     100 mg       J9070     Cyclophosphamide, 100<br>mg     100 mg       J9100     Injection, cytarabine, 100<br>mg     100 mg       J9101     Injection, cytarabine, 100<br>mg     100 mg       J9120     Dacarbazine, 100 mg     100 mg       J9130     Dacarbazine, 100 mg     100 mg       J9145     Injection, daratumumab,<br>10 mg     10 mg       J9151     Injection, daunorubicin,<br>chrate, liposomal, 100<br>mg cytarabine     10 mg       J9153     Injection, Jaunorubicin,<br>chrate, liposomal, 1.27<br>mg cytarabine     11 mg/2.27 mg | J9055mgJ0 mgJ/J/200519057Injection, copanitaib, 1<br>mg1 mg1/1/201919050Injection, cisplatin,<br>mg10 mg1/1/200019050Injection, cisplatin,<br>1 mg10 mg1/1/200019050Injection, ciadribine, per<br>1 mg1 mg1/1/200019070Cyclophosphamide, 100<br>mg100 mg1/1/200019080Injection, ciadribine, per<br>1 mg100 mg1/1/200019090Injection, ciarabine, 100<br>mg100 mg1/1/200019100Injection, ciarabine, 100<br>mg0.5 mg1/1/200019130Dacarbazine, 100 mg100 mg1/1/200019140Injection, daratumumab,<br>10 mg100 mg1/1/200019151Injection, danarutuninab,<br>tormation, 10 mg10 mg1/1/200019151Injection, daunorubicin<br>citrate, liposomal,<br>tormation, 10 mg10 mg1/1/200019151Injection, fusionubicin<br>citrate, liposomal,<br>mg cytarabine,<br>mg cytarabine10 mg/2.27 mg1/1/2019 | J9555mg10 mgJ1/2005Fritux*19057Injection, copanitsib, 1<br>mg1 mg1/1/2019Aliqopa**19050Injection, cisplatin,<br>mg10 mg1/1/2000N/A19052Injection, cisplatin,<br>10 mg10 mg1/1/2000N/A19053Injection, cisplatin,<br>mg1 mg1/1/2000N/A19054Injection, cisplatin,<br>mg1 mg1/1/2000N/A19070Cyclophosphamide, 100<br>mg100 mg1/1/2000N/A19080Injection, cytarabine,<br>mg100 mg1/1/2000N/A19100Injection, cytarabine, 100<br>mg100 mg1/1/2000N/A19120Injection, datatinomycin,<br>0.5 mg0.5 mg1/1/2000N/A19130Dacarbazine, 100 mg100 mg1/1/2000N/A19130Injection, datatumumab,<br>10 mg10 mg1/1/2017Daraslex*19150Injection, daugorubicin,<br>citorate, joposmal, 10 mg10 mg1/1/2000N/A19151Injection, daugorubicin,<br>citorate, joposmal, 10 mg1/1/2000N/A19151Injection, daugorubicin,<br>citorate, joposmal, 10 mg10 mg1/1/2000Daugoxome*19151Injection, daugorubicin<br>citorate, joposmal, 10 mg1/1/2000Junoxome*19151Injection, induction and 2.27<br>mg cytarabine1/1/2019Lyposma' | 3953     mg     1.0 mg     1/1/200     EPRILAP     Intravenous use       19957     Injection, copanlisb, 1     1 mg     1/1/2019     Allqopa*     copanlisb injection, for<br>intravenous use       19056     Injection, cipalatin,<br>mg     1 mg     1/1/2000     N/A     cisplatin injection       19056     Injection, ciadarbine, per<br>1 mg     1 mg     1/1/2000     N/A     cisplatin injection       19057     Cr(dophosphamide, per<br>1 mg     1 mg     1/1/2000     N/A     cisplatin injection       19058     Injection, cidarbine, per<br>1 mg     10 mg     1/1/2000     N/A     cisplatin injection       19070     Cr(dophosphamide, per<br>mg     10 mg     1/1/2000     N/A     cisplatin injection       19100     Injection, cytarabine<br>liposome, 10 mg     100 mg     1/1/2000     N/A     cytarabine liposome injection<br>for intravenous use       19101     Injection, datatinomycin,<br>0.5 mg     0.5 mg     1/1/2000     N/A     datatinomycin for injection.       19132     Injection, datatumumab,<br>10 mg     100 mg     1/1/2000     N/A     datactionmycin for injection.       19134     Injection, daurorubicin,<br>10 mg     10 mg     1/1/2000     N/A     dataction hydrochloride<br>intravenous use       19135     Injection, daurorubicin<br>formitation, 10 mg     10 mg     1/1/2000     N/A | And Process         System         Jackson System         System | No.         Participant State         James State         James State         Substrate State | No.         No. <td>Answer         Answer         Answer&lt;</td> <td>Appendix Participants         Appendix Participant         Appendix Participant         &lt;</td> <td>And Area         Area</td> <td>And       And       A</td> <td><ul> <li> <ul> <li></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></td> | Answer         Answer< | Appendix Participants         Appendix Participant         Appendix Participant         < | And Area         Area | And       A | <ul> <li> /li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul> |

| Drugs       | J9171 | Injection, docetaxel, 1 mg   | 1 mg   | 1/1/2010 | Taxotere®,<br>Docefrez® | docetaxel injection<br>concentrate, intravenous<br>infusion     | Indicated for:<br>• Breast Cancer (BC): single agent for locally advanced or metastatic BC after chemotherapy failure; and with doxorubicin and<br>cyclophosphamide as adjuvant treatment of operable node-positive BC.<br>• Non-Small Cell Lung Cancer (NSCLC): single agent for locally advanced or metastatic NSCLC after platinum therapy failure; and<br>with cisplain for unrescatable, locally advanced or metastatic untreated NSCLC.<br>• Hormone Refractory Prostate Cancer (HRPC): with prednisone in androgen independent (hormone refractory) metastatic prostate<br>cancer.<br>• Gastric Adenocarcinoma (GC): with cisplatin and fluorouracil for untreated, advanced GC, including the gastroesophageal junction.<br>• Squamous Cell Carcinoma of the Head and Neck Cancer (SCCHN): with cisplatin and fluorouracil for induction treatment of locally<br>advanced SCHN.   | 250   | 500   | N/A                                   | N/A | N/A  | Y | Y | 6/8/2019   |
|-------------|-------|--|--------|----------|-------------------------|---|---|-------|-------|---------------------------------------|-----|--|---|---|--|
| Biologicals | J9173 | Injection, durvalumab, 10<br>mg  | 10 mg  | 1/1/2019 | lmfinzi®                | durvalumab injection, for<br>intravenous use                    | Imfinzi is a programmed death-ligand 1 (PD-L1) blocking antibody indicated for the treatment of patients with:<br>• Locally advanced or metastatic urothelial carcinoma who:<br>- Have disease progression during or following platinum-containing chemotherapy.<br>- Have disease progression within 12 months of neadolyurant or adjuvant treatment with platinum-containing chemotherapy.<br>This indication is approved under accelerated approval based on tumor response rate and duration of response. Continued<br>approval for this indication my be contingent upon verification and description of clinical banefit in continnatory trials.<br>- Unresectable, Stage III non-small cell lung cancer (NSCLC) whose disease has not progressed following concurrent platinum-based<br>chemotherapy and radiation therapy<br>- in combination with etoposide and either carboplatin or cisplatin, as first-line treatment of adult patients with extensive-stage<br>small cell lung cancer (ES-SCLC). | 150   | 420   | 18 years                              | N/A | N/A  | Y | ¥ | 4/29/2020  |
| Biologicals | J9176 | Injection, elotuzumab, 1<br>mg   | 1 mg   | 1/1/2017 | Empliciti®              | elotuzumab for injection, for<br>intravenous use                | Indicated in:<br>• combination with lenalidomide and dexamethasone for the treatment of adult patients with multiple myeloma who have received<br>one to three prior therapies.<br>• combination with pomalidomide and dexamethasone for the treatment of adult patients with multiple myeloma who have<br>received at least two prior therapies, including lenalidomide and a proteasome inhibitor.  | 2,800 | 5,600 | 18 years                              | N/A | N/A  | Y | Y | 5/20/2019  |
| Drugs       | J9178 | Injection, epirubicin HCl,<br>2 mg   | 2 mg   | 1/1/2004 | Ellence®                | epirubicin hydrochloride<br>injection                           | Indicated as a component of adjuvant therapy in patients with evidence of axillary node tumor involvement following resection of<br>primary breast cancer.  | 150   | 300   | 18 years                              | N/A | N/A  | Y | Y | 10/10/2018   |
| Drugs       | J9179 | Injection, eribulin<br>mesylate, 0.1 mg  | 0.1 mg | 1/1/2012 | Halaven®                | eribulin mesylate injection,<br>for intravenous use             | primer views carter.<br>Indicated for the treatment of patients with:<br>• Metastatic breast cancer who have previously received at least two chemotherapeutic regimens for the treatment of metastatic<br>disease. Prior therapy should have included an antitracycline and a takane in either the adjuvant or metastatic setting.<br>• Unresectable or metastatic liposarcoma who have received a prior anthracycline-containing regimen.   | 40    | 160   | 18 years                              | N/A | N/A  | Y | Y | 6/4/2019   |
| Drugs       | J9181 | Injection, etoposide, 10<br>mg   | 10 mg  | 1/1/2000 | Toposar™,<br>Etopophos® | etoposide phosphate for<br>injection, for intravenous use       | Indicated for the treatment of patients with:<br>• Refractory testicular tumors, in combination with other chemotherapeutic drugs.<br>• Small cell lung cancer, in combination with cisplatin, as first-line treatment.   | 30    | 300   | 18 years                              | N/A | N/A  | Y | Y | 6/10/2019  |
| Drugs       | J9185 | Injection, fludarabine<br>phosphate, 50 mg                                     | 50 mg  | 1/1/2000 | N/A                     | fludarabine phosphate for<br>injection for intravenous use      | Indicated for the treatment of adult patients with B-cell chronic lymphocytic leukemia (CLL) who have not responded to or whose disease has progressed during treatment with at least 1 standard alkulating agent containing regimen. The safety and effectiveness  | 2     | 16    | 18 years                              | N/A | N/A  | Y | Y | 10/10/2018   |
| Drugs       | J9190 | Injection, fluorouracil,<br>500 mg   | 500 mg | 1/1/2000 | Adrucil®                | fluorouracil injection for<br>intravenous use                   | Indicated for the treatment of patients with:<br>• Adenocarcinoma of the colon and rectum<br>• Adenocarcinoma of the breast<br>• Gastric adenocarcinoma<br>• Pancreatic adenocarcinoma  | 15    | 45    | 18 years                              | N/A | N/A  | Y | Y | 4/10/2019  |
| Drugs       | J9200 | Injection, floxuridine, 500<br>mg  | 500 mg | 1/1/2000 | N/A                     | floxuridine for injection, for<br>intra-arterial infusion       | Effective in the palliative management of gastrointestinal adenocarcinoma metastatic to the liver, when given by continuous<br>regional intra-anterial infusion in carefully selected patients who are considered incurable by surgery or other means. Patients with<br>known disease extending beyond an area capable of infusion via a single artery should, except in unusual circumstances, be<br>considered for systemic therapy with other chemotherapeutic agents.   | 1     | 5     | 18 years                              | N/A | N/A  | Y | Y | 10/26/2018   |
| Drugs       | J9201 | Injection, gemcitabine<br>hydrochloride, not<br>otherwise specified, 200<br>mg | 200 mg | 1/1/2000 | Gemzar®                 | gemcitabine for injection, for<br>intravenous use               | Indicated:<br>In combination with carboplatin, for the treatment of advanced ovarian cancer that has relapsed at least 6 months after<br>completion of platinum-based therapy.<br>I no combination with pacificate, for first-line treatment of metastatic breast cancer after failure of prior anthrocycline-containing<br>adjurant Chemotherapy, unless anthracyclines were clinically contraindicated.<br>I no combination with cipatin for the treatment of non-small cell lung cancer.<br>As a single agent for the treatment of non-small cell lung cancer.   | 16    | 64    | 18 years                              | N/A | N/A  | Y | Y | 1/9/2020   |
| Drugs       | J9202 | Goserelin acetate<br>implant, per 3.6 mg                                       | 3.6 mg | 1/1/2000 | Zoladex*                | goserelin acetate implant                                       | Product Specific:<br>3.6 mg:<br>- Use in combination with flutamide for the management of locally confined carcinoma of the prostate.<br>• Palliative treatment of advanced carcinoma of the prostate.<br>• Deal as an endometrial-thinning agent prior to endometrial ablation for dysfunctional uterine bleeding.<br>• Use in the palliative treatment of advanced breast cancer in pre- and perimenopausal women.<br>10.8 mg:<br>• Use in combination with flutamide for the management of locally confined carcinoma of the prostate.<br>• Use as palliative treatment of advanced carcinoma of the prostate.   | з     | 3     | 18 years                              | N/A | 3.6 mg implant:<br>None<br>10.8 mg<br>implant: Males<br>Only | ¥ | Y | 10/26/2018   |
| Biologicals | J9203 | Injection, gemtuzumab<br>ozogamicin, 0.1 mg                                    | 0.1 mg | 1/1/2018 | Mylotarg™               |   | • Ose as parameter the treatment of newly-diagnosed CD33-positive acute myeloid leukemia (AML) in adults and the treatment of relapsed or refractory CD33-positive AML in adults and in pediatric patients 2 years and older.   | 150   | 275   | Indication Specific<br>(see comments) | N/A | N/A  | Y | Ŷ | Indication specific age<br>restrictions:<br>Newly-diagnosed (D33-<br>positive acute myeloid<br>leukemia: 18 years of age and<br>older<br>Relapsed or refractory (D33-<br>positive AML: 2 years of age<br>and older |
| Drugs       | J9205 | Injection, irinotecan<br>liposome, 1 mg  | 1 mg   | 1/1/2017 | Onivyde™                | irinotecan liposome injection,<br>for intravenous use           | Indicated, in combination with fluorouracii and leucovorin, for the treatment of patients with metastatic adenocarcinoma of the<br>pancress after disease progression following gemcitabine-based therapy.<br>Limitation of Use: Onivyde is not indicated as a single agent for the treatment of patients with metastatic adenocarcinoma of the<br>pancress.  | 172   | 516   | 18 years                              | N/A | N/A  | Y | Y | 6/6/2019   |
| Drugs       | J9206 | Injection, irinotecan, 20<br>mg  | 20 mg  | 1/1/2000 | Camptosar®              | irinotecan injection,<br>intravenous infusion                   | Indicated for:<br>• First-line therapy in combination with 5-fluorouracil and leucovorin for patients with metastatic carcinoma of the colon or rectum.<br>• Patients with metastatic carcinoma of the colon or rectum whose disease has recurred or progressed following initial fluorouracil-<br>based therapy.   | 44    | 88    | 18 years                              | N/A | N/A  | Y | Ŷ | 4/10/2019  |
| Drugs       | J9207 | Injection, ixabepilone, 1<br>mg  | 1 mg   | 1/1/2009 | lxempra®                | ixabepilone kit for injection,<br>for intravenous infusion only | Indicated for the treatment of metastatic or locally advanced breast cancer in patients after failure of an anthracycline and a taxane.<br>Ixempra as monotherapy is indicated for the treatment of metastatic or locally advanced breast cancer in patients after failure of an<br>anthracycline, a taxane, and capecitabine.  | 90    | 180   | 18 years                              | N/A | N/A  | Y | Ŷ | 10/26/2018   |
| Drugs       | J9208 | Injection, ifosfamide, 1<br>gram   | 1 g    | 1/1/2000 | Ifex*                   | ifosfamide for injection,<br>intravenous use                    | Indicated for use in combination with certain other approved antineoplastic agents for third-line chemotherapy of germ cell<br>testicular cancer. It should be used in combination with mesna for prophylaxis of hemorrhagic cystitis.  | 3     | 30    | 18 years                              | N/A | N/A  | Y | Y | 6/4/2019   |
|             |       |  |        |          |                         |   |   |       |       |                                       |     |  |   |   |  |

|             | 1     | 1  |                 |          |                            |  |   |       |       |                                       |     | 1          |   | 1 |  |            |
|-------------|-------|--|-----------------|----------|----------------------------|--|---|-------|-------|---------------------------------------|-----|------------|---|---|--|------------|
| Drugs       | J9209 | Injection, mesna, 200 mg   | 200 mg          | 1/1/2000 | Mesnex <sup>®</sup>        | mesna injection solution   | Indicated as a prophylactic agent in reducing the incidence of ifosfamide-induced hemorrhagic cystitis.   | 9     | 90    | 18 years                              | N/A | N/A        | Y | Y |  | 6/10/2019  |
| Drugs       | J9211 | Injection, idarubicin<br>hydrochloride, 5 mg                                 | 5 mg            | 1/1/2000 | Idamycin®                  | idarubicin hydrochloride for<br>injection  | Indicated in combination with other approved antileukemic drugs for the treatment of acute myeloid leukemia in adults. This<br>includes French-American-British (FAB) classifications M1 through M7.  | 6     | 36    | 18 years                              | N/A | N/A        | Y | Y |  | 10/31/2018 |
| Biologicals | J9214 | Injection, interferon, alfa-<br>2b, recombinant, 1<br>million units          | 1 million units | 1/1/2000 | Intron® A                  | interferon alfa-2b<br>recombinant for injection                                  | Indicated for: hairy cell leukemia, malignant melanoma, follicular lymphoma, condylomata acuminata, AIDS-related Kaposi's sarcoma, chronic hepatitis C and chronic hepatitis 8. Please see package insert for additional information on each indication.  | 75    | 1,050 | Indication Specific<br>(see comments) | N/A | N/A        | Y | Y | Indication specific: 18 years<br>and older for all indications<br>except chronic Hepatitis B and<br>C.<br>Hepatitis B - 1 year of age and<br>older<br>Hepatitis C - 3 years of age and<br>older                            | 6/4/2019   |
| Biologicals | J9215 | Injection, interferon, alfa-<br>n3, (human leukocyte<br>derived), 250,000 IU | 250,000 IU      | 1/1/2000 | Alferon® N                 | interferon alfa-n3 injection   | Indicated for condyloma acuminata.  | 10    | 100   | 18 years                              | N/A | N/A        | Y | Y |  | 10/4/2018  |
| Biologicals | J9216 | Injection, interferon,<br>gamma-1b, 3 million units                          | 3 million units | 1/1/2000 | Actimmune®                 | interferon gamma-1b<br>injection, for subcutaneous<br>use                        | Indicated for:<br>• Reducing the frequency and severity of serious infections associated with Chronic Granulomatous Disease (CGD)<br>• Delaying time to disease progression in patients with severe, malignant osteoporosis (SMO)   | 1.33  | 18.67 | Indication Specific<br>(see comments) | N/A | N/A        | Y | Y | Indication specific age<br>restrictions:<br>CGD: 1 year and older<br>SMO: 1 month and older  | 5/6/2019   |
| Drugs       | J9217 | Leuprolide acetate (for<br>depot suspension), 7.5<br>mg                      | 7.5 mg          | 1/1/2000 | Lupron Depot®,<br>Eligard® | leuprolide acetate for<br>injectable suspension, for<br>doses 7.5 mg and greater | Indicated for the palliative treatment of advanced prostate cancer.   | 6     | 6     | 18 years                              | N/A | Males Only | Y | Y |  | 6/4/2019   |
| Drugs       | J9218 | Leuprolide acetate, per 1<br>mg  | per 1 mg        | 1/1/2000 | N/A                        | leuprolide acetate injection   | Indicated in the palliative treatment of advanced prostatic cancer.   | 1     | 31    | N/A                                   | N/A | Males Only | Y | Y |  | 6/4/2019   |
| Drugs       | J9225 | Histrelin implant (Vantas),<br>50 mg   | 50 mg           | 1/1/2006 | Vantas <sup>®</sup>        | histrelin acetate<br>subcutaneous implant  | Indicated for the palliative treatment of advanced prostate cancer.   | 1     | 1     | 18 years                              | N/A | Males Only | Y | Y |  | 10/26/2018 |
| Drugs       | J9226 | Histrelin implant<br>(Supprelin LA), 50 mg                                   | 50 mg           | 1/1/2008 | Supprelin <sup>®</sup> LA  | histrelin acetate<br>subcutaneous implant  | Indicated for the treatment of children with central precocious puberty (CPP).  | 1     | 1     | 2 years                               | N/A | N/A        | Y | Y |  | 10/26/2018 |
| Biologicals | J9228 | Injection, ipilimumab, 1<br>mg   | 1 mg            | 1/1/2012 | Yervoy®                    | ipilimumab injection, for<br>intravenous use                                     | Indicated for:<br>Adjuvant treatment of patients with cutaneous melanoma with pathologic involvement of regional lymph nodes of more than 1<br>mm who have undergone complete resection, including total lymphadenectomy.<br>Treatment of unvestcable or metastatic melanoma in adults and pediatric patients (12 years and older).<br>• Treatment of unvestcable or metastatic melanoma in adults and pediatric patients (12 years and older).<br>• Treatment of unvestcable or metastatic melanoma in adults and pediatric patients (12 years and older).<br>• Treatment of adult and pediatric patients 12 years of age and older with microsatellite instability-high (MSI-H) or mismatch repair<br>deficient (IdMMR) metastatic colorectal cancer that has progressed following treatment with a fluoropyrimidine, osaliplatin, and<br>irinotean, in combination with noulumab.<br>• Indicated for the treatment of patients with hepatocellular carcinoma who have been previously treated with sorafenib, in<br>combination with nivolumab.  | 1,400 | 2,800 | 12 years                              | N/A | N/A        | Y | Ŷ |  | 4/29/2020  |
| Biologicals | J9229 | Injection, inotuzumab<br>ozogamicin, 0.1 mg                                  | 0.1 mg          | 1/1/2019 | Besponsa™                  | inotuzumab ozogamicin<br>injection, for intravenous use                          | Indicated for the treatment of adults with relapsed or refractory B-cell precursor acute lymphoblastic leukemia (ALL).  | 27    | 108   | 18 years                              | N/A | N/A        | Y | Y |  | 5/6/2019   |
| Drugs       | J9245 | Injection, melphalan<br>hydrochloride, 50 mg                                 | 50 mg           | 1/1/2000 | Alkeran®                   | melphalan hydrochloride for<br>injection   | Indicated for the palliative treatment of patients with multiple myeloma for whom oral therapy is not appropriate.  | 1     | 3     | 18 years                              | N/A | N/A        | Y | Y |  | 10/26/2018 |
| Drugs       | J9245 | Injection, melphalan<br>hydrochloride, 50 mg                                 | 50 mg           | 1/1/2000 | Evomela®                   | melphalan for injection, for<br>intravenous use                                  | Indicated for:<br>• use as a high-dose conditioning treatment prior to hematopoietic progenitor (stem) cell transplantation in patients with multiple<br>myeloma.<br>• paliative treatment of patients with multiple myeloma for whom oral therapy is not appropriate.  | 5     | 10    | 18 years                              | N/A | N/A        | Y | Y |  | 9/27/2018  |
| Drugs       | J9250 | Methotrexate sodium, 5<br>mg   | 5 mg            | 1/1/2000 | N/A                        | methotrexate sodium<br>injection, 5 mg   | Methotrexate is indicated in the treatment of gestational choriocarcinoma, chorioadenoma destruens andhydatidiform mole.     In acute lymphocytic leukemia, methotrexate is indicated in the prophylaxis of meningeal leukemia and is used in maintenance therapy in combination with other chemotherapeutic agents. Methotrexate is also indicated in the treatment of meningeal leukemia.     Methotrexate is used alone or in combination with other anticancer agents in the treatment of breast cancer, epidermoid cancers     of the head and neck, advanced myocis fungoides (cutaneous T cell hymphoma), and fung cancer, particularity squamous cell and     small cell types. Methotrexate is also used in combination with other chemotherapeutic agents in the treatment of advanced stage     non-Hodgin's hymphomas.     Methotrexate in high doases followed by leucovoin rescue in combination with other chemotherapeutic agents in the treatment of advanced stage     non-Hodgin's hymphomas.     Methotrexate is indicated in the symptomatic control of severe, recakitrant, disabiling psoriasis that is not adequately responsive     to other forms of theraph, used ny when the diagnosis has been estabilished, as by biopsy and/or after dermatologic consultation. It     is important to ensure that a psoriasis "flare" is not due to an undiagnosed concomitant disease affecting immune response to     other forms of adequate trial of frist-line theraph (uncluing full does no-steroidal anti-finammatory agent (ISADI). Aprinfin,     NSAIDs, and/or iow does steroids may be continued, although the possibility of increased toxicity with concomitant user (NSADI). Aprinfin,     NSAIDs, and/or iow does steroids may be continued, although the possibility of increased toxicity with concomitant user (NSADI). Aprinfin,     NSAIDs, and/or iow does steroids may be continued, although the possibility of increased toxicity with concomitant user (NSADI). Aprinfin,     NSAIDs, and/or iow does steroids may be continued, although the possibility of increased toxicity | 9     | 135   | Indication Specific<br>(see comments) | N/A | N/A        | ¥ | ¥ | Indication specific age<br>restrictions:<br>• Cancer chemotherapy: None<br>• Polyaticular-comotherapy: Uneville<br>rheumatoid arturis: 2 yeas<br>of age and older<br>• All other indications: 18<br>years of age and older | 10/26/2018 |

| Drugs       | J9260 | Methotrexate sodium, 50<br>mg                             | 50 mg                              | 1/1/2000  | N/A                 | methotrexate sodium<br>injection, 50 mg   | <ul> <li>Methotexate is indicated in the treatment of gestational choriocarcinoma, chorioadenoma destruens and hydatidiform mole.</li> <li>In acute lymphocytic leukemia, methotrexate is indicated in the prophylaxis of meningeal leukemia and is used in maintenance therapy in combination with other chemotherapeutic agents. Methotexate is also indicated in the treatment of meningeal leukemia.</li> <li>Methotrexate is used alone or in combination with other anticancer agents in the treatment of breast cancer, epidermoid cancers of the head and neck, advanced mycosis fungioles (cutaneous T cell lymphoma), and lung cancer, particularly sugamous cell and small cell types. Methotrexate is also used in combination with other chemotherapeutic agents in the treatment of advanced stage non-holdgin's hymphoma.</li> <li>Methotrexate in high doses followed by leucovorin rescue in combination with other chemotherapeutic agents is effective in prolonging relipse/fres survival in patients with non-metastatic costeoarcoma who have undergone surgical resection or amputation for the primary tumor.</li> <li>Methotrexate is indicated in the symptomatic control of severe, recalcitrant, disabiling psoriasis that is not adequately responsive to other forms of therapp, but only when the diagnosis has been established, as by biopsy and/or after dermatologic comprises.</li> <li>Methotrexate is indicated in the management of selected adults with severe, active rheumatoid anthritis (ARC riteria), or caliform into active structure sets on a grant of an antification. It is important to can deal on super discust charace affecting immune responses.</li> <li>Methotrexate is indicated in the management of selected adults with severe, active rheumatoid arthritis (ARC riteria), or caliform inthatuse of MSADs and/or new dose zerosits has be continued, although the possibility of increased toxicity with concomisent so of SADs and/or new dose zerosits habe to contundiagnouting, suffasilation, cutosity with concominant use of</li></ul> | 750   | 3,000  | Indication Specific<br>(see comments) | N/A | N/A | Ÿ | ¥ | Indication specific.<br>Cancer chemotherapy: None<br>Polyarticular-course juvenile<br>rheumatoid arthritis: 2 years<br>of age and older<br>All other indications: 18 years<br>of age and older |
|-------------|-------|---|------------------------------------|-----------|---------------------|---|--|-------|--------|---------------------------------------|-----|-----|---|---|--|
| Drugs       | J9261 | Injection, nelarabine, 50<br>mg                           | 50 mg                              | 1/1/2007  | Arranon®            | nelarabine injection, for<br>intravenous use  | Indicated for the treatment of patients with T-cell acute lymphoblastic leukemia and T-cell lymphoblastic lymphoma whose disease<br>has not responded to or has relapsed following treatment with at least two chemotherapy regimens. This use is based on the<br>induction of complete responses. Randomized trials demonstrating increased survival or other clinical benefit have not been<br>conducted.  | 75    | 450    | N/A                                   | N/A | N/A | Y | Y | 4/10/2019  |
| Drugs       | J9262 | Injection, omacetaxine<br>mepesuccinate, 0.01 mg          | 0.01 mg                            | 1/1/2014  | Synribo®            | omacetaxine mepesuccinate<br>for injection, for<br>subcutaneous use                 | Indicated for the treatment of adult patients with chronic or accelerated phase chronic myeloid leukemia (CML) with resistance<br>and/or intolerance to two or more tyrosine kinase inhibitors.  | 625   | 10,625 | 18 years                              | N/A | N/A | Y | Y | 9/21/2018  |
| Drugs       | J9263 | Injection, oxaliplatin, 0.5<br>mg                         | 0.5 mg                             | 1/1/2004  | Eloxatin®           | oxaliplatin injection for<br>intravenous use  | Indicated for:<br>• Adjuvant treatment of stage III colon cancer in patients who have undergone complete resection of the primary tumor.<br>• Treatment of advanced colorectal cancer.   | 500   | 1,500  | 18 years                              | N/A | N/A | Y | Y | 6/4/2019   |
| Drugs       | J9264 | Injection, paclitaxel<br>protein-bound particles,<br>1 mg | 1 mg                               | 1/1/2006  | Abraxane®           | paclitaxel protein-bound<br>particles for injectable<br>suspension, (albumin-bound) | Indicated for the treatment:<br>• Metastatic breast cancer, after failure of combination chemotherapy for metastatic disease or relapse within six months of<br>adjuvant chemotherapy. Prior therapy should have included an anthracycline unless clinically contraindicated.<br>• Locally advanced or metastatic non-small cell lung cancer (NSCLC), as first-line treatment in combination with carboplatin, in<br>patients who are not candidates for curative surgery or radiation therapy.<br>• Metastatic advancaricnmon of the pancreas as first-line treatment, in combination with gencitabine.   | 650   | 1,300  | 18 years                              | N/A | N/A | Ŷ | Ŷ | 7/16/2018  |
| Biologicals | J9266 | Injection, pegaspargase,<br>per single dose vial          | per single dose vial<br>(3,750 IU) | 1/1/2000  | Oncaspar*           |   | Indicated as a component of a multi-agent chemotherapeutic regimen for treatment of patients with:<br>• First line acute lymphoblastic leukemia<br>• Acute lymphoblastic leukemia and hypersensitivity to asparaginase   | 2     | 6      | 1 year                                | N/A | N/A | Y | Y | 8/24/2018  |
| Drugs       | J9267 | Injection, paclitaxel, 1 mg                               | 1 mg                               | 1/1/2015  | Taxol®              | paclitaxel injection  | Indicated for breast cancer, ovarian cancer, non-small cell lung cancer, and AIDS-related karposi sarcoma. See package insert for<br>full details of each indication.  | 437.5 | 875    | 18 years                              | N/A | N/A | Y | Y | 9/27/2018  |
| Drugs       | J9268 | Injection, pentostatin, per<br>10 mg                      | 10 mg                              | 7/15/2001 | Nipent <sup>®</sup> | pentostatin for injection   | Indicated as single-agent treatment for both untreated and alpha-interferon-refractory hairy cell leukemia patients with active<br>disease as defined by clinically significant anemia, neutropenia, thrombocytopenia, or disease-related symptoms.  | 1     | 3      | 18 years                              | N/A | N/A | Y | Y | 9/21/2018  |
| Drugs       | J9280 | Injection, mitomycin, 5<br>mg                             | 5 mg                               | 1/1/2000  | Mutamycin®          | mitomycin for injection, 5 mg   | Mitomycin is not recommended as single-agent, primary therapy. It has been shown to be useful in the therapy of disseminated<br>adenocarcinoma of the stomach or pancreas in proven combinations with other approved chemotherapeutic agents and as<br>pallative treatment when other modalities have failed. Mitomycin is not recommended to replace appropriate surgery and/or<br>radiotherapy.  | 10    | 10     | 18 years                              | N/A | N/A | Y | ¥ | 6/7/2019   |
| Biologicals | J9285 | Injection, olaratumab, 10<br>mg                           | 10 mg                              | 1/1/2018  | Lartruvo™           | olaratumab injection, for<br>intravenous use  | Indicated, in combination with doxorubicin, for the treatment of adult patients with soft tissue sarcoma (STS) with a histologic<br>subtype for which an anthracytine-containing regimen is appropriate and which is not amenable to curative treatment with<br>radiotherapy or surgery. This indication is approved under accelerated approval. Continued approval for this indication may be<br>contingent upon verification and description of clinical benefit in the confirmatory trial.  | 210   | 840    | 18 years                              | N/A | N/A | Y | Y | 7/2/2018   |
| Drugs       | J9293 | Injection, mitoxantrone<br>hydrochloride, per 5 mg        | 5 mg                               | 1/1/2000  | N/A                 | mitoxantrone hydrochloride<br>injection, solution                                   | Indizated:<br>For reducing neurologic disability and/or the frequency of clinical relapses in patients with secondary (chronic) progressive,<br>progressive relapsing, or worsening relapsing-remitting multiple sclerosis (i.e., patients whose neurologic status is significantly<br>abnormal between relapses).<br>Mitoxantrone is not indicated in the treatment of patients with primary progressive multiple sclerosis.<br>• In combination with cortocosteroids is indicated as initial chemotherapy for the treatment of patients with pain related to<br>advanced hormone-refractory prostate cancer.<br>• In combination with enter approved druggljs is indicated in the initial therapy of acute nonlymphocytic leukemia (ANLL) in adults.<br>This category induces myolegenous, promyedorgit, monocytic, and entyrhog acute leukemias.  | 7     | 30     | 18 years                              | N/A | N/A | Ŷ | Ŷ | Lifetime Maximum Dose: 70<br>units 10/31/2018  |
| Biologicals | J9295 | Injection, necitumumab,<br>1 mg                           | 1 mg                               | 1/1/2017  | Portrazza™          | necitumumab injection, for<br>intravenous use                                       | Indicated, in combination with gemcitabine and cisplatin, for first-line treatment of patients with metastatic squamous non-small<br>cell lung cancer.<br>Limitation of Use: Portraza is not indicated for treatment of non-squamous non-small cell lung cancer.   | 800   | 3,200  | 18 years                              | N/A | N/A | Y | Y | 7/2/2018   |

|             |       | 1                                 |       |          |                       | -  |  |     |       |          |     |     |   |   | 1  | ,          |
|-------------|-------|-----------------------------------|-------|----------|-----------------------|--|--|-----|-------|----------|-----|-----|---|---|--|------------|
| Biologicals | 19299 | Injection, nivolumab, 1<br>mg     | 1 mg  | 1/1/2016 | Opdivo*               | nivolumab injection, for<br>intravenous use      | <ul> <li>Indicated for unresectable or metastatic melanoma, as a single agent or in combination with ipilimumab. (Indication simplified 37/7019)</li> <li>Indicated for the treatment of patients with metastatic non-small cell lung cancer and progression on or after platinum-based chemotherapy. Patients with CFG or ALK genomic turor aberrations should have disease progression on FDA-approved therapy.</li> <li>Indicated for the treatment of patients with advanced renal cell carcinoma who have received prior anti-angiogenic therapy.</li> <li>Indicated for the treatment of patients with advanced renal cell carcinoma who have received prior anti-angiogenic therapy.</li> <li>Indicated for the treatment of patients with current or metastatic quamous cell carcinoma who: have disease progression on rafter a platinum-based therapy.</li> <li>Indicated for the treatment of patients with cally advanced or metastatic curothelial carcinoma who: have disease progression during or following platinum-containing chemotherapy. or have disease progression within 12 months of neoadjuvant or adjuvant treatment with platinum-containing chemotherapy.</li> <li>Indicated for the treatment of adult patients with classical Hodgkin lymphoma that has relapsed or progressed after: autologous hematopoletic strene uclel transplantation (HSCT) and breaturismite disease progression within 12 months of neoadjuvant treatment with platinum-containing chemotherapy.</li> <li>Indicated for the treatment of adult and pediatric (12 years and older) patients with microsatelitic instability-high (MSI-H) or mismatch repair deficient (MMR) metastatic colorectal cancer that has progressed following treatment with a fluoropyrimidine, coaliplatin, and the treatment in platinum-tab.</li> <li>Indicated for the treatment of patients with high node involvement or metastatic disease who have undergone complete resection, in the treatment of patients with high node involvement or metastatic disease who have undergone complete resection, in the adjuvant atting.</li> <l< td=""><td>480</td><td>960</td><td>12 years</td><td>N/A</td><td>N/A</td><td>¥</td><td>¥</td><td></td><td>4/29/2020</td></l<></ul> | 480 | 960   | 12 years | N/A | N/A | ¥ | ¥ |  | 4/29/2020  |
| Biologicals | J9301 | Injection, obinutuzumab,<br>10 mg | 10 mg | 1/1/2015 | Gazyva®               | obinutuzumab Injection, for<br>intravenous use   | Indicated:<br>• In combination with chlorambucil, for the treatment of patients with previously untreated chronic lymphocytic leukenia.<br>• In combination with bendamustine followed by Gazyva monotherapy, for the treatment of patients with follicular lymphoma who<br>relapsed after, or are refractory to, a rituximab-containing regimen.<br>• In combination with chemotherapy followed by Gazyva monotherapy in patients achieving at least a partial remission, for the<br>treatment of adult patients with previously untreated stage II bulley, III or IV follicular lymphoma.  | 100 | 400   | 18 years | N/A | N/A | Ŷ | Ŷ |  | 7/16/2018  |
| Biologicals | J9302 | Injection, ofatumumab,<br>10 mg   | 10 mg | 1/1/2011 | Arzerra®              | ofatumumab injection, for<br>intravenous use     | Indicated for the treatment of chronic lymphocytic leukemia (CLL):<br>• in combination with chlorambucil, for the treatment of previously untreated patients with CLL for whom fludarabine-based<br>therapy is considered<br>inappropriate.<br>• in combination with fludarabine and cyclophosphamide for the treatment of patients with relapsed CLL<br>• for extended treatment of patients who are in complete or partial response after at least two lines of therapy for recurrent or<br>progressive CLL.<br>• for the treatment of patients with CLL refractory to fludarabine and alemtuzumab.  | 200 | 1,000 | 18 years | N/A | N/A | Ŷ | Y | Pregnancy: May cause fetal B-<br>cell depletion. | 7/16/2018  |
| Biologicals | J9303 | Injection, panitumumab,<br>10 mg  | 10 mg | 1/1/2008 | Vectibix <sup>®</sup> | panitumumab injection, for<br>intravenous use    | Indicated for the treatment of wild-type RAS (defined as wild-type in both KRAS and NRAS as determined by an FDA-approved test<br>for this use) metastatic otorectal cancer (mCRC):<br>- In combination with Folfox for first-line treatment.<br>- As monotherapy following disease progression after prior treatment with fluoropyrimidine, oxaliplatin, and irinotecan-containing<br>chemotherapy.<br>Limitation of Use: Vectibic is not indicated for the treatment of patients with RAS-mutant mCRC or for whom RAS mutation status is<br>unknown.   | 90  | 270   | 18 years | N/A | N/A | Y | Y |  | 6/4/2019   |
| Drugs       | 19305 | Injection, pemetrexed, 10 mg      | 10 mg | 1/1/2005 | Alimta®               | pemetrexed for injection, for<br>intravenous use | Indicated:<br>Indicated:<br>In combination with cisplatin for the initial treatment of patients with locally advanced or metastatic, non-squamous, non-small<br>cell lung cancer (NSCL)<br>As a single agent for the maintenance treatment of patients with locally advanced or metastatic, non-squamous NSCLC whose<br>disease has not progressed after four cycles of platinum-based first-line chemotherapy.<br>As a single agent for the treatment of a platient with recurrent metastatic non-squamous, NSCLC after prior chemotherapy.<br>• Initial treatment, in combination with cisplatin, of patients with malignant pleural mesotheliona whose disease is unresectable or<br>who are otherwise not candidates for curative surgery.<br>• In combination with carboplatin and pembrolizumab for the initial treatment of patients with metastatic, non-squamous NSCLC.<br>Limitations of Use: Not indicated for the treatment of patients with squamous cell, non-small cell lung cancer.  | 200 | 300   | 18 years | N/A | N/A | Y | ¥ |  | 10/31/2018 |
| Biologicals | J9306 | Injection, pertuzumab, 1<br>mg    | 1 mg  | 1/1/2014 | Perjeta*              | pertuzumab injection, for<br>intravenous use     | Indicated for:<br>• Use in combination with trastuzumab and docetaxel for treatment of patients with HER2-positive metastatic breast cancer (MBC)<br>who have not received prior anti-HER2 therapy or chemotherapy for metastatic disease.<br>• Use in combination with trastuzumab and chemotherapy as<br>o Neoadjuvant treatment of patients with HER2-positive_locally advanced, inflammatory, or early stage breast cancer (either greater<br>than 2 cm in diameter or node positive) as part of a complete treatment regimen for early breast cancer.<br>o Adjuvant treatment of patients with HER2-positive early breast cancer at high risk of recurrence.  | 840 | 1,260 | 18 years | N/A | N/A | Y | Y |  | 7/2/2018   |
| Drugs       | J9307 | Injection, pralatrexate, 1<br>mg  | 1 mg  | 1/1/2011 | Folotyn®              | pralatrexate injection, for<br>intravenous use   | Indicated for the treatment of patients with relapsed or refractory peripheral T-cell lymphoma.  | 80  | 400   | 18 years | N/A | N/A | Y | Y |  | 8/24/2018  |
| Biologicals | 19308 | Injection, ramucirumab, 5<br>mg   | 5 mg  | 1/1/2016 | Cyramza®              |  | Indicated:<br>• As a single agent or in combination with pacifixee, for treatment of advanced gastric or gastro-esophageal junction<br>adenocarcinoma, with disease progression on or after prior fluoropyrimidine- or platinum-containing chemotherapy.<br>• In combination with doctaxee, for treatment of metastatic non-small cell lung cancer with disease progression on or after<br>platinum-based chemotherapy. Platine with EGR eA XLR genomic tunnor aberrations should have disease progression on Dr-<br>approved therapy for these aberrations prior to receiving Cyramza.<br>• In combination with Folfri, for the treatment of metastatic colorectal cancer with disease progression on or after prior therapy<br>with bevacizumab, oxaliplatin, and a fluoropyrimidine.<br>• As a single agent, for the treatment of hepatocellular carcinoma in patients who have an alpha fetoprotein of 2400 ng/mL and<br>have been treated with sorafenib.   | 280 | 672   | 18 years | N/A | N/A | Y | ¥ |  | 6/4/2019   |

| Biologicals | J9311 | Injection, rituximab 10<br>mg and hyaluronidase                                  | 10 mg         | 1/1/2019 | Rituxan Hycela®      | rituximab and hyaluronidase<br>human injection, for<br>subcutaneous use<br>antihemophilic factor | Indicated for the treatment of adult patients with:<br>• Follicular lymphoma (FL):<br>o Relapsed or refractory, follicular lymphoma as a single agent<br>o Previously untreated follicular lymphoma in combination with first line chemotherapy and, in patients achieving a complete or<br>partial response tritkumia hi combination with themotherapy, as single-agent maintenance therapy<br>o Non-progressing (including stable disease), follicular lymphoma as a single agent after first-line cyclophosphamide, vincristine, and<br>prednisone (CVP) chemotherapy<br>o Proviously untreated diffuse large B-cell lymphoma (DLBCL);<br>o Previously untreated diffuse large B-cell lymphoma in combination with cyclophosphamide, doxorubicin, vincristine, prednisone<br>(CHOP) or other anthracycline-based chemotherapy regimens<br>• Chronic lymphocytic Leukemia (CLL):<br>o Previously untreated and previously treated CLL in combination with fludarabine and cyclophosphamide (FC)<br>Limitations of Use:<br>• Initiate treatment with Rituxan Hycela only after patients have received at least one full dose of rituximab product by intravenous<br>infusion.<br>• Rituxan Hycela is not indicated for the treatment of non-malignant conditions.<br>Indicated for use in adults and children with hemophilia A for:<br>• On-demand treatment and control of bleedine existeds | 160   | 700     | 18 years | N/A | N/A        | Y | Y | 4/19/2019 |
|-------------|-------|--|---------------|----------|----------------------|--|---|-------|---------|----------|-----|------------|---|---|-----------|
| Biologicals | J7199 | Hemophilia clotting<br>factor, not otherwise<br>classified                       | 1 IU          | 1/1/2000 | Esperoct®            | (recombinant),<br>glycopegylated-exei<br>lyophilized powder for<br>solution, for intravenous use | Perioperative management of bleeding     Routine prophylaxis to reduce the frequency of bleeding episodes   | 7,000 | 133,000 | N/A      | N/A | N/A        | Y | Y | 3/3/2020  |
| Drugs       | J9315 | Injection, romidepsin, 1<br>mg   | 1 mg          | 1/1/2011 | Istodax <sup>®</sup> | romidepsin for injection, for<br>intravenous use   | Indicated for:<br>• Treatment of cutaneous T-cell lymphoma (CTCL) in patients who have received at least one prior systemic therapy.<br>• Treatment of peripheral T-cell lymphoma (PTCL) in patients who have received at least one prior therapy.  | 40    | 160     | 18 years | N/A | N/A        | Y | Y | 8/29/2018 |
| Drugs       | J9320 | Injection, streptozocin, 1<br>gram   | 1 g           | 1/1/2000 | Zanosar®             | streptozocin powder, for<br>solution   | Indicated in the treatment of metastatic islet cell cancer of pancreas.   | 4     | 20      | N/A      | N/A | N/A        | Y | Y | 6/7/2019  |
| Biologicals | J9325 | Injection, talimogene<br>laherparepvec, per 1<br>million plaque forming<br>units | 1 million PFU | 1/1/2017 | Imlygic®             | talimogene laherparepvec<br>suspension for intralesional<br>injection                            | Indicated for the local treatment of unresectable cutaneous, subcutaneous, and nodal lesions in patients with melanoma recurrent<br>after initial surgery.<br>Limitations of Use: Imlygic has not been shown to improve overall survival or have an effect on visceral metastases.  | 400   | 800     | 18 years | N/A | N/A        | Y | Y | 7/16/2018 |
| Drugs       | J9328 | Injection, temozolomide,<br>1 mg   | 1 mg          | 1/1/2010 | Temodar®             | temozolomide for injection,<br>administered via intravenous<br>infusion                          | Indicated for the treatment of adult patients with:<br>• Newly diagnosed glioblastoma multiforme (GBM) concomitantly with radiotherapy and then as maintenance treatment.<br>• Refractory naplastic astrocytoma patients who have experienced disease progression on a drug regimen containing nitrosourea<br>and procarbazine.   | 400   | 6,200   | 18 years | N/A | N/A        | Y | Y | 9/12/2018 |
| Drugs       | J9330 | Injection, temsirolimus, 1   | 1 mg          | 1/1/2009 | Torisel®             | temsirolimus injection, for  | Indicated for the treatment of advanced renal cell carcinoma.   | 25    | 125     | N/A      | N/A | N/A        | Y | Y | 9/25/2018 |
| Drugs       | J9340 | mg<br>Injection, thiotepa, 15 mg   | 15 mg         | 1/1/2000 | N/A                  | intravenous use<br>thiotepa injection, powder,<br>lyophilized, for solution                      | Thiotepa has been tried with varying results in the palliation of a wide variety of neoplastic diseases. However, the most consistent<br>results have been seen in the following tumors: adenocarrinoma of the breast; adenocarrinoma of the ovary, for controlling<br>intracwitary efficians secondary to diffuse or localized neoplastic diseases of various seroal arouties; for the treatment of<br>superficial papillary carcinoma of the urinary bladder. Thiotepa has been effective against other lymphomas, such as  | 8     | 20      | 18 years | N/A | N/A        | Y | Y | 9/21/2018 |
| Drugs       | J9351 | Injection, topotecan, 0.1 mg   | 0.1 mg        | 1/1/2011 | Hycamtin®            | topotecan for injection  | hymphoaszcoma and Hodgkin's disease.           Indicated for:           Indicated for:           * Metatatic carcinoma of the ovary after disease progression on or after initial or subsequent chemotherapy.           * Metatatic carcinoma of the ovary after disease in patients who progressed after first-line chemotherapy.           * Combination therapy with cisplatin for Stage IV-8, recurrent, or persistent carcinoma of the cervix which is not amenable to curative treatment.   | 40    | 400     | 18 years | N/A | N/A        | Y | Y | 9/12/2018 |
| Drugs       | J9352 | Injection, trabectedin, 0.1  | 0.1 mg        | 1/1/2017 | Yondelis®            | trabectedin for injection, for   | Indicated for the treatment of patients with unresectable or metastatic liposarcoma or leiomyosarcoma who received a prior  | 40    | 80      | 18 years | N/A | N/A        | Y | Y | 9/12/2018 |
| Biologicals | J9354 | mg<br>Injection, ado-<br>trastuzumab emtansine, 1<br>mg                          | 1 mg          | 1/1/2014 | Kadcyla*             |  | anthracycline-containing regimen.<br>Indicated, as a single agent, for the treatment of patients with HER2-positive, metastatic breast cancer who previously received<br>trasturumab and a<br>trastic separately or in combination. Patients should have either:<br>- received prior therapy for metastatic disease, or<br>- developed disease recurrence during or within six months of completing adjuvant therapy.<br>- The adjuvant treatment of patients with HER2-positive early breast cancer who have residual invasive disease after neoadjuvant<br>traxen and traxturumab-based treatment.  | 580   | 1,160   | 18 years | N/A | N/A<br>N/A | Y | Y | 6/4/2019  |
| Biologicals | J9355 | Injection, trastuzumab,<br>excludes biosimilar, 10<br>mg                         | 10 mg         | 1/1/2000 | Herceptin®           | trastuzumab for injection, for<br>intravenous use  | <ul> <li>The treatment of nexz-overexpressing metastatic gastric or gastroesophageal jonction adenotationna.</li> </ul>   | 112   | 196     | 18 years | N/A | N/A        | Y | Y | 9/12/2018 |
| Drugs       | J9357 | Injection, valrubicin,   | 200 mg        | 1/1/2000 | Valstar®             | valrubicin solution,<br>concentrate, for intravesical  | Select patients for therapy based on an FDA-approved companion diagnostic for Herceptin. Indicated for intravesical therapy of Bacillus Calmette-Guerin (BCG) - refractory carcinoma in situ (CIS) of the urinary bladder in extends for whome immediate or extendament with unscenable modelistic or mortality.  | 4     | 20      | 18 years | N/A | N/A        | Y | Y | 9/12/2018 |
| Drugs       | J9360 | intravesical, 200 mg<br>Injection, vinblastine<br>sulfate, 1 mg                  | 1 mg          | 1/1/2009 | N/A                  | use<br>vinblastine sulfate injection   | patients for whom immediate cystectomy would be associated with unacceptable morbidity or mortality. Indicated in the palliative treatment of the following: Frequently Responsive Malignancies III and IV, Ann Arbor modification of Rye staging system) Fourphotic (stopphotic modification and diffue, poorly and well differentiated) Histocycle (mphoma Hymboxie) (stoppione) (stoppione) Kappoi's surrors and diffue, poorly and well differentiated) Kappoi's arcma Kappoi's arcma Letterer-Sive disease (histocytosis X) Letterer-Sive disease to to cherchemotherapeutic agents Carcinoma of the breast, unresponsive to appropriate endocrine surgery and hormonal therapy  | 50    | 250     | N/A      | N/A | N/A        | Y | ¥ | 9/12/2018 |
| Drugs       | J9370 | Vincristine sulfate, 1 mg  | 1 mg          | 1/1/2000 | Vincasar PFS®        | vincristine sulfate injection solution   |   | 4     | 20      | N/A      | N/A | N/A        | Y | Y | 9/12/2018 |
| Drugs       | J9371 | Injection, vincristine<br>sulfate liposome, 1 mg                                 | 1 mg          | 1/1/2014 | Marqibo®             | vincristine sulfate liposome<br>injection, for intravenous<br>infusion                           | Indicated for the treatment of adult patients with Philadelphia chromosome-negative (Ph-) acute lymphoblastic leukemia (ALL) in<br>second or greater relapse or whose disease has progressed following two or more anti-leukemia therapies. This indication is based<br>on overall response rate. Clinical benefit such as improvement in overall survival has not been verified.   | 6     | 30      | 18 years | N/A | N/A        | Y | Y | 9/12/2018 |
| Drugs       | 19390 | Injection, vinorelbine<br>tartrate, per 10 mg                                    | 10 mg         | 1/1/2000 | Navelbine®           | vinorelbine tartrate injection,<br>for intravenous use   | Indicated:<br>• In combination with cisplatin for first-line treatment of patients with locally advanced or metastatic non-small cell lung cancer<br>(NSCLC).<br>• As a single agent for first-line treatment of patients with metastatic NSCLC.  | 8     | 40      | 18 years | N/A | N/A        | Y | Y | 9/27/2018 |

|             |       |  |           |           |                          |   | Indicated for the treatment of HR-positive advanced breast cancer in postmenopausal women with disease progression following<br>endocrine therapy.<br>Indicated for the treatment of HR-positive, HER2-negative advanced or metastatic breast cancer in combination with palbociclib in<br>women with disease progression after endocrine therapy.  |     |       |                                       |     |              |   |   |  |
|-------------|-------|--|-----------|-----------|--------------------------|---|---|-----|-------|---------------------------------------|-----|--------------|---|---|--|
| Drugs       | J9395 | Injection, fulvestrant, 25<br>mg   | 25 mg     | 1/1/2004  | Faslodex*                | fulvestrant injection, for intramuscular use  | women wur duezes progression are enacune delay:<br>***New Indication 8/25/2017***<br>Indicated for the treatment of hormone receptor (HR)-positive, human epidermal growth receptor 2 (HER2)-negative advanced<br>breast cancer in postmenopausal women not previously treated with endocrine therapy.  | 20  | 60    | 18 years                              | N/A | Females only | Y | Y | 10/10/2018   |
|             |       |  |           |           |                          |   | ***New Indication 11/14/2017***<br>Indicated for the treatment of HR-positive, HER2-negative advanced or metastatic breast cancer in combination with abemaciclib in<br>women with disease progression after endocrine therapy.   |     |       |                                       |     |              |   |   |  |
| Biologicals | J9400 | Injection, ziv-aflibercept,<br>1 mg  | 1 mg      | 1/1/2014  | Zaltrap®                 | ziv-aflibercept injection for<br>intravenous infusion   | Indicated in combination with 5-fluorouracil, leucovorin, irinotecan-(FOLFIRI), for the treatment of patients with metastatic<br>colorectal cancer (mCRC) that is resistant to or has progressed following an oxaliplatin-containing regimen.   | 600 | 1,800 | 18 years                              | N/A | N/A          | Y | Y | 6/7/2019   |
| Drugs       | 19600 | Injection, porfimer<br>sodium, 75 mg   | 75 mg     | 1/1/2000  | Photofrin®               | porfimer sodium injection   | Indicated for:<br>Esophageal Cancer<br>> Palliation of patients with completely obstructing esophageal cancer, or of patients with partially obstructing esophageal cancer<br>who, in the opinion of<br>their physician, cannot be satisfactorily treated with Nd:YAG laser therapy<br>Endobronchial Cancer<br>• Treatment of microimasive endobronchial non-small-cell lung cancer (NSCLC) in patients for whom surgery and radiotherapy are<br>not indicated<br>• Reduction of obstruction and palliation of symptoms in patients with completely or partially obstructing endobronchial NSCLC<br>High-Grade Dypolasia in Barrett's exophagus<br>• Ablation of high-grade dysplasia (HGD) in Barrett's esophagus (BE) patients who do not undergo esophagectomy | 4   | 8     | 18 years                              | N/A | N/A          | ¥ | Ŷ | 6/5/2019   |
| Biologicals | J1303 | Injection, ravulizumab-<br>cwvz, 10 mg   | 10 mg     | 10/1/2019 | Ultomiris™               | ravulizumab-cwvz injection,<br>for intravenous use  | Indicated for the treatment of adult patients with paroxysmal nocturnal hemoglobinuria (PNH).<br>Indicated for the treatment of adults and pediatric patients one month of age and older with atypical hemolytic uremic syndrome<br>(aHUS) to inhibit complement-mediated thrombotic microangiopathy (TMA).<br>Limitations of Use:<br>Limitations of Use:   | 360 | 660   | Indication Specific<br>(see comments) | N/A | N/A          | Y | Y | PNH: 18 years and older 12/3/2019<br>aHUS: 1 month and older   |
| Drugs       | J9199 | Injection, gemcitabine<br>hydrochloride (infugem),<br>200 mg                                     | 200 mg    | 1/1/2020  | Infugem™                 | gemcitabine in sodium<br>chloride injection, for<br>intravenous use   | Indicated:<br>• In combination with carboplatin, for the treatment of advanced ovarian cancer that has relapsed at least 6 months after<br>completion of platinum-based therapy.<br>• In combination with pacitaxel, for first-line treatment of metastatic breast cancer after failure of prior anthracycline-containing<br>adjuant chemotherapy, unless anthracyclines were discularly contraindicated.<br>• In combination with capitalin for the treatment of non-small cell lung cancer.   | 16  | 64    | 18 years                              | N/A | N/A          | Y | Y | 1/9/2020   |
| Biologicals | J0587 | Injection,<br>rimabotulinumtoxinB,<br>100 units  | 100 units | 1/1/2002  | Myobloc®                 | rimabotulinumtoxin B<br>injection   | Indicated for:<br>- Treatment of adult patients with cervical dystonia to reduce the severity of abnormal head position and neck pain associated with<br>cervical dystonia.<br>- Treatment of chronic sialorrhea in adults.   | 100 | 100   | 18 years                              | N/A | N/A          | Y | Y | 9/27/2019  |
| Drugs       | J1097 | phenylephrine 10.16<br>mg/ml and ketorolac 2.88<br>mg/ml ophthalmic<br>irrigation solution, 1 ml | 1 mL      | 10/1/2019 | Omidria*                 | phenylephrine and ketorolac<br>intraocular solution, 1%<br>/0.3%, for addition to ocular<br>irrigating solution | Indicated for maintaining pupil size by preventing intraoperative miosis and reducing postoperative ocular pain.  | 4   | 8     | N/A                                   | N/A | N/A          | Y | Y | 9/27/2019  |
| Drugs       | J0121 | Injection, omadacycline, 1<br>mg   | 1 mg      | 10/1/2019 | Nuzyra™                  | omadacycline for injection,<br>for intravenous use  | Indicated for the treatment of adult patients with the following infections caused by susceptible microorganisms:<br>• Community-acquired bacterial pneumonia (CABP)<br>• Acute bacterial skin and skin structure infections (RABSSI)<br>To reduce the development of drug-resistant bacteria and maintain the effectiveness of Nuzyra and other antibacterial drugs,<br>Nuzyra should be used only to treat or prevent infections that are proven or strongly suspected to be caused by susceptible<br>bacteria.   | 200 | 1,500 | 18 years                              | N/A | N/A          | Y | Ŷ | 9/27/2019  |
| Biologicals | J9356 | Injection, trastuzumab,<br>10 mg and Hyaluronidase-<br>oysk                                      | 10 mg     | 7/1/2019  | Herceptin<br>Hylecta™    | trastuzumab and<br>hyaluronidase-oysk injection,<br>for subcutaneous use  | Indicated in adults for the treatment of HER2-overexpressing breast cancer. Select patients for therapy based on an FDA-approved<br>companion diagnostic for trastuzumab.   | 60  | 120   | 18 years                              | N/A | N/A          | Y | Y | 6/3/2019   |
| Biologicals | 19999 | Not otherwise classified,<br>antineoplastic drugs  | 1 mL      | 1/1/2000  | Unituxin®                | dinutuximab injection, for<br>intravenous use   | Indicated, in combination with granulocyte-macrophage colony-stimulating factor (SM-CSF), interleuxin-2 (II-2), and 13-cis-retinoic<br>acid (AB), for the treatment of pediatric patients with high-risk neuroblastoma who achieve at least a partial response to prior first-<br>line multiagent, multimodality therapy.   | 15  | 60    | 18 years                              | N/A | N/A          | Y | Y | 6/6/2019   |
| Biologicals | P9041 | Infusion, albumin<br>(human), 5%, 50 mL  | 50 mL     | 1/1/2001  | Albutein®,<br>Plasbumin® | albumin (human), 5%   | Plasbumin: Indicated for:<br>= Emergency treatment of hypovolemic shock<br>= Burn therapy<br>= Cardiopulmonary bypass<br>= Cardiopulmonary bypass<br>= Sequestration of protein rich fluids<br>= Sequestration of protein rich fluids<br>= Abutein: Indicated for:<br>= Hypovolemia<br>= Cardiopulmonary bypass procedures<br>= Hypovolemia<br>= Plasma exchange  | 50  | 1,550 | Product Specific (see<br>comments)    | N/A | N/A          | ¥ | Ŷ | Product specific age<br>restrictions:<br>• Plasbumin: 18 years of age<br>and older<br>• Albutein: None (use only if<br>clearly needed) |

| Biologicals | P9047 | Infusion, albumin<br>(human), 25%, 50 mL   | 50 mL  | 1/1/2002 | Albuminar <sup>#</sup> ,<br>Albutein <sup>*</sup> ,<br>Plasbumin <sup>*</sup> ,<br>Flexbumin,<br>Kedbumin <sup>**</sup> ,<br>Albuked | albumin (human), 25%  | Presonant and Audukter. Indicated for:<br>Emergency treatment of hypovolemic shock<br>Burn therapy<br>Hypoprotisemia with or without edema<br>Aduit respiratory distress syndrome (ARDS)<br>Cardiopulmonary bypass<br>Actual there failure<br>Neonatal hemolytic disease<br>Sequestration of protein rich fluids<br>Erythorycte resuspension<br>Actuate heprotosis<br>Renal dialysis<br>Flexburnis: Indicated for:<br>Hypovolemia<br>Hypositalburninemia: Burns, Aduit Respiratory Distress Syndrome (ARDS) and Nephrosis<br>Cardiopulmonary bypass surgery<br>Hemolytic disease of the networn (HDN)<br>Limitation of Use: Alburnin is not indicated as an intravenous nutrient.<br>Albutein: Indicated for:<br>Hyposolemia<br>Cardiopulmonary bypass<br>Cardiopulmonary bypass<br>Cardiopulmonary bypass<br>Cardiopulmonary bypass<br>(Acute nephrosis<br>Cardiopulmonary bypass<br>(Acute nephrosis<br>Hyposolemia<br>Cardiopulmonary bypass<br>(Acute nephrosis<br>Hypostelinutation syndrome<br>Novarian hyperstimulation syndrome   | 10  | 310   | Product Specific (see<br>comments) | N/A | N/A        | Ą | Y | Product specific age<br>restrictions:<br>Kedbumin: Iz years of age<br>and older<br>• Albuted: 18 years of age and<br>older<br>• Albutininar: None<br>• Albutinin: 18 years of age<br>and older<br>• Flexbumin: None |
|-------------|-------|--|--------|----------|--|---|---|-----|-------|------------------------------------|-----|------------|---|---|---|
| Drugs       | Q0138 | Injection, ferumoxytol,<br>for treatment of iron<br>deficiency anemia, 1 mg<br>(non-ESRD use)  | 1 mg   | 1/1/2010 | Feraheme®  |   | Indicated for the treatment of iron deficiency anemia in adult patients with chronic kidney disease (CKD).     Treatment of iron deficiency anemia in adult patients who have intolerance to oral iron or have had unsatisfactory response to oral iron.  | 510 | 1,020 | 18 years                           | N/A | N/A        | Ŷ | Y | 10/26/2018  |
| Drugs       | Q0139 | Injection, ferumoxytol,<br>for treatment of iron<br>deficiency anemia, 1 mg<br>(for ESRD on dialysis)  | 1 mg   | 1/1/2010 | Feraheme®  | ferumoxytol injection, for<br>intravenous use (ESRD use)                | Indicated for the treatment of iron deficiency anemia in adult patients<br>• With thronic kidney disease (CKD) or<br>• Who have intolerance to oral iron or have had unsatisfactory response to oral iron.  | 510 | 1,020 | 18 years                           | N/A | N/A        | Y | Y | 10/26/2018  |
| Drugs       | Q0144 | Azithromycin diłydrate,<br>oral, capsule/powder, 1 g   | lg     | 1/1/2000 | Zithromax*   | azithromycin, oral  | Approved indication for use in the PADP:<br>• Sexually Transmitted Diseases<br>Other FDA approved indications:<br>indicated for the treatment of mild to moderate infections caused by designated, susceptible bacteria:<br>• Acute bacterial simustis in adults<br>• Acute bacterial simustis in adults<br>• Uncemplicated skin and skin structure infections in adults<br>• Urethritis and cervicitis in adults<br>• Urethritis and cervicitis in adults<br>• Community-acquired neuronain in adults and pediatric patients<br>• Community-acquired pneuronain in adults and pediatric patients<br>• Pharyngits/tonsillitis in adults and pediatric patients<br>• Pharyngits/tonsillitis in adults and pediatric patients<br>• Mycobacterial infections<br>Limitations of Use:<br>• Altithomycin should not be used in patients with pneumonia who are judged to be inappropriate for oral therapy because of<br>moderate to severe illness or risk factors.<br>• To reduce the development of drug-resistant bacteria and maintain the effectiveness of azithromycin and other antibacterial | 2   | 2     | N/A                                | N/A | N/A        | Y | Y | 6/7/2019  |
| Biologicals | Q2043 | Sipuleucel-T, minimum of<br>50 million autologous<br>CD54+ cells activated<br>with PAP-GM-CSF,<br>including leukapheresis<br>and all other preparatory<br>procedures, per infusion | 250 mL | 7/1/2011 | Provenge®  | sipuleucel-T, suspension for<br>intravenous infusion                    | drugs, aithromycin should be used only to treat infections that are proven or strongly suspected to be caused by susceptible<br>bacteria.<br>Indicated for the treatment of asymptomatic or minimally symptomatic metastatic castrate-resistant (hormone refractory) prostate<br>cancer.  | 1   | 3     | N/A                                | N/A | Males Only | Y | Y | 7/16/2018   |
| Drugs       | Q2049 | Injection, doxorubicin<br>hydrochloride, liposomal,<br>imported Lipodox, 10 mg   | 10 mg  | 7/1/2012 | Lipodox®   | doxorubicin hydrochloride<br>liposome injection                         | Indicated:<br>• For treatment of metastatic carcinoma of the ovary in patients with disease that is refractory to both pacifiaxel and platinum<br>based chemotherapy regimens. Refractory disease is defined as disease that has progressed while on treatment or within 6 months<br>of completing treatment.<br>• As monotherapy for the treatment of metastatic breast cancer, where there is an increased cardiac risk.<br>• For the treatment of AIDS related kaposi's Sarcoma in patients with extensive mucoculaneous or visceral disease that has<br>progressed on prior combination therapy (consisting of two of the following agents: a vinca alkaloid, bleomycin and standard<br>dosorubicin or another anthracyfung) or in patients with one rintolerant to such therapy.   | 13  | 26    | 18 years                           | N/A | N/A        | Y | ¥ | 10/4/2018   |
| Drugs       | Q2050 | Injection, doxorubicin<br>hydrochloride, liposomal,<br>not otherwise specified,<br>10 mg   | 10 mg  | 7/1/2013 | Doxil®   | doxorubicin hydrochloride<br>liposome injection, for<br>intravenous use | Indicated for:<br>• Ovarian carer after failure of platinum-based chemotherapy.<br>• AUS-related Kaposi's Sarcoma after failure of prior systemic chemotherapy or intolerance to such therapy.<br>• Multiple Myeloma in combination with bortezomb in patients who have not previously received bortezomb and have received at<br>least one prior therapy.  | 15  | 30    | 18 years                           | N/A | N/A        | Ŷ | Y | 6/10/2019   |

| Biologicals | Q4081 | Injection, epoetin alfa,<br>100 units (for ESRD on<br>dialysis) (for renal dialysis<br>facilities and hospital use) | 100 units | 1/1/2007 | Epogen®,<br>Procrit® | epoetin alfa injection, for<br>intravenous or subcutaneous<br>use (for ESRD on dialysis)         | Indicated for treatment of anemia due to - Chronic Kidney Disease (CKD) in patients on dialysis and not on dialysis Zdovudine in patients with HV-Infection The effects of concomitant myelosuppressive chemotherapy, and upon initiation, there is a minimum of two additional months of planned chemotherapy Reduction of allogeneic RBC transfusions in patients undergoing elective, noncardiac, nonvascular surgery. Limitations of Use: Expectin alfa has not been shown to improve quality of life, fatigue, or patient wellbeing. Not indicated for use: - In patients with cancer receiving hormonal agents, biologic products, or radiotherapy, unless also receiving concomitant myelosuppressive chemotherapy In patients with cancer receiving myelosuppressive chemotherapy when the anticipated outcome is cure In patients with cancer receiving myelosuppressive chemotherapy when the anticipated outcome is cure In patients with cancer receiving myelosuppressive chemotherapy when the anticipated outcome is cure In patients with cancer receiving myelosuppressive chemotherapy when the anticipated outcome is cure In patients with cancer receiving myelosuppressive chemotherapy in whom the anemia can be managed by transfusion In patients with going cardia cur vascular surgery As a substitute for RBC transfusions in patients who require immediate correction of anemia.  | 140   | 1,960  | 18 years                              | N/A | N/A | Y | ¥ |  | 10/10/2018 |
|-------------|-------|---|-----------|----------|----------------------|--|---|-------|--------|---------------------------------------|-----|-----|---|---|--|------------|
| Biologicals | Q5101 | Injection, filgrastim-sndz,<br>biosimilar, (Zarxio), 1<br>microgram   | 1 mcg     | 4/1/2018 | Zarxio*              | filgrastim-sndz injection, for<br>subcutaneous or intravenous<br>use                             | Indicated to:<br>• Decrease the incidence of infection, as manifested by febrile neutropenia, in patients with nonmyeloid malignancies receiving<br>myelosuppressive anticoner drugs associated with a significant incidence of severe neutropenia with feve.<br>• Reduce the time to neutrophil recovery and the duration of fever, following induction or consolidation chemotherapy treatment<br>of patients with acute myeloid leukemia (AML).<br>• Reduce the duration of neutropenia and neutropenia-related clinicalsequelae, e.g., febrile neutropenia, in patients with<br>nonmyeloid malignancies undergoing myeloablative chemotherapy followed by bone marrow transglantation (BMT).<br>• Mobilize autologous hematopoietic progenitor cells into the peripheral blood for collection by leukapheresis.<br>• Reduce the incidence and duration of sequelee of severe neutropenia (e.g., fever, infections, oropharyngeai ulcers) in<br>symptomatic patients with congenital neutropenia, cyclic neutropenia, or idiopathic neutropenia.   | 1,920 | 59,520 | N/A                                   | N/A | N/A | Y | ¥ |  | 6/6/2019   |
| Biologicals | Q5103 | injection, infliximab-dyyb,<br>biosimilar, (Inflectra), 10<br>mg  | 10 mg     | 4/1/2018 | Inflectra®           | infliximab-dyyb lyophilized<br>concentrate for injection, for<br>intravenous use                 | Indicated for:<br>Crohn's Disease:<br>reducing signs and symptoms and inducing and maintaining clinical remission in adult patients with moderately to severely active<br>disease who have had an inadequate response to conventional therapy.<br>reducing tigns and symptoms and inducing and maintaining clinical remission in pediatric patients with moderately to severely<br>reducing tigns and symptoms and inducing and maintaining clinical remission in pediatric patients with moderately to severely<br>active disease.<br>Pediatric Crohn's Disease:<br>reducing signs and symptoms inducing and maintaining clinical remission and mucosal healing, and eliminating corticosteroid use<br>in adult patients with moderately to severely active disease who have had an inadequate response to conventional therapy.<br>Pediatric Ulcerative Colitis:<br>reducing signs and symptoms, inducing and maintaining clinical remission in pediatric patients with moderately to severely<br>active disease who have had an inadequate response to conventional therapy.<br>Pediatric Ulcerative Colitis:<br>reducing signs and symptoms and inducing and maintaining clinical remission in pediatric patients with moderately to severely<br>active disease who have had an inadequate response to conventional therapy.<br>Remandiol Arthritis in combination with methotreaxe:<br>reducing signs and symptoms, inhibiting the progression of structural damage, and improving physical function in patients with<br>moderately to severely active disease.<br>Ankylosing Spondylitis:<br>reducing signs and symptoms in patients with active disease.<br>Paoriatic Arthritis:<br>reducing signs and symptoms of active arthritis, inhibiting the progression of structural damage, and improving physical function.<br>Plaque Posriasis:<br>therapy and when other systemic therapies are medically less appropriate. | 140   | 140    | Indication Specific<br>(see comments) | N/A | N/A | Y | Ŷ | Crohn's Disease and Ulcerative<br>Collis: 6 years of age and<br>older<br>Plaque Psoriasis, Psoriatic<br>Arthritis: Ankylosing<br>Spondylitis: 18 years of age<br>and older | 7/26/2019  |
| Biologicals | Q5105 | Injection, epoetin alfa-<br>epix, biosimilar, (retacriti<br>(for esrd on dialysis), 100<br>units                    | 100 units | 7/1/2018 | Retacrit™            | epoetin alfa-epbx injection,<br>for intravenous or<br>subcutaneous use (for ESRD<br>on dialysis) | Indicated for the treatment of anemia due to:<br>O Chronic kidney disease (CKD) in patients on dialysis and not on dialysis. O Zidovudine in patients with HV-infection. O The effects of concomitant myelosuppressive chemotherapy, and upon initiation, there is a minimum of two additional months of<br>planned chemotherapy. Indicated for the reduction of allogeneic R8C transfusions in patients undergoing elective, noncardiac, nonvascular surgery. Limitations of Use: Retear: this an other shown to improve quality of life, fatigue, or patient well-being. Not indicated for use in: In patients with cancer receiving hormonal agents, biologic products, or radiotherapy, unless also receiving concomitant<br>myelosuppressive chemotherapy. In patients with cancer receiving myelosuppressive chemotherapy in whom the anticipated outcome is cure. In patients with cancer receiving myelosuppressive chemotherapy in whom the anemia can be managed by transfusion. In patients undergoing cardiac or vascular surgery. As a substitute for R8C transfusions in patients who require immediate correction of anemia.   | 140   | 1,820  | 1 month                               | N/A | N/A | Y | ¥ |  | 1/9/2020   |

|             |       |   |                              | -         |                           |  |  |       |        |                                       |     | 1            |   |   | 1   |
|-------------|-------|---|------------------------------|-----------|---------------------------|--|--|-------|--------|---------------------------------------|-----|--------------|---|---|---|
| Biologicals | Q5106 | Injection, epoetin alfa-<br>eptx, biosimilar, (retacrit)<br>(for non-esrd use), 1000<br>units | 1,000 units                  | 7/1/2018  | Retacrit™                 | epoetin alfa-epbx injection,<br>for intravenous or<br>subcutaneous use (for non-<br>ESRD use)          | <ul> <li>Indicated for the treatment of anemia due to:</li> <li>O Chronic kidney disease (CKD) in patients on dialysis and not on dialysis.</li> <li>O Zidovudine in gatent swith Hivinfection.</li> <li>The effects of concomitant myelosuppressive chemotherapy, and upon initiation, there is a minimum of two additional months of planned chemotherapy.</li> <li>Indicated for the reduction of allogeneic RBC transfusions in patients undergoing elective, noncardiac, nonvascular surgery.</li> <li>Limitations of Use: Retacrit has not been shown to improve quality of life, fatigue, or patient well-being.</li> <li>Not indicated for use in: <ul> <li>In patients with Cancer receiving hormonal agents, biologic products, or radiotherapy, unless also receiving concomitant myelosuppressive chemotherapy in whom the anticipated outcome is cure.</li> <li>In patients with cancer receiving myelosuppressive chemotherapy when the anticipated outcome is cure.</li> <li>In patients with cancer receiving welosuppressive chemotherapy in whom the anemia can be managed by transfusion.</li> <li>In patients subclude for surgery who are willing to donate autologous blood.</li> <li>In patients subclude for surgery:</li> <li>As a substitute for RBC transfusions in patients who require immediate correction of anemia.</li> </ul> </li> </ul> | 84    | 630    | Indication Specific<br>(see comments) | N/A | N/A          | ¥ | Y | Indication specific age<br>restrictions:<br>• Anemia due to concomitant<br>myeloauppressive<br>chemotherapy: 5 years of age<br>and older<br>• Zidowudine-treated, anemia,<br>patients with IVI infection: 8<br>months and older |
| Biologicals | Q5108 | Injection, pegfilgrastim-<br>jmdb, biosimilar,<br>(Fulphila), 0.5 mg                          | 0.5 mg                       | 10/1/2018 | Fulphila™                 | pegfilgrastim-jmdb injection,<br>for subcutaneous use  | Indicated to decrease the incidence of infection, as manifested by febrile neutropenia, in patients with non-myeloid malignancies<br>receiving myelosuppressive anti-cancer drugs associated with a clinically significant incidence of febrile neutropenia.<br>Limitations of Use:<br>Fulphila is not indicated for the mobilization of peripheral blood progenitor cells for hematopoietic stem cell transplantation.  | 12    | 36     | N/A                                   | N/A | N/A          | Y | ¥ | 1/9/2020  |
| Biologicals | Q5110 | Injection, filgrastim-aafi,<br>biosimilar, (Nivestym), 1<br>microgram                         | 1 mcg                        | 10/1/2018 | Nivestym™                 | filgrastim-aafi injection, for<br>subcutaneous or intravenous<br>use                                   | Indicated to:<br>• Decrease the incidence of infection, as manifested by febrile neutropenia, in patients with nonmyeloid malignancies receiving<br>myelosuppressive anti-cancer drugs associated with a significant incidence of severe neutropenia with fever.<br>• Reduce the time to neutrophil recovery and the duration of fever, following induction or consolidation chemotherapy treatment<br>of patients with acute myeloid leukemia (ANL).<br>• Reduce the duration of neutropenia and neutropenia-related clinical sequelae, e.g., febrile neutropenia, in patients with<br>nonmyeloid malignancies undergoing myeloablative chemotherapy followed by kone marrow transplantation (BMT).<br>• Mobilize autologous hematopoietic progenitor cells into the peripheral bloof for collection by leukapheresis.<br>• Reduce the duradence and duration of sequelea de severe neutropenia (e.g., fever, infections, cropharyngeal ulcers) in<br>symptomatic patients with congenital neutropenia, cyclic neutropenia, or idiopathic neutropenia.  | 1,920 | 59,520 | N/A                                   | N/A | N/A          | Ŷ | Y | 12/28/2018  |
| Biologicals | Q5111 | Injection, pegfilgrastim-<br>cbqv, biosimilar,<br>(udenyca), 0.5 mg                           | 0.5 mg                       | 1/1/2019  | Udenyca™                  | pegfilgrastim-cbqv injection,<br>for subcutaneous use  | Indicated to decrease the incidence of infection, as manifested by febrile neutropenia, in patients with non-myeloid malignancies<br>receiving myelosuppressive anti-cancer drugs associated with a clinically significant incidence of febrile neutropenia.<br>Limitations of use:<br>Udenyca is not indicated for the mobilization of peripheral blood progenitor cells for hematopoietic stem cell transplantation.   | 12    | 36     | N/A                                   | N/A | N/A          | Ŷ | Y | 1/9/2020  |
| Drugs       | Q9991 | Injection, buprenorphine<br>extended-release<br>(Sublocade), less than or<br>equal to 100 mg  | less than or equal to 100 mg | 7/1/2018  | Sublocade™                | buprenorphine extended-<br>release injection, for<br>subcutaneous use, less than<br>or equal to 100 mg | Indicated for the treatment of moderate to severe opioid use disorder in patients who have initiated treatment with a transmucosal<br>buprenorphine-containing product, followed by dose adjustment for a minimum of 7 days.   | 1     | 2      | 18 years                              | N/A | N/A          | Y | Y | 9/27/2018   |
| Drugs       | Q9992 | Injection, buprenorphine<br>extended-release<br>(Sublocade), greater than<br>100 mg           | greater than 100 mg          | 7/1/2018  | Sublocade™                | buprenorphine extended-<br>release injection, for<br>subcutaneous use, greater<br>than 100 mg          | Indicated for the treatment of moderate to severe opioid use disorder in patients who have initiated treatment with a transmucosal<br>buprenorphine-containing product, followed by dose adjustment for a minimum of 7 days.   | 1     | 2      | 18 years                              | N/A | N/A          | Y | Y | 9/27/2018   |
| Drugs       | S0080 | Injection, pentamidine<br>isethionate, 300 mg   | 300 mg                       | 1/1/2000  | Pentam <sup>®</sup> 300   | pentamidine isethionate for<br>injection   | Indicated for the treatment and prevention of pneumonia caused by Pneumocystis carinii.  | 2     | 42     | 4 months                              | N/A | N/A          | Y | Y | 8/24/2018   |
| Biologicals | 50145 | Injection, pegylated<br>interferon alfa-2a, 180<br>mcg per mL                                 | 180 mcg                      | 7/1/2005  | Pegasys®                  | peginterferon alfa-2a<br>injection, for subcutaneous<br>use  | Chronic Hepatitis C (CHC):<br>•Adult Patients: In combination therapy with other hepatitis C virus drugs for adults with compensated liver disease. Pegasys<br>monotherapy is indicated only if patient has contraindication or significant intolerance to other HCV drugs.<br>•Pediatric Patients: In combination with ribavirin for pediatric patients 5 years of age and older with compensated liver disease.<br>Chronic Hepatitis B (CHB):<br>•Adult Patients: Treatment of adults with HBeAg-positive and HBeAg-negative chronic hepatitis B (CHB) infection who have<br>compensated liver disease and evidence of viral replication and liver inflammation.<br>•Pediatric Patients: Treatment of no-cirrhoic pediatric patients 3 years of age and older with HBeAg-positive CHB and evidence of<br>viral replication and elevations in serum alanine aminotransferase (ALT).   | 1     | 5      | Indication Specific<br>(see comments) | N/A | N/A          | ¥ | Y | Indication specific age<br>restrictions:<br>• Chronic Hepatitis C: S years<br>of age and older<br>• Chronic Hepatitis B: 3 years<br>of age and older  |
| Biologicals | 50148 | Injection, pegylated<br>interferon alfa-2b, 10 mcg  | 10 mcg                       | 10/1/2010 | PegIntron®                | peginterferon alfa-2b<br>injection, for subcutaneous<br>use  | Indicated for treatment of Chronic Hepatitis C (CHC) in patients with compensated liver disease.   | 21    | 105    | 3 years                               | N/A | N/A          | Y | Y | 6/7/2019  |
| Drugs       | S0166 | Injection, olanzapine, 2.5<br>mg  | 2.5 mg                       | 10/1/2004 | Zyprexa®<br>Intramuscular | olanzapine injection, powder,<br>for solution  | Indicated for the treatment of acute agitation associated with schizophrenia and bipolar I mania.  | 12    | 372    | 13 years                              | N/A | N/A          | Y | Y | 9/21/2018   |
| Drugs       | 50189 | Testosterone pellet, 75<br>mg   | 75 mg                        | 1/1/2002  | Testopel <sup>®</sup>     | testosterone pellets for subcutaneous implantation   | Indicated for replacement therapy in conditions associated with a deficiency or absence of endogenous testosterone:<br>• Primary hypogonadism (congenital or acquired) - testicular failure due to cryptorchidism, bilateral torsion, orchitis, vanishing<br>testes syndrome; or orchitectomy.<br>• Hypogonadotropic hypogonadism (congenital or acquired) - gonadotropic LHRH deficiency, or pituitary - hypothalamic injury from<br>tumors, trauma or radiation.   | 6     | 6      | N/A                                   | N/A | Males Only   | Y | Ŷ | 9/21/2018   |
| Drugs       | S0190 | Mifepristone, oral, 200<br>mg   | 200 mg                       | 1/1/2000  | Mifeprex®                 | mifepristone tablets, for oral<br>use  | Indicated, in a regimen with misoprostol, for the medical termination of intrauterine pregnancy through 70 days gestation.   | 1     | 1      | N/A                                   | N/A | Females Only | Y | Y | 3/15/2019   |
| Drugs       | S0191 | Misoprostol, oral, 200<br>mcg   | 200 mcg                      | 1/1/2000  | Cytotec*                  | misoprostol tablets, for oral<br>use   | Indicated, in a regimen with mifepristone, for the medical termination of intrauterine pregnancy through 70 days gestation.  | 4     | 4      | N/A                                   | N/A | Females Only | Y | Y | 5/30/2019   |

| Drugs       | 54993 | Contraceptive pills for<br>birth control  | 1 tablet | 4/1/2002  | N/A   | contraceptive pills for birth<br>control  | Indicated as birth control.  | 91    | 91     | 11 years                              | 55 years  | Females Only | Y | Y | Max Daily: Birth control pack<br>canot be broken - max daily<br>indicates one pack of 28 or 91<br>birth control pills depending<br>on specific product<br>• Max Monthly: Birth control<br>packs cannot be broken - max<br>monthly indicates up to two<br>packs of 28 birth control pills<br>depending on specific product                              | 6/19/2019 |
|-------------|-------|---|----------|-----------|---|---|--|-------|--------|---------------------------------------|-----------|--------------|---|---|--|-----------|
| Drugs       | J1444 | Injection, ferric<br>pyrophosphate citrate<br>powder, 0.1 mg of iron<br>(This code would be used<br>with the "JE" modifier,<br>when administered via<br>dialysate.) | 0.1 mg   | 7/1/2019  | Triferic®   | ferric pyrophosphate citrate<br>powder packet for<br>hemodialysis use                                     | Indicated for the replacement of iron to maintain hemoglobin in adult patients with hemodialysis-dependent chronic kidney disease<br>(HDD-CKD).<br>Limitations of Use:<br>- Triferic is not intended for use in patients receiving peritoneal dialysis.<br>- Triferic has not been studied in patients receiving home hemodialysis.  | 2,720 | 38,080 | 18 years                              | N/A       | N/A          | ¥ | Ŷ |  | 7/26/2019 |
| Biologicals | Q5104 | Injection, infliximab-abda,<br>biosimilar (Renflexis), 10<br>mg   | 10 mg    | 4/1/2018  | Renflexis*  | infliximab-abda for injection,<br>for intravenous use   | Indicated for:<br>Crohn's Disease:<br>Reducing signs and symptoms and inducing and maintaining clinical remission in adult patients with moderately to severely active<br>disease who have had an inadequate response to conventional therapy.<br>Reducing the number of draining enterocutaneous and rectovaginal fistulas and maintaining fistula closure in adult patients with<br>fistuliaring disease.<br>Reducing tigns and symptoms and inducing and maintaining clinical remission in pediatric patients with moderately to severely<br>active disease who have had an inadequate response to conventional therapy.<br>Reducing tigns and symptoms, inducing and maintaining clinical remission and mucosal healing, and eliminating corticosteroid use<br>in adult patients with moderately to severely active disease who have had an inadequate response to conventional therapy.<br>Reducing tigns and symptoms, inducing and maintaining clinical remission in pediatric patients with moderately to severely<br>active disease who have had an inadequate response to conventional therapy.<br>Reducing signs and symptoms, inducing and maintaining clinical remission in pediatric patients with moderately to severely<br>active disease who have had an inadequate response to conventional therapy.<br>Relumatoid Arthinits in combination with methortexte:<br>Reducing signs and symptoms, inhibiting the progression of structural damage, and improving physical function in patients with<br>moderately to severely active disease.<br>Parviatic Arthritis:<br>Reducing signs and symptoms in patients with active disease.<br>Parviatic Arthritis.<br>Reducing signs and symptoms of active arthritis, inhibiting the progression of structural damage, and improving physical function.<br>Plaque Pooriasis:<br>Treatment of adult patients with chronic severe (i.e., extensive and/or disabiling plaque psoriasis who are candidates for systemic<br>therapy and when other systemic therapies are medically less appropriate. | 140   | 140    | Indication Specific<br>(see comments) | N/A       | N/A          | ¥ | ¥ | Indication specific.<br>• Croin's Disease: 6 years and<br>older<br>• Ulcerative Colitis: 5 years<br>and older<br>• Rheumatoid Arthritis in<br>combination with<br>methotrexate: 18 years and<br>older<br>• Ankylosing Spondylitis: 18<br>years and older<br>• Pasoriatic Arthritis: 18 years<br>and older<br>• Plaque Psoriasis: 18 years<br>and older | 7/26/2019 |
| Drugs       | J0222 | Injection, Patisiran, 0.1<br>mg   | 0.1 mg   | 10/1/2019 | Onpattro™   | patisiran lipid complex<br>injection, for intravenous use   | Indicated for the treatment of the polyneuropathy of hereditary transthyretin-mediated amyloidosis in adults.  | 300   | 600    | 18 years                              | N/A       | N/A          | Y | Y |  | 9/27/2019 |
| Biologicals | J9309 | Injection, polatuzumab<br>vedotin-piiq, 1 mg  | 1 mg     | 1/1/2020  | Polivy™   |   | Indicated in combination with bendamustine and a rituximab product for the treatment of adult patients with relapsed or refractory<br>diffuse large B-cell lymphoma, not otherwise specified, after at least two prior therapies.  | 280   | 560    | 18 years                              | N/A       | N/A          | Ŷ | Y |  | 1/9/2020  |
| Drugs       | J9036 | Injection, bendamustine<br>hydrochloride,<br>(Belrapzo/bendamustine)<br>, 1 mg  | 1 mg     | 7/1/2019  | Belrapzo™   |   | Indicated for treatment of patients with:<br>• Chronic kymphocytic leukemia (CLL). Efficacy relative to first line therapies other than chlorambucil has not been established.<br>• Indicent 3-cell ionn-Hodgkin kymphoma (NHL) that has progressed during or within six months of treatment with rituximab or a<br>rituximab-containing regimen.  | 300   | 1,200  | 18 years                              | N/A       | N/A          | Y | Y |  | 8/26/2019 |
| Vaccines    | 90685 | Influenza virus vaccine,<br>quadrivalent (IIV4), split<br>virus, preservative free,<br>0.25 mL dosage, for<br>intramuscular use                                     | 0.25 mL  | 1/1/2013  | Fluzone®<br>Quadrivalent;<br>Afluria®<br>Quadrivalent | influenza vaccine suspension<br>for intramuscular injection<br>2019-2020 Formula, 0.25 mL                 | Indicated for active immunization for the prevention of influenza disease caused by influenza A subtype viruses and type B viruses<br>contained in the vaccine.  | 1     | 2      | 6 months                              | 35 months | N/A          | Y | N |  | 8/26/2019 |
| Vaccines    | 90662 | Influenza virus vaccine<br>(IIV), split virus,<br>preservative free,<br>enhanced<br>immunogenicity via<br>increased antigen<br>content, for<br>intramuscular use    | 0.5 mL   | 1/1/2008  | Fluzone® High-<br>Dose                                | influenza vaccine suspension<br>for intramuscular injection   | Indicated for active immunization for the prevention of influenza disease caused by influenza A subtype viruses and type B<br>contained in the vaccine for use in persons 65 years of age and older.   | 1     | 1      | 65 years                              | N/A       | N/A          | Ŷ | N |  | 8/26/2019 |
| Vaccines    | 90687 | Influenza virus vaccine,<br>quadrivalent (IIV4), split<br>virus, 0.25 mL dosage, for<br>intramuscular use   | 0.25 mL  | 1/1/2013  | Fluzone®<br>Quadrivalent                              | influenza virus vaccine,<br>quadrivalent (IIV4), split<br>virus, 0.25 mL dosage, for<br>intramuscular use | Indicated for active immunization for the prevention of influenza disease caused by influenza A subtype viruses and type B viruses<br>contained in the vaccine.  | 1     | 2      | 6 months                              | 35 months | N/A          | Y | N |  | 8/26/2019 |
| Vaccines    | 90653 | Influenza vaccine,<br>inactivated (IIV), subunit,<br>adjuvanted, for<br>intramuscular use   | 0.5 mL   | 1/1/2013  | Fluad®  |   | Indicated for active immunization for the prevention of influenza disease caused by influenza A subtype viruses and type B virus<br>contained in the vaccine for use in persons 65 years of age and older.   | 1     | 1      | 65 years                              | N/A       | N/A          | Y | N |  | 8/26/2019 |

|                     |       |  |                          |           | r                    | 1   |  |       |        | 1                                     | r        |     | Т | 1 |   |
|---------------------|-------|--|--------------------------|-----------|----------------------|---|--|-------|--------|---------------------------------------|----------|-----|---|---|---|
| Biologicals         | Q5107 | Injection, bevacizumab,<br>(mvasi), 10 mg  | 10 mg                    | 1/1/2019  | Mvasi™               | bevacizumab-awwb injection<br>for intravenous use                                     | Indicated for the treatment of:<br>• Metastatic colorectal cancer, in combination with intravenous fluorouracil-based chemotherapy for first- or second-line<br>treatment.<br>• Metastatic colorectal cancer, in combination with fluoropyrimidine-intotecan- or fluoropyrimidine-oxaliplatin-based<br>chemotherapy for second-line treatment in patients who have progressed on a first-line bevacizumab product-containing regimen.<br>- Junitations of Use: Mesi is not indicated for adjuvant treatment of color cancer.<br>• Urresectable, locally advanced, recurrent or metastatic non-squamous non-small cell lung cancer, in combination with carboplatin<br>and pacitized for first-line treatment.<br>• Recurrent glioblastoma in adults.<br>• Persistent, recurrent, or metastatic cervical cancer, in combination with pacitaxel and cisplatin, or pacitaxel and topotecan.   | 210   | 420    | 18 years                              | N/A      | N/A | Y | Y | 8/29/2019   |
| Drugs               | J0291 | Injection, plazomicin, 5<br>mg   | 5 mg                     | 10/1/2019 | Zemdri™              | plazomicin injection, for<br>intravenous use  | <ul> <li>Indicated for the treatment of patients 18 years of age or older with complicated urinary tract infections (cUTI) including pyelonephritis.</li> <li>As only limited clinical safety and efficacy data are available, reserve Zemdri for use in patients who have limited or no alternative treatment options.</li> <li>To reduce the development of drug-resistant bacteria and maintain effectiveness of Zemdri and other antibacterial drugs, Zemdri should be used only to treat infections that are proven or strongly suspected to be caused by susceptible microorganisms.</li> </ul>  | 420   | 2,940  | 18 years                              | N/A      | N/A | Y | Y | 10/3/2019   |
| Drugs               | J7314 | Injection, fluocinolone<br>acetonide, intravitreal<br>implant (Yutiq), 0.01 mg                                       | 0.01 mg                  | 10/1/2019 | Yutiq™               | fluocinolone acetonide<br>intravitreal implant 0.18 mg,<br>for intravitreal injection | Indicated for the treatment of non-infectious uveitis affecting the posterior segment of the eye.  | 36    | 36     | 18 years                              | N/A      | N/A | Y | Y | 9/27/2019   |
| Biologicals         | J3398 | Injection, voretigene<br>neparvovec-rzyl, 1 billion<br>vector genomes  | 1 billion vector genomes | 1/1/2019  | Luxturna™            | voretigene neparvovec-rzyl<br>intraocular suspension for<br>subretinal injection      | Indicated for the treatment of patients with confirmed biallelic RPE65 mutation-associated retinal dystrophy. Patients must have<br>viable retinal cells as determined by the treating physician(s).   | 150   | 300    | 1 year                                | N/A      | N/A | Y | Y | 10/16/2019  |
| Biologicals         | J9312 | Injection, rituximab, 10<br>mg   | 10 mg                    | 1/1/2019  | Rituxan®             | rituximab injection, for<br>intravenous use   | Indicated for the treatment of adult patients with:<br>• Non-Hodgkin's Lymphoma (NHL)<br>• Relapsed or refractory, low grade or follicular, CD20-positive B-cell NHL as a single agent.<br>• Previously untreated follicular, CD20-positive, B-cell NHL in combination with first line chemotherapy and, in patients achieving a<br>complete or partial response to Rituxan in combination with chemotherapy, as single-agent maintenance therapy.<br>• Non-progressing (including stable disease), low-grade, CD20-positive, B-cell NHL as a single-agent after first-line cyclophosphamide,<br>vincristine, and prednisone (CVP) chemotherapy.<br>• Previously untreated diffue large B-cell, CD20-positive NHL in combination with (cyclophosphamide, doxorubicin, vincristine, and<br>prednisone) (CHOP) or other anthracycline-based chemotherapy regimens.<br>• Chronic Lymphocytic Leukemia (CLL)<br>• Previously untreated and previously treated CD20-positive CLL in combination with fludarabine and cyclophosphamide (FC).<br>• Rheumatiol Arthritis (IA) in combination with methotrexate in adult patients with moderately-to severely-active RA who have<br>inadequate response to one or more TN Fantagonis Heraples.<br>• Granulomatosis with Polyangitis (GPA) (Wegener's Granulomatosis) and Microscopic Polyangitis (MPA) in adult and pediatric<br>patients 2 years of age and older in combination with gluccorticoids.<br>• Moderate to severe pemphigus vulgaris (PV) in adult patients. | 130   | 500    | Indication Specific<br>(see comments) | N/A      | N/A | ¥ | ¥ | Indication Specific:<br>• NHL, CLL, RA, PV: 18 years of<br>age and older 10/28/2019<br>• GPA and MPA: 2 years of age<br>and older |
| Drugs               | J3490 | Unclassified drugs   | 1 mg                     | 1/1/2000  | Bridion®             | sugammadex injection, for<br>intravenous use  | Indicated for the reversal of neuromuscular blockade induced by rocuronium bromide and vecuronium bromide in adults<br>undergoing surgery.   | 2,500 | 12,500 | 18 years                              | N/A      | N/A | Y | Y | 11/14/2019  |
| Biologicals         | J9118 | Injection, calaspargase pegol-mknl, 10 units   | 10 units                 | 10/1/2019 | Asparlas™            | calaspargase pegol-mknl<br>injection, for intravenous use                             | Indicated for the treatment of each lumphoblestic bullowin in pediatric and usuan edult estimate and 1 month to 21 years   | 750   | 1,500  | 1 month                               | 21 years | N/A | Y | Y | 12/3/2019   |
| Biologicals         | Q5115 | Injection, rituximab-abbs,<br>biosimilar, (Truxima), 10<br>mg  | 10 mg                    | 7/1/2019  | Truxima®             | rituximab-abbs injection, for<br>intravenous use                                      | Indicated for the treatment of adult patients with:<br>• Non-Hodgkin's Lymphoma (NHL)<br>- Relapsed or refactory, low grade or follicular, CD20-positive B-cell NHL as a single agent.<br>- Previously untreated follicular, CD20-positive, B-cell NHL in combination with first line chemotherapy and, in patients achieving a<br>Complete or partial response to a ritusmab product in combination with first line chemotherapy and, in patients achieving a<br>Complete or partial response to a ritusmab product in combination with themotherapy, as single-agent maintenance therapy.<br>- Previously untreated offlue large B-cell, CD20-positive NHL in combination with furth as single-agent after first-line cyclophosphamide,<br>vincristine, and predinisone (CVP) chemotherapy.<br>- Previously untreated diffue large B-cell, CD20-positive NHL in combination with fludarabine and cyclophosphamide (FC).<br>- Orronic Lymphorycit Leukeming (CL)<br>- Previously untreated and previously treated CD20-positive CLL in combination with fludarabine and cyclophosphamide (FC).<br>- Renumatod Arthitis (RA) in combination with motersteate in adult patients with moderately-to severely-active RA who have<br>inadequate response to ne or more TNF antagonist therapies.<br>- Granulomatosis with Polyangitis (GPA) (Wegener's Granulomatosis) and Microscopic Polyangitis (MPA) in adult patients in<br>combination with glucocorticoids.   | 130   | 500    | 18 years                              | N/A      | N/A | Y | ¥ | 12/4/2019   |
| Biologicals         | J0179 | Injection, brolucizumab-<br>dbll, 1 mg   | 1 mg                     | 1/1/2020  | Beovu®               | brolucizumab-dbll injection,<br>for intravitreal injection                            | Indicated for the treatment of Neovascular (Wet) Age-Related Macular Degeneration (AMD).   | 12    | 24     | 18 years                              | N/A      | N/A | Y | Y | 1/9/2020  |
| Biologicals         | Q5114 | Injection, Trastuzumab-<br>dkst, biosimilar, (Ogivri),<br>10 mg  | 10 mg                    | 7/1/2019  | Ogivri™              | trastuzumab-dkst for<br>injection, for intravenous use                                | Indicated for:<br>• The treatment of HER2-overexpressing breast cancer.<br>• The treatment of HER2-overexpressing metastatic gastric or gastroesophageal junction adenocarcinoma.  | 112   | 196    | 18 years                              | N/A      | N/A | Ŷ | Y | 12/4/2019   |
| Biologicals         | J3590 | Unclassified biologics   | 1 mg                     | 1/1/2002  | Adakveo <sup>®</sup> | crizanlizumab-tmca injection<br>for intravenous use                                   | Select patients for therapy based on an FDA-approved companion diagnostic for a trastuzumab product.<br>Indicated to reduce the frequency of vasoocclusive crises in adults and pediatric patients aged 16 years and older with sickle cell<br>disease.  | 700   | 1,400  | 16 years                              | N/A      | N/A | Y | Y | 1/10/2020   |
| Immune<br>Globulins | J1599 | Injection, immune<br>globulin, intravenous,<br>non-lyophilized (e.g.,<br>liquid), not otherwise<br>specified, 500 mg | 500 mg                   | 1/1/2011  | Asceniv™             | immune globulin<br>intravenous, human – slra<br>10% liquid                            |  | 230   | 460    | 12 years                              | N/A      | N/A | Y | Y | 1/10/2020   |
| Drugs               | J3490 | Unclassified drugs   | 1 mg                     | 1/1/2000  | Givlaari™            | givosiran injection, for<br>subcutaneous use  | Indicated for the treatment of adults with acute hepatic porphyria (AHP).  | 378   | 756    | 18 years                              | N/A      | N/A | Y | Y | 1/10/2020   |
| Drugs               | J3490 | Unclassified drugs   | 30 mg                    | 1/1/2000  | Anjeso™              | meloxicam injection, for<br>intravenous use   | Indicated for use in adults for the management of moderate-to-severe pain, alone or in combination with non-NSAID analgesics.<br>Limitation of Use:<br>Because of delayed onset of analgesia, Anjeso alone is not recommended for use when rapid onset of analgesia is required.   | 1     | 31     | 18 years                              | N/A      | N/A | Y | Y | 5/25/2020   |

| Biologicals         | J3590 | Unclassified biologics   | 0.5 mg          | 1/1/2002  | Ziextenzo™ | pegfilgrastim-bmez injection,<br>for subcutaneous use                                  | Indicated to decrease the incidence of infection, as manifested by febrile neutropenia, in patients with nonmyeloid malignancies<br>receiving myelosuppressive anti-cancer drugs associated with a clinically significant incidence of febrile neutropenia.<br>Limitations of Use:<br>Ziextenzo is not indicated for the mobilization of peripheral blood progenitor cells for hematopoietic stem cell transplantation.   | 12    | 36     | N/A      | N/A | N/A | Ŷ | Ŷ |  | 1/10/2020 |
|---------------------|-------|--|-----------------|-----------|------------|--|---|-------|--------|----------|-----|-----|---|---|--|-----------|
| Biologicals         | 19999 | Not otherwise classified,<br>antineoplastic drugs                  | 10 mg           | 1/1/2000  | Padcev™    | enfortumab vedotin-ejfv for<br>injection, for intravenous use                          | Indicated for the treatment of adult patients with locally advanced or metastatic urothelial cancer who have previously received a<br>programmed death receptor.1 (PD-1) or programmed death-ligand 1 (PD-11) inhibitor, and a platinum-containing chemotherapy in<br>the neoadjuvari/adjuvani, locally advanced or metastatic setting.   | 13    | 52     | 18 years | N/A | N/A | Y | Y |  | 1/30/2020 |
| Biologicals         | 19999 | Not otherwise classified,<br>antineoplastic drugs                  | 10 mg           | 1/1/2000  | Enhertu®   | fam-trastuzumab deruxtecan-<br>nxki for injection, for<br>intravenous use              | Indicated for the treatment of adult patients with unresectable or metastatic HER2-positive breast cancer who have received two or<br>more prior anti-HER2-based regimens in the metastatic setting.  | 80    | 160    | 18 years | N/A | N/A | Y | Y |  | 1/30/2020 |
| Biologicals         | J9210 | Injection, emapalumab-<br>Izsg, 1 mg                               | 1 mg            | 10/1/2019 | Gamifant™  | emapalumab-lzsg injection,<br>for intravenous use                                      | Indicated for the treatment of adult and pediatric (newborn and older) patients with primary hemophagocytic lymphohistiocytosis<br>(HLH) with refractory, recurrent or progressive disease or intolerance with conventional HLH therapy.  | 1,400 | 14,000 | N/A      | N/A | N/A | Y | Y |  | 5/27/2020 |
| Drugs               | J3490 | Unclassified drugs   | 1.25 g          | 1/1/2000  | Recarbrio™ | imipenem, cilastatin, and<br>relebactam for injection, for<br>intravenous use          | Indicated in patients 18 years of age and older who have limited or no alternative treatment options, for the treatment of the following infections caused by susceptible gram-negative bacteria:   | 4     | 56     | 18 years | N/A | N/A | Y | ¥ |  | 3/3/2020  |
| Biologics           | 19999 | Not otherwise classified,<br>antineoplastic drugs                  | 10 mg           | 1/1/2000  | Ruxience™  | ritusimab-pvvr injection, for<br>intravenous use                                       | Indicated for the treatment of adult patients with:<br>• Non-Hodgkin's Lymphoma (NHL):<br>o Relapsed or refractory, low grade or follicular, CD20-positive B-cell NHL as a single agent.<br>o Previously untreated follicular, CD20-positive, B-cell NHL in combination with first line chemotherapy and, in patients achieving a<br>complete or partial response to a ritusimab product in combination with chemotherapy, as single-agent maintenance therapy.<br>o Non-progressing (including stable disease), low-grade, CD20-positive, B-cell NHL as a single agent after first-line<br>cyclophosphamide, vincristine, and predinsione (LYP) chemotherapy. E-cell NHL as a single agent after first-line<br>cyclophosphamide, vincristine, and predinsione (LYP) chemotherapy regimens.<br>• Ornoric Lymphocytic Leukemia (LL):<br>o Previously untreated diffuse large B-cell, CD20-positive NLI in combination with fludarabine and cyclophosphamide (FC).<br>• Granulomatosi with Polyangitis (GPA) (Wegener's Granulomatosis) and Microscopic Polyangitis (MPA) in adult patients in<br>combination with glucocorticoids. | 130   | 500    | 18 years | N/A | N/A | ¥ | ¥ |  | 3/3/2020  |
| Biologics           | J3590 | Unclassified biologics   | 1 mg            | 1/1/2002  | Tepezza™   | teprotumumab-trbw for<br>injection, for intravenous use                                | Indicated for the treatment of Thyroid Eye Disease.   | 3,000 | 6,000  | 18 years | N/A | N/A | Y | Y |  | 3/3/2020  |
| Biologics           | Q5118 | Injection, bevacizumab-<br>bvzr, biosimilar, (Zirabev),<br>10 mg   | 10 mg           | 10/1/2019 | Zirabev™   | bevacizumab-bvzr injection,<br>for intravenous use                                     | Indicated for the treatment of:<br>• Metastatic colorectal cancer, in combination with intravenous fluorouracil-based chemotherapy for first- or second-line<br>treatment.<br>• Metastatic colorectal cancer, in combination with fluoropyrimidine-irinotecan- or fluoropyrimidine-exaliplatin-based<br>chemotherapy for second-line treatment in patients who have progressed on a first-line bevacizumab product-containing regimen.<br>• Unresectable, locally advanced, recurrent or metastatic non-squamous non-small cell lung cancer, in combination with<br>carboplatin and pacitized for first-line treatment.<br>• Recurrent globalstoma in adduct cervical cancer, in combination with pacitized and cisplatin or pacitized and topotecan.<br>• Metastatic renal cell cardinoma in combination with interferon alfa.<br>• Persistent, recurrent, or metastatic cervical cancer, in combination with pacitized and cisplatin or pacitized and topotecan.<br>Limitations of Use: Zirabev is not indicated for adjuvant treatment of colon cancer.  | 210   | 420    | 18 years | N/A | N/A | Ŷ | Ŷ |  | 3/3/2020  |
| Drugs               | J3490 | Unclassified drugs   | 1 gram (1 vial) | 1/1/2000  | Fetroja®   | cefiderocol for injection, for<br>intravenous use                                      | Indicated in patients 18 years of age or older who have limited or no alternative treatment options, for the treatment of<br>complicated urinary tract infections (UUTI), including pyelonephritis caused by susceptible Gram-negative microorganisms.<br>To reduce the development of drug-resistant bacteria and maintain the effectiveness of Fetroja and other antibacterial drugs,<br>Fetroja should be used only to treat or prevent infections that are proven or strongly suspected to be caused by bacteria.   | 8     | 112    | 18 years | N/A | N/A | Ŷ | ¥ |  | 3/26/2020 |
| Drugs               | J3490 | Unclassified drugs   | 1 mg            | 1/1/2000  | Quzyttir™  | cetirizine hydrochloride<br>injection, for intravenous use                             | Indicated for the treatment of acute urticaria in adults and children 6 months of age and older.<br>Limitations of use:<br>Quzyttir <sup>™</sup> is not recommended in pediatric patients less than 6 years of age with impaired renal or hepatic function.   | 10    | 100    | 6 months | N/A | N/A | Ŷ | Ŷ |  | 3/26/2020 |
| Biologicals         | Q5116 | Injection, trastuzumab-<br>qyyp, biosimilar,<br>(trazimera), 10 mg | 10 mg           | 10/1/2019 | Trazimera™ | trastuzumab-qyyp for<br>injection, for intravenous use                                 | Indicated for:<br>• The treatment of HER2-overexpressing breast cancer.<br>• The treatment of HER2-overexpressing metastatic gastric or gastroesophageal junction adenocarcinoma.   | 112   | 196    | 18 years | N/A | N/A | Y | Y |  | 3/26/2020 |
| Immune<br>Globulins | J3590 | Unclassified biologics   | 100 mg          | 1/1/2002  | Xembify®   | immune globulin<br>subcutaneous, human – klhw<br>20% solution                          | Indicated for treatment of Primary Humoral Immunodeficiency (PI) in patients 2 years of age and older.  | 480   | 14,880 | 2 years  | N/A | N/A | Y | Y |  | 4/23/2020 |
| Biologicals         | Q5113 | Injection, trastuzumab-<br>pkrb, biosimilar,<br>(Herzuma), 10 mg   | 10 mg           | 7/1/2019  | Herzuma®   | trastuzumab-pkrb for<br>injection, for intravenous use                                 | Indicated for:<br>• the treatment of HER2-overexpressing breast cancer.<br>• the treatment of HER2-overexpressing metastatic gastric or gastroesophageal junction adenocarcinoma.<br>Select patients for therapy based on an FDA-approved companion diagnostic for a trasturumab product.   | 112   | 196    | 18 years | N/A | N/A | Y | Y |  | 4/29/2020 |
| Biologicals         | J3590 | Unclassified biologics   | per daily dose  | 1/1/2002  | Palforzia™ | peanut (Arachis hypogaea)<br>allergen powder-dnfp<br>powder for oral<br>administration | Server patients for therapy based on an Fox-approved companion diagnostic for a distortioned product.<br>Indicated for the mitigation of allergic reactions, including anaphylaxis, that may occur with accidental exposure to peanut.<br>Limitation of Use: Not indicated for the emergency treatment of allergic reactions, including anaphylaxis.  | 1     | 31     | 4 years  | N/A | N/A | Y | Y | Initial Dose Escalation may be<br>administered to patients aged<br>4 through 17 years. Up-Dosing<br>and Maintenance may be<br>continued in patients 4 years<br>of age and older. | 4/29/2020 |
| Biologicals         | 19999 | Not otherwise classified,<br>antineoplastic drugs                  | 1 mg            | 1/1/2000  | Sarclisa®  | isatuximab-irfc injection, for<br>intravenous use                                      | Indicated, in combination with pomalidomide and dexamethasone, for the treatment of adult patients with multiple myeloma who<br>have received at least two prior therapies including lenalidomide and a proteasome inhibitor.   | 1,400 | 7,000  | 18 years | N/A | N/A | Y | Y |  | 4/29/2020 |

| Biologicals | J3590 | Unclassified biologics   | 1 mg  | 1/1/2002 | Vyepti™                | eptinezumab-jjmr injection,<br>for intravenous use                  | Indicated for the preventive treatment of migraine in adults.  | 300   | 300   | 18 years | N/A | N/A | Y | Y | 4/29/2020 |
|-------------|-------|--|-------|----------|------------------------|---|--|-------|-------|----------|-----|-----|---|---|-----------|
| Biologicals | J9271 | Injection,<br>pembrolizumab, 1 mg                                  | 1 mg  | 1/1/2016 | Keytruda*              | pembrolizumab injection, fo<br>intravenous use                      | Meanona:<br>Indicated for the treatment of patients with unresectable or metastatic melanoma.<br>Indicated for the adjuvant treatment of patients with melanoma with involvement of lymph node(s) following complete resection.<br>Non-Small Cell Lung Cancer (NSCLC):<br>1. Indicated in combination with pemetrexed and platinum chemotherapy, as first-line treatment of patients with metastatic<br>nonsquamous NSCLC, with no EGFR or ALX genomic tumor aberrations.<br>2. Indicated as angle agent for the treatment of patients with metastatic NSCLC whose tumors express PD-L1 (TPS ≥ 1%) as<br>determined by an EDA-approved test, with disease progression on PA-approved therapy for threa aberrations prior to<br>receiving Keytruda.<br>3. Indicated as a single agent for the first-line treatment of patients with stage III NSCLC, who are not candidates for surgical<br>resection or definitive chemoradiation, or metastatic NSCLC and whose tumors express PD-L1 [TMD Propriotin Score (TPS) 2150]<br>as determined by an FDA-approved test, with no EGFR or ALX genomic tumor aberrations.<br>4. Indicated in combination with carboplatin and either pacifiaxel or nab-pacifiaxel, as first-line treatment of patients with<br>metastatic squamous NSCLC.<br>Head and Neck Squamous Cell Cancer (HNSCC):<br>1. Indicated for the treatment of patients with recurrent or metastatic HNSCC with disease progression on or after platinum-<br>containing chemotherapy.<br>2. Indicated as a single agent for the first-line treatment of patients with metastatic or with unresectable,<br>recurrent HNSCC.<br>3. Indicated as a single agent for the first-line treatment of patients with metastatic or with unresectable, recurrent HNSCC whose<br>tumors express PD-11 [Combined Positive Score (CPS) 21] as determined by an FDA-approved test.<br>Classical Hodgiku Huyphoma (GHL):<br>Indicated for the treatment of adult and pediatric patients with refractory cHL, or who have relapsed after 3 or more prior lines of<br>hypense. | 400   | 400   | N/A      | N/A | N/A | ¥ | ¥ | 5/25/2020 |
| Biologicals | Q5112 | Injection, trastuzumab-<br>dttb, biosimilar,<br>(Ontruzant), 10 mg | 10 mg | 7/1/2019 | Ontruzant <sup>®</sup> | trastuzumab-dttb for<br>injection, for intravenous use              | Indicated for:<br>The treatment of HER2-overexpressing breast cancer.<br>The treatment of HER2-overexpressing metastatic gastric or gastroesophageal junction adenocarcinoma.<br>Select patients for therapy based on an FDA-approved companion diagnostic for a trasturumab product.  | 112   | 196   | 18 years | N/A | N/A | Y | Y | 5/25/2020 |
| Biologicals | J3590 | Unclassified biologics   | 1 mg  | 1/1/2002 | Reblozyl®              | luspatercept-aamt for<br>injection, for subcutaneous<br>use         | Indicated for the treatment of:<br>• anemia in adult patients with beta thalassemia who require regular red blood cell (RBC) transfusions.<br>• anemia lain and an erythropoiesis stimulating agent and requiring 2 or more RBC units over 8 weeks in adult patients with very low-<br>to intermediate-risk myelodysplastic syndromes with ring sideroblasts (MDS-RS) or with myelodysplastic/myeloproliferative<br>neoplasm with ring sideroblasts and thrombocytosis (MDS/MPN-RS-T).<br>Limitations of Use:<br>Rebloxyl is not indicated for use as a substitute for RBC transfusions in patients who require immediate correction of anemia.  | 250   | 500   | 18 years | N/A | N/A | Y | Ŷ | 5/25/2020 |
| Biologicals | 19999 | Not otherwise classified,<br>antineoplastic drugs                  | 1 mg  | 1/1/2000 | Trodelvy™              | sacituzumab govitecan-hziy<br>for injection, for intravenous<br>use | Indicated for the treatment of adult patients with metastatic triple-negative breast cancer (mTNBC) who have received at least two<br>prior therapies for metastatic disease.  | 1,440 | 5,760 | 18 years | N/A | N/A | Y | Y | 5/25/2020 |