#### 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).

•The Max Daily Units for radiopharmaceuticals represents one therapeutic dose or diagnostic dose.

•The HCPCS Code effective date represents the date the HCPCS code was established

•Procedure codes for covered devices and vaccines are not required to be from a rebating labeler/manufacturer as they are not classified as covered 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 (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 |
|---------------------|---------------|--|----------------------------|----------------------------|------------------------------|---|---|-----------------|----------------------|-------------|-------------|------------------------|-----------------|------------------------------|----------|-----------------------|
| 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 cytomegalovirus disease associated with transplantation of kidney, lung, liver, pancreas, and heart. In transplants of these organs other than kidney from CMV seropositive donors into ser  | 8.4             | 25.2                 | N/A         | N/A         | N/A                    | Y               | 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 mothers, sexual exposure to HBsAg-positive persons and household exposure to persons with acute HBV infection in the following settings:  • Acute Exposure to Blood Containing HBsAg- Following either parenteral exposure (needlestick, bite, sharps), filtered trucous membrane contact (accidental spisah), or oral ingestion (pipetting accident), involving HBsAg-positive materials such as blood, plasma, or serum.  • Perinatal Exposure of Infants Born to HBsAg-positive Mothers: Infants born to mothers positive for HBsAg with or without HBsAg.  • Sexual Exposure to HBsAg-positive Persons. Sexual partners of HBsAg-positive persons.  • Household Exposure to Persons with Acute HBV Infection: Infants less than 12 months old whose mother or primary caregiver is 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* S/D,<br>HyperRAB*  | rabies immune globulin,<br>(human) treated with<br>solvent/detergent, for<br>infiltration and intramuscular<br>administration<br>rabies immune globulin,<br>(human) solution for<br>infiltration and intramuscular<br>injection | suspected or exposure to rables.  Limitations of use:  -Persons previously immunized with rables vaccine that have a confirmed adequate rables antibody titre should receive only vaccine.  | 20              | 20                   | 18 years    | N/A         | N/A                    | Y               | Υ                            |          | 7/3/2018              |
| 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® Rabies<br>– HT       | rabies immune globulin<br>(human) USP, heat treated   | Indicated for individuals suspected of exposure to rables, particularly severe exposure, with one exception; persons who have been previously immunized with rables vaccine prepared from human diploid cells (HDCV) in a pre-exposure or post exposure treatment series should receive only vaccine. Persons who have been previously immunized with rables vaccines other than HDCV, RVA (Rables Vaccine Adsorbed), or PCEC (Purified Chick Embryo Cell Vaccine) vaccines should have confirmed adequate rables antibody 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>(Tlg), 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 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                    | Υ               | 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®                     | 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:  • immunocompromised children and adults,  • newborns of mothers with varicella shortly before or after delivery,  • premature infants,  • infants less than one year of age,  • adults without evidence of immunity,  • pregnant women.  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 rabid or possibly rabid animal. Kedrab should be administered concurrently with a full course of rabies vaccine.  • Do not administer additional (repeat) doses of Kedrab once vaccine treatment has been initiated, since this may interfere with the immune response to the rabies vaccine.  • Do not administer Kedrab to persons with a history of a complete pre-exposure or post-exposure rabies vaccination and 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 exposure.   | 1               | 1                    | N/A         | N/A         | N/A                    | Υ               | N                            |          | 7/2/2018              |

| Vaccines | 90620 | Meningococcal<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 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 B. Trumenba is approved 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<br>2017-2018 formula   | Indicated for active immunization for the prevention of influenza disease caused by influenza A subtype viruses and type 8 viruses contained in the vaccine.  Formulation specific information (2017-18):  - Fluzone 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<br>use in persons 12 months of age and older. Primary immunization should be administered at<br>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 immunication against disease exceed by boastitic A visus (HAM). Approved for   | 1 | 1 | 12 months | 18 years  | N/A | Y | N | 7/3/2018   |
| Vaccines | 90636 | Hepatitis A and Hepatitis<br>B Vaccine (HepA-HepB),<br>adult dosage, for<br>intramuscular use   | 1 mL   | 1/1/2000 | Twinrix®                                | hepatitis a & hepatitis b<br>(recombinant) vaccine<br>suspension for intramuscular<br>injection                                    | Indicated for active immunization against disease caused by hepatitis A virus and infection by all known subtypes of hepatitis B 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-  | 0.5 mL | 1/1/2000 | PedvaxHib®                              | haemophilus b conjugate<br>vaccine (meningococcal  | For routine vaccination against invasive disease caused by haemophilus influenzae type B 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 (4vHPV),<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 | Gardasil is indicated in girls and women 9 – 26 years of age for the prevention of the following diseases caused by human papillomavirus (HPV) types included in the vaccine:  • Cervical, vulvar, vaginal, and anal cancer caused by HPV types 16 and 18  • Genital warts (condyloma acuminata) caused by HPV types 6 and 11 And the following precancerous or dysplastic Isoins caused by HPV types 6, 11, 16, and 18:  • Cervical intraepithelial neoplasia (CIN) grade 2/3 and Cervical adenocarcinoma in situ (AIS)  • Cervical intraepithelial neoplasia (CIN) grade 1  • Vulvar intraepithelial neoplasia (VIN) grade 2 and grade 3  • Vaginal intraepithelial neoplasia (VIN) grade 2 and grade 3  • Anal intraepithelial neoplasia (VIN) grade 2 and grade 3  • Anal intraepithelial neoplasia (VIN) grade 2, and 3  Gardasil is indicated in boys and men 9 through 26 years of age for the prevention of the following diseases caused by HPV types included in the vaccine:  • Anal cancer caused by HPV types 16 and 18  • Genital warts (condyloma acuminata) caused by HPV types 6 and 11 And the following precancerous or dysplastic lesions caused by HPV types 6, 11, 16, and 18:  • Anal intraepithelial neoplasia (AIN) grades 1, 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 (9vHPV), 2 or<br>3 dose schedule, for<br>intramuscular use  | 0.5 mL | 7/1/2017 | Gardasil® 9                             | human papillomavirus 9-<br>valent vaccine, recombinant<br>suspension for intramuscular<br>injection                                | Indicated in girls and women 9 through 45 years of age for the prevention of the following diseases:  * Cervical, vulvar, vaginal, and anal cancer caused by HPV types 16, 18, 31, 33, 45, 52, and 58  * Genital warts (condyloma acuminata) caused by HPV types 6 and 11.  The following precancerous or dysplastic lesions caused by HPV types 6, 11, 16, 18, 31, 33, 45, 52, and 58:  * Cervical intraepithelial neoplasia (CIN) grade 2/3 and cervical adenocarcinoma in situ (AIS).  * Cervical intraepithelial neoplasia (CIN) grade 1.  * Vulvar intraepithelial neoplasia (VIN) grade 2 and grade 3.  * Vaginal intraepithelial neoplasia (VIN) grade 2 and grade 3.  | 1 | 1 | 9 years   | 45 years  | N/A | Y | N | 7/3/2018   |
| Vaccines | 90656 | Influenza virus vaccine,<br>trivalent (IIV3), split virus,<br>preservative free, 0.5 mL<br>dosage, for intramuscular<br>use                           | 0.5 mL | 1/1/2017 | Afluria*                                | influenza virus vaccine,<br>trivalent (IIV3), split virus,<br>preservative free, 0.5 mL<br>dosage, for intramuscular us            | Varian intraconthelial neopasia (vaint) grade 2 and grade 3.  Indicated for active immunization against influenza disease caused by influenza subtypes A and type B present in the vaccine.  Formulation specific information (2018-19):  - Affuria: Approved for use in persons 5 years of age and older   | 1 | 2 | 5 years   | N/A       | N/A | Y | Y | 10/31/2018 |
| Vaccines | 90658 | Influenza virus vaccine,<br>trivalent (IIV3), split virus,<br>0.5 mL dosage, for<br>intramuscular use   | 0.5 mL | 1/1/2017 | Afluria*                                | influenza virus vaccine,<br>trivalent (IIV3), split virus, 0.5<br>mL dosage, for intramuscular<br>use                              | Indicated for active immunization against influenza disease caused by influenza virus subtypes A and type B present in the vaccine.  Formulation specific information (2018-19):  - Afluria: Approved for use in persons 5 years of age and older   | 1 | 2 | 5 years   | N/A       | N/A | Y | Y | 10/31/2018 |

| Vaccines | 90670 | Pneumococcal conjugate<br>vaccine, 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  | tor:  *Active immunization for the prevention of invasive disease caused by S. pneumoniae serotypes 1, 3, 4, 5, 6A, 6B, 7F, 9V, 14, 18C, 19A, 19F and 23F.  In adults 18 years of age and older, Prevnar 13 is indicated for:  *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, 19A, 19F and 23F.   | 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*<br>Quadrivalent  | influenza virus vaccine,<br>quadrivalent live, intranasal<br>2018-2019 formula  | 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 | Y | N | 9/21/2018 |
| Vaccines |       | Influenza virus vaccine,<br>quadrivalent (ccIIVA)<br>derived from cell cultures,<br>subunit, 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,<br>2018-2019 Formula  | Indicated for active immunization for the prevention of influenza disease caused by influenza virus subtypes A and type B contained in the vaccine.  Formulation specific information (2018-19):  Flucelvax 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® Rabies<br>(Human Diploid-   | rabies vaccine, for<br>intramuscular use  | Indicated for pre-exposure and post-exposure prophylaxis against rabies in all age groups.  | 1 | 5 | N/A      | N/A      | N/A | Υ | N | 7/3/2018  |
| Vaccines |       | Rotavirus vaccine,<br>pentavalent (RV5), 3 dose<br>schedule, live, for oral 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 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 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 (IHA) 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<br>B viruses contained in the vaccine.  Formulation specific information (2018-19):  - Flublok Quadrivalent: Approved for use in persons 18 years of age and older   | 1 | 1 | 18 years | N/A      | N/A | Y | 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          | 1/1/2017 | Afluria* Quadrivalent, Fluarix* Quadrivalent, FluLaval* Quadrivalent, Fluzone* Quadrivalent | influenza vaccine suspension<br>for intramuscular injection<br>2017-2018 Formula  | Indicated for active immunization against influenza disease caused by influenza A subtype viruses and type B viruses contained in 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          | 1/1/2017 | Afluria®<br>Quadrivalent,<br>FluLaval®<br>Quadrivalent,<br>Fluzone®<br>Quadrivalent         | influenza vaccine suspension<br>for intramuscular injection<br>2017-2018 Formula  | Indicated for active immunization for the prevention of influenza disease caused by influenza A subtype viruses and type B viruses contained in the vaccine.  | 1 | 2 | 6 months | N/A      | N/A | Y | N | 7/3/2018  |
| Vaccines |       | Diphtheria, tetanus<br>toxoids, acellular<br>pertussis vaccine and<br>inactivated pollovirus<br>vaccine, (DTaP-IPV), when<br>administered to children<br>4 years through 6 years of<br>age, for intramuscular 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 fifth dose in the diphtheria, tetanus, and acellular pertussis (DTaP) vaccine series and the fourth dose in the inactivated poliovirus vaccine (IPV) series in children 4 through 6 years of age whose previous DTaP vaccine doses have been with INFANRIX and/or PEDIARIX for the first three doses and INFANRIX for the fourth dose.  Quadracel: Indicated for active immunization against diphtheria, tetanus, pertussis and poliomyellits. A single dose of Quadracel is approved for use in children four through six years of age as a fifth dose in the diphtheria, tetanus, pertussis vaccination (1PV) series, in children who have received four doses of Pentacel and/or Daptacel vaccine. | 1 | 1 | 4 years  | 6 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 pertussis<br>adsorbed, inactivated<br>poliovirus and haemophilus b<br>conjugate (tetanus toxoid<br>conjugate) vaccine,<br>suspension for intramuscular<br>injection | Indicated for active immunization against diphtheria, tetanus, pertussis, pollomyelitis, and invasive disease due to Haemophilus 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 birthday).  | 1 | 1 | 6 weeks                         | 4 years  | N/A | Y | 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 toxolds,<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 | Y | N |   | 7/2/2018  |
| 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<br>Adsorbed is approved for use in children from 6 weeks through 6 years of age (prior to 7th<br>birthday).  | 1 | 1 | 6 weeks                         | 6 years  | N/A | Y | 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* II                                     | measles, mumps, and rubella 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 | ProQuad®                                      | 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 caused by poliovirus types 1, 2, and 3.  | 1 | 2 | 6 weeks                         | N/A      | N/A | Y | N |   | 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*                                      | 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 | Adacel®,<br>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 older. (Adacel brand is only indicated for patients 11-64 years of age.)  | 1 | 1 | Product Specific (see comments) | 64 years | N/A | Y | N | Product specific age restrictions: • Boostrix is indicated in individuals 10 years of age and older. • Adacel is indicated in persons 10 through 64 years of age. | 7/3/2018  |
| Vaccines | 90716 | Varicella virus vaccine<br>(VAR), Live, for<br>subcutaneous use  | 0.5 mL | 1/1/2000 | Varivax*                                      | 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 | N |   | 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 | Pediarix®                                     | diphtheria and tetanus<br>toxoids and acellular pertussis<br>adsorbed, hepatitis b<br>(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, and poliomyellist. Pediarix is approved for use as a three-dose series in Infants born of hepatitis B surface antigen (HBsAg-legative 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  | 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, 19F, 19A, 20, 22F, 23F, and 33F).  Pheumovax 23 is approved for usin 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. | 1 | 1 | 2 years                         | N/A      | N/A | Y | N |   | 7/3/2018  |
| Vaccines | 90734 | Meningococcal conjugate<br>vaccine, serogroups A, C,<br>Y and W-135 quadrivalent<br>(MCV4 or MenACWY), for<br>intramuscular use  | 0.5 mL | 1/1/2017 | Menactra®                                     | meningococcal (groups a, c,<br>y, and w-135) polysaccharide<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 and W-135. Menactra is approved for use in individuals 9 months through 55 years of age. Menactra does not prevent N meningitidis serogroup B disease.  | 1 | 1 | 9 months                        | 18 years | N/A | Y | Υ |   | 9/12/2018 |

| Vaccines    | 90736 | Zoster (shingles) vaccine (HZV), live, for subcutaneous injection  | 0.65 mL | 1/1/2006 | Zostavax*   | Indicated for prevention of herpes zoster (shingles) in individuals 50 years of age and older.  Limitations of Use:  Zostavax is not indicated for the treatment of zoster or postherpetic neuralgia (PHN).  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<br>lndicated for prevention of infection caused by all known subtypes of hepatitis B virus in adults<br>wears of age and older.  | s 18 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 patient dosage (3 dose schedule), for intramuscular use  Recombivax HB Dialysis Formulation is approved for use in adult predialysis and dialysis patie 18 years of age and older for prevention of infection caused by all known subtypes of hepatit virus.   |        | 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*<br>Pediatric,<br>Recombivax HB*<br>Pediatric | hepatitis b vaccine, pediatric/adolescent dosage (3 dose schedule), for intramuscular use Hepatitis B vaccination is appropriate for people expected to receive human alpha-1 proteins inhibitor that is produced from heat-treated, pooled human plasma that may contain the causative agents of hepatitis and other viral diseases.  | se 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   | . 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 B-infected mothers, others who have or might have been recently exposed to the virus, certa<br>dosage (4 dose schedule), for<br>intramuscular use   | n 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, adjuvanted, suspension for intramuscular injection  Limitations of Use:  - 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 (ccIIV4),<br>derived from cell cultures,<br>subunit, antibiotic free,<br>0.5 mL dosage, for | 0.5 mL  | 7/1/2017 | Flucelvax®<br>Quadrivalent                              | influenza virus vaccine, suspension for intramuscular injection, 2018-2019 Formulation specific information (2018-19):  - FluceNax 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®  | Treatment of:  • Adult Rheumatoid Arthritis (RA): moderately to severely active RA in adults. Orencia may be used as monotherapy or concomitantly with DMARDs other than TNF antagonists.  • Juvenile Idiopathic Arthritis: moderately to severely active polyarticular juvenile Idiopathic arthritis in moderately to severely active polyarticular juvenile Idiopathic arthritis in patients 2 years of age and older. Orencia may be used as monotherapy or concomitantly with methotrexate.  • Active Psoriatic Arthritis (PsA) in adults.  Important Limitations of Use:  • Should not be given concomitantly with TNF antagonists. | 100    | 300 | Indication Specific<br>(see comments) | N/A      | N/A | Y | Y | Indication specific age restrictions:  • Adult Rheumatoid Arthritis: 18 years of age and older • Juvenille diopathic Arthritis: 2 years of age and older • Active Psorfatic Arthritis: 18 years of age and older | 7/2/2018   |

| Biologicals | J0130 | Injection, abciximab,<br>10mg   | 10 mg  | 1/1/2000 | ReoPro*                                   | abciximab, for intravenous use  | Indicated as an adjunct to percutaneous coronary intervention for the prevention of cardiac ischemic complications:  • in patients undergoing percutaneous coronary intervention  • in patients with unstable angina not responding to conventional medical therapy when percutaneous coronary intervention is 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:  • Het pres simplex infections in immunocompromised patients • Initial episodes of herpes gentalis • Het pres simplex encephalits • Neonatal herpes simplex virus infection • Varicella-zoster infections in immunocompromised patients  | 840   | 8,400 | Indication Specific<br>(see comments) | N/A | N/A | Υ | Y | Indication specific age restrictions:  • Herpes Simplex Infections: Mucosal and Cutaneous Herpes Simplex (HSV-1 and HSV-2) Infections in Immunocompromised Patients: None Sewere Initial Episodes of Herpes Genitalis: 12 years of age and older  • Herpes Simplex Encephalitis: 3 months of age and older  • Neonatal Herpes Simplex Virus Infections: None  • Varicella Zoster Infections in Immunocompromised Patients: None | 5/14/2019  |
| 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 intravenous use  | Adenocacn: Adjunct to thallium-201 myocardial perfusion scintigraphy in patients unable to exercise adequately.  Adenocard: Conversion to sinus rhythm of paroxysmal supraventricular tachyarrhythmias (PSVT) including that associated with accessory bypass tracts (Wolff-Parkinson-White syndrome). When clinically advisable, appropriate vagal maneuvers (e.g., Valsalva maneuver) should be attempted prior to administration.  | 118   | 118   | Indication Specific<br>(see comments) | N/A | N/A | Y | Υ | Product specific age<br>restrictions:<br>Adenoscan: 18 years of age<br>and older<br>Adenocard: None   | 5/6/2019   |
| 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 |
| Biologicals | J0178 | Injection, aflibercept, 1<br>mg   | 1 mg   | 1/1/2013 | Eylea®                                    | aflibercept injection for<br>intravitreal injection                                   | Indicates for:  Neovascular (Wet) Age-Related Macular Degeneration (AMD)  Macular Edema Following Retinal Vein Occlusion (RVO)  | 4     | 8     | 18 years                              | N/A | N/A | Y | Υ |   | 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 | Υ | Υ |   | 6/4/2019   |
| Drugs       | J0185 | Injection, aprepitant, 1<br>mg  | 1 mg   | 1/1/2019 | Cinvanti™                                 | aprepitant injectable emulsion, for intravenous use                                   | Indicated in adults, in combination with other antiemetic agents, for the prevention of:  *acute and delayed nausea and vomiting associated with initial and repeat courses of highly emetogenic cancer chemotherapy (HEC) including high-dose cisplatin.  *ausea and vomiting associated with initial and repeat courses of moderately emetogenic cancer chemotherapy (MEC). Limitations of USe: Cinvanti has not been studied for treatment of established nausea and vomiting. | 130   | 390   | 18 years                              | N/A | N/A | Y | Y |   | 9/25/2018  |
| 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 (MS).  | 12    | 60    | 17 years                              | N/A | N/A | Y | Υ |   | 7/2/2018   |
| Drugs       | J0207 | Injection, amifostine, 500 mg   | 500 mg | 1/1/2000 | Ethyol®                                   | amifostine for injection  | Indicated to:  Reduce the incidence of moderate to severe xerostomia in patients undergoing postoperative radiation treatment of head and neck cancer.  Reduce the cumulative renal toxicity associated with repeated administration of cisplatin in patients with advanced ovarian cancer, where the radiation port includes a substantial portion of the parotid glands.  | 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 methyldopate HCI injection.   | 16    | 496   | N/A                                   | N/A | N/A | Y | Υ |   | 10/26/2018 |
| Biologicals | J0221 | Injection, alglucosidase<br>alfa, (Lumizyme), 10 mg   | 10 mg  | 1/1/2012 | Lumizyme®                                 | alglucosidase alfa for 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 | Υ |   | 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®,<br>Aralast NP®,<br>Zemaira® | 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 Alpha1-Pl (alpha1-antitrypsin deficiency).  | 1,000 | 5,000 | 18 years                              | N/A | N/A | Υ | 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 deficiency of Alpha1-P1 (alpha1-antitrypsin deficiency). Glassia increases antigenic and functional (anti-neutrophil elastase capacity, ANEC) serum levels and antigenic lung epithelal lining fluid levels of alpha1-P1. Limitations of Use:  1 The effect of augmentation therapy with any Alpha1-P1, including Glassia, on pulmonary exacerbations and on the progression of emphysema in alpha1-antitrypsin deficiency has not been conclusively demonstrated in randomized, controlled clinical trials.  2 Clinical data demonstrating the long-term effects of chronic augmentation and maintenance therapy of individuals with Glassia are not available.  3 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 | Y |   | 9/25/2018 |
|-------------|-------|---|--------------|----------|-------------------------|--|--|-----|-------|---------------------------------------|-----|-----|---|---|---|-----------|
| Drugs       | J0278 | Injection, amikacin<br>sulfate, 100 mg                                  | 100 mg       | 1/1/2006 | N/A                     | amikacin sulfate injection,<br>solution  | Indicated in the short-term treatment of serious infections due to susceptible strains of Gramnegative bacteria, including Pseudomonas species, Escherichia coli, species of indole-positive and indole-negative Proteus, Providencia species, Klebsiella-Enterobacter-Serratia species, and Acinetobacter (Mima-Hereilea) species.  Clinical studies have shown amikacin sulfate injection to be effective in bacterial septicemia (including neonatal sepsis); in serious infections of the respiratory tract, bones and joints, central nervous system (including meningitis) and skin and soft tissue; intra-abdominal infections (including peritonitis); and in burns and postoperative infections (including post-vascular surgery). Clinical studies have shown amikacin also to be effective in serious complicated and recurrent urinary tract infections due to those organisms.  | 15  | 150   | N/A                                   | N/A | N/A | Y | Y |   | 4/10/2019 |
| 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<br>corticosteroids for the treatment of acute exacerbations of the symptoms and reversible airflow<br>obstruction associated with asthma and other chronic lung diseases, e.g., emphysema and<br>chronic bronchitis.  | 7   | 217   | N/A                                   | N/A | N/A | Υ | 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 infections: aspergillosis, cryptococcosis (torulosis), North American blastomycosis, systemic apublishies, crecification  | 4   | 93    | N/A                                   | N/A | N/A | Υ | Y |   | 9/25/2018 |
| Drugs       | J0287 | Injection, amphotericin B<br>lipid complex, 10 mg                       | 10 mg        | 1/1/2003 | Abelcet*                | amphotericin B lipid complex injection   | Indicated for the treatment of invasive fungal infections in patients who are refractory to or intolerant of conventional amphotericin B therapy.  | 70  | 2,170 | N/A                                   | N/A | N/A | Υ | Υ |   | 5/6/2019  |
| Drugs       | J0289 | Injection, amphotericin B<br>liposome, 10 mg                            | 10 mg        | 1/1/2003 | AmBisome*               | amphotericin B liposome for injection  | Indicated for:  • Empirical therapy for presumed fungal infection in febrile, neutropenic patients  • Treatment of patients with Aspergillus species, Candida species, and/or Cryptococcus species infections refractory to amphotericin B desoxycholate, or in patients where renal impairment or unacceptable toxicity precludes the use of amphotericin B desoxycholate  • Treatment of Cryptococcal Meninglists in HiV-infected patients  • Treatment of Visceral leishmaniasis. In immunocompromised patients with visceral leishmaniasis treated with AmBisome, relapse rates were high following initial clearance of parasites.  | 84  | 2,604 | 1 month                               | N/A | N/A | Υ | 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:  • Respiratory Tract Infections caused by Streptococcus pneumoniae, Staphylococcus aureus (pencillinase and nonpenicillinase-producing), H. influenzae, and Group A beta-hemolytic streptococci.  • Bacterial Meningitis caused by E. coli, Group B streptococci, and other Gram-negative bacteria (Listeria monocytogenes, N. meningitidis). The addition of an aminoglycoside with ampicillin may increase its effectiveness against Gram-negative bacteria.  • Septicemia and Endocarditis caused by susceptible Gram-positive organisms including Streptococcus spo., penicillin G-susceptible staphylococci, and enterococci. Gram-negative sepsis caused by E. coli, Proteus mirabilis and Salmonella spp. responds to ampicillin. Endocarditis due to enterococcal strains usually respond to intravenous therapy. The addition of an aminoglycoside may enhance the effectiveness of ampicillin when treating streptococcal endocarditis.  • Urinary Tract Infections caused by sensitive strains of E. coli and Proteus mirabilis.  • Gastrointestian Infections caused by Salmonella typhi (typhoid fever), other Salmonella spp., and Shigella spp. (dysentery) usually respond to oral or intravenous therapy. | 56  | 1,736 | N/A                                   | N/A | N/A | Y | Y |   | 4/10/2019 |
| Drugs       | J0295 | Injection, ampicillin<br>sodium/sulbactam<br>sodium, per 1.5 gm         | per 1.5 gm   | 1/1/2000 | Unasyn®                 | ampicillin sodium and<br>sulbactam sodium injection,<br>powder, for solution       | microorganisms in the conditions listed below:  - Skin and skin structure infections caused by beta-lactamase producing strains of Staphylococcus aureus, Escherichia coli, Klebsiella spp. (Including K. pneumoniae), Proteus mirabilis, Bacteroides fragilis, Enterobacter spp., and Acinetobacter calcoaceticus.  | 12  | 168   | Indication Specific<br>(see comments) | N/A | N/A | Υ | Y | Skin and skin structure infections: 1 year of age and older Intra-abdominal infections: | 6/7/2019  |
| Drugs       | 10300 | Injection, amobarbital, up<br>to 125mg                                  | up to 125 mg | 1/1/2000 | Amytal®                 | amobarbital sodium for injection   | Indicated for use as a:  - Sedative  - Hypnotic, for the short-term treatment of insomnia, since it appears to lose its effectiveness for sleep induction and sleep maintenance after 2 weeks  - Preanesthetic   | 8   | 112   | 6 years                               | N/A | N/A | Y | Y |   | 4/10/2019 |
| Drugs       | J0330 | Injection, succinylcholine 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 surgery or mechanical ventilation.  | 8   | 8     | N/A                                   | N/A | N/A | Y | Y |   | 9/21/2018 |

| Drugs | 10360 | Injection, hydralazine HCl,<br>up to 20mg       | up to 20 mg | 1/1/2000 | N/A                 | hydralazine hydrochloride 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, extended release, 1 mg | 1 mg        | 1/1/2014 | Ablify<br>Maintena* | aripiprazole extended-release injectable suspension, for intramuscular use  Indicated for the treatment of schizophrenia in adults. 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 indicated for mild to moderate infections caused by designated, susceptible bacteria in infusion community-acquired pneumonia in adults and pelvic inflammatory disease.   | 1   | 10     | 16 years | N/A | N/A | Υ | Y | 9/25/2018 |
| Drugs | J0461 | Injection, atropine sulfate, 0.01 mg            | 0.01 mg     | 1/1/2010 | N/A                 | atropine sulfate injection for intravenous, intramuscular, subcutaneous, intraosseous, or endotracheal use indicated for temporary blockade of severe or life threatening muscarinic effects.   | 900 | 27,900 | N/A      | N/A | N/A | Y | Y | 10/4/2018 |
| Drugs | J0470 | Injection, dimercaprol,<br>per 100mg            | per 100 mg  | 1/1/2000 | BAL in oil™         | Indicated in the treatment of:  Arsenic, gold and mercury poisoning.  Acute lead poisoning when used concomitantly with Edetate Calcium Disodium Injection.  dimercaprol injection  Dimercaprol is effective for use in acute poisoning by mercury salts if therapy is begun within one or two hours following ingestion. It is not very effective for chronic mercury poisoning. Dimercaprol is of questionable value in poisoning by other heavy metals such as antimony and bismuth. It should not be used in iron, cadmium, or selenium poisoning because the resulting dimercaprol-metal complexes are more toxic than the metal alone, especially to the kidneys. | 36  | 252    | N/A      | N/A | N/A | Y | Y | 6/7/2019  |

| Drugs       | J0475 | Injection, baclofen, 10 mg  | 10 mg         | 1/1/2000 | Lioresal <sup>®</sup><br>Intrathecal,<br>Gablofen <sup>®</sup> | 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 above.  - Baclofen intrathecal should be reserved for patients unresponsive to oral baclofen therapy, or those who experience intolerable central nervous system side effects at effective doses.  - Patients should first respond to a screening dose of intrathecal baclofen prior to consideration for long term infusion via an implantable pump.  - Spasticity due to traumatic brain injury: wait at least one year after injury before considering baclofen intrathecal therapy.  | 1     | 3     | 4 years  | N/A | N/A | Y | Y | 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. Baclofen also<br>is used intrathecally in patients with spasticity of cerebral origin, including those with cerebral<br>palsy and acquired brain injury. Baclofen injection is designated an orphan drug by the FDA for<br>the management of spasticity in patients with cerebral palsy.  | 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 intravenous use                                 | Prophylaxis of organ rejection in adult patients receiving a kidney transplant. Use in combination with basiliximab induction, mycophenolate mofetil, and corticosteroids.  Limitations of Use:  - Use only in patients who are EBV seropositive 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 mg   | 10 mg         | 1/1/2012 | Benlysta®  | belimumab injection, for intravenous use                                      | Indicated for the treatment of patients aged 5 years and older with active, autoantibody-positive, systemic lupus erythematosus who are receiving standard therapy.  Limitations of Use: The efficacy of Benlysta has not been evaluated in patients with severe active lupus nephritis or severe active central nervous system lupus. Benlysta has not been studied in combination with other biologics or intravenous cyclophosphamide. Use of Benlysta is not recommended in these 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               | Indicated for the treatment of functional bowel/irritable bowel syndrome.  | 4     | 8     | 18 years | N/A | N/A | Υ | Υ | 4/10/2019 |
| Drugs       | 10558 | Injection, penicillin G<br>benzathine and penicillin<br>G procaine, 100,000 units | 100,000 units | 1/1/2011 | Bicillin* C-R  | penicillin G benzathine and<br>penicillin G procaine<br>injectable suspension | Indicated for the treatment of moderately severe infections due to penicillin G–susceptible microorganisms that are susceptible to serum levels common to this particular dosage form. Therapy should be guided by bacteriological studies (including susceptibility testing) and by clinical response. Bicillin C-R is indicated in the treatment of the following in adults and pediatric patients:  • Moderately severe to severe infections of the upper-respiratory tract, scarlet fever, erysipelas, and skin and soft-tissue infections due to susceptible streptococci. NoTE: Streptococci in Groups A, C, G, H, L, and M are very sensitive to penicillin G. Other groups, including Group (Intercococci), are resistant. Penicillin G sodium or potassium is recommended for streptococcal infections with bacteremia.  • Moderately severe pneumonia, and otitis media due to susceptible Streptococcus pneumoniae. NOTE: Severe pneumonia, empyema, bacteremia, pericarditis, meningitis, peritonitis, and arthritis of pneumococcal etiology are better treated with penicillin G sodium or potassium during the acute stage.  • When high, sustained serum levels are required, penicillin G sodium or potassium, either IM or IV, should be used. This drug should not be used in the treatment of venereal diseases, including syphilis, genorrhea, yaws, bele, and pinta. | 24    | 96    | N/A      | N/A | N/A | Y | 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 prolonged serum levels common to this particular dosage form. Therapy should be guided by bacteriological studies (including sensitivity tests) and by clinical response. The following infections will usually respond to adequate dosage of intramuscular penicillin G benzathine: mild to moderate upper respiratory infections due to susceptible streptocock, venereal infections (syphilis, yaws, bejel, and pinta) and prophylaxis of rheumatic fever and chorea.   | 24    | 96    | N/A      | N/A | N/A | Υ | Y | 8/24/2018 |
| Biologicals | J0565 | Injection, beziotoxumab,<br>10 mg   | 10 mg         | 1/1/2018 | Zinplava™  | bezlotoxumab injection, for intravenous use                                   | Indicated to reduce recurrence of Clostridium difficile infection (CDI) in patients 18 years of age<br>or older who are receiving antibacterial drug treatment of CDI and are high risk for CDI<br>recurrence.  Limitation of use: Zinplava is not indicated for the treatment of CDI. Zinplava is not an<br>antibacterial drug. Zinplava should only be used in conjunction with antibacterial drug treatment<br>of CDI.  | 140   | 140   | 18 years | N/A | N/A | Y | Y | 7/2/2018  |
| Biologicals | J0567 | Injection, cerliponase alfa,<br>1 mg  | 1 mg          | 1/1/2019 | Brineura®  | cerliponase alfa injection, for intraventricular use                          | Indicated to close the loce of ambulation in comptomatic podiatric nationts 2 years of age and   | 300   | 900   | 3 years  | N/A | N/A | Y | Y | 7/2/2018  |

| Drugs       | J0570 | 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 stability on low-to-moderate doses of a transmucosal buprenorphine-containing product (i.e., doses of no more than 8 mg per day of Subutex® or Suboxone® sublingual tablet or generic equivalent).  Probuphine should be used as part of a complete treatment program to include counseling and psychosocial support.  Probuphine is not appropriate for new entrants to treatment and patients who have not achieved and sustained prolonged clinical stability, while being maintained on buprenorphine 8 mg per day or less of a Subutex or Suboxone sublingual tablet or generic equivalent.                         | 4   | 4     | 16 years                              | N/A | N/A | Y | Y |  | 9/27/2018 |
|-------------|-------|---|---------------------|----------|-------------|---|--|-----|-------|---------------------------------------|-----|-----|---|---|--|-----------|
| 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 1 year of age and older.  | 90  | 270   | 1 year                                | N/A | N/A | Y | Υ |  | 2/5/2019  |
| Biologicals | 10585 | Injection,<br>onabotulinumtoxinA, 1<br>unit                               | 1 unit              | 1/1/2000 | Botox*      | onabotulinumtoxinA for injection, for intramuscular, intradetrusor, or intraderma use                   | Treatment of overactive bladder (OAB) with symptoms of urge urinary incontinence, urgency, and frequency, in adults who have an inadequate response to or are intolerant of an anticholinergic medication  * Treatment of urinary incontinence due to detrusor overactivity associated with a neurologic condition [e.g., spinal cord injury (SCI), multiple sciencis (MSI) in adults who have an inadequate response to or are intolerant of an anticholinergic medication  * Prophylaxis of headaches in adult patients with chronic migraine (± 15 days per month with headache lasting 4 hours a day or longer)  * Treatment of Spastickity in adult patients  | 400 | 400   | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific age restrictions: • Bladder dysfunction, prophylaxis of headaches in chronic migraine, spasticity and axillary hyperhidrosis: 18 years of age and older • Cervical dystonia: 16 years of age and older | 4/9/2019  |
| Biologicals | J0586 | Injection,<br>abobotulinumtoxinA, 5<br>units                              | 5 units             | 1/1/2010 | Dysport*    | abobotulinumtoxinA for injection, for intramuscular 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 <65 years of age. Treatment of spasticity in adults. Treatment of lower limb spasticity in pediatric patients 2 years of age and older.  | 300 | 300   | 18 years                              | N/A | N/A | Y | Y |  | 6/10/2019 |
| Biologicals | J0587 | Injection,<br>rimabotulinumtoxinB,<br>100 units                           | 100 units           | 1/1/2002 | Myobloc*    | rimabotulinumtoxin B<br>injection   | Indicated for the treatment of adult patients with cervical dystonia to reduce the severity of abnormal head position and neck pain associated with cervical dystonia.   | 100 | 100   | 18 years                              | N/A | N/A | Y | Y |  | 9/25/2018 |
| Biologicals | J0588 | Injection,<br>incobotulinumtoxinA, 1<br>unit                              | 1 unit              | 1/1/2012 | Xeomin®     | incobotulinumtoxinA for<br>injection, for intramuscular o<br>intraglandular use                         | Indicated for the treatment or improvement of adult patients with:  - Upper limb spasticity  - Cervical dystonia  - Temporary improvement in the appearance of moderate to severe glabellar lines with corrugator and/or procerus muscle activity  - Chronic sialornhea  - Blepharospasm   | 400 | 400   | 18 years                              | N/A | N/A | Y | Y |  | 6/5/2019  |
| Drugs       | J0594 | Injection, busulfan, 1 mg   | 1 mg                | 1/1/2007 | Busulfex*   | busulfan injection for intravenous use  | Indicated for use in combination with cyclophosphamide as a conditioning regimen prior to allogeneic hematopoietic progenitor cell transplantation for chronic myelogenous leukemia (CML).   | 328 | 1,312 | N/A                                   | N/A | N/A | Y | Υ |  | 9/27/2018 |
| Drugs       | J0595 | Injection, butorphanol<br>tartrate, 1mg                                   | 1 mg                | 1/1/2004 | N/A         | butorphanol tartrate<br>injection   | Indicated:  • As a preoperative or pre-anesthetic medication  • As a supplement to balanced anesthesia  • For the relief of pain during labor, and  • For the management of pain severe enough to require an opioid analgesic and for which alternative treatments are inadequate  Limitations of Use:  • Because of the risks of addiction, abuse, and misuse, with opioids, even at recommended doses, reserve butrorphanol tartrate for us in patients for whom alternative treatment option (e.g. non-opioid analgesics):  - Have not been tolerated, or at not expected to be tolerate  - Have not been tolerated, or at not expected to be tolerate  - Have not provided adequate analgesia, or are not expected to provide adequate analgesia | 32  | 992   | 18 years                              | N/A | N/A | Υ | Y |  | 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 | Υ | 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*                                      | c1 esterase inhibitor (human)<br>for intravenous use                          | Indicated for routine prophylaxis against angioedema attacks in adults, adolescents and pediatric patients (6 years of age and older) with hereditary angioedema (HAE).   | 250   | 2,750  | 6 years                               | N/A | N/A | Y | Υ |  | 7/26/2018  |
| Drugs       | J0600 | Injection, edetate calcium 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 in both pediatric populations and adults.  | 3     | 15     | N/A                                   | N/A | N/A | Y | Υ |  | 10/10/2018 |
| Drugs       | J0604 | Cinacalcet, oral, 1 mg,<br>(for ESRD on dialysis)                   | 1 mg          | 1/1/2018 | Sensipar®                                     | cinacalcet tablets, for oral use<br>(for ESRD on dialysis)                    | Indicated for: - Secondary Hyperparathyroidism (HPT) in adult patients with chronic kidney disease (CKD) on dialysis.  Limitation of Use: Sensipar is not indicated for use in patients with CKD who are not on dialysis.  The following indications are FDA approved but should not be associated with this HCPCS code: - Hypercalcemia in adult patients with Parathyroid Carcinoma (PC) Hypercalcemia in adult patients with primary HPT for whom parathyroidectomy would be indicated on the basis of serum calcium levels, but who are unable to undergo parathyroidectomy.                              | 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 intravenous use                                  | Indicated for secondary hyperparathyroidism (HPT) in adult patients with chronic kidney disease (CKD) on hemodialysis.<br>Limitations of Use: Parsabiv has not been studied in adult patients with parathyroid carcinoma, primary hyperparathyroidism or with CKD who are not 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<br>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.  Limitations of Use: 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 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 reduce elevated parathyroid hormone levels. Reduction of PTH has been shown to result in an improvement in renal osteodystrophy.  | 40    | 560    | 13 years                              | N/A | N/A | Y | Y |  | 9/27/2018  |
| Biologicals | 10638 | Injection, canakinumab, 1<br>mg                                     | 1 mg          | 1/1/2011 | llaris*                                       | canakinumab for injection,<br>for subcutaneous use                            | Periodic Fever Syndromes:  * Cryopyrin-Associated Periodic Syndromes (CAPS), in adults and children 4 years of age and older including: Familial Cold Autoinflammatory Syndrome (FCAS) and Muckle-Wells Syndrome (MWS).  * Tumor Necrosis Factor Receptor Associated Periodic Syndrome (TRAPS) in adult and pediatric patients.  * Hyperimmunoglobulin D Syndrome (HIDS)/Mevalonate Kinase Deficiency (MKD) in adult and pediatric patients.  * Familial Mediterranean Fever (FMF) in adult and pediatric patients.  Active Systemic Juvenile Idiopathic Arthritis (SJIA) in patients aged 2 years and older. | 300   | 600    | Indication Specific<br>(see comments) | N/A | N/A | Υ | Y | Indication specific age restrictions: Periodic Fever Syndromes: • Cryopyrin-Associated Periodic Syndromes (CAPS): 4 years of age and older • Tumor Necrosis Factor Receptor Associated Periodic Syndrome (TARS) in adult and pediatric patients. • Hyperimmunoglobulin D Syndrome (HIDS)/Mevalonate Kinase Deficiency (MKD) in adult and pediatric patients. • Familial Mediterranean Fever (FMF) in adult and pediatric patients. Active Systemic Juvenile Unionality (SIIA): 2 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 injection for intravenous or intramuscular use         | Indicated:  • After high dose methotrexate therapy in osteosarcoma.  • To diminish the toxicity and counteract the effects of impaired methotrexate elimination and of inadvertent overdosages of folic acid antagonists.  • In the treatment of megaloblastic anemias due to folic acid deficiency when oral therapy is not feasible.  • For use in combination with 5-fluorouracil to prolong survival in the palliative treatment of patients with advanced colorectal 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 | Y |  |            |
| Drugs       | J0641 | Injection, levoleucovorin calcium, 0.5 mg                           | 0.5 mg        | 1/1/2009 | Fusilev®                                      | levoleucovorin injection solution for intravenous use                         | Indicated for:  - Rescue after high-dose methotrexate therapy in osteosarcoma.  - Diminishing the toxicity and counteracting the effects of impaired methotrexate elimination and of inadvertent overdosage of folic acid antagonists.  - Use in combination chemotherapy with 5-fluorouracil in the palliative treatment of patients   | 2,000 | 10,000 | N/A                                   | N/A | N/A | Y | Y |  | 6/4/2019   |
| 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 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 | J0690 | Injection, cefazolin<br>sodium, 500 mg                  | 500 mg | 1/1/2000 | N/A       | cefazolin sodium for injection  | Indicated for the treatment of the following serious infections when due to susceptible organisms:  - Respiratory Tract Infections: Due to S. pneumoniae, Klebsiella species, H. Influenzae, S. aureus (penicillin-sensitive and penicillin-resistant), and group A beta-hemolytic streptococci. Injectable hemzathine penicillin is considered the drug of choice in treatment and prevention of streptococcal infections, including the prophylaxis of rheumatic fever. Cefazolin is effective in the eradication of streptococcal from the nasopharynx, however, data establishing the efficacy of cefazolin in the subsequent prevention of rheumatic fever are not available at present.  - Urinary Tract Infections: Due to E. coil, P. mirabilis, Klebsiella species, and some strains of enterobacter and enteroococc.  - Skin and Skin Structure Infections: Due to S. aureus (penicillin-sensitive and penicillin-resistant), group A beta-hemolytic streptococc, and other strains of streptococcc.  - Biliary Tract Infections: Due to E. coil, various strains of streptococcc.  - Biliary Tract Infections: Due to S. aureus.  - Bone and Joint Infections: Due to S. aureus.  - Genital Infections: (i.e., prostatitis, epididymits) due to E. coil, P. mirabilis, Klebsiella species, and some strains of enterooccc.  - Septicemia: Due to S. pneumoniae, S. aureus (penicillin-sensitive and penicillin-resistant), P. mirabilis, E. coli, and Klebsiella species.  - Endocarditis: Due to S. aureus (penicillin-sensitive and penicillin-resistant), P. mirabilis, E. coli, and Klebsiella species.  - Endocarditis: Due to S. aureus (penicillin-sensitive and penicillin-resistant), P. mirabilis, Euch, and Klebsiella species.  - Endocarditis: Due to S. aureus (penicillin-sensitive and penicillin-resistant), P. mirabilis, Euch, and Klebsiella species.  - Endocarditis: Due to S. aureus (penicillin-sensitive and penicillin-resistant), P. mirabilis, Euch, and Klebsiella species.  - Endocarditis: Due to S. aureus (penicillin-sensitive and penicillin-resistant), P. mirabilis, Euch, and | 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™ | 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 mirroorganisms:  • Moderate to severe pneumonia  • Empiric therapy for febrile neutropenic patients  • Uncomplicated and complicated urinary tract infections (including pyelonephritis)  • Uncomplicated skin and skin structure infections  • Complicated intra-abdominal infections (used in combination with metronidazole) in adults  | 12 | 120 | 2 months | N/A | N/A | Y | Υ | 5/21/2019 |
| Drugs | J0694 | Injection, cefoxitin<br>sodium, 1 gram                  | 1g     | 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 listed below.  * Lower respiratory tract infections: including pneumonia and lung abscess, caused by Streptococcus preumoniae, other streptococci (excluding enterococci, e.g., Enterococcus facealis), Isoaphylococcus aureus (including penicillinase-producing strains), Escherichia coli, Klebsiella species, Haemophilus influenzae, and Bacteroides species.  * Urinary tract infections caused by Escherichia coli, Klebsiella species, Proteus mirabilis, Morganella morganii, Proteus vulgaris and Providencia species (including P. rettgeri).  * Intra-abdominal infections, including peritonitis and intra-abdominal abscess, caused by Escherichia coli, Klebsiella species, Bacteroides species (including Bacteroides fragilis, and Clostridium species.  * Gynecological infections: including endometritis, pelvic cellulitis, and pelvic inflammatory disease caused by Escherichia coli, Neisseria gonorrhoeae (including penicillinase-producing strains), Bacteroides species including B. fragilis, Clostridium species, Peptococcus niger, Peptostreptococcus  * species, and Streptococcus agalactiae. Cefoxitin, like cephalosporins, has no activity against Chiamydia trachomatis. Therefore, when cefoxitin is used in the treatment of patients with pelvic inflammatory disease and C. trachomatis is one of the suspected pathogens, appropriate antichiamydial coverage should be added.  * Septicemais: caused by Streptococcus pelmoniae, Staphylococcus aureus (including penicillinase producing strains), Escherichia coli, Klebsiella species, and Bacteroides species including B. fragilis.  * Bone and joint infections: caused by Staphylococcus aureus (including penicillinase-producing strains), Staphylococcus epidermidis, Streptococcus and other streptococci acuseruling strains), Staphylococcus aureus (including penicillinase-producing strains), Staphylococcus epidermidis, Streptolococcus and other streptococci                  | 12 | 372 | 3 months | N/A | N/A | Y | γ | 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         | Indicated for the treatment of the following infections caused by designated susceptible   | 60 | 840 | 18 years | N/A | N/A | Y | Υ | 10/4/2018 |

|       | ,     |  | 1      |          |           | 1                            | Indicated for the treatment of the following infections when caused by susceptible organisms:  |    |     |                                       | r   |     | , | 1 | T.   |           |
|-------|-------|--|--------|----------|-----------|------------------------------|--|----|-----|---------------------------------------|-----|-----|---|---|--|-----------|
| Drugs | J0696 | injection, ceftriaxone<br>sodium, per 250 mg           | 250 mg | 1/1/2000 | Rocephin* | ceftriaxone sodium injection | Lower Respiratory Tract Infections: Caused by Streptococcus pneumoniae, Staphylococcus aureus, Haemophilus influenzae, Haemophilus parainfluenzae, Klebsiella pneumoniae, Escherichia coli, Enterobacter aerogenes, Proteus mirabilis or Serratia marcescens.  Acute Bacterial Ottils Media: Caused by Streptococcus pneumoniae, Haemophilus influenzae (Including beta-lactamase producing strains) or Moraxella catarrhalis (Including beta-lactamase producing strains).  Skin and Skin Structure Infections: Caused by Staphylococcus aureus, Staphylococcus epidermidis, Streptococcus pyogenes, Viridans group streptococci, Escherichia coli, Enterobacter cloacae, Klebsiella oyrtoca, Klebsiella pneumoniae, Proteus mirabilis, Morganella morganii, Pseudomonas aeruginosa, Serratia marcescens, Acinetobacter calcaceticus, Bacteroides fragilis or Peptostreptococcus species.   | 16 | 496 | Indication Specific<br>(see comments) | N/A | N/A | ٧ | 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 diseases:  Lower Respiratory Tract Infections: including pneumonia, caused by Streptococcus pneumoniae, Haemophilus influenzae (including ampicillin-resistant strains), Rébsiella spp., Staphylococcus aureus (penicillinase- and non-penicillinase- producing strains), Streptococcus progenes, and Escherichia coil.  - Urinary Tract Infections: caused by Escherichia coil and Klebsiella spp.  - Skin and Skin Structure Infections: caused by Staphylococcus aureus (penicillinase- and non-penicillinase- producing strains), Streptococcus propensicillinase- producing strains), Streptococcus propensicillinase- and non-penicillinase- producing strains), Streptococcus preumoniae, Escherichia coil, Alemophilus influenzae (including ampicillin-resistant strains), and Reliselial spp.  - Meningitis: caused by Streptococcus pneumoniae, Escherichia coil, Haemophilus influenzae (including ampicillin-resistant strains), and Reliselial spp.  - Meningitis: caused by Streptococcus pneumoniae, Haemophilus influenzae (including ampicillin-resistant strains), and Reliselial spp.  - Meningitis: caused by Streptococcus pneumoniae, Haemophilus influenzae (including ampicillin-resistant strains), and staphylococcus aureus (penicillinase- and non-penicillinase- and non-penicillinase- and non-penicillinase- producing strains).  | 12 | 372 | 3 months                              | N/A | N/A | Y | Y |  | 10/4/2018 |
| Drugs | J0698 | Cefotaxime sodium, per<br>gram                         | 1g     | 1/1/2000 | Claforan® | cefotaxime for injection     | Indicated for the treatment of patients with serious infections caused by susceptible strains of the designated microorganisms in the diseases listed below.  Lower respiratory tract infections: including pneumonia, caused by Streptococcus pneumoniae (formerly Diplococcus pneumoniae). Streptococcus pneumoniae, Group A streptococcul and other streptococic (see, Enterococcus faecalis), Staphylococcus aureus (penicillinase and non-penicillinase producing), Escherichia coli, Klebsiella species, Haemophilus influenzae (including ampicillin resistant strains), Haemophilus parainfluenzae, Proteus mirabilis, Serratia marcescens*, Enterobacter species, indole positive Proteus and Pseudomonas species (including P. aeruginosa).  Sentatouriany infections: Uninary tract infections caused by Enterococcus species, Staphylococcus epidermidis, Staphylococcus aureus*, (penicillinase and non-penicillinase producing), Cirtobacter species, Enterobacter species, Escherichia coli, Klebsiella species, Proteus mirabilis, Proteus vulgaris*, Providencia stuartii, Morganella morganii*, Providencia rettgeri*, Serratia marcescens and Pseudomonas species (including P. aeruginosa). Also, uncomplicated gonorrhea (cervical/urethral and rectal) caused by Neisseria gonorrhoeae, including penicillinase producing strains.  **Gynecologic infections: including pelvic inflammatory disease, endometritis and pelvic cellulitis caused by Staphylococcus epidermidis, Streptococcus species, Enterobacter species, Metarodise species, Enterobacter species, Metarodise species (including Bacteroides fragilis*), Clostridium species, and anaerobic occi (including Pentorioretoscus species inflammatory disease and C. Trachomatis is one of the suspected pathogens, appropriate anti-chlamydal coverage should be added.  **Bacteremia/Septicemia*: caused by Stcherichia coli, Richaes and Serratia marcescens, Staphylococcus aureus and Streptococcus species (including S. pneumonia).  **Stin and stink strutzure infertoria crused hu Strabuboccoccus sureus and Streptococcus speci | 12 | 372 | N/A                                   | N/A | N/A | Y | Υ |  | 5/20/2019 |

| Drugs | 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 acetate<br>injectable suspension | When or al'therapy is not feasible, the intramuscular use of Celestone Soluspan is indicated as follows:  Allergic States: Control of severe or incapacitating allergic conditions intractable to adequate trials of conventional treatment in asthma, atopic dermatitis, contact dermatitis, drug hypersensitivity reactions, perennial or seasonal allergic rhinitis, serum sickness, transfusion reactions.  Dermatologic Diseases: Bullous dermatitis herpetiformis, exfoliative erythroderma, mycosis fungoides, pemphigus, severe erythema multiforme (Stevens-Johnson syndrome).  Endocrine Disorders: Congenital adrenal hyperplasia, hypercalcemia associated with cancer, nonsupurative thyroiditis. Hydrocortisone or cortisone is the drug of choice in primary or secondary adrenocortical insufficiency. Synthetic analogs may be used in conjunction with mineralocorticiots where applicable; in infancy mineralocorticiotis supplementation is of particular importance.  Gastrointestiand Diseases: To tide the patient over a critical period of the disease in regional enteritis and ulcerative colitis.  Hematologic Disorders: Acquired (autoimmune) hemolytic anemia, Diamond-Blackfan anemia, pure red cell aplasia, selected cases of secondary thrombocytopenia.  Miscellaneous: Trichinosis with neurologic or myocardial involvement, tuberculous meningitis with subarachnoid block or impending block when used with appropriate antituberculous chemotherapy.  Neoplastic Diseases: For palliative management of leukemias and lymphomas.  Nervous System: Acute exacerbations of multiple sclerosis; cerebral edema associated with primary or metastatic brait numor or craniotomy.  Ophthalmic Diseases: Sympathetic ophthalmia, temporal arteritis, uveitis and ocular inflammatory conditions unresponsive to topical corticosteroids.  Renal Diseases: To induce duries or remission of proteinural in idiopathic nephrotic syndrome or that due to lupus erythematosus. | 5   | 155   | N/A                                   | N/A | N/A | Y | Y |   | 9/25/2018 |
|-------|--|------------|----------|-------------------------|---|--|-----|-------|---------------------------------------|-----|-----|---|---|---|-----------|
| Drugs | J0712 Injection, ceftaroline fosamil, 10 mg  | 10 mg      | 1/1/2012 | Teflaro®                | ceftaroline fosamil for injection, for intravenous use                                  | Indicated in adult and pediatric patients 2 months of age and older for the treatment of the following infections caused by designated susceptible bacteria:  • Accute bacterial skin and skin structure infections (ABSSSI)  • Community-acquired bacterial pneumonia (CABP)  | 120 | 1,680 | 2 months                              | N/A | N/A | Y | Y |   | 5/21/2019 |
| Drugs | J0713 Injection, ceftazidime, per 500 mg   | per 500 mg | 1/1/2000 | Tazicef*                | ceftazidime for injection, for<br>intravenous or intramuscular<br>use                   | Bacterial Septicemia: caused by Pseudomonas aeruginosa, Klebsiella spp., Haemophilus influenzae, Escherichia coli, Serratia spp., Streptococcus pneumoniae, and Staphylococcus aureus (methicillinsusceptible strains).     Bone and Joint Infections: caused by Pseudomonas aeruginosa, Klebsiella spp., Enterobacter spp., and Staphylococcus aureus (methicillin-susceptible strains).     Gynecologic Infections: including endometritis, pelvic cellulitis, and other infections of the female genital tract caused by Escherichia coli.     Intra-abdomial Infections: including peritonitis caused by Escherichia coli, Klebsiella spp., and Staphylococcus aureus (methicillin-susceptible strains) and polymicrobial infections caused by aerobic and anaerobic organisms and Bacteroides spp. (many strains of Bacteroides fragilis are resistant).     Central Nervous System Infections: including meningitis, caused by Haemophilus influenzae and Neisseria meningitidis. Ceftazidime has also been used successfully in a limited number of cases   | 12  | 372   | N/A                                   | N/A | N/A | Y | Y |   | 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                      | of meningitis due to Pseudomonas aeruginosa and Streptococcus pneumoniae.  Indicated for the treatment of the following infections:  • Complicated intra-abdominal infection (cIAI) caused by the following susceptible Gram-negative microorganisms, in combination with meteronidazole, in adult and pediatric patients 3 months and older: Escherichia coll, Klebsiella opneumoniae, Proteus mirabilis, Enterobacter cloacae, Klebsiella opteo, Citrobacter freundli complex, and Pseudomonas aeruginosa.  • Complicated urinary tract infections (cUTI), including pyelonephritis, caused by the following susceptible Gram-negative microorganisms in adult and pediatric patients 3 months and older: Escherichia coll, Klebsiella pneumoniae, Enterobacter cloacae, Citrobacter freundli complex, Proteus mirabilis, and Pseudomonas aeruginosa.  **New Indication 2/1/2018***  * Hospital-acquired bacterial pneumonia and ventilator-associated bacterial pneumonia (HABP/NABP) caused by the following susceptible Gram-negative microorganisms: Klebsiella pneumoniae, Enterobacter cloacae, Escherichia coll, Serratia marcescens, Proteus mirabilis, Pseudomonas aeruginosa, and Haemophilus influenzae.  | 12  | 168   | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific age restrictions:  • Complicated intra-abdominal infection (clal). 3 months and older  • Complicated uriany tract infections (cUTI): 3 months and older  • Hospital-acquired bacterial pneumonia and ventilator-associated bacterial pneumonia (HABP/VABP): 18 years of age and older | 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 | Υ |  | 4/10/2019 |
|-------------|-------|---|-----------------------|----------|-----------------------|--|---|--------------|--------------|----------|-----|-----|---|---|--|-----------|
| Biologicals | J0717 | Injection, certolizumab<br>pegol, 1 mg                            | 1 mg                  | 1/1/2014 | Cimzia®               | certolizumab pegol for injection, for subcutaneous use   | Indicated for:  Reducing signs and symptoms of Crohn's disease and maintaining clinical response in adult patients with moderately to severely active disease who have had an inadequate response to conventional therapy.  Treatment of adults with moderately to severely active rheumatoid arthritis.  Treatment of adult patients with active psoriatic arthritis.  Treatment of adults with moderate to severely active rheumatoid arthritis.  Treatment of adults with moderate to severely adults who are candidates for systemic therapy or phototherapy.  Treatment of adults with active non-radiographic axial spondyloarthritis who have objective signs of inflammation.   | 400          | 1,200        | 18 years | N/A | N/A | Y | Y |  | 5/1/2019  |
| Drugs       | J0720 | Injection,<br>chloramphenicol sodium<br>succinate, up to 1 g      | up to 1 g             | 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 contraindicated. (See package insert for recommendations and warnings associated with chloramphenicol.)  Indicated for:  *Acute infections caused by Salmonella typhi. In treatment of typhoid fever some authorities recommend that chloramphenicol be administered at therapeutic levels for 8 to 10 days after the patient has become afebrile to lessen the possibility of relapse. It is not recommended for the routine treatment of the typhoid carrier state.  *Serious infections caused by susceptible strains in accordance with the concepts expressed in the package insert:  -Salmonella species  -H. Influenzae, specifically meningeal infections  Rickettsia  -Lymphogranuloma-psittacosis group  -Various gram-negative bacteria causing bacteremia, meningitis or other serious gram-negative infections.  -Other susceptible organisms which have been demonstrated to be resistant to all other appropriate antimicrobial agents.  *Cystic fibrosis regimens | 7            | 217          | N/A      | N/A | N/A | Y | 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:  • Prepubertal cryptorchidism not due to anatomic obstruction. In general, HCG is thought to induce testicular descent in situations when descent would have occurred at puberty, HCG thus may help to predict whether or not orchiopesy will be needed in the future. Although, in some cases, descent following HCG administration is permanent, in most cases the response is temporary. Therapy is usually instituted between the ages of 4 and 9.  • Selected cases of hypogonadotropic hypogonadism (hypogonadism secondary to a pituitary deficiency) in males.  • Induction of ovulation and pregnancy in the anovulatoris, infertile woman in whom the cause of anovulation is secondary and not due to primary ovarian failure, and who has been appropriately pretreated with human menotropins.  | 5            | 60           | 4 years  | N/A | N/A | Y | Y |  | 9/27/2018 |
| Drugs       | J0735 | Injection, clonidine<br>hydrochloride, 1 mg                       | 1 mg                  | 1/1/2000 | Duraclon*             | clonidine hydrochloride<br>injection solution  | Indicated in combination with opiates for the treatment of severe pain in cancer patients that is<br>not adequately relieved by opioid analgesics alone. Epidural clonidine is more likely to be<br>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 doses are individualized and 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 | Υ | 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 injection, for intravenous use   | Indicated for the treatment of the following serious infections caused by designated susceptible bacteria:  **Lower respiratory tract infections**  **Urnary tract infections**  **Intra-abdominal infections**  **Gynecologic infections**  **Bacterial septicemia**   | 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 intravenous use  | Indicated in adults (2: 18 years of age) with the following infections caused by designated, susceptible bacteria and in pediatric patients where indicated:  - Skin and skin structure infections - Bone and joint infections - Complicated intra-abdominal infections - Nosocomial pneumonia - Empirical therapy for febrile neutropenic patients - Inhalational anthrax post-exposure in adult and pediatric patients - Inhalational anthrax post-exposure in adult and pediatric patients - Chronic bacterial prostatis - Chronic bacterial prostatis - Chronic bacterial prostatis - Lower respiratory tract infections - Acute exacerbation of chronic bronchitis - Urinary tract infections (UTI) - Complicated UTI and pyelonephritis in pediatric patients - Acute sensitis   | 6   | 186    | N/A      | N/A | N/A | Y | Y | 4/9/2019   |
|-------------|-------|---|--------------------|----------|------------------|--|--|-----|--------|----------|-----|-----|---|---|------------|
| Drugs       | J0770 | Injection, collistimethate<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-<br>negative bacilli. Particularly indicated when the infection is caused by sensitive strains of P.<br>aeruginosa. Clinically effective in treatment of infections due to the following gram-negative<br>organisms: Enterobacter aerogenes, Escherichia coll, Klebsiella pneumoniae and Pseudomonas<br>aeruginosa.  | 4   | 124    | N/A      | N/A | N/A | Υ | 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  | Treatment of adult patients with Dupuytren's contracture with a palpable cord. 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.   | 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              | prochlorperazine edisylate<br>injection  | Indicated to control severe nausea and vomiting and for the treatment of schizophrenia.  Prochlorperazine has not been shown effective in the management of behavioral complications in patients with mental retardation.  | 4   | 124    | 2 years  | N/A | N/A | Y | Υ | 8/24/2018  |
| Drugs       | J0800 | Injection, corticotropin,<br>up to 40 units                             | up to 40 units     | 1/1/2000 | H.P. Acthar® Gel | repository corticotropin<br>injection, gel for<br>intramuscular or<br>subcutaneous use                         | Indicated as monotherapy for the treatment of infantile spasms in infants and children under 2 years of age.     Indicated for the treatment of exacerbations of multiple sclerosis in adults.     May be used for the following disorders and diseases: rheumatic, collagen, dermatologic, allergic states, ophthalmic, respiratory, and edematous state.   | 3   | 63     | N/A      | N/A | N/A | Υ | 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<br>adrenocortical insufficiency.  | 3   | 3      | N/A      | N/A | N/A | Υ | Υ | 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 immune<br>fab (ovine) lyophilized<br>powder for solution for<br>intravenous injection    | Indicated for the management of adult and pediatric patients with North American crotalid envenomation. The term crotalid is used to describe the Crotalinae subfamily (formerly known as Crotalidae) of venomous snakes which includes rattlesnakes, copperheads 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 (fab')2 (equine),<br>120 mg             | 120 mg             | 1/1/2019 | Anavip**         | crotalidae immune f(ab')2<br>(equine), lyophilized powder<br>for solution for nipection 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<br>mg   | 5 mg               | 1/1/2016 | Dalvance*        | dalbavancin for injection, for<br>intravenous use  | Indicated for acute bacterial skin and skin structure infections (ABSSSI) caused by designated susceptible strains of Gram-positive 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<br>intravenous use   | Indicated for the treatment of:  - Complicated skin and skin structure infections (cSSSI) in adult and pediatric patients (1 to 17 years of age).  - Staphylococcus aureus bloodstream infections (bacteremia), in adult patients including those with right-sided infective endocardits.  ***Approved 9/1/2017***  - Indicated for the treatment of Staphylococcus aureus bloodstream infections (bacteremia) in pediatric patients (1 to 17 years of age).  Limitations of Use:  - Cubicin is not indicated for the treatment of pneumonia.  - Cubicin is not indicated for the treatment of left-sided infective endocardits due to S. aureus.  - Cubicin is not indicated for the treatment of left-sided infective endocardits due to S. aureus.  - Cubicin is not recommended in pediatric patients younger than one year of age due to the risk of potential effects on muscular, neuromuscular, and/or nervous systems (either peripheral and/or central) observed in neonatal dogs. | 840 | 26,040 | 1 year   | N/A | N/A | Y | Y | 10/4/2018  |

| Biologicals | Injection, darbepoetin alfa, 1 microgram (non- ESRD use)              | 1 mcg       | 1/1/2006 | Aranesp®             | darbepoetin alfa injection, for<br>intravenous or subcutaneous<br>use (non-ESRD use) | Indicated for the treatment of anemia due to:  • Chronic Kidney Disease (CKO) in patients on dialysis and patient not on dialysis.  • The effects of concomitant myelosuppressive chemotherapy, and upon initiation, there is a minimum of two additional months of planned chemotherapy.  Limitations of Use: Aranesp has not been shown to improve quality of life, fatigue, or patient well-being.  Aranesp is 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 in whom the anemia can be managed by transfusion.  • 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 | Y | Y | Indication specific age restrictions: • CKD: None • Cancer: 18 years of age and older  | 4/10/2019  |
|-------------|---|-------------|----------|----------------------|--|---|-----|-------|---------------------------------------|-----|-----|---|---|--|------------|
| Biologicals | Injection, darbepoetin<br>alfa, 1 microgram (for<br>ESRD on dialysis) | 1 mcg       | 1/1/2006 | Aranesp®             | use (ESRD use on dialysis)   | Indicated for the treatment of anemia due to:  • Chronic Kidney Disease (CKD) in patients on dialysis and patients not on dialysis.  • Chronic Kidney Disease (CKD) in patients on dialysis and patients not on dialysis.  • The effects of concomitant myelosuppressive chemotherapy, and upon initiation, there is a minimum of two additional months of planned chemotherapy.  Limitations of Use: Aranesp has not been shown to improve quality of life, fatigue, or patient well-being.  Aranesp is 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 in whom the anemia can be managed by transfusion.  • As a substitute for RBC transfusions in patients who require immediate correction of anemia.  | 105 | 315   | N/A                                   | N/A | N/A | Y | Y |  | 4/10/2019  |
| Biologicals | Injection, epoetin alfa,<br>J0885 (for non-ESRO use), 1000<br>units   | 1,000 units | 1/1/2006 | Epogen*,<br>Procrit* | intravenous or subcutaneous  | Indicated for treatment of anemia due to - Chronic Kidney Disease (CKD) in patients on dialysis and not on dialysis Zidovudine in patients with HIV-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: 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 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 underspoing cardiac or vascular surgery In patients deregoing cardiac or vascular surgery As a substitute for RBC transfusions in patients who require immediate correction of anemia. | 84  | 630   | N/A                                   | N/A | N/A | Y | Y |  | 6/4/2019   |
| Biologicals | Injection, epoetin beta,<br>microgram, (for ESRD or<br>dialysis)      | 1 mcg       | 1/1/2015 | Mircera*             | epoetin beta injection, for<br>intravenous or subcutaneous                           | Indicated for the treatment of anemia associated with chronic kidney disease (CKD) in:  • adult patients on dialysts and adult patients not on dialysis.  • pediatric patients 5 to 17 years of age on hemodialysis who are converting from another ESA after their hemoglobin level was stabilized with an ESA.  Limitations of Use:  Limitations of Use:  • In the treatment of anemia due to cancer chemotherapy  • As a substitute for RBC transfusions in patients who require immediate correction of anemia.  Mircera has not been shown to improve quality of life, fatigue, or patient well-being.   | 360 | 720   | 5 years                               | N/A | N/A | Y | Y |  | 10/10/2018 |
| Biologicals | Injection, epoetin beta,<br>microgram, (for non-<br>ESRD use)         | l 1 mcg     | 1/1/2015 | Mircera*             | epoetin beta injection, for<br>intravenous or subcutaneous                           | Indicated for the treatment of anemia associated with chronic kidney disease (CKD) in:  • Adult patients on dialysis and adult patients not on dialysis.  • Pediatric patients 5 to 17 years of age on hemodialysis who are converting from another ESA after their hemoglobin level was stabilized with an ESA.  Limitations of Use:  Mircera is not indicated and is not recommended for use:  • In the treatment of anemia due to cancer chemotherapy.  • As a substitute for RBC transfusions in patients who require immediate correction of anemia.  Mircera has not been shown to improve quality of life, fatigue, or patient well-being.   | 360 | 720   | Indication Specific<br>(see comments) | N/A | N/A | Y | ٧ | Indication specific age restrictions:  • Adult patients with CKD - 18 years of age and older  • Pediatric patients on hemodiallysis who are converting from another ESA - 5 years of age and older | 7/26/2018  |

| Drugs       | J0894 | Injection, decitabine, 1<br>mg                     | 1 mg       | 1/1/2007 | N/A             | decitabine for injection, for intravenous infusion | Indicated for treatment of patients with myelodysplastic syndromes (MDS) including previously treated and untreated, de novo and secondary MDS of all French-American-British subtypes (refractory anemia, refractory anemia with ringed sideroblasts, refractory anemia with excess blasts, refractory anemia with excess blasts, refractory anemia with excess blasts, refractory anemia with excess blasts in transformation, and chronic myelomonocytic leukemia) and intermediate-1, intermediate-2, and high-risk international Prognostic Scoring System groups.   | 150 | 450 | 18 years                              | N/A | N/A          | Υ | Υ |   | 10/4/2018  |
|-------------|-------|--|------------|----------|-----------------|--|---|-----|-----|---------------------------------------|-----|--------------|---|---|---|------------|
| Drugs       | 10895 | Injection, deferoxamine<br>mesylate, 500 mg        | 500 mg     | 1/1/2000 | Desferal®       | deferoxamine mesylate for 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          | Υ | Y |   | 10/4/2018  |
| Biologicals | J0897 | Injection, denosumab, 1<br>mg (Xgeva, Prolia)      | 1 mg       | 1/1/2012 | Prolia*, Xgeva* | denosumab injection, for<br>subcutaneous use       | Prolia Indicated for:  * The treatment in postmenopausal women with osteoporosis at high risk for fracture  * The treatment to increase bone mass in men with osteoporosis at high risk for fracture  * The treatment to increase bone mass in men at high risk for fracture receiving androgen deprivation therapy for nonmetastatic prostate cancer  * The treatment to increase bone mass in women at high risk for fracture receiving adjuvant aromatase inhibitor therapy for breast cancer.  * The treatment of glucocorticoid-induced osteoporosis in men and women at high risk for fracture.  * Xgeva Indicated for:  * The prevention of skeletal-related events in patients with multiple myeloma and in patients with bone metastases from solid tumors  * The treatment of adults and skeletally mature adolescents with giant cell tumor of bone that is unresectable or where surgical resection is likely to result in severe morbidity  * The treatment of hypercalcemia of malignancy refractory to bisphosphonate therapy  | 120 | 360 | Indication Specific<br>(see comments) | N/A | N/A          | Υ | Υ | Product/indication specific age restrictions:  Prolia: 18 years of age and older  Xgeva: Indication specific. O Giant cell tumor of bone: Only use in skeletally mature adolescents. O All other indications: 18 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®-Estradiol | estradiol cypionate injection                      | 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 | Υ | Υ |   | 10/4/2018  |
| Drugs       | J1020 | Injection,<br>methylprednisolone<br>acetate, 20 mg | 20 mg      | 1/1/2000 | Depo-Medrol®    |  | Indicated as follows when the oral route is not feasible: Intramuscular Administration  Allergic States: Control of severe or incapacitating allergic conditions intractable to adequate trials of conventional treatment in asthma, atopic dermatitis, contact dermatitis, drug hypersensitivity reactions, seasonal or perennial allergic hrinitis; serum sickness, transfusion reactions.  Dermatologic Diseases: Bullous dermatitis herpetiformis, exfoliative dermatitis, mycosis fungoides, pemphigus, severe erythema multiforme (Stevens-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 mineralocorticoids where applicable; in infancy, mineralocorticoid supplementation is of particular importance), congenital adrenal hyperaplasia, hypercalemia associated with cancer, nonsupportive thyroiditis.  Gastrointestiand Diseases: To tide the patient over a critical period of the disease in regional enteritis (systemic therapy) and ulcerative colitis.  Hematologic Disorders: Acquired (autoimmune) hemolytic anemia, congenital (erythroid) hypoplastic anemia (Diamond Blackfan anemia), pure red cell aplasia, select cases of secondary thrombocytopenia.  Miscellaneous: Trichinosis with neurologic or myocardial involvement, tuberculous meningitis with subarachnoid block or impending block when used concurrently with appropriate antituberculous chemotherapy.  Neoplastic Diseases: For palliative management of: leukemias and lymphomas.  Nervous System: Acute exacereations of multiple sclerosis; cerebral edema associated with primary or metastatic brain tumor or craniotomy.  Ophthalmic Diseases: Sor palliative management of: leukemias and lymphomas.  Revolus System: Acute exacereations of multiple sclerosis; cerebral edema associated with primary or metastatic brain tumor or craniotomy.  Coptimismic Diseases: Sor palliative management of: leukemias and lymphomas. | 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<br>injection, suspension, 40 mg                    | enteritis (systemic therapy) and ulcerative collitis.  Hematologic Disorders: Acquired (autoimmune) hemolytic anemia, congenital (erythroid) hypoplastic anemia (Diamond Blackfan anemia), pure red cell aplasia, select cases of secondary thrombocytopenia.  Miscellaneous: Trichinosis with neurologic or myocardial involvement, tuberculous meningitis with subarachnoid block or impending block when used concurrently with appropriate antituberculous chemotherapy.  Neoplastic Diseases: For palliative management of: leukemias and lymphomas.  Nervous System: Acute exacerbations of multiple sclerosis; cerebral edema associated with primary or metastatic brait numor or cranitorum.  Ophthalmic Diseases: Sympathetic ophthalmia, temporal arteritis, uveltis, ocular inflammatory conditions unresponsive to topical corticosteroids.  Renal Diseases: To induce diuresis or remission of proteinuria in idiopathic nephrotic syndrome,   | 1     | 31    | N/A                                   | N/A | N/A        | γ | Y |  | 10/26/2018 |
| Drugs | J1040 | Injection,<br>methylprednisolone<br>acetate, 80 mg                 | 80 mg | 1/1/2000 | Depo-Medrol®           | methylprednisolone acetate injection, suspension, 80 mg                       |  | 2     | 31    | N/A                                   | N/A | N/A        | Υ | Y |  | 10/26/2018 |
| Drugs | J1050 | Injection,<br>medroxyprogesterone<br>acetate, 1 mg                 | 1 mg  | 1/1/2013 | Depo-Provera®          |   | 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        | Υ | Y | Indication specific age restrictions: • Endometrial and renal carcinoma: 18 years and older • Prevention of pregnancy: Use after menarche. | 10/26/2018 |
| Drugs | J1071 | Injection, testosterone 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 testosterone.  1. Primary hypogonadism (congenital or acquired)-testicular failure due to cryptorchidism, bilateral torsion, orchitis, vanishing testis syndrome; or orchidectomy.  2. Hypogonadotropic hypogonadism (congenital or acquired)- gonadotropin or LHRH deficiency, or pituitary-hypothalamic injury from tumors, trauma, or radiation.  Safety and efficacy of Depo-Testosterone (testosterone cyplonate) in men with "age-related hypogonadism" (also referred to as "late-onset hypogonadism") have not been established.   | 400   | 1,200 | 12 years                              | N/A | Males Only | Υ | Y |  | 4/10/2019  |
| Drugs | J1095 | Injection, dexamethasone<br>9 percent, intraocular, 1<br>microgram | 1 mcg | 1/1/2019 | Dexycu™                | dexamethasone intraocular<br>suspension 9%, for<br>intraocular administration | Indicated for the treatment of postoperative inflammation.   | 1,034 | 1,034 | 18 years                              | N/A | N/A        | Υ | 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                                   | Intrarenous or Intramuscular Administration: When oral therapy is not feasible and the strength dosage form, and route of administration of the drug reasonably hend the preparation to the treatment of the condition, those products labeled for intravenous or intramuscular use are indicated as follows:  - Endocrine Disorders: Primary or secondary adrenocortical insufficiency (hydrocortisone or cortisone is the drug of choice; synthetic analogs may be used in conjunction with mineralocorticols where applicable; in infanzy, mineralocorticold supplementation is of particular importance). Acute adrenocortical insufficiency (hydrocortisone or cortisone is the drug of choice; mineralocorticold supplementation in may be necessary, particularly when synthetic analogs are used), Preoperatively, and in the event of serious trauma or illness, in patients with known adrenal insufficiency or when adrenocortical reserve is doubtful, Shock unresponsive to conventional therapy if adrenocortical insufficiency exists or is suspected, Congenital adrenal hyperplasia, Nonsuppurative thyroiditis, Hypercalcemia associated with cancer.  - Rheumatic Disorders: As adjunctive therapy for short-term administration (to tide the patient over an acute peloode or exacerbation) in: post-traumatic osteoarthritis, synovitis of osteoarthritis, rheumatoid arthritis including juvenile rheumatoid arthritis (selected cases may require low-dose maintenance therapy), acute and subacute burstits, epicondylitis, acute nonspecific tenosynovitis, acute gounty arthritis, psoriatic arthritis, and askylosing spondylitis.  - Collagen Diseases: During an exacerbation or as maintenance therapy in selected cases of systemic lupus erythematosus and acute rheumatic carditis.  - Dermatologic Diseases: Pemphigus, severe erythema multiforme (Steven-Johnson Syndrome), exfoliative dermatitis, bellous dermatitis herpetiformis, severe seborrheic dermatitis, severe psoriasis, and mycosis fungoides.  - Allergic States: control of severe or incapacitating allergic conditions i | 10    | 310   | N/A                                   | N/A | N/A        | Υ | Y |  | 10/4/2018  |
| Drugs | J1110 | Injection,<br>dihydroergotamine                                    | 1 mg  | 1/1/2000 | DHE 45*                | dihydroergotamine mesylate injection  | transtission reactions acute nonintectious laurageal edgma (eningabrine is the drug of tiest<br>Indicated for the acute treatment of migraine headaches with or without aura and the acute<br>treatment of cluster headache episodes.  | 3     | 30    | 18 years                              | N/A | N/A        | Υ | Y |  | 10/10/2018 |
|       | l     | mesylate, per 1 mg   |       | 1        | 1                      | · ·   | · ·  |       | L     |                                       |     | 1          |   | l | 1  | 1          |

|       |       |  |              |          |                       |   | Indicated for the adjunctive treatment of:   |    |     |                                       |     |  |   |   |  |            |
|-------|-------|--|--------------|----------|-----------------------|---|--|----|-----|---------------------------------------|-----|--|---|---|--|------------|
| Drugs | J1120 | Injection, acetazolamide<br>sodium, up to 500 mg       | up to 500 mg | 1/1/2000 | Diamox®               | acetazolamide sodium<br>injection, powder, lyophilized<br>for solution                    | Edema due to congestive heart failure     Drug-induced edema     Centrencehalic politensies (potit mal unlocalized seizures)   | 2  | 62  | 18 years                              | N/A | N/A                                      | Υ | Y |  | 10/31/2018 |
| Drugs | J1160 | Injection, digoxin, up to 0.5 mg                       | up to 0.5 mg | 1/1/2000 | Lanoxin®              | digoxin injection, for<br>intravenous or intramuscula<br>use                              | Indicated for:  • Treatment of mild to moderate heart failure in adults.  • Increasing myocardial contractility in pediatric patients with heart failure. (Indication added to the portal 10/4/2018)  • 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 restrictions:  • Mild to moderate heart failure and control of resting ventricular rate in chronic atrial fibrillation: 18 years of age and older  • Increasing myocardial 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<br>treatment of seizures occurring during neurosurgery. Intravenous phenytoin can also be<br>substituted, as short-term use, for oral phenytoin. Parenteral phenytoin should be used only<br>when oral phenytoin administration is not possible.   | 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 | Indicated for the management of pain severe enough to require an opioid analgesic and for which alternate treatments are inadequate.  Limitations of Use: Because of the risks of addiction, abuse, and misuse with opioids, even at   | 6  | 186 | 18 years                              | N/A | N/A                                      | Υ | 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 women with metastatic breast cancer who have received a cumulative doxorubicin dose of 300 mg/m² and who will continue to receive doxorubicin therapy to maintain turmor control. Do not use with doxorubicin initiation.  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 the following conditions when diphenhydramine in the oral form is impractica:  • Antihistaminic: For amelioration of allergic reactions to blood or plasma, in anaphylaxis as an adjunct to epinephrine and other standard measures after the acute symptoms have been controlled, and for other uncomplicated allergic conditions of the immediate type when oral therapy is impossible or contraindicated.  • Motion Sickness: For active treatment of motion sickness.  Antiparkinosimis: For use in parkinosinism, when oral therapy is impossible or contraindicated, as follows: parkinsonism in the elderly who are unable to tolerate more potent agents; mild cases of parkinsonism in other age groups, and in other cases of parkinsonism in combination with centrally acting anticholinergic agents. | 8  | 248 | Indication Specific<br>(see comments) | N/A | N/A                                      | Υ | Y | Contraindicated in newborns or premature infants.  | 10/4/2018  |
| Drugs | J1205 | Injection, chlorothiazide sodium, per 500 mg           | 500 mg       | 1/1/2000 | N/A                   | chlorothiazide sodium for 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                                      | Υ | Υ |  | 9/27/2018  |
| Drugs | J1212 | Injection, DMSO,<br>dimethyl sulfoxide, 50%,<br>50 mL  | 50 mL        | 1/1/2000 | RIMSO-50®             | dimethyl sulfoxide (DMSO)<br>irrigation   | Indicated for symptomatic relief of patients with interstitial cystitis.   | 1  | 3   | N/A                                   | N/A | N/A                                      | Υ | Y |  | 10/4/2018  |
| Drugs | J1230 | Injection, methadone HCI,<br>up to 10 mg               | up to 10 mg  | 1/1/2000 | N/A                   | methadone hydrochloride<br>injection  | Indicated for:  • The management of pain severe enough to require an opioid analgesic and for which alternative treatment options are inadequate. Limitations of Use: Because of the risks of addiction, abuse, and misuse with opioids, even at recommended doses, reserve methadone injection for use in patients for whom alternative treatment options (e.g., non-opioid analgesics or opioid combination products):  O Have not been tolerated, or are not expected to be tolerated. O Have not provided adequate analgesia, or not expected to provide adequate analgesia.  Use in temporary treatment of opioid dependence in patients unable to take oral medication. Limitations of Use: Injectable methadone products are not approved for the outpatient treatment of opioid dependence. In this patient population, parenteral methadone is to be used only for patients unable to take oral medication, such as hospitalized patients.    | 4  | 93  | 18 years                              | N/A | N/A                                      | Y | 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                                      | Υ | Υ |  | 6/10/2019  |
| Drugs | J1245 | Injection, dipyridamole,<br>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 cannot exercise adequately.   | 6  | 6   | 18 years                              | N/A | N/A                                      | Υ | Υ |  | 6/10/2019  |
| Drugs | J1250 | Injection, dobutamine<br>hydrochloride, per 250<br>mg  | 250 mg       | 1/1/2000 | N/A                   | dobutamine injection  | Indicated:  • When parenteral therapy is necessary for inotropic support in the short-term treatment of adults with cardiac decompensation due to depressed contractility resulting either from organic heart disease or from cardiac surgical procedures.  • In patients who have atrial fibrillation with rapid ventricular response, a digitalis preparation should be used prior to institution of therapy with dobutamine.  | 30 | 930 | 18 years                              | N/A | N/A                                      | Y | Y |  | 10/4/2018  |

|             |       | Injection, dopamine                                 |             |          |                   |  | Indicated for the correction of hemodynamic imbalances present in the shock syndrome due to  |     |       |                                       |     |              |   |   |  |            |
|-------------|-------|---|-------------|----------|-------------------|--|--|-----|-------|---------------------------------------|-----|--------------|---|---|--|------------|
| Drugs       | J1265 | hydrochloride, 40 mg                                | 40 mg       | 1/1/2006 | N/A               | dopamine hydrochloride   | myocardial infarction, trauma, 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 intravenous use                   | Indicated for the treatment of the following infections caused by susceptible bacteria:  Complicated intra-abdominal infections  Complicated urinary tract infections, including pyelonephritis  | 150 | 2,100 | 18 years                              | N/A | N/A          | Υ | Υ |  | 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          | Υ | Y |  | 10/4/2018  |
| Drugs       | J1290 | Injection, ecallantide, 1<br>mg                     | 1 mg        | 1/1/2011 | Kalbitor®         | ecallantide injection for 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 mg                        | 10 mg       | 1/1/2008 | Soliris®          | eculizumab injection, for<br>intravenous use                   | Treatment of patients with paroxysmal nocturnal hemoglobinuria (PNH) to reduce hemolysis. Treatment of patients with atypical hemolytic uremic syndrome (aHUS) to inhibit complement-mediated thrombotic uncroangiopathy. Limitation of Use: Solliris is not indicated for the treatment of patients with Shiga toxin E. coli related hemolytic uremic syndrome (STEC+HUS). Treatment of adult patients with generalized Myasthenia Gravis (gMG) who are antiacetylcholine receptor (AchR) antibody positive.  | 120 | 480   | Indication Specific<br>(see comments) | N/A | N/A          | Y | 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 | 6/6/2019   |
| 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          | Υ | 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          | Υ | 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<br>exercise capacity. Studies establishing effectiveness included predominantly (97%) patients with<br>NYHA Functional Class III-V symptoms and etiologies of idiopathic or heritable PAH (49%) or PAH<br>associated with connective tissue diseases (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®           | ertapenem injection for<br>intravenous or intramuscular<br>use | Indicated in adult patients and pediatric patients (3 months of age and older) for the treatment of the following moderate to severe infections caused by susceptible bacteria:  - Complicated intra-abdominal infections.  - Complicated skin and skin structure infections, including diabetic foot infections without osteomyellis.  - Community-acquired pneumonia.  - Complicated urinary tract infections including pyelonephritis.  - Acute pelvic infections including postpartum endomyometritis, septic abortion and post surgical gynecologic infections.  Indicated in adults for the prophylaxis of surgical site infection following elective colorectal surgery.  | 2   | 28    | 3 months                              | N/A | N/A          | Y | Y |  | 10/10/2018 |
| Drugs       | J1364 | Injection, erythromycin<br>lactobionate, per 500 mg | 500 mg      | 1/1/2000 | Erythrocin™       | erythromycin lactobionate<br>for injection                     | Indicated in the treatment of infections caused by susceptible strains of the designated organisms in the diseases listed below when oral administration is not possible or when the severity of the infection requires immediate high serum levels of erythromycin. Intravenous therapy should be replaced by oral administration at the appropriate time.  1 Upper respiratory tract infections of mild to moderate degree caused by Streptococcus pyogenes (Group A beta-hemolytic streptococci), Streptococcus pneumoniae (Diplococcus pneumoniae). Heamophilus influenzae (when used concomitantly with adequate doses of suffonamides, since many strains of H. Influenzae are not susceptible to the erythromycin concentrations ordinarily achieved).  1 Lower respiratory tract infections of mild to moderate severity caused by Streptococcus pyogenes (Group A beta-hemolytic streptococci); Streptococcus pneumoniae (Diplococcus pneumoniae).  2 Respiratory tract infections due to Mycoplasma pneumoniae.  3 Skin and skin structure infections of mild to moderate severity caused by Streptococcus pyogenes and Staphylococcus aureus (resistant staphylococci may emerge during treatment).  1 Diphtheria: As an adjunct to antitions infections due to Corynebacterium diphtheriae to prevent establishment of carriers and to eradicate the organism in carriers.  2 Erythrasma: In the treatment of infections due to Corynebacterium minutissimum.  3 Acute pelvic inflammatory disease caused by Nesseria gonorrhoeae: Erythromycin tactobionate for injection, USP) followed by erythromycin taetare or erythromycin bactobionate for injection, USP) followed by erythromycin stearate or erythromycin bactobionate for injection, USP) followed by erythromycin stearate or erythromycin and monthly serologic tests for a minimum of 4 months thereafter.  4 Legionanier's Disease caused by Legionella pneumophila. Although no controlled clinical efficacy studies have been conducted, in vitro and limited preliminary clinical data suggest that enthorisms and a many she effective the res | 8   | 248   | N/A                                   | N/A | N/A          | ٧ | Y |  | 10/10/2018 |
| Drugs       | J1380 | Injection, estradiol<br>valerate, up to 10 mg       | up to 10 mg | 1/1/2000 | Delestrogen*      | estradiol valerate injection                                   | Indicated in the treatment of:  Moderate-to-severe vasomotor symptoms associated with the menopause  Hypoestrogenism caused by hypogonadism, castration or primary ovarian failure  Advanced androgen-dependent carcinoma of the prostate (for palliation only)  Vulval and vaginal atrophy associated with the menopause. When prescribing solely for the treatment of symptoms of vulvar and 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      | 25 mg       | 1/1/2000 | Premarin® IV      |  | Indicated in the treatment of abnormal uterine bleeding caused by hormonal imbalance in the<br>absence of organic pathology. Indicated for short-term use only, to provide a rapid and<br>temporary increase in estrogen levels.   | 2   | 62    | N/A                                   | N/A | Females Only | Y | Υ |  | 10/10/2018 |

| Drugs       | J1439 Injection, ferric carboxymaltose, 1 mg                                  | 1 mg               | 1/1/2015  | Injectafer* | rerric carboxymaitose - Who  | cated for the treatment of iron deficiency anemia in adult patients: 10 have intolerance to oral iron or have had unsattsfactory response to oral iron. 10 have non-dialysis dependent chronic kidney disease.   | 750   | 1,500  | 18 years | N/A | N/A | Y | Υ | 10/26/2018 |
|-------------|---|--------------------|-----------|-------------|--|--|-------|--------|----------|-----|-----|---|---|------------|
| Biologicals | Injection, filgrastim (G-<br>J1442 CSF), excludes biosimilars,<br>1 microgram | . 1 mcg            | 1/1/20016 | Neupogen*   | Indicat  Decrease  Indicate  Indicat | cated to:  crease the incidence of infection, as manifested by febrile neutropenia, in patients with myeloid malignancies receiving myelosuppressive  cancer drugs associated with a significant incidence of severe neutropenia with fever. duce the time to neutrophil recovery and the duration of fever, following induction or  solidation chemotherapy treatment of patients with acute  loid leukemia (AML).  duce the duration of neutropenia and neutropenia-related clinical sequelae, e.g., febrile  tropenia, in patients with nonmyeloid gnancies undergoing myeloablative chemotherapy followed by bone marrow transplantation | 1,920 | 59,520 | N/A      | N/A | N/A | γ | Y | 6/6/2019   |
| Drugs       | Injection, ferric pyrophosphate citrate solution, 0.1 mg of iron              | 0.1 mg of iron     | 1/1/2016  | Triferic*   | solution, for hemodialysis use, and powder for solution, for how all the leave   | cated for the replacement of Iron to maintain hemoglobin in adult patients with hemodialysis-<br>endent chronic kidney disease (HDD-CKD).<br>Lations of Use:<br>Iferic is not intended for use in patients receiving peritoneal dialysis.<br>Iferic has not been studied in patients receiving home hemodialysis.  | 2,720 | 38,080 | 18 years | N/A | N/A | Y | Y | 6/7/2019   |
| Biologicals | J1447 Injection, tbo-filgrastim, 1<br>microgram                               | 1 mcg              | 1/1/2016  | Granix*     | tbo-filgrastim injection, for severe   | cated in adult and pediatric patients 1 month and older for reduction in the duration of<br>re neutropenia in patients with non-myeloid malignancies receiving myelosuppressive anti-<br>ter drugs associated with a clinically significant incidence of febrile neutropenia.  | 780   | 10,920 | 1 month  | N/A | N/A | Y | Y | 5/20/2019  |
| Drugs       | J1453 Injection, fosaprepitant, 1   | 1 mg               | 1/1/2009  | Emend*      | fosaprepitant for injection, for intravenous use for intravenous use for intravenous use for intravenous for interest for intravenous for intravenous for intravenous for interest for int | cated in adults and pediatric patients 6 months of age and older, in combination with other emetic agents, for the prevention of:<br>ute and delayed nausea and vomiting associated with initial and repeat courses of highly togenic cancer chemotherapy (HEC) including high-dose cisplatin.<br>layed nausea and vomiting associated with initial and repeat courses of moderately togenic cancer chemotherapy (MEC).<br>tations of Use: Emend has not been studied for treatment of established nausea and<br>titing.<br>ication approved on 4/3/2018 to expand use from adults to pediatric patients 6 months of<br>and older)           | 150   | 450    | 6 months | N/A | N/A | Y | Y | 10/10/2018 |
| Drugs       | Injection, fosnetupitant J1454 235 mg and palonosetron 0.25 mg                | 235.25 mg (1 vial) | 1/1/2019  | Akynzeo*    | palonosetron for injection, nausea   | cated in combination with dexamethasone in adults for the prevention of acute and delayed<br>sea and vomiting associated with initial and repeat courses of highly emetogenic cancer<br>motherapy.   | 1     | 3      | 18 years | N/A | N/A | Y | Y | 10/31/2018 |
| Drugs       | J1455 Injection, foscarnet sodium, per 1,000 mg                               | 1,000 mg           | 1/1/2000  | Foscavir®   | foscarnet sodium injection therap monot  | motheraov.  acted for the treatment of:  AV retinitis in patients with acquired immunodeficiency syndrome (AIDS). Combination apy with Foscavir and ganciclovir is indicated for patients who have relapsed after notherapy with either drug. Safety and efficacy of foscavir have not been established for timent of other CMV infertions te g nenumonitis, eastroenteritist, consenital or nenonatal.  | 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 walking and stair-climbing capacity.   | 140 | 700    | N/A                                   | N/A | N/A | Y | Y |  | 7/2/2018   |
|---------------------|-------|--|--------|----------|-----------------------------|--|--|-----|--------|---------------------------------------|-----|-----|---|---|--|------------|
|                     |       |  |        |          |                             |  |  |     |        |                                       |     |     |   |   |  |            |
| Immune<br>Globulins | J1459 | Injection, immune<br>globulin (Prvigen),<br>intravenous, non-<br>lyophilized (e.g., liquid),<br>500 mg                                       | 500 mg | 1/1/2009 | Privigen*                   | immune globulin intravenous<br>(human), 10% liquid                                     | Indicated for the treatment of:  • Primary humoral immunodeficiency (PI)  • Chronic immune thrombocytopenic purpura (ITP) in patients age 15 years and older  • Chronic inflammatory demyelinating polyneuropathy (CIDP) in adults  Limitations of Use:  Privigen maintenance therapy in CIDP has not been studied beyond 6 months.  | 280 | 840    | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific age restrictions: Primary Humoral Immunodeficiency: 3 years of age and older Chronic Immune Thrombocytopenic Purpura: 15 years of age and older Chronic Inflammatory Demyelinating Polyneuropathy: 18 years of age and older | 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:  * For prophylaxis following exposure to hepatitis A.  * To prevent or modify measles in a susceptible person exposed fewer than 6 days previously.  * To modify varicella.  * To modify varicella.  * To modify rubella in exposed women who will not consider a therapeutic abortion.  * Not indicated for routine prophylaxis or treatment of viral hepatitis type B, rubella, pollomyelitis, mumps or 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 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:  • Chronic immune thrombocytopenic purpura (ITP).  • Primary humoral immunodeficiency (PI) in adults and pediatric patients 2 years of age and older.  Gammaplex 10%: Indicated for the treatment of:  • Primary humoral immunodeficiency (PI) in adults.  • Chronic immune thrombocytopenic purpura (ITP) in adults.  | 280 | 560    | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | 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  | 9/21/2018  |
| 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 agammaglobulinenia, common variable immunodeficiency. X-linked agammaglobulinenia, Wiskott-Aldrich syndrome and severe combined immunodeficiencies.</li> <li>Indicated as maintenance therapy for the treatment of adult patients with chronic inflammatory demyelinating polyneuropathy (CIDP) to prevent relapse of neuromuscular disability and impairment.</li> </ul> | 560 | 2,800  | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific age<br>restrictions:<br>• PI - 2 years of age and older<br>• CDIP - 18 years of age and<br>older   | 7/16/2018  |
| 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:  * For prophylaxis following exposure to hepatitis A.  * To prevent or modify measles in a susceptible person exposed fewer than 6 days previously.  * To modify varicella.  * To modify varicella in exposed women who will not consider a therapeutic abortion.  * Not indicated for routine prophylaxis or treatment of viral hepatitis type B, rubella, pollomyelitis, 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>lyophilized (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 Primary Humoral Immun<br>• Idiopathic Thrombocytop   | nodeficiency (Pi) in patients 2 years of age and older<br>penic Purpura (ITP) in adults and children<br>emyelinating Polyneuropathy (CIDP) in adults<br>r:<br>nodeficiency (Pi) in patients 2 years of age and older  | 280  | 840   | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific age restrictions:  • Primary Humoral Immunodeficiency (PI): 2 years of age and older elidipathic Thrombocytopenic Purpura (ITP): None  • Chronic Inflammatory Demyelinating Polyneuropathy (CIDP): 18 years of age and 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 | immune globulin intravenous (human), lyophilized, ammaglobulinemia, sev fammung flobulin intravenous (human), sobern detergent treated - Gammagard S/D treated - Sammagard S/D | r the maintenance treatment of patients with primary e.g., common variable immunodeficiency, X-linked ere combined immunodeficiency do r the treatment of Primary Immunodeficiency (PI) in adults and so fage or older, prevention of bacterial infections in and/or recurrent bacterial infections associated with B-cell Chronic LJ, prevention and/or control of bleeding in adult Chronic (Idopathic a (ITP) patients and prevention of coronary artery aneurysms 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/D:<br>• Primary Immunodeficiency:<br>16 years of age and older<br>• Chronic Idiopathic<br>Thrombocytopenic Purpura:<br>18 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 Octagam 5%: Indicated for (human) liquid solution for Octagam 10%: Indicated for intravenous administration in adults.   | r the treatment of primary humoral immunodeficiency. or the treatment of chronic immune thrombocytopenic purpura (ITP)  | Octagam 5%:     168 units     Octagam 10%:     280 units | • Octagam 5%:<br>336 units<br>• Octagam 10%:<br>560 units | Product Specific (see comments)       | N/A | N/A | Y | Y | Product specific age restrictions: • Octagam 5%: 6 years of age and older. • Octagam 10%: 18 years of age and older.  | 9/21/2018 |
| Immune<br>Globulins | J1569 | Injection, immune<br>globulin, (Gammagard<br>liquid), non-lyophilized,<br>(e.g. liquid), 500 mg                              | 500 mg | 1/1/2008 | Gammagard<br>Liquid            | intravenous and pediatric patients two year  | therapy for primary humoral immunodeficiency (PI) in adult and rs of age or older and as a maintenance therapy to improve muscle dult patients with Multifocal Motor Neuropathy (MMN).  | 672  | 672   | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific age restrictions: • Primary humoral immunodeficiency: 2 years and older • Multifocal motor neuropathy: 18 years and older   | 9/12/2018 |
| Drugs               | J1570 | Injection, ganciclovir<br>sodium, 500 mg   | 500 mg | 1/1/2000 | Cytovene®-IV                   | injection, for intravenous use acquired immunodeficience   | tis in immunocompromised individuals, including patients with<br>cy syndrome (AIDS).<br>se in adult transplant recipients at risk for CMV disease.  | 3  | 77  | 18 years                              | N/A | N/A | Υ | 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®                     | Acute Exposure to Blood     Perinatal Exposure of Infa     Sexual Exposure to HBsAg  | ants Born to HBsAg-positive Mothers   | 17   | 34  | N/A                                   | N/A | N/A | Υ | Y |   | 9/12/2018 |
| Immune<br>Globulins | J1572 | Injection, immune<br>globulin,<br>(Flebogamma/Flebogam<br>ma DIF), intravenous, non-<br>lyophilized (e.g. llquid),<br>500 mg | 500 mg | 1/1/2008 | Flebogamma®                    | immune globulin intravenous (human) for intravenous administration, 10% liquid preparation   |   | 280  | 560   | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific age restrictions: • Primary (inherited) Immunodeficiency (PI): None • Chronic Primary Immune Thrombocytopenia (ITP): In patients 2 years of age and older.  | 7/3/2018  |
| 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 intravenous (human) indicated for the preventio positive transplant patients   | on of hepatitis B virus recurrence after liver transplantation in HBsAgs (HepaGam B) – IV only.   | 129  | 1,290   | N/A                                   | N/A | N/A | У | Y |   | 7/3/2018  |
| Immune<br>Globulins | J1575 | Injection, immune<br>globulin/hyaluronidase,<br>(Hyqvia), 100 mg immune<br>globulin  | 100 mg | 1/1/2016 | HyQvia                         | 10% (numan) with recombinant human burduropidese solution for  | primary immunodeficiency (PI) in adults. and efficacy of chronic use of Recombinant Human Hyaluronidase in ablished in conditions other than PI.  | 840  | 840   | 18 years                              | N/A | N/A | Y | Y |   | 7/3/2018  |

| Drugs               | J1580 | Injection, garamycin, 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 | 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-Enterobacter-Serratia species, Citrobacter species, and Staphylococcus species (coagulase-positive and coagulase-negative).  I clinical studies have shown gentamicin to be effective in bacterial neonatal sepsis; bacterial septicemia; and serious bacterial infections of the central nervous system (meningitis), urinary tract, respiratory tract, gastrointestinal tract (including peritonitis), skin, bone and soft tissue (including burns).  Gentamicin suifate may be considered as initial therapy in suspected or confirmed gramnegative 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, if the decision to continue therapy with this drug should be based on the results of susceptibility ests, the severity of the infection, and the important additional concepts. If the causative organisms are resistant to gentamicin, other appropriate therapy should be instituted.  In serious infections when the causative organisms are unknown, gentamicin sulfate may be administered as initial therapy in conjunction with periodicing instituted in the periodicination of the organisms are suspected as etiologic agents, consideration should be given to using other suitable antimicrobial therapy in conjunction with gentamicin. Following identification of the organisms and its susceptibility, appropriate antibiotic therapy should then be continued.  Gentamicin sulfate has been used effectively in combination with carbenicillin for the treatment of life-threatening infections caused by Seudomonas aeruginosa. It has also been found effective when used in conjunction with a penicillin-type drug for the treatment of serious staphylococcal infections. While not the antibiotic of first c | 9   | 279 | N/A                                   | N/A | N/A | Y | Υ |  | 6/4/2019   |
|---------------------|-------|--|-------------|----------|----------------------|---|---|-----|-----|---------------------------------------|-----|-----|---|---|--|------------|
| Immune<br>Globulins | J1599 | Injection, immune<br>globulin, intravenous, non-<br>lyophilized (e.g. liquid),<br>not otherwise specified,<br>500 mg | 500 mg      | 1/1/2011 | Panzyga <sup>®</sup> | immune globulin intravenous,<br>human - ifas  | clinical indoment indicate its use. It may also be considered in mixed infections caused by   | 280 | 560 | Indication Specific<br>(see comments) | N/A | N/A | Y | Υ | Indication specific age restrictions:  • Primary humoral immunodeficiency (PI) - 2 years of age and older  • Chronic immune thrombocytopenia (ITP) - 18 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 intravenous use  | Indicated for treatment of adult patients with:  * Moderately to severely active Rheumatold Arthritis (RA) in combination with methotrexate.  * Active Posnial Arthritis (PA).  * Active Ankylosing Spondylitis (AS).   | 280 | 560 | 18 years                              | N/A | N/A | Y | Υ |  | 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:  • Treatment of severe hypoglycemia.  • Use as a diagnostic aid for use during radiologic examinations to temporarily inhibit movement of the gastrointestinal tract.  | 2   | 10  | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific age estrictions: • Treatment of severe hypoglycemia: None • Diagnostic aid: 18 years of 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                             | Indicated for:  • Prevention of nausea and/or vomiting associated with initial and repeat courses of emetogenic cancer therapy including high-dose cisplatin.  • Prevention and treatment of postoperative nausea and vomiting in adults.   | 14  | 294 | Indication Specific<br>(see comments) | N/A | N/A | Y | Y | Indication specific: • Chemotherapy Induced Nausea and Vomiting: 2 years of age and older • Postoperative Nausea and Vomiting: 18 years of age and older                       | 6/4/2019   |
| Drugs               | J1627 | Injection, granisetron, 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 antiemetics in adults for the prevention of acute and delayed<br>nausea and vomiting associated with initial and repeat courses of moderately emetogenic<br>chemotherapy (MEC) or anthracycline and cyclophosphamide (AC) combination chemotherapy<br>regimens  | 100 | 500 | 18 years                              | N/A | N/A | Y | Υ |  | 10/26/2018 |
| Drugs               | J1630 | Injection, haloperidol, up<br>to 5 mg  | up to 5 mg  | 1/1/2000 | Haldol®              | haloperidol lactate injection   | Indicated for use in the treatment of schizophrenia and for the control of tics and vocal utterances of Tourette's Disorder.  | 4   | 124 | 18 years                              | N/A | N/A | Y | Υ |  | 10/26/2018 |
| Drugs               | J1631 | Injection, haloperidol<br>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   |

|       |       |  |                 |          |                           |   | Indicated for amelioration of recurrent attacks of acute intermittent porphyria temporally related to the menstrual cycle in susceptible women, after initial carbohydrate therapy is known  |       |                                    |          |     |              |   |   |  |            |
|-------|-------|--|-----------------|----------|---------------------------|---|--|-------|------------------------------------|----------|-----|--------------|---|---|--|------------|
| Drugs | J1640 | Injection, hemin, 1 mg   | 1 mg            | 1/1/2006 | Panhematin*               | hemin for injection   | reasted to the menstrual cycle in succeptione women, after initial carromyorate therapy is known or suspected to be inadequate.  Limitations of Use:  - Before administering Panhematin, consider an appropriate period of carbohydrate loading (i.e., 400 g glucose/day for 1 to 2 days).  - 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 | Y |  | 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 sampling. Heparin lock flush solution may be used following initial placement of the device in the vein, after each injection of a 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          | Υ | Y |  | 10/26/2018 |
| Drugs | J1644 | Injection, heparin sodium,<br>per 1,000 units                      | per 1,000 units | 1/1/2000 | N/A                       | heparin sodium injection, for intravenous or subcutaneous use   |  | 60    | 465                                | N/A      | N/A | N/A          | Y | Y |  | 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  | Indicated for:  Prophylaxis of ischemic complications of unstable angina and non-Q-wave myocardial infarction.  Prophylaxis of deep vein thrombosis (DVT) in abdominal surgery, hip replacement surgery or medical patients with severely restricted mobility during acute illness.  | 14    | 372                                | 1 month  | N/A | N/A          | Y | 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                                 | Outpatient treatment of acute DVT without pulmonary embolism. Prophylaxis of ischemic complications of unstable angina and non-Q-wave myocardial infarction (MI). Treatment of acute ST-segment elevation myocardial infarction (STEMI) managed medically or with subsequent percutaneous coronary intervention (PCI).   | 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:  Prophylaxis of deep vein thrombosis (DVT) in patients undergoing hip fracture surgery (including extended prophylaxis), hip replacement surgery, knee replacement surgery, or abdominal surgery.  Treatment of DVT or acute pulmonary embolism (PE) when administered in conjunction with Coumadin.  | 20    | 520                                | 18 years | N/A | N/A          | Υ | 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 or al therapy is not feasible, and the strength, dosage form, and route of administration of the drug reasonably lend the preparation to the treatment of the condition, the intravenous or intramuscular use of Solu-Cortel is indicated as follows:  * Allergic States: Control of severe or incapacitating allergic conditions intractable to adequate trials of conventional treatment in asthma, atopic dermatitis, conditions intractable to adequate trials of conventional treatment in asthma, atopic dermatitis, ornate dermatitis, drug hypersensitivity reactions, perennial or seasonal allergic rhinitis, serum sickness, transfusion reactions.  * Dermatologic Diseases: Bullous dermatitis herpetiformis, exfoliative erythroderma, mycosis fungoides, pemphigus, severe erythema multiforme (Stevens-Johnson syndrome).  * Endocrine Disorders: Primary or secondary adrencortical insufficiency (hydrocortisone or cortisone is the drug of choice; synthetic analogs may be used in conjunction with mineralocorticolds where applicable; in infancy, mineralocorticold supplementation is of particular importance), congenital adrenal hypersplasis, hypercalcenian associated with cancer, | 60    | 155                                | N/A      | N/A | N/A          | Y | 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 preterm birth. 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) | 16 years | N/A | Females Only | Υ | Y | Product specific max dally units:  • Makena single- and multi-dose vials:  • Or or billing prior to 7/1/17: 250 units; assumption 1 unit = 1 mg  • For billing on or after 7/1/17: 25 units; assumption 1 unit = 10 mg  • Makena auto-injector: 27.5 units; assumption 1 unit = 10 | 9/21/2018  |

| 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:  • For the treatment of advanced adenocarcinoma of the uterine corpus (Stage III or IV)  • In the management of amenorrhea (primary and secondary) and abnormal uterine bleeding due to hormonal imbalance in the absence of organic pathology, such as submucous fibroids or uterine cancer  • As a test for endogenous estrogen production and for the production of secretory endometrium and desquamation.   | 100 | 3,100 | N/A       | N/A | Indicated only<br>for non-<br>pregnant<br>women. | Y | Y | 6/4/2019   |
|-------------|-------|--|------------|----------|-------------------------|--|---|-----|-------|-----------|-----|--|---|---|------------|
| Drugs       | J1740 | Injection, ibandronate sodium, 1 mg  | 1 mg       | 1/1/2007 | Boniva®                 | ibandronate injection, for intravenous use                                 | Indicated for the treatment of osteoporosis in postmenopausal women.  Limitations of Use:  Optimal duration of use has not been determined. For patients at low-risk form fracture, consider  | 3   | 3     | 40 years  | N/A | Females Only                                     | Υ | Y | 10/18/2018 |
| Drugs       | J1742 | Injection, ibutilide<br>fumarate, 1 mg   | 1 mg       | 1/1/2000 | Corvert®                | ibutilide fumarate injection,<br>for intravenous infusion                  | drug discontinuation after 3 to 5 years of use.<br>Indicated for the rapid conversion of atrial fibrillation or atrial flutter of recent onset to sinus<br>rhythm. Patients with atrial arrhythmias of longer duration are less likely to respond to ibutilide.<br>The effectiveness of ibutilide has not been determined in patients with arrhythmias of more than<br>90 days in duration.   | 2   | 10    | 18 years  | N/A | N/A  | Υ | 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 (Mucopolysaccharidosis II, MPS II). Elaprase has<br>been shown to improve walking capacity in patients 5 years and older. In patients 16 months to 5<br>years of age, no data are available to demonstrate improvement in disease-related symptoms or<br>long term clinical outcome; however, treatment with Elaprase has reduced spleen volume<br>similarly to that of adults and children 5 years of age and older. The safety and efficacy of<br>Elaprase have not been established in pediatric patients less than 16 months of age.  | 72  | 360   | 16 months | N/A | N/A  | Υ | 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  | Υ | Υ | 6/4/2019   |
| Biologicals | J1745 | Injection, infliximab,<br>excludes biosimilar, 10<br>mg                          | 10 mg      | 1/1/2017 | Remicade*               | infliximab lyophilized<br>concentrate for injection, fo<br>intravenous use | Indicated for:  Crohn's Disease: reducing signs and symptoms and inducing and maintaining clinical remission in adult patients with moderately to severely active disease who have had an inadequate response to conventional therapy and reducing the number of draining enterocutaneous and rectovaginal fistulas and maintaining fistula closure in adult patients with fistulizing disease. Pediatric Crohn's Disease: reducing signs and symptoms and inducing and maintaining clinical remission in pediatric patients with moderately to severely active disease who have had an inadequate response to conventional therapy. Ulcerative Colitis: reducing signs and symptoms, inducing and maintaining clinical remission in pediatric patients with moderately to severely active disease who have had an inadequate response to conventional therapy. Pediatric Ulcerative Colitis: reducing signs and symptoms and inducing and maintaining clinical remission in pediatric patients with moderately to severely active disease who have had an inadequate response to conventional therapy. Rheumatoid Arthritis in combination with methotrexate: reducing signs and symptoms. An knylosing Spondylistis: reducing signs and symptoms in patients with active disease. Anknylosing Spondylist: reducing signs and symptoms of active arthritis, inhibiting the progression of structural damage, and improving physical function. Plaque Poriosists: treatment of adult patients with chronic severe (i.e., extensive and/or disabling) plaque psoriasis who are candidates for systemic therapy and when other systemic therapies are medically less appropriate. | 140 | 140   | 6 years   | N/A | N/A  | Y | Y | 6/6/2019   |
| Biologicals | J1746 | Injection, ibalizumab-uiyk,<br>10 mg   | 10 mg      | 1/1/2019 | Trogarzo™               | ibalizumab-uiyk injection, fo<br>intravenous use                           | immunodeficiency virus type 1 (HIV-1) infection in heavily treatment-experienced adults with<br>multidrug resistant HIV-1 infection failing their current antiretroviral regimen.   | 200 | 360   | 18 years  | N/A | N/A  | Υ | 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  | Υ | Υ | 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  | Υ | Υ | 10/10/2018 |
| Drugs       | J1786 | Injection, imiglucerase, 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 disease that results in one or more of the following conditions:  a anemia thrombocytopenia bone disease 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 intramuscula<br>use             | r Indicated to reduce nausea and vomiting associated with surgical and diagnostic procedures.   | 1   | 5     | 2 years   | N/A | N/A  | Υ | 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 injection, solution                              | Indicated for supraventricular arrhythmias, ventricular tachycardias, tachyarrhythmias of digitalis intoxication and resistant tachyarrhythmias due to excessive catecholamine action during anesthesia.  | N/A | N/A   | 18 years  | N/A | N/A  | Υ | 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  | Υ | Υ | 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 sciencist (who to slow the<br>accumulation of physical disability and decrease the frequency of clinical exacerbations.  | 1   | 5     | 18 years  | N/A | N/A  | Υ | Y |            |
| Biologicals | J1830 | Injection, interferon beta-<br>1B, 0.25 mg                                       | 0.25 mg    | 1/1/2000 | Extavia®,<br>Betaseron® | interferon beta-1b for injection, for subcutaneous use                     | Indicated for the treatment of relapsing forms of multiple sclerosis to reduce the frequency of<br>clinical exacerbations. Patients with multiple sclerosis in whom efficacy has been demonstrated<br>include patients who have experienced a first clinical episode and have MRI features consistent<br>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*                | isavuconazonium sulfate for injection for intravenous administration                      | Indicated for use in the treatment of:  Invasive aspergillosis  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 (s 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 | Υ |  | 4/9/2019   |
| Drugs       | J1930 | Injection, lanreotide, 1<br>mg  | 1 mg        | 1/1/2009 | Somatuline*<br>Depot     | lanreotide injection, for subcutaneous use  | Indicated for the long-term treatment of arcromegalic patients who have had an inadequate response to or cannot be treated with surgery and/or radiotherapy, indicated for the treatment of adult patients with unresectable, well- or moderately-differentiated, locally advanced or metastatic gastoenteropancreatic neuroendocrine tumors (GEP-NETs) to improve progression-free survival. Indicated for the treatment of adults with carcinoid syndrome; when used, it reduces the frequency of short-acting somatostatin analogue rescue therapy.  | 120   | 240    | 18 years                              | N/A      | N/A          | Y | Υ |  | 10/26/2018 |
| Biologicals | J1931 | Injection, laronidase, 0.1<br>mg  | 0.1 mg      | 1/1/2005 | Aldurazyme®              | laronidase solution for intravenous infusion only   | Indicated for patients with Hurler and Hurler-Scheie forms of Mucopolysaccharidosis I (MPS I) and for patients with the Scheie form who have moderate to sewere symptoms. The risks and benefits of treating mildly affected patients with the Scheie form have not been established. Aldurazyme has been shown to improve pulmonary function and walking capacity. Aldurazyme has not been evaluated for effects on the central nervous system manifestations of the disorder.   | 812   | 4,060  | 6 months                              | N/A      | N/A          | Y | Υ |  | 4/10/2019  |
| Drugs       | J1940 | Injection, furosemide, up<br>to 20 mg                                   | up to 20 mg | 1/1/2000 | Lasix <sup>®</sup>       | furosemide injection  | Indicated for the treatment of edema associated with congestive heart failure, cirrhosis of the liver, and renal disease, including the nephrotic syndrome. Furosemide is particularly useful when an agent with greater diuretic potential is desired. As an adjunct in the treatment of pulmonary edema. The intravenous administration of furosemide is indicated when a rapid onset of diuresis is desired. If gastrointestinal absorption is impaired or oral medication is not practical for any reason, furosemide is indicated by the 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       | J1942 | Injection, aripiprazole<br>lauroxil, 1 mg                               | 1 mg        | 1/1/2017 | Aristada®                | aripiprazole lauroxil extended<br>release injectable suspension,<br>for intramuscular use | Indicated for the treatment of schizophrenia.   | 1,064 | 1,064  | 18 years                              | 65 years | N/A          | Υ | Y |  | 9/25/2018  |
| 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             | Lupron is indicated for:  • Management of endometriosis, including pain relief and reduction of endometriotic lesions.  • Preoperative hematologic improvement of patients with anemia caused by uterine leiomyomata when used concomitantly with iron therapy.   | 1     | 2      | 18 years                              | N/A      | Females Only | Υ | Υ |  | 6/4/2019   |
| Drugs       | J1953 | Injection, levetiracetam,   | 10 mg       | 1/1/2009 | Keppra*                  | levetiracetam injection, for intravenous use  | Indicated as an adjunctive therapy, as an alternative when oral administration is temporarily not feasible, for the treatment of:  • Partial onset seizures in patients 1 month of age and older with epilepsy  • Myoclonic seizures in patients 12 years of age and older with juvenile myoclonic epilepsy  • 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          | Y | Y | Indication specific age restrictions: Partial Oraste Seizures: 1 month of age and older • Myoclonic Seizures in Patients with Juvenile Myoclonic Epilepsy: 12 years of age and older • Primary Generalized Tonic-Clonic Seizures: 6 years of age | 10/10/2018 |
| Drugs       | J1955 | Injection, levocarnitine,<br>per 1 g                                    | 1 g         | 1/1/2000 | Carnitor®                | levocarnitine injection for intravenous use   | Indicated for:  • the acute and chronic treatment of patients with an inborn error of metabolism which results in secondary carmitine deficiency.  • the prevention and treatment of carmitine deficiency in patients with end stage renal disease who are undergoing dialysis.   | 42    | 1,302  | N/A                                   | N/A      | N/A          | Y | Υ |  | 4/10/2019  |
| Drugs       | 11956 | Injection, levofloxacin,<br>250 mg                                      | 250 mg      | 1/1/2000 | Levaquin®                | levofloxacin injection for intravenous use  | Indicated in adults (>=18 years of age) with infections caused by designated, susceptible bacteria:  Pneumonia: Nosocomial and Community Acquired  Skin and Skin Structure Infections: Complicated and Uncomplicated  Chronic bacterial prostatitis  Inhalational Anthrax, Post-Exposure  Plague  Urinary Tract Infections: Complicated and Uncomplicated  Acute Pyelonephritis  Acute Bacterial Exacerbation of Chronic Bronchitis  Acute Bacterial Sinusitis  Usage: To reduce the development of drug-resistant bacteria and maintain the effectiveness of Levaquin and other antibacterial drugs, Levaquin should be used only to treat or 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: Inhalation Anthrax (Post- Exposure): 6 months and older. Plague: 6 months and older. All other indications: 18 years of age and older.  | 6/5/2019   |

| Drugs | 11980 | Injection, byoscyamine<br>sulfate, up to 0.25 mg               | up to 0.25 mg | 1/1/2000 | Levsin*     | hyoscyamine sulfate injection   | Is effective as adjunctive therapy in the treatment of peptic ulcer.  In acute episodes, Levsin injection can be used to control gastric secretion, visceral spasm and hypermotility in spastic colities, spastic bladder, cystitis, pylorospasm, and associated abdominal cramps.  For use as adjunctive therapy in the treatment of irritable bowel syndrome (irritable colon, spastic colon, mucous colitis) and functional gastrointestinal disorders.  Also as adjunctive therapy in the treatment of neurogenic bladder and neurogenic bowel disturbances (including the splenic flexure syndrome and neurogenic colon).  Parenterally administered Levisin is also effective in reducing gastrointestinal motility to facilitate diagnostic procedures such as endoscopy or hypotonic duodenography.  Levisin may be used to reduce pain and hypersecretion in pancreatitis, incertain cases of partial heart block associated with vagal activity, and as an antidote for poisonic post patholinesterase agents.  Indicated as a pre-operative antimuscarinic to reduce salivary, tracheobronchial, and pharyngeal secretions, to reduce the volume and acidity of gastric secretions, and to block cardiac vagal inhibitory reflexes during induction of anesthesia and intubation.  May also be used intravenously to improve radiologic visibility of the kidneys.  Indicated along with morphine or other narcotics in symptomatic relief of biliary and renal colic. | 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  | Administered intravenously or intramuscularly, is specifically indicated in the acute management of ventricular arrhythmias such as those occurring in relation to acute myocardial infarction, or during cardiac manipulation, such as cardiac surgerior. Indicated for production of local or regional anesthesis by infiltration techniques such as percutaneous injection and intravenous regional anesthesis by peripheral nerve block techniques such as brachial plexus and intercostal and by central neural techniques such as lumbar and caudal epidural blocks, when the accepted procedures for these techniques as described in standard technioks are observed.   | 35  | 35    | N/A                       | N/A                       | N/A          | Υ | Y | 10/31/2018 |
| Drugs | J2010 | Injection, lincomycin HCl,<br>up to 300 mg                     | 300 mg        | 1/1/2000 | Lincocin®   | lincomycin hydrochloride injection, solution  | Indicated for the treatment of serious infections due to susceptible strains of streptococci,<br>pneumococci, and staphylococci. Its use should be reserved for penicillin-allergic patients or<br>other patients for whom, in the judgment of the physician, a penicillin is inappropriate.  | 27  | 837   | 1 month                   | N/A                       | N/A          | Υ | Y | 10/26/2018 |
| Drugs | J2020 | Injection, linezolid, 200 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: nosocomial pneumonia; community-acquired pneumonia, complicated skin and skin structure infections, including diabetic foot infections, without concomitant osteomyelitis, uncomplicated skin and skin structure infections, vancomycin-resistant Enterococcus faecium infections.  To reduce the development of drug-resistant bacteria and maintain the effectiveness of Zyvox formulations and other antibacterial 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          | Υ | Y | 10/26/2018 |
| Drugs | J2060 | Injection, lorazepam, 2  | 2 mg          | 1/1/2000 | Ativan®     | lorazepam injection for<br>intravenous or intramuscula<br>use                                     | Indicated:  • In adult patients for preanesthetic medication, producing sedation (sleepiness or drowsiness), relief of anxiety and a decreased ability to recall events related to the day of surgery.  • For treatment of status epilepticus.  | 4   | 124   | 18 years                  | N/A                       | N/A          | Υ | Y | 4/10/2019  |
| Drugs | J2150 | Injection, mannitol, 25% in 50 mL                              | 50 mL         | 1/1/2000 | N/A         | mannitol injection  | Indicated for the:  • Promotion of diuresis, in the prevention or treatment of the oliguric phase of acute renal failure before irreversible renal failure becomes established.  • Reduction of intracranial pressure and treatment of cerebral edema by reducing brain mass.  • Reduction of elevated intracoular pressure when the pressure cannot be lowered by other means.  • Promotion of urinary excretion of toxic substances.  | 23  | 713   | 12 years                  | N/A                       | N/A          | Υ | Y | 6/10/2019  |
| Drugs | J2175 | Injection, meperidine<br>hydrochloride, per 100<br>mg          | 100 mg        | 1/1/2000 | Demeroi™    | 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 to require an opioid analgesic and for which alternative treatments are inadequate.  Limitations of Use:  Because of the risks of addiction, abuse, and misuse with opioids, even at recommended doses, reserve for use in patients for whom alternative treatment options [e.g., non-opioid analgesics or opioid combination products] have not been tolerated, or are 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          | Υ | Y | 10/26/2018 |
| Drugs | J2186 | Injection, meropenem<br>and vaborbactam,<br>10mg/10mg (20mg)   | 1 vial        | 1/1/2019 | Vabomere™   | meropenem and vaborbactam for injection, for intravenous use                                      | Indicated for the treatment of patients 18 years and older with complicated urinary tract infections (cUT) including pyelonephritis caused by designated susceptible bacteria. To reduce the development of drug-resistant bacteria and maintain the effectiveness of Vabomere and other antibacterial drugs, Vabomere should be used only to treat or prevent infections that are proven or strongly suspected to be caused by susceptible bacteria.   | 600 | 8,400 | 18 years                  | N/A                       | N/A          | Υ | 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  • Following delivery of the placenta, for routine management of uterine atony, hemorrhage, and subinvolution of the uterus.  • 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 childbearing age | Females Only | Υ | Y | 10/31/2018 |
| -     | -     | +  | <del></del>   | -        | 1           | +   | + +   |     | -     | <del></del>               |                           | ·            |   | - | +          |

| Drugs | Injection, midazola hydrochloride, per 1   | ng Ing    | 1/1/2000 | N/A                                  | midazolam hydrochloride<br>injection for intravenous or<br>intramuscular use | Indicated:  Indicated:  Intramuscularly or intravenously for preoperative sedation/anxiolysis/amnesia  Intravenously as an agent for sedation/anxiolysis/amnesia prior to or during diagnostic, therapeutic or endoscopic procedures, such as bronchoscopy, gastroscopy, cystoscopy, coronary angiography, cardiac catheterization, oncology procedures, radiologic procedures, suture of lacerations and other procedures either alone or in combination with other CNS depressants; Intravenously for induction of general anesthesia, before administration of other enasthetic agents. With the use of narcotic premedication, induction of anesthesia can be attained within a relatively narrow dose range and in a short period of time. Intravenous midazolam can also be used as a component of intravenous supplementation of nitrous oxide and oxygen (balanced anesthesia);  Continuous intravenous infusion for sedation of intubated and mechanically ventilated patients as a component of anesthesia or during treatment in a critical care setting.  | 5   | 25  | NA       | N/A | N/A | Y | Y | 10/31/2018 |
|-------|--|-----------|----------|--------------------------------------|--|---|-----|-----|----------|-----|-----|---|---|------------|
| Drugs | J2260 lactate, per 5 mg  |           | 1/1/2000 | N/A                                  | milrinone lactate injection  | failure.  | 32  | 64  | 18 years | N/A | N/A | Y | Y | 6/6/2019   |
| Drugs | J2270 Injection, morphin<br>sulfate, up to 10 n                                      |           | 1/1/2000 | N/A                                  | morphine sulfate injection, u<br>to 10 mg                                    | Indicated for the management of pain severe enough to require an opioid analgesic and for which alternative treatments are inadequate.  Limitations of Use: Because of the risks of addiction, abuse, and misuse with opioids, even at recommended doses, reserve Morphine Sulfate Injection, for use in patients for whom alternative treatment options [e.g., non-opioid analgesics or opioid combination products]:  Have not been tolerated, or are not expected to be tolerated,  Have not provided adequate analgesia, or are not expected to provide adequate analgesia  Prior: Indicated for:  the relief of severe acute and chronic pain  to relieve preoperative apprehension  to facilitate anesthesia induction  the treatment of dyspnea associated with acute left ventricular failure and pulmonary edema  analgesia during labor  anxiety  anesthesia  to control postoperative pain.  | 17  | 527 | N/A      | N/A | N/A | Y | Y | 6/7/2019   |
| Drugs | Injection, morphir<br>sulfate, preservative<br>for epidural or intertu<br>use, 10 mg | ree 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 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.  Duramorph: indicated for:  o the 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.  o the epidural or intrathecal management of pain without attendant loss of motor, sensory, or sympathetic function.  O Limitation of Use: Duramorph is not for use in continuous microinfusion devices.  Prior to 10/30/2018: Morphine sulfate (preservative-free sterile solution) is a systemic narcotic analgesics. Morphine sulfate (preservative-free sterile solution) 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) administered epidurally or intrathecally, provides pain relief for extended periods without attendant loss of motor, sensory, or sympathetic function.  Infumorph* 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 | Y | Y | 6/10/2019  |
| Drugs | J2278 Injection, ziconotide microgram  | 1 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 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 | Injection, nalbuphi<br>hydrochloride, per 1t   |           | 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 inadequate. Also can be used as a supplement to balanced anesthesia, for pre/post operative analgesia and obstetrical analgesia during labor and delivery.  Limitations of Use: Because of the risks of addiction, abuse, and misuse with opioids, even at recommended doses, reserve nalbuphine injection for use in patients for whom alternative treatment options (e.g. non-opioid analgesis):  • have not been tolerated, or are not expected to be tolerated.  • have not provided adequate analgesia, or are not expected to provide adequate analgesia.  | 16  | 248 | 18 years | N/A | N/A | Y | Y | 10/26/2018 |
| Drugs | J2310 Injection, naloxor<br>hydrochloride, per 1                                     |           | 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 synthetic opioids including: propoxyphene, methadone, nalbuphine, butorphanol and pentazocine; It is also indicated for the diagnosis of suspected opioid tolerance or acute opioid overdose.   | N/A | N/A | N/A      | N/A | N/A | Υ | Y | 10/26/2018 |

| Drugs       | J2315 | Injection, naltrexone,<br>depot form, 1 mg   | 1 mg        | 1/1/2007 | VivitroI®                      | naltrexone for extended-<br>release injectable suspension                       | Indicated for the treatment of alcohol dependence in patients who are able to abstain from alcohol in an outpatient setting prior to initiation of treatment with Vivitrol. Patients should not be actively drinking at the time of initial Vivitrol administration.  Indicated for the prevention of relapse to opioid dependence, following opioid detoxification.  Vivitrol should be part of a comprehensive management program that includes psychosocial support.   | 380 | 760   | 18 years                              | N/A | N/A | Υ | Y |  | 10/26/2018 |
|-------------|-------|--|-------------|----------|--------------------------------|---|---|-----|-------|---------------------------------------|-----|-----|---|---|--|------------|
| Biologicals | J2323 | Injection, natalizumab, 1  | 1 mg        | 1/1/2008 | Tysabri*                       | natalizumab injection, for<br>intravenous use                                   | Indicated for treatment of: Multiple Sclerosis (MS)  * Tysabri is indicated as monotherapy for the treatment of patients with relapsing forms of multiple sclerosis. Tysabri increases the risk of PML. When initiating and continuing treatment with Tysabri, physicians should consider whether the expected benefit of Tysabri is sufficient to offset this risk. See important information regarding the risk of PML with Tysabri. Crofn's Disease (CD)  * Tysabri is indicated for inducing and maintaining clinical response and remission in adult patients with moderately to severely active Crohn's disease with evidence of inflammation who have had an inadequate response to, or are unable to tolerate, conventional CD therapies and inhibitors of TNF-α.  * In CD, Tysabri should not be used in combination with immunosuppressants or inhibitors of TNF-α. | 300 | 600   | 18 years                              | N/A | N/A | Υ | Y |  | 10/26/2018 |
| Drugs       | J2326 | Injection, nusinersen, 0.1 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 | Υ | 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      | octreotide acetate for injectable suspension                                    | Indicated for treatment in patients who have responded to and tolerated sandostatin injection subcutaneous injection for:  • Acromegaly  • Severe diarrhea/flushing episodes associated with metastatic carcinoid tumors  • Profuse watery diarrhea associated with VIP-secreting tumors  | 20  | 40    | 18 years                              | N/A | N/A | Υ | Y |  | 7/16/2018  |
| 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:  * To reduce blood levels of growth hormone and IGF-I (somatomedin C) in acromegaly patients who have had inadequate response to or cannot be treated with surgical resection, pituitary irradiation, and bromocriptine mesylate at maximally tolerated doses.  * For the symptomatic treatment of patients with metastatic carcinoid tumors where it suppresses or inhibits the severe diarrhea and flushing episodes asociated with the disease.  * For the treatment of the profuse watery diarrhea associated with VIP-secreting tumors. Sandostatin studies were not designed to show an effect on the size, rate of growth or development of metastases.   | 60  | 1,860 | 18 years                              | N/A | N/A | Y | Y |  | 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 chemotherapy.  | 1   | 27    | N/A                                   | N/A | N/A | Υ | Y |  | 5/30/2019  |
| Drugs       | J2358 | Injection, olanzapine, long-<br>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 | Υ | Y |  | 9/21/2018  |
| Drugs       | J2360 | Injection, orphenadrine citrate, up to 60 mg   | up to 60 mg | 1/1/2000 | Norflex*                       | orphenadrine citrate injection  | Indicated as an adjunct to rest, physical therapy, and other measures for the relief of discomfort associated with acute painful musculoskeletal conditions.  | 2   | 20    | 18 years                              | N/A | N/A | Υ | Υ |  | 7/16/2018  |
| Drugs       | J2370 | Injection, phenylephrine<br>HCl, up to 1 mL  | 1 mL        | 1/1/2000 | Vazculep®                      |   | 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 | Υ | Y |  | 5/21/2019  |
| Drugs       | J2400 | Injection, chloroprocaine<br>hydrochloride, per 30 mL  | 30 mL       | 1/1/2000 | Nesacaine®,<br>Nesacaine® -MPF | chloroprocaine HCI injection  | Multidose vial with preservatives: Indicated for the production of local anesthesia by infiltration<br>and peripheral nerve block.  Single dose vial without preservatives and without EDTA: Indicated for the production of local<br>anesthesia by infiltration, peripheral, and central nerve block, including lumbar and caudal<br>epidural block.   | 2   | 2     | N/A                                   | N/A | N/A | Υ | Y |  | 9/27/2018  |
| Drugs       | J2405 | Injection, ondansetron hydrochloride, per 1 mg   | 1 mg        | 1/1/2000 | Zofran®                        | ondansetron hydrochloride<br>injection, for intravenous or<br>intramuscular use | Indicated for the prevention of:  • Nausea and vomiting associated with initial and repeat courses of emetogenic cancer chemotherapy.  • Postoperative nausea and/or vomiting.  | 48  | 720   | Indication Specific<br>(see comments) | N/A | N/A | Υ | Y | Indication specific age restrictions: • Prevention of nausea and vomiting associated with emetogenic chemotherapy: 6 months of age and older • Prevention of postoperative nausea and vomiting: 1 month of age and older | 9/27/2018  |
| Drugs       | J2407 | Injection, oritavancin, 10<br>mg   | 10 mg       | 1/1/2016 | Orbactiv®                      | oritavancin for injection, for intravenous use                                  | Indicated for the treatment of adult patients with acute bacterial skin and skin structure infections caused or suspected to be caused by susceptible isolates of designated Gram-positive microorganisms.  | 120 | 120   | 18 years                              | N/A | N/A | Υ | Υ |  | 7/16/2018  |
| Drugs       | J2425 | Injection, palifermin, 50<br>micrograms  | 50 mcg      | 1/1/2006 | Kepivance*                     | palifermin injection, for<br>intravenous use                                    | Indicated to decrease the incidence and duration of severe oral mucositis in patients with hematologic malignancies receiving myelotoxic therapy in the setting of autologous hematopoietic stem cell support. Kepivance is indicated as supportive care for preparative regimens predicted to result in 3 WHO Grade 3 mucositis in the majority of patients. Limitations of Use:  - The safety and efficacy of Kepivance have not been established in patients with non-hematologic malignancies.  - Kepivance was not effective in decreasing the incidence of severe mucositis in patients with hematologic malignancies receiving myelotoxic therapy in the setting of allogeneic hematopoletic stem cell support.  - Kepivance is not recommended for use with melphalan 200 mg/m² as a conditioning regimen.  | 168 | 1,008 | 18 years                              | N/A | N/A | Y | Y |  | 4/9/2019   |

| Drugs       | J2426 | Injection, paliperidone<br>palmitate extended<br>release, 1 mg  | 1 mg                | 1/1/2011 | Invega Sustenna®          | paliperidone palmitate<br>extended-release injectable<br>suspension, for intramuscular<br>use | Indicated for:  Treatment of schizophrenia in adults.  Treatment of schizophrenia 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:  + Hypercalcemia of malignancy  - Paget's disease  Osteolytic bone metastases of breast cancer and osteolytic lesions of multiple myeloma   | 3   | 6     | 18 years | N/A | N/A | Y | Y | 9/21/2018 |
| Drugs       | J2440 | Injection, papaverine HCI,<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 infarction (coronary occlusion), angina pectoris, peripheral and pulmonary embolism, peripheral vascular disease in which there is a vascopsatic element, or certain cerebral angiospastic states; and visceral spasm, as in ureteral, biliary, or gastrointestinal colic.  | 16  | 80    | 18 years | N/A | N/A | Y | Y | 7/16/2018 |
| Drugs       | J2469 | Injection, palonosetron<br>HCI, 25 mcg  | 25 mcg              | 1/1/2005 | Aloxi**                   | palonosetron HCl injection<br>for intravenous use   | Indicated in adults for:  *Moderately emetogenic cancer chemotherapy prevention of acute and delayed nausea and vomiting associated with initial and repeat courses.  *Highly emetogenic cancer chemotherapy prevention of acute nausea and vomiting associated with initial and repeat courses.  *Prevention of postoperative nausea and vomiting (PONV) for up to 24 hours following surgery.  Efficacy beyond 24 hours has not been demonstrated.  Indicated in pediatric patients aged 1 month to less than 17 years for:  *Prevention of acute nausea and vomiting associated with initial and repeat courses of emetogenic cancer chemotherapy, including highly emetogenic cancer chemotherapy. | 10  | 50    | 1 month  | N/A | N/A | Υ | Y | 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<br>stage 5 chronic kidney disease (CKD).   | 30  | 420   | 18 years | N/A | N/A | Y | Υ | 7/16/2018 |
| Drugs       | J2502 | Injection, pasireotide 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:  Patients with acromegaly who have had an inadequate response to surgery and/or for whom surgery is not an option.  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®                  | 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 | Υ | 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:  - To decrease the incidence of infection, as manifested by febrile neutropenia, in patients with nonmyeloid malignancies receiving myelosuppressive anticancer drugs associated with a clinically significant incidence of febrile neutropenia.  - increase survival in patients acrutely exposed to myelosuppressive doses of radiation (Hematopoietic Subsyndrome of Acute Radiation Syndrome).  Limitations of Use:  - Neulasta is not indicated for the mobilization of peripheral blood progenitor cells for hematopoietic stem cell transplantation.  | 1   | 2     | N/A      | N/A | N/A | Y | Y | 6/6/2019  |
| 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 | Υ | Υ | 6/4/2019  |
| Drugs       | J2510 | Injection, penicillin G<br>procaine, aqueous, up to<br>600,000 units  | 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-G-susceptible microorganisms that are susceptible to the low and persistent serum levels common to this particular dosage form. Therapy should be guided by bacteriological studies (including susceptibility tests) and by clinical response. See package insert for list of infections and microorganisms.  | 4   | 52    | N/A      | N/A | N/A | Y | Y | 8/24/2018 |
| Drugs       | J2515 | Injection, pentobarbital<br>sodium, per 50 mg   | 50 mg               | 1/1/2000 | Nembutal*                 | pentobarbital sodium<br>injection, USP  | Indicated for use as:  - Sedatives  - Hypnotics, for the short-term treatment of insomnia, since they appear to lose their effectiveness for sleep induction and sleep maintenance after 2 weeks  - Preanesthetic:  - Anticonvulsant, in anesthetic doses, in the emergency control of certain acute convulsive episodes, e.g., those associated with status epilepticus, cholera, eclampsia, meningitis, tetanus, and toxic reactions to strychnine or local anesthetic   | 10  | 150   | N/A      | N/A | N/A | Y | Y | 8/24/2018 |
| Drugs       | J2540 | Injection, penicillin G<br>potassium, up to 600,000<br>units  | 600,000 units       | 1/1/2000 | Pfizerpen®                | penicillin G potassium for injection  | Indicated in the therapy of severe infections caused by penicillin G-susceptible microorganisms when rapid and high penicillin levels are required. Therapy should be guided by bacteriological studies (including susceptibility tests) and by clinical response. See package insert for full list of microorganisms.   | 40  | 1,240 | N/A      | N/A | N/A | Υ | Y | 8/24/2018 |
| Drugs       | 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:  Intra-abdominal infections  Skin and skin structure infections  Female pelvic infections  Community-acquired pneumonia  Nosocomial pneumonia  Usage  To reduce the development of drug-resistant bacteria and maintain the effectiveness of Zosyn and other antibacterial drugs, Zosyn should be used only to treat or prevent infections that are proven or strongly suspected to be caused by bacteria.   | 16  | 224   | 2 months | N/A | N/A | Y | Y | 4/10/2019 |
| Drugs       | 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 the following criteria:  • a history of one or more episodes of PJP  • a peripheral CD4+ (T4 helper/inducer) lymphocyte count less than or equal to 200/mm3  | 1   | 2     | 16 years | N/A | N/A | Y | Y | 8/24/2018 |

| Drugs | 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 than two days.  Limitations of Use:  - Efficacy based on clinical trials in which the predominant influenza virus type was influenza A; a limited number of subjects infected with influenza B virus were enrolled.  - Consider available information on influenza drug susceptibility patterns and treatment effects when deciding whether to use.  - Efficacy could not be established in patients with serious influenza requiring hospitalization.  | 600 | 600 | 2 years                               | N/A | N/A          | Y | Y |   | 8/24/2018 |
|-------|-------|---|----------------|----------|-----------|--|--|-----|-----|---------------------------------------|-----|--------------|---|---|---|-----------|
| Drugs | J2550 | Injection, promethazine<br>HCI, up to 50 mg       | up to 50 mg    | 1/1/2000 | Phenergan | promethazine hydrochloride<br>injection                                | Indicated for the following conditions:  - Amelioration of allergic reactions to blood or plasma.  - In anaphylaxis as an adjunct to epinephrine and other standard measures after the acute symptoms have been controlled.  - For other uncomplicated allergic conditions of the immediate type when oral therapy is impossible or contraindicated.  - For sedation and relief of apprehension and to produce light sleep from which the patient can be easily aroused.  - Active treatment of motion sickness.  - Prevention and control of nausea and vomitting associated with certain types of anesthesia and surgery.  - As an adjunct to analgesics for the control of postoperative pain.  - Precoperative, postoperative, and obstetric (during labor) sedation.  - Intravenously in special surgical situations, such as repeated bronchoscopy, ophthalmic surgery, and poor-risk patients with reduced amounts of meperidine or other narcotic analgesic as an adjunct to anesthesia and analgesis.   | 3   | 93  | 2 years                               | N/A | N/A          | Y | Y |   | 8/24/2018 |
| Drugs | J2560 | Injection, phenobarbital sodium, up to 120 mg     | up to 120 mg   | 1/1/2000 | N/A       | phenobarbital sodium<br>injection                                      | Indicated for use as:  • Sedative. Sedation is obtainable within an hour, and in adequate dosage, the duration of action is more than six hours, included in the more common conditions in which the sedative action of this class of drugs is desired are anxiety-tension states, hyperthyroidism, essential hypertension, nausea and vomitting of functional origin, motion sickness, acute labyrinthitis, pylorospasm in infants, chorea and cardiac failure. Phenoabribital is also a useful adjunct in treatment of hemorrhage from the respiratory or gastrointestinal tract. Phenobarbital controls anxiety, decreases muscular activity and lessens nervous exitability in hyperthyroid patients. However, thyrotoxic individuals occasionally react poorly to barbiturates.  • Hypnotic, for the short-term treatment of insomnia, since it appears to lose its effectiveness for sleep induction and sleep maintenance after 2 weeks.  • Preanesthetic.  • Long-term anticonvulsant, (phenobarbital, mephobarbital and metharbital) for the treatment of generalized tonic-clonic and cortical focal seizures. And, in the emergency control of certain acute convulsive episodes, e.g., those associated with status epigletius, cholera, clampsia, cerebral hemorrhage, meninglits, tetanus, and toxic reactions to strychnine or local anesthetics. Phenoabriblas oddium may be administered intravenously, it may require 15 or more minutes before reaching peak concentrations in the brain. Therefore, injecting phenobarbital sodium may be administered intravenously, it may require 15 or more minutes before reaching peak concentrations in the brain. Therefore, injecting phenobarbital sodium and the convulsions stop may cause the brain level to exceed that required to control the convulsions and lead to severe barbiturate-induced depression. | N/A | N/A | N/A                                   | N/A | N/A          | Y | Y |   | 8/29/2018 |
| Drugs | 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 peripheral blood for collection and subsequent autologous transplantation in patients with non-Hodgkin's lymphoma and multiple myeloma.   | 40  | 160 | 18 years                              | N/A | N/A          | Υ | Υ |   | 6/6/2019  |
| Drugs | J2590 | Injection, oxytocin, up to 10 units               | up to 10 units | 1/1/2000 | Pitocin®  | oxytocin injection, USP<br>synthetic                                   | Indicated for:  • Antepartum  - The initiation or improvement of uterine contractions, where there is desirable and considered suitable for reasons of fetal or maternal concern, in order to achieve vaginal delivery.  - Induction of labor in patients with a medical indication for the initiation of labor.  - Stimulation or reinforcement of labor, as in selected cases of uterine inertia.  - Adjunctive therapy in the management of incomplete or inevitable abortion.  • Postpartum  - Produce uterine contractions during the third stage of labor and to control postpartum bleeding or hemorrhage.  | 6   | 12  | N/A                                   | N/A | Females Only | Υ | Y |   | 7/16/2018 |
| Drugs | J2597 | Injection, desmopressin 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 classic von Willebrand's disease (Type 1) with factor VIIII levels greater than 5%, as an antidiuretic replacement therapy in the management of central (cranial) diabetes insipidus and for the management of the temporary polyuria and polydipsia following head trauma or surgery int he pitultary region. DDAVP is ineffective for the treatment of nephrogenic diabetes insipidus.   | 44  | 660 | Indication Specific<br>(see comments) | N/A | N/A          | Y | Y | Indication specific: Hemophilia A and von Willebrand's Disease: 3 months of age and older Diabetes Insipidus: 12 years of 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 as submucous fibroids or uterine cancer.  | 1   | 2   | 18 years                              | N/A | Females Only | Υ | Υ |   | 6/6/2019  |
| Drugs | J2680 | Injection, fluphenazine<br>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). Fluphenazine decanoate has not been shown effective in the management of behavioral complications in patients with mental retardation.  | 4   | 8   | 12 years                              | N/A | N/A          | Y | Y |   | 6/4/2019  |

| Drugs               | J2690 | Injection, procainamide   | up to 1 g         | 1/1/2000 | N/A  | procainamide hydrochloride   | Indicated for the treatment of documented ventricular arrhythmias, such as sustained ventricular tachycardia, that, in the judgement of the physician, are life-threatening. Because of the proarrhythmic effects of procainamide, its use with lesser arrhythmias is generally not   | 7     | 7       | 18 years                              | N/A | N/A                       | Y | Y | 6/6/2019  |
|---------------------|-------|---|-------------------|----------|--|--|---|-------|---------|---------------------------------------|-----|---------------------------|---|---|---|
|                     |       | HCl, up to 1 g  |                   |          |  | injection, solution  | recommended. Treatment of patients with asymptomatic ventricular premature contractions should be avoided.  |       |         | ,                                     |     |                           |   |   |   |
| 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<br>use | Indicated for the treatment of infections caused by penicillinase-producing staphylococci which have demonstrated susceptibility to the drug. Cultures and susceptibility tests should be performed initially to determine the causative organism and their susceptibility to the drug.   | 24    | 744     | N/A                                   | N/A | N/A                       | Y | Υ | 9/21/2018   |
| Drugs               | J2710 | Injection, neostigmine<br>methylsulfate, up to 0.5<br>mg                              | up to 0.5 mg      | 1/1/2000 | Bloxiverz*                                 | neostigmine methylsulfate injection, for intravenous use                                       |   | 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                       | Υ | Υ | 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 thrombosis and purpura fulminans.   | 5,040 | 105,840 | N/A                                   | N/A | N/A                       | Y | Y | 6/4/2019  |
| Drugs               | J2730 | Injection, pralidoxime<br>chloride, up to 1 g   | up to 1 g         | 1/1/2000 | Protopam®                                  | pralidoxime chloride for injection   | Indicated as an antidote:  In the treatment of poisoning caused by those pesticides and chemicals of the organophosphate class which have anticholinesterase activity.  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®                                  | phentolamine mesylate<br>injection, powder, lyophilized<br>for suspension                      | Indicated for:  The prevention or control of hypertensive episodes that may occur in a patient with pheochromocytoma as a result of stress or manipulation during preoperative preparation and surgical excision.  The prevention or treatment of dermal necrosis and sloughing following intravenous administration or extravasation of norepinephrine.  The diagnosis of pheochromocytoma by the phentolamine mesylate for injection blocking test.   | 12    | 372     | N/A                                   | N/A | N/A                       | Y | Y | 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:  • The relief of symptoms associated with acute and recurrent diabetic gastric stasis  • The prophylaxis of vomiting associated with emetagenic cancer chemotherapy  • The prophylaxis of postoperative nausea and vomiting in those circumstances where nasogastric suction is undesirable  • Facilitating small bowel intubation in adults and pediatric patients in whom the tube does not pass the pylorus with conventions maneuvers  • Stimulating gastric emptying and intestinal transit of barium in cases where delayed emptying interferes with radiological examination of the stomach and/or small intestine  | 112   | 560     | Indication Specific<br>(see comments) | N/A | N/A                       | Y | Υ | Indication specific: • Facilitating Small Bowel Intubation: 19 years of age and older • All other indications: None |
| Biologicals         | J2778 | Injection, ranibizumab,<br>0.1 mg   | 0.1 mg            | 1/1/2008 | Lucentis®                                  | ranibizumab injection for<br>intravitreal injection  | Indicated for the treatment of patients with:  • Neovascular (Net) Age-Related Macular Degeneration (AMD)  • Macular Edema Following Retinal Vein Occlusion (RVO)  • Diabetic Macular Edema (DME)  • Diabetic Retinopathy (DR)  • Myopic Choroidal Neovascularization (mCNV)  | 10    | 20      | 18 years                              | N/A | N/A                       | Y | Y | 10/31/2018  |
| Drugs               | J2780 | Injection, ranitidine<br>hydrochloride, 25 mg   | 25 mg             | 1/1/2000 | Zantac*                                    | ranitidine hydrochloride injection   | Indicated in some hospitalized patients with pathological hypersecretory conditions or<br>intractable duodend ulcers, or as natternative to the oral dosage form for short-term use in<br>patients who are unable to take oral medication.  | 16    | 496     | 1 month                               | N/A | N/A                       | Υ | Υ | 6/7/2019  |
| Biologicals         | J2783 | Injection, rasburicase, 0.5<br>mg   | 0.5 mg            | 1/1/2004 | Elitek*                                    | rasburicase for injection, for intravenous use   | expected to result in tumor lysis and subsequent elevation or plasma unic acid.   | 56    | 280     | N/A                                   | N/A | N/A                       | Y | Υ | 6/4/2019  |
|                     |       |   |                   |          |  |  | Limitation of Use: Elitek is indicated for a single course of treatment.  Indicated for add-on maintenance treatment of patients with severe asthma aged 18 years and   |       |         |                                       |     |                           |   |   |   |
| Biologicals         | J2786 | Injection, reslizumab, 1<br>mg  | 1 mg              | 1/1/2017 | Cinqair*                                   | reslizumab injection, for intravenous use  | Idea and the description of the | 420   | 840     | 18 years                              | N/A | N/A                       | Y | Υ | 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 induced abortion of up to 12 weeks' gestation provided the following criteria are met:  1. The mother must be Rho(D) negative and must not already be sensitized to the Rho(D) antigen.  2. The father is not known to be Rho(D) negative.  3. Gestation is not more than 12 weeks at termination.  **See package insert for full usage criteria.**  MICRhoGAN: For use in preventing Rh immunization.  *Pregnancy and other obstetrical conditions in Rh-negative women unless the father or baby are conclusively Rh-negative, e.g. delivery of an Rh-positive baby irrespective of the ABO groups of the mother and baby, any antepartum fetal-maternal hemorrhage (suspected or proven), actual or threatened pregnancy loss at any stage of gestation and ectopic pregnancy.  * 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 | Y | 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® S/D<br>Full Dose,<br>RhoGAM®     | rho(d) immune globulin<br>(human), full dose   | Indicated for use in preventing Rh immunization:  In pregnancy and other obstetrical conditions (see full prescribing information).  In any Rh-negative person after incompatible transfusion of Rh-positive blood or blood products.   | 1     | 1       | N/A                                   | N/A | N/A                       | Y | Υ | 7/3/2018  |

|                     |       |  |             |          |                      |  | Indicated for:<br>Suppression of Rhesus (Rh) Isoimmunization in:   |       |       |                                       |     |     |   |   |   |           |
|---------------------|-------|--|-------------|----------|----------------------|--|--|-------|-------|---------------------------------------|-----|-----|---|---|---|-----------|
| 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 | Pregnancy and obstetric conditions in non-sensitized, Rho (D)-negative women with an Rh- incompatible pregnancy, including: Rodutine antepartum and postpartum Rh prophylaxis -Rh prophylaxis in obstetric complications or invasive procedures -Incompatible transfusions in Rho (D)-negative individuals transfused with blood components containing Rho (D)-positive red blood cells (RBCs). Immune Thrombocytopenic Purpura (ITP) - Raising platelet counts in Rho (D)-positive, non-splenectomized adults with chronic ITP.   | 350   | 350   | 18 years                              | N/A | N/A | Y | Υ |   | 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: Immune Thrombocytopenic Purpura (ITP) Raising platelet counts in Rho(D) positive, non-splenectomized:  - Children with chronic or acute ITP,  - Adults with chronic ITP and  - Children and adults with ITP secondary to HIV infection  Suppression of Rhesus (Rh) Isoimmunization  - Pregnancy and other obstetric conditions in non-sensitized, Rho(D)-negative women with an Rh- incompatible pregnancy including:  O Routine antepartum and postpartum Rh prophylaxis  O Rh prophylaxis in obstetric complications or invasive procedures  - Incompatible transfusions in Rho(D)-negative individuals transfused with blood components containing Rho(D)-positive red blood cells (RBCs). | 1,500 | 1,500 | N/A                                   | N/A | N/A | Y | Υ |   | 9/12/2018 |
| Biologicals         | J2793 | Injection, rilonacept, 1 mg  | 1 mg        | 1/1/2010 | Arcalyst*            | rilonacept injection for<br>subcutaneous use   | Indicated for the treatment of patients with Cryopyrin-Associated Periodic Syndromes (CAPS),<br>including Familial Cold Autoinflammatory Syndrome (FACS) and Muckle-Wells Syndrome (MWS)<br>in adults and children 12 years of age and older.  | 320   | 960   | 12 years                              | N/A | N/A | Υ | Υ |   | 4/10/2019 |
| Drugs               | J2794 | Injection, risperidone,<br>long acting, 0.5 mg   | 0.5 mg      | 1/1/2005 | Risperdal<br>Consta® | risperidone long-acting injection  | Indicated:  • for the treatment of schizophrenia.  • 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 |   | 6/10/2019 |
| 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.  Surgical Anesthesia: epidural block for surgery including cesarean section; major nerve block; local infiltration.  Acute pain management: epidural continuous infusion 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 patients with chronic immune thrombocytopenia (ITP) who have had an insufficient response to corticosteroids, immunoglobuling, or spienectiomy.  Limitations of Use:  Nplate is not indicated for the treatment of thrombocytopenia due to myelodysplastic syndrome (MDS) or any cause of thrombocytopenia other than chronic ITP.  Nplate should be used only in patients with ITP whose degree of thrombocytopenia and clinical condition increases the risk for bleeding.  Nplate should not be used in an attempt to normalize platelet counts.   | 140   | 700   | 18 years                              | N/A | N/A | Y | Υ |   | 8/29/2018 |
| Drugs               | J2797 | Injection, rolapitant, 0.5<br>mg   | 0.5 mg      | 1/1/2019 | Varubi*              | rolapitant injection, emulsion<br>for intravenous use  | Indicated in combination with other antiemetic agents in adults for the prevention of delayed nausea and vomitting associated with initial and repeat courses of emetogenic cancer chemotherapy, including, but not limited to, highly emetogenic chemotherapy.  | 333   | 999   | 18 years                              | N/A | N/A | Y | Υ |   | 8/29/2018 |
| Drugs               | J2800 | Injection,<br>methocarbamol, up to 10<br>mL  | up to 10 mL | 1/1/2000 | Robaxin®             | methocarbamol injection for intravenous or intramuscular use   | Indicated as an adjunct to rest, physical therapy, and other measures for the relief of discomfort associated with acute, painful, musculoskeletal conditions; supportive therapy in tetanus.  | 12    | 54    | Indication Specific<br>(see comments) | N/A | N/A | Y | Υ | 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®             | 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:  * To shorten time to neutrophil recovery and to reduce the incidence of severe and life- threatening infections and infections resulting in death following induction chemotherapy in adult patients 55 years and older with acute myeloid leukemia (AML).  * For the mobilization of hematopoietic progenitor cells into peripheral blood for collection by leukapheresis and autologous transplantation in adults.  * For the acceleration of myeloid reconstitution following autologous bone marrow or peripheral blood progenitor cell transplantation in adult and pediatric patients 2 years of age and older.  * For the acceleration of myeloid reconstitution following allogeneit bone marrow transplantation in adult and pediatric patients 2 years of age and older.  * For treatment of delayed neutrophil recovery or graft failure after autologous or allogeneit bone marrow transplantation in adult and pediatric patients 2 years of age and older.  * To increase survival in adult and pediatric patients from birth to 17 years of age acutely exposed to myelosuppressive doses of radiation (Hematopoietic Syndrome of Acute Radiation Syndrome [H-AAS]).  | 20  | 620 | Indication Specific<br>(see comments) | Indication<br>Specific (see<br>comments) | N/A | ٧ | Y | Indication specific age restrictions:   To shorten time to neutrophil recovery and to reduce the incidence of severe and life-threatening infections and infections resulting in death following induction chemotherapy in adult patients 55 years and older with acute myeloid leukemia (AML).  For the mobilization of hematopoletic progenitor cells into peripheral blood for collection by leukaphresis and autologous transplantation in adults.  For the acceleration of myeloid reconstitution following autologous bone marrow or peripheral blood progenitor cell transplantation in adult and pediatric patients 2 years of age and older.  For the acceleration of myeloid reconstitution following autologous bone marrow or peripheral blood progenitor cell transplantation in adult and pediatric patients 2 years of age and older.  For the acceleration of myeloid reconstitution following autopaneir hone.  | 8/29/2018  |
|-------------|-------|--|-------------|----------|--------------|--|--|-----|-----|---------------------------------------|--|-----|---|---|--|------------|
| Biologicals | J2840 | Injection, sebelipase alfa,<br>1 mg  | 1 mg        | 1/1/2017 | Kanuma®      | sebelipase alfa injection, for<br>intravenous use                                    | Indicated for the treatment of patients with a diagnosis of Lysosomal Acid Lipase (LAL) deficiency.  | 140 | 420 | 1 month                               | N/A                                      | N/A | Y | Y | The Control of the Co | 6/4/2019   |
| Biologicals | J2860 | Injection, siltuximab, 10 mg   | 10 mg       | 1/1/2016 | Sylvant®     | siltuximab for injection, for intravenous use  | Indicated for treatment of patients with multicentric Castleman's disease (MCD) who are human immunodeficiency virus (HIV) negative and human herpesvirus-8 (HHV-8) negative.  Limitations of Use: Sylvant was not studied in patients with MCD who are HIV positive or HHV-8 positive because Sylvant did not bind to virally produced IL-6 in a non-clinical study.  | 200 | 400 | 18 years                              | N/A                                      | N/A | Υ | Y |  | 6/7/2019   |
| Drugs       | J2916 | Injection, sodium ferric<br>gluconate complex in<br>sucrose injection, 12.5 mg | 12.5 mg     | 1/1/2003 | Ferrlecit®   | sodium ferric gluconate<br>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<br>chronic kidney disease receiving 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 therapy is not feasible, and the strength, dosage form, and route of administration of the drug reasonably lend the preparation to the treatment of the condition, the intravenous or intramuscular use of Solu-Medrol is indicated as follows:  * Allergic states: Control of severe or incapacitating allergic conditions intractable to adequate trials of conventional treatment in asthma, atopic dermatitis, contact dermatitis, drug hypersensitivity reactions, perennial or seasonal allergic rhinitis, serum sickness, transfusion reactions.  * Dermatologic diseases: Bullous dermatitis herpetformis, exfoliative erythroderma, mycosis fungoides, pemphigus, severe extythema multiforme (Stevens-Johnson syndrome).  * Endocrine disorders: Primary or secondary adrenocortical insufficiency (hydrocortisone or cortisone is the drug of choice; synthetic analogs may be used in conjunction with mineralocorticolis where applicable; in infancy, mineralocorticol supplementation is of particular importance), congenital adrenal hyperplasia, hypercalcemia associated with cancer, nonsupurative thyroiditis.  * Gastrointestinal diseases: To tide the patient over a critical period of the disease in regional enteritis (systemic therapy) and ulcerative colitis.  * Hematologic disorders: Acquired (autoimmune) hemolytic anemia, congenital (erythroid) hypoplastic anemia (blamond eliactfan anemia), idiopatitic thrombocytopenic purpura in adults (intravenous administration only intramuscular administration is contraindicatedly, pur erd cell caplasia, selected cases of secondary thrombocytopenic.  * Miscellaneous: Trichinosis with neurologic or myocardial involvement, tuberculous meningitis with subarachnoid block or impending block when used concurrently with appropriate antituberculous chemotherapy.  * Neconsus System: Acute exaccerbations of multiple sclerosis; cerebral edema associated with primary or metastatic brait futuror, or craniotomy.  * Ophthalmic diseases: Sympathetic ophthalmia, uveitis and ocular inflammatory conditions invere | 3   | 93  | N/A                                   | N/A                                      | N/A | Y | Y |  | 10/26/2018 |

| Drugs       | 12930 | Injection,<br>methylprednisolone<br>sodium succinate, 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  |   | 24  | 360   | N/A      | N/A | N/A | Y | Y | 10/31/2018 |
|-------------|-------|---|--------------|----------|-------------------------------------|--|---|-----|-------|----------|-----|-----|---|---|------------|
| Biologicals | J2993 | Injection, reteplase, 18.1<br>mg                                      | 18.1 mg      | 1/1/2002 | Retavase®                           | reteplase for injection, for intravenous use                           | Indicated for treatment of acute ST-elevation myocardial infarction (STEMI) to reduce the risk of death and heart failure.  Limitation of Use: The risk of stroke may outweigh the benefit produced by thrombolytic therapy in patients whose STEMI puts 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 recombinant, 1 mg                                | 1 mg         | 1/1/2001 | Activase®,<br>Cathflo®<br>Activase® | alteplase for injection, for intravenous use                           | Cathflo Activase: Indicated for the restoration of function to central venous access devices as assessed by the ability to withdraw blood.  Activase: Indicated for the treatment of:  • Acute Ischemic Stroke (AIS)  • Acute Ischemic Stroke (AIS)  • Acute Myocardial Infarction (AMI) to reduce mortality and incidence of heart failure.  Limitation of use in AMI: The risk of stroke may be greater than the benefit in patients at low risk of death from cardiac causes.  • Acute Maysove Pulmonary Embolism (PE) for lysis.  | 100 | 3,100 | 18 years | N/A | N/A | Y | Y | 9/25/2018  |
| Drugs       | J3000 | 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 specific conditions of Mycobacterium tuberculosis and Non-tuberculosis infections. Mycobacterium tuberculosis and other sensitive non tuberculosis pathogens including Pasteurella pestis (plague): Francisella tularensis (fularemia); Brucella; Calymmatobacterium granulomatis (donovanosis, granuloma inguinale); H. ducreyi (chancroid); H. influenzae (in respiratory, endocardial, and meningeal infections, concomitantly with another antibacterial agent); E. coli, Proteus, A erogenes, K. pneumoniae, and Enterooccus faecalis in urinary tract infections; Streptococcus viridans; Enterococcus faecalis (in endocardial infections, concomitantly with penicillin); Gram-negative 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:  * analgesic action of short duration during the anesthetic periods, premedication, induction and maintenance, and in the immediate postoperative period (recovery room) as the need arises.  * use as an oploid analgesic supplement in general or regional anesthesia.  * administration with a neuroleptic as an anesthetic premedication, for the induction of anesthesia and as an adjunct in the maintenance of general and regional anesthesia.  * use as an anesthetic agent with oxygen in selected high risk patients, such as those undergoing open heart surgery or certain 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 | Imitrex*                            | sumatriptan succinate<br>injection, for subcutaneous<br>use            | Indicated for:  • Acute treatment of migraine with or without aura in adults  • Acute treatment of cluster headache in adults  Limitations of Use:  Use only if a clear diagnosis of migraine or cluster headache has been established. Not indicated for the prophylacitic therapy of migraine or cluster headache attacks.  | 2   | 8     | 18 years | N/A | N/A | Y | Y | 9/21/2018  |
| Biologicals | J3060 | Injection, taliglucerase<br>alfa, 10 units                            | 10 units     | 1/1/2014 | Elelyso®                            | taliglucerase alfa for 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 | Υ | 6/4/2019   |
| Drugs       | J3090 | Injection, tedizolid phosphate, 1 mg                                  | 1 mg         | 1/1/2016 | Sivextro®                           | tedizolid phosphate for 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 | Υ | Υ | 8/24/2018  |
| Drugs       | J3095 | Injection, telavancin, 10<br>mg                                       | 10 mg        | 1/1/2011 | Vibativ*                            | telavancin for injection, for<br>intravenous use                       | Indicated for the treatment of the following infections in adult patients caused by designated susceptible bacteria:  - Complicated skin and skin structure infections (cSSSI)  - Hospital-acquired and ventilator-associated bacterial pneumonia (HABP/VABP) caused by susceptible solates of Staphylococcus 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, solution                                | Indicated for the prevention and reversal of bronchospasm in patients 12 years of age and older with asthma and reversible 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 primary hypogonadism (congenital or acquired), hypogonadotropic hypogonadism (congenital or acquired), and delayed puberty. Testosterone Enanthate injection may be used secondarily in women with advancing inoperable metastatic (skeletal) mammary 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 testosterone:<br>primary hypogonadism (congenital or acquired) or hypogonadotropic hypogonadism (congenital or acquired).  Limitations of Use:  * Safety and efficacy of Aveed in men with "age-related hypogonadism" have not been established.  * 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 | Y | Y | 9/21/2018 |
| Drugs | J3230 | Injection, chlorpromazine<br>HCI, 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 surgery, for acute intermittent porphyria; as an adjunct in the treatment of tetanus; to control the manifestations of the main type of manic-depressive illness; for relief of intractable hiccups; for the treatment of severe behavioral problems in children (1 to 12 years of age) marked by combativeness and/or explosive hyperexcitable behavior (out of proportion to immediate provocations), and in the short-term treatment of hyperactive children who show excessive motor activity with accompanying conduct disorders consisting of some or all of the following symptoms: impulsivity, difficulty sustaining attention, aggressivity, mood lability, and poor 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 in<br>1.1 mg vial | 0.9 mg       | 1/1/2003 | Thyrogen* | thyrotropin alfa for injection,<br>for intramuscular injection |  | 1   | 2     | 18 years | N/A | N/A        | Y | Y | 9/21/2018 |
| Drugs | J3243 | Injection, tigecycline, 1<br>mg                                     | 1 mg         | 1/1/2007 | Tygacil®  | tigecycline for injection, for intravenous use                 | Indicated in patients 18 years of age and older for:  • Complicated skin and skin structure infections  • Complicated intra-abdominal infections  • Community-acquired bacterial pneumonia  Limitations of Use: Tygacii is not indicated for treatment of diabetic foot infection or hospital- acquired pneumonia, including ventilator-associated pneumonia.  | 150 | 1,450 | 18 years | N/A | N/A        | Y | Y | 9/21/2018 |
| Drugs | J3250 | Injection,<br>trimethobenzamide HCI,<br>up to 200 mg                | 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 | 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 diseases listed below:  • Septicemia in the neonate, child, and adult caused by P. aeruginosa, E. coli, and Klebsiella sp.  • Lower respiratory tract infections caused by P. aeruginosa, Klebsiella sp, Enterobacter sp, Serratia sp, E. coli, and S. aureus (spenidilinase and non-penicillimase-producing strains)  • Serious central nervous system infections (meningitis) caused by susceptible organisms  • Intra-abdominal infections, including peritonitis, caused by E. coli, Klebsiella sp, and Enterobacter sp  • 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 | Y | 9/12/2018 |

| Biologicals | J3262 | Injection, tocilizumab, 1<br>mg   | 1 mg    | 1/1/2011 | Actemra*                            | tocilizumab injection, for<br>intravenous use  | Indicated for the treatment of:  • Adult patients with moderately to severely active rheumatoid arthritis (RA) who have had an imadequate response to one or more Disease-Modifying Anti-Rheumatic Drugs (DMARDs).  • Active systemic juvenile idiopathic arthritis in patients two years of age and older.  • Active polyaricular juvenile idiopathic arthritis in patients two years of age and older.  • Adult and pediatric patients 2 years of age and older with chimeric antigen receptor (CAR) T cell-induced severe or life-threatening cytokine release syndrome.  | 2,400 | 3,200 | Indication Specific<br>(see comments) | N/A | N/A        | Y | Y | Indication specific age restrictions:  • Active systemic Juvenile idiopathic arthritis: 2 years of age and older  • Active polyarticular juvenile idiopathic arthritis: 2 years of age and older  • Sever or Ilfe-threatening CAR T cell-induced cytokine release syndrome: 2 years of age and older  • Moderately to severely active rheumatoid arthritis who have had an inadequate response to one or more DMARDs: 18 years of age and older | 4/9/2019   |
|-------------|-------|---|---------|----------|-------------------------------------|--|--|-------|-------|---------------------------------------|-----|------------|---|---|---|------------|
| Drugs       | J3285 | Injection, treprostinil, 1<br>mg  | 1 mg    | 1/1/2006 | Remodulin*                          |  | Indicated for treatment of pulmonary arterial hypertension (PAH) (WHO Group 1) to diminish<br>symptoms associated with exercise and to reduce the rate of clinical deterioration in patients<br>requiring transition from epoprostenol.  | 59    | 1,813 | 17 years                              | N/A | N/A        | Υ | 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:  • Treatment of the following ophthalmic diseases: sympathetic ophthalmia, temporal arteritis, uveitis, and ocular inflammatory conditions unresponsive to topical corticosteroids.  • Visualization during vitrectomy  | 8     | 8     | N/A                                   | N/A | N/A        | Υ | Υ |   | 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*         | triamcinolone acetonide<br>injectable suspension, for<br>intra-articular or intralesiona<br>use only | Kenalog-40 Indicated for intramuscular use as follows:  * Allergic states: Control of severe or incapacitating allergic conditions intractable to adequate trials of conventional treatment in asthma, atopic dermatitis, contact dermatitis, tong hypersensitivity reactions, perennial or seasonal allergic frinitis; serum sickness, transfusion reactions.  * Dermatologic diseases: Bullous dermatitis herpetiformis, exfoliative erythroderma, mycosis fungoides, pemphigus, severe erythema multiforme (Stevens-Johnson syndrome).  * Endocrine disorders: Primary or secondary ademocortical 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 importance), congenital adrenal hyperplasia, hypercalemia associated with cancer, nonsuppurative thyroiditis.  * Gastrointestinal diseases: To tide the patient over a critical period of the disease in regional enteritis and ulcerative colitis.  * Hematologic disorders: Acquired (autoimmune) hemolytic anemia, Diamond-Blackfan anemia, pure red cell aplasia, selected cases of secondary thrombocytopenia.  * Miscellaneous: Trichinosis with neurologic or myocardial involvement, tuberculous meningitis with subarachnoid block or impending block when used with appropriate antituberculous chemotherapy.  * Neoplastic diseases: For the palliative management of leukemias and lymphomas.  * Nervous system: Acute exacerbations of multiple sclerosis; cerebral edema associated with primary or metastatic brain tumor or craniotomy.  * Ophthalmic diseases: Senditive diversions of multiple sclerosis; cerebral edema associated with primary or metastatic brain tumor or craniotomy.  * Ophthalmic diseases: Senditive diversions or miscerbroids.  * Renal diseases: To induce diversions of mortini indiopathic nephrotic syndrome or that due to lupus erythematosus. | 10    | 150   | N/A                                   | N/A | N/A        | Y | Y |   | 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-articula<br>use      |  | 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 | Υ | Υ |   | 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 suspension<br>for intramuscular 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: Adult patients with:  *Moderate to severe plaque psoriasis (Ps) who are candidates for phototherapy or systemic therapy.  *Active psoriatic arthritis (PsA), alone or in combination with methotrexate.  *Moderately to severely active Crohn's disease (CD) who have  -Failed or were intolerant to treatment with immunomodulators or corticosteroids, but never failed a tumor necrosis fator (TNF) blocker or  -Failed or were intolerant to treatment with one or more TNF blockers.  Adolescent patients (12 years or older) with:  *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 | Y | Indication specific age restrictions.  • Moderate to severe plaque psoriasis, who are candidates for phototherapy or systemic therapy: 12 years of age and older  •All other indications: 18 years of age and older   | 10/31/2018 |
| Biologicals | J3358 | Ustekinumab, for intravenous injection, 1 mg  | 1 mg    | 1/1/2018 | Stelara® for intravenous use        | ustekinumab injection, for intravenous use   | Treatment of adult patients with moderately to severely active Crohn's disease (CD) who have:  • failed or were intolerant to treatment with immunomodulators or corticosteroids, but never failed a tumor necrosis factor (TNF) blocker.  • failed or were intolerant to treatment with one or more TNF blockers.   | 520   | 520   | 18 years                              | N/A | N/A        | Υ | Y |   | 10/31/2018 |

| Drugs          | J3360 | Injection, diazepam, up to<br>5 mg  | up to 5 mg  | 1/1/2000 | N/A       | diazepam injection  | Indicated:  For the management of anxiety disorders or for the short-term relief of the symptoms of anxiety. Anxiety or tension associated with the stress of everyday life usually does not require treatment with an anxielydic.  In acute alcohol withdrawal, diazepam may be useful in the symptomatic relief of acute algration, tremor, impending or acute delirium tremens and hallucinosis.  As an adjunct prior to endoscopic procedures if apprehension, anxiety or acute stress reactions are present, and to diminish the patient's recall of the procedures.  As a useful adjunct for the relief of skeletal muscle spasm due to reflex spasm to local pathology (such as inflammation of the muscles or joints, or secondary to traumal; spasticity caused by upper motor neuron disorders (such as cerebral palsy and paraplegia); athetosis; stiff-man syndrome; and tetanus.  As a useful adjunct in status epilepticus and severe recurrent convulsive seizures.  As a useful premedication (the I.M. route is preferred) for relief of anxiety and tension in patients who are to undergo surgical procedures. Intravenously, prior to cardioversion for the relief of anxiety and tension and to diminish the patient's recall of the procedure.  | 16  | 250   | 31 days    | N/A        | N/A | Y | 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) staphylococci. It is indicated for penicillin-allergic patients, for patients who cannot receive or who have failed to respond to other drugs, including the penicillins or cephalosporins, and for infections caused by vancomycin-susceptible organisms that are resistant to other antimicrobial drugs. Vancomycin hydrochloride for injection is indicated for initial therapy when methicillin-resistant staphylococci are suspected, but after susceptibility data are available, therapy should be adjusted accordingly.  To reduce the development of drug-resistant bacteria and maintain the effectiveness of vancomycin hydrochloride for injection IVSP and other antibacterial drugs, vancomycin hydrochloride for injection sould be used only to treat or prevent infections that are proven or strongly suspected to be caused by susceptible bacteria. When culture and susceptibility information are available, they should be considered in selecting or modifying antibacterial therapy. In the absence of such data, local epidemiology and susceptibility patterns may contribute to the empiric selection of therapy.  See package insert for list of infections. | 4   | 124   | N/A        | N/A        | N/A | Y | Y | 6/8/2019   |
| Biologicals    | J3380 | Injection, vedolizumab, 1   | 1 mg        | 1/1/2016 | Entyvio*  | vedolizumab for injection, for intravenous use                          | Indicated for:  Adult patients with moderately to severely active ulcerative collitis (UC) who have had an inadequate response with, lost response to, or were intolerant to a tumor necrosis factor (TNF) blocker or immunomodulators; or had an inadequate response with, were intolerant to, or demonstrated dependence on corticosteroids:  O Inducing and maintaining clinical response O Inducing and maintaining clinical remission O Improving endoscopic appearance of the mucosa O Achieving corticosteroid-free remission  Adult patients with moderately to severely active crohn's disease (CD) who have had an inadequate response with, lost response to, or were intolerant to a TNF blocker or immunomodulators; or had an inadequate response with, were intolerant to, or demonstrated dependence on corticosteroids.  O Achieving clinical response O Achieving clinical remission  Achieving circicateroid-free remission  | 300 | 600   | 18 years   | N/A        | N/A | Y | Y | 7/16/2018  |
| Biologicals    | J3385 | Injection, velaglucerase alfa, 100 units  | 100 units   | 1/1/2011 | VPRIV®    | velaglucerase alfa for 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 | Υ | 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<br>neovascularization due to age-related macular degeneration, pathologic myopia or presumed<br>ocular histoglasmosis.   | 150 | 150   | 18 years   | N/A        | N/A | Y | Υ | 9/12/2018  |
| Biologicals    | J3397 | Injection, vestronidase<br>alfa-vjbk, 1 mg                                      | 1 mg        | 1/1/2019 | Mepsevii™ | vestronidase alfa-vjbk<br>injection, for intravenous use                | Indicated in pediatric and adult patients for the treatment of Mucopolysaccharidosis VII (MPS VII, SIJ syndrome). Limitations of Use: The effect of Mepsevii on the central nervous system manifestations of MPS VII has not been determined.   | 560 | 1,680 | N/A        | N/A        | N/A | Y | Y | 7/16/2018  |
| Drugs<br>Drugs | J3410 | Injection, hydroxyzine  Injection, vitamin B-12 cyanocobalamin, up to 1,000 mcg | up to 25 mg | 1/1/2000 | Vistaril® | hydroxyzine hydrochloride  cyanocobalamin injection, USP (vitamin B-12) | The total management of anxiety, tension, and psychomotor agitation in conditions of Indicated for vitamin B12 deficiencies due to malabsorption which may be associated with the following conditions:  Addisonian (pernicious) anemia  Addisonian (pernicious) anemia  Adsatrointestian pathology, dysfunction, or surgery, including gluten enteropathy or sprue, small bowel bacteria overgrowth, total or partial gastrectomy  Fish tapeworm infestation  Malignancy of pancreas or bowel  Folic acid deficiency  Cyanocobalamin injection is also suitable for the vitamin B12 absorption test (Schilling test).  | 1   | 10    | N/A<br>N/A | N/A<br>N/A | N/A | Y | Y | 9/27/2018  |

| Drugs | 13430 | Injection, phytonadione<br>(vitamin K) per 1 mg   | 1 mg                       | 1/1/2000 | Mephyton*                                      | phytonadione injectable<br>emulsion, USP  | Indicated in the following coagulation disorders which are due to faulty formation of factors II, VII, IX and X when caused by vitamin K deficiency or interference with vitamin K activity:  • anticoagulant-induced prothrombin deficiency caused by coumarin or indanedione derivatives;  • prophylaxis and therapy of hemorrhagic disease of the newborn;  • hypoprothrombinemia due to antibacterial therapy;  • hypoprothrombinemia due to antibacterial therapy;  • hypoprothrombinemia usecondary to factors limiting absorption or synthesis of vitamin K, e.g., obstructive jaundice, billiary fistula, sprue, ulcerative colitis, celiac disease, intestinal resection, cystic fibrosis of the pancreas, and regional entertitis;  • other drug-induced hypoprothrombinemia where it is definitely shown that the result is due to interference with vitamin K metabolism, e.g., salicylates.  | 50    | 50      | N/A      | N/A | N/A | Y | Y | 6/5/2019   |
|-------|-------|---|----------------------------|----------|--|---|---|-------|---------|----------|-----|-----|---|---|------------|
| Drugs | J3470 | Injection, hyaluronidase,<br>up to 150 units      | up to 150 units            | 1/1/2000 | Amphadase*                                     | hyaluronidase injection   | Indicated as an adjuvant:  • In subcutaneous fluid administration for achieving hydration.  • To increase absorption and dispersion of other injected drugs.  • In subcutaneous urography for improving resorption of radiopaque agents.  | 3     | 93      | N/A      | N/A | N/A | Y | Y | 10/26/2018 |
| Drugs | J3473 | Injection, hyaluronidase, 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 peribulba<br>use, for soft tissue use, and<br>for subcutaneous use | Indicated as an:  • Adjuvant to increase the dispersion and absorption of other injected drugs.  • In subcutaneous fluid administration for achieving hydration.  In subcutaneous uncoration to improving responsible of radiopague agents  | 450   | 2,250   | N/A      | N/A | N/A | Y | Y | 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 similar to those observed in hypocalcemia. In such cases, the serum magnesium level is usually below the lower limit of normal (1.5 to 2.5 mEq/L) and the serum calcium level is normal (4.3 to 5.3 mEq/L) or elevated. Magnesium sulfate injection is also indicated for the prevention and control of seizures in pre-eclampsia and eclampsia, respectively and for use in hyperalimentation.  | 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 | Υ | Y | 8/24/2018  |
| Drugs | 13489 | 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:  • Treatment and prevention of postmenopausal osteoporosis  • Treatment on increase bone mass in men with osteoporosis  • Treatment and prevention of glucocorticoid-induced osteoporosis  • Treatment and prevention of glucocorticoid-induced osteoporosis  • Treatment of Paget's disease of bone in men and women  Limitations of Use: Optimal duration of use has not been determined. For patients at low-risk for fracture, consider drug discontinuation after 3 to 5 years of use.  Zometa is indicated for the treatment of:  • Hypercalcemia of malignancy,  • Patients with multiple myeloma and patients with documented bone metastases from solid tumors, in conjunction with standard antineoplastic therapy. Prostate cancer should have progressed after treatment with at least one hormonal therapy.  Limitations of Use: The safety and efficacy of Zometa has not been established for use in hyperparathyroidism or non-tumor-related hyperaciaemia. | 5     | 20      | 18 years | N/A | N/A | Y | Y | 9/21/2018  |
| Drugs | J3490 | Unclassified drugs                                | 1 mg                       | 1/1/2000 | Depacon®                                       | valproate sodium, for intravenous injection   | Indicated as an intravenous alternative in patients in whom oral administration of valproate<br>products is temporarily not feasible in the following conditions:  • Monotherapy and adjunctive therapy of complex partial seizures and simple and complex<br>absence seizures; adjunctive therapy in patients with multiple seizure types that include absence<br>seizures.  | 8,500 | 119,000 | 2 years  | N/A | N/A | Y | Y | 5/30/2019  |
| Drugs | J3490 | Unclassified drugs                                | 1 mg                       | 1/1/2000 | Aristada Initio™                               |   | 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 | Υ | Y | 7/26/2018  |
| 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 the following:   | 600   | 8,400   | 18 years | N/A | N/A | Y | Y | 10/4/2018  |
| Drugs | J3490 | Unclassified drugs                                | 1 mg                       | 1/1/2000 | Cleviprex*                                     | 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   |   | 819   | 819     | 18 years | N/A | N/A | Y | Y | 7/16/2018  |
| Drugs | J3490 | Unclassified drugs                                | 1 mg                       | 1/1/2000 | Khapzory™                                      | levoleucovorin for injection,<br>for intravenous use  | Indicated for:  • Rescue after high-dose methotrexate therapy in patients with osteosarcoma.  • Diminishing the toxicity associated with overdosage of folic acid antagonists or impaired methotrexate elimination.  • Treatment of patients with metastatic colorectal cancer in combination with fluorouracil. Limitations of Use:  Khapzory is not indicated for the treatment of pernicious anemia and megaloblastic anemia secondary to lack of vitamin B12 because of the risk of progression of neurologic manifestations despite hematologic remission.   | 1,200 | 2,400   | N/A      | N/A | N/A | Y | Y | 2/1/2019   |
| Drugs | J3490 | Unclassified drugs                                | 1 mg lidocaine USP<br>base | 1/1/2000 | Lidocaine<br>(various topical<br>formulations) | lidocaine (various topical formulations)  | Indicated for production of anesthesia of accessible mucous membranes of the oropharynx. It is also useful as an anesthetic lubricant for intubation and for the temporary relief of pain associated with minor burns, including sunburn, abrasions of the skin, and insect bites.  | 1,000 | 31,000  | N/A      | N/A | N/A | Y | Y | 10/26/2018 |
| Drugs | J3490 | Unclassified drugs                                | 1 mg                       | 1/1/2000 | Nuzyra™  | omadacycline for injection,<br>for intravenous use  | Indicated for the treatment of adult patients with the following infections caused by susceptible microorganisms:  • Community-acquired bacterial pneumonia (CABP)  • Acute bacterial skin and skin structure infections (ABSSSI)  To reduce the development of drug-resistant bacteria and maintain the effectiveness of Nuzyra and other antibacterial drugs. Nuzyra should be used only to treat or prevent infections that are proven or strongly suspected to be caused by susceptible bacteria.   | 200   | 1,500   | 18 years | N/A | N/A | Y | Y | 2/28/2019  |

| Drugs | J3490 | Unclassified drugs | 50 mL            | 1/1/2000 | N/A         | 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 circulation of blood, cardiac arrest and severe primary lactic acidosis.  * The treatment of certain drug intoxications, including barbiturates (where dissociation of the barbiturate-protein complex is desired), in poisoning by salicylates or methyl alcohol and in hemolytic reactions requiring alkalinization of the urine to diminish nephrotoxicity of blood pigments.  solution  * Treatment of metabolic acidosis should, if possible, be superimposed on measures designed to control the basic cause of the acidosis — e.g., insulin in uncomplicated diabetes, blood volume restoration in shock, but since an appreciable time interval may elapses before all of the ancillary effects are brought about, bicarbonate therapy is indicated to minimize risks inherent to the acidosis itself.  * Vigorous bicarbonate therapy is required in any form of metabolic acidosis where a rapid increase in plasma total CO content is crucial — e.g., cardiac arrest, circulatory insufficiency due to shock or severe dehydration, and in severe primary lactic acidosis or severe diabetic acidosis. | 13    | 403    | N/A      | N/A | N/A          | Υ | Y | 10/31/2018 |
|-------|-------|--------------------|------------------|----------|-------------|--|-------|--------|----------|-----|--------------|---|---|------------|
| Drugs | J3490 | Unclassified drugs | 1 mg             | 1/1/2000 | Onpattro™   | patisiran lipid complex Indicated for the treatment of the polyneuropathy of hereditary transthyretin-mediated injection, for intravenous use amyloidosis in adults.   | 30    | 60     | 18 years | N/A | N/A          | Υ | Υ | 9/25/2018  |
| Drugs | J3490 | Unclassified drugs | 1 mg             | 1/1/2000 | Perseris™   | risperidone for extended-<br>release injectable suspension,<br>lor subcutaneous use  | 120   | 240    | 18 years | N/A | N/A          | Υ | Y | 12/28/2018 |
| Drugs | J3490 | Unclassified drugs | 1 vial           | 1/1/2000 | Prevymis™   | letermovir injection, for indicated for prophylaxis of cytomegalovirus (CMV) infection and disease in adult CMV-seropositive recipients [8+] of an allogeneic hematopoletic stem cell transplant (HSCT).   | 1     | 31     | 18 years | N/A | N/A          | Υ | Υ | 10/26/2018 |
| Drugs | J3490 | Unclassified drugs | 1 implant        | 1/1/2000 | Sinuva™     | mometasone furoate sinus indicated for the treatment of nasal polyps in patients greater than or equal to 18 years of age who have had ethmoid sinus surgery.  | 2     | 2      | 18 years | N/A | N/A          | Υ | Υ | 10/26/2018 |
| Drugs | J3490 | Unclassified drugs | 1 device (28 mg) | 1/1/2000 | Spravato™   | Indicated, in conjunction with an oral antidepressant, for the treatment of treatment-resistant depression (TRD) in adults.  esketamine nasal spray  Limitations of Use: Spravato is not approved as an anesthetic agent. The safety and effectiveness   | 3     | 26     | 18 years | N/A | N/A          | Υ | Υ | 5/14/2019  |
| Drugs | J3490 | Unclassified drugs | 1 mg             | 1/1/2000 | Xerava™     | of Spravato as an an esthetic agent have not been established.  Indicated for the treatment of complicated intra-abdominal infections in patients 18 years of age array acycline for injection, for intravenous use  Limitations of Use  Xerava is not indicated for the treatment of complicated urinary tract infections (cUTI).   | 500   | 7,000  | 18 years | N/A | N/A          | Y | Y | 12/28/2018 |
| Drugs | J3490 | Unclassified drugs | 1 mg             | 1/1/2000 | Zemdri™     | Indicated for the treatment of patients 18 years of age or older with complicated urinary tract infections (cUTI) including pyelonephritis.     As only limited clinical safety and efficacy data are available, reserve Zemdri for use in patients who have limited or no alternative treatment options.     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.  | 2,100 | 14,700 | 18 years | N/A | N/A          | Y | Y | 9/25/2018  |
| Drugs | J3490 | Unclassified drugs | 1 mL             | 1/4/2000 | Provayblue* | methylene blue injection, for intravenous use Indicated for the treatment of pediatric and adult patients with acquired methemoglobinemia. This indication is approved under accelerated approval. Continued approval for this indication may be contingent upon verification of clinical benefit in subsequent trials.  | 60    | 60     | N/A      | N/A | N/A          | Υ | Y | 6/6/2019   |
| Drugs | J3490 | Unclassified drugs | 10 mg            | 1/1/2000 | Vimpat®     | lacosamide injection, for intravenous use older). 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          | Υ | Y | 6/8/2019   |
| Drugs | 13490 | Unclassified drugs | 10 mg            | 1/4/2000 | Revatio*    | Indicated for the treatment of pulmonary arterial hypertension (PAH) (WHO Group I) in adults to improve exercise ability and delay clinical worsening. Studies establishing effectiveness were short-term (12 to 16 weeks), and included predominately patients with NYHA Functional Class II-III symptoms. Etiologies were idiopathic (71%) or associated with connective tissue disease (25%). Limitation of Use: Adding sildenafil to bosentan therapy does not result in any beneficial effect on exercise capacity.   | 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, for intravenous use indicated for the treatment of adult and pediatric patients with hepatic veno-occlusive disease (VOD), also known as sinusoidal obstruction syndrome (SOS), with renal or pulmonary dysfunction following hematopoletic stem-cell transplantation (HSCT).  | 45    | 1,395  | 18 years | N/A | N/A          | Υ | Y | 6/10/2019  |
| Drugs | J3490 | Unclassified drugs | 1 mg             | 1/1/2000 | Noxafil*    | Indicated for the prophylaxis of invasive Aspergillus and Candida infections in patients who are at posaconazole injection, for high risk of developing these infections due to being severely immunocompromised, such as HSCT recipients with GVHD or those with hematologic malignancies with prolonged neutropenia from chemotherapy.   | 600   | 9,600  | 18 years | N/A | N/A          | Y | Y | 8/24/2018  |
| Drugs | J3490 | Unclassified drugs | 1 vial (4 mL)    | 1/1/2000 | Omidria®    | phenylephrine and ketorolac intraocular solution, 3% Indicated for maintaining pupil size by preventing intraoperative miosis and reducing //0.3%, for addition to ocular pain. irrigating solution  | 1     | 2      | N/A      | N/A | N/A          | Y | Y | 8/24/2018  |
| Drugs | J3490 | Unclassified drugs | 250 mg           | 1/1/2000 | N/A         | 17 alpha hydroxyprogesterone caproate (17P) *Compounded*  This drug is an investigational compounded drug with no current FDA approved indications.  | 1     | 5      | N/A      | N/A | Females Only | Υ | Y | 5/22/2019  |

|             |       |  |                            | ,        | ,          |  |                |        |   |     | , ,          |   | , |            |
|-------------|-------|--|----------------------------|----------|------------|--|----------------|--------|---|-----|--------------|---|---|------------|
| Biologicals | J3590 | Unclassified biologics   | 1 mg                       | 1/1/2002 | Andexxa®   | coagulation factor Xa (recombinant), inactivated-<br>zho yophilized powder for solution for intravenous injection injection  | on is 1,800    | 1,800  | 18 years                                  | N/A | N/A          | Υ | Y | 6/13/2019  |
| Biologicals | J3590 | Unclassified biologics   | 11 mg (1 kit)              | 1/1/2002 | Cablivi*   | caplacizumab-yhdp for injection, for intravenous or subcutaneous use a lindicated for the treatment of adult patients with acquired thrombotic thrombocytopenic purpura (aTTP), in combination with plasma exchange and immunosuppressive therapy.   | 2              | 32     | 18 years                                  | N/A | N/A          | Υ | Υ | 3/26/2019  |
| Biologicals | J3590 | Unclassified biologics   | 150 mg                     | 1/1/2002 | Cosentyx*  | Indicated for the treatment of: - Moderate to severe plaque psoriasis in adult patients who are candidates for systemic ther or phototherapy Adults with active psoriatic arthritis (PsA) Adults with active ankylosing spondylitis (AS).  | 2              | 10     | 18 years                                  | N/A | N/A          | Υ | Y | 6/4/2019   |
| Biologicals | J3590 | Unclassified biologics   | · 105 mg (1 prefilled syri | 1/1/2002 | Evenity™   | romosozumab-aqqg injection, for subcutaneous use  Indicated for the treatment of osteoporosis in postmenopausal women at high risk for fract defined as a history of osteoporotic fracture, or multiple risk factors for fracture; or patient have failed or are intolerant to other available osteoporosis therapy.  Limitations of Use: Limit duration of use to 12 monthly doses. If osteoporosis therapy remai warranted, continued therapy with an anti-resorptive agent should be considered                                   | who 2          | 4      | Not for use in<br>premenopausal<br>women. | N/A | Females Only | Υ | Y | 6/3/2019   |
| Biologicals | J3590 | Unclassified biologics   | 110                        | 1/1/2002 | Kcentra®   | prothrombin complex concentrate (human) for indicated for the urgent reversal of acquired coagulation factor deficiency induced by Vitam intravenous use, yophilized powder for reconstitution urgent surgery/invasive procedure.  |                | 5,000  | 18 years                                  | N/A | N/A          | Υ | Y | 7/2/2018   |
| Biologicals | J3590 | Unclassified biologics   | 0.5 mL                     | 1/1/2002 | Plegridy™  | peginterferon beta-1a injection, for subcutaneous injection indicated for the treatment of patients with relapsing forms of multiple sclerosis.  | 1              | 3      | 18 years                                  | N/A | N/A          | Υ | Y | 6/6/2019   |
| Biologicals | J3590 | Unclassified biologics   | 50 mL                      | 1/1/2002 | Praxbind*  | indicated in patients treated with Pradaxa when reversal of the anticoagulant effects of dialigatran is needed:  • For emergency surgery/urgent procedures  • In life-threatening or uncontrolled bleeding   | 4              | 4      | 18 years                                  | N/A | N/A          | Υ | Y | 7/16/2018  |
| Biologicals | J3590 | Unclassified biologics   | 1 IU                       | 1/1/2002 | Recothrom* | thrombin topical<br>(recombinant) hophilized<br>powder for solution - for<br>topical use only  |                | 80,000 | 1 month                                   | N/A | N/A          | Υ | Y | 4/10/2019  |
| Biologicals | J3590 | Unclassified biologics   | 1 mg                       | 1/1/2002 | Revcovi™   | elapegademase-lvlr injection, for intramuscular use Indicated for the treatment of adenosine deaminase severe combined immune deficiency (// SCID) in pediatric and adult patients.  | DA- 28.8       | 288    | N/A                                       | N/A | N/A          | Υ | Y | 12/28/2018 |
| Biologicals | J3590 | Unclassified biologics   | 1 mg                       | 1/1/2002 | Strensiq®  | asfotase alfa injection, for subcutaneous use  Treatment of patients with perinatal/infantile-onset and juvenile-onset hypophosphatasia (Handal Parker)  | PP). 420       | 5,460  | N/A                                       | N/A | N/A          | Υ | Y | 4/10/2019  |
| Biologicals | J3590 | Unclassified biologics   | 1 mcg                      | 1/1/2002 | Sylatron™  | peginterferon alfa-2b for injection, for subcutaneous within 84 days of definitive surgical resection including complete lymphadenectomy.  | ent 900        | 4,500  | 18 years                                  | N/A | N/A          | Y | Υ | 6/7/2019   |
| Biologicals | J3590 | Unclassified biologics   | 1 mg                       | 1/1/2002 | Ultomiris™ | ravulizumab-cwvz injection, for intravenous use Indicated for the treatment of adult patients with paroxysmal nocturnal hemoglobinuria (PN   | н). 3,600      | 6,600  | 18 years                                  | N/A | N/A          | Υ | Y | 2/1/2019   |
| Drugs       | J7030 | Infusion, normal saline solution, 1,000 cc                     | 1,000 cc                   | 1/1/2000 | N/A        | normal saline solution 1,000 Indicated as a source of water and electrolytes. Also indicated for use as a priming solution cc (sodium chloride injection) hemodialysis procedures.   | n N/A          | N/A    | N/A                                       | N/A | N/A          | Υ | Υ | 10/26/2018 |
| Drugs       | J7040 | Infusion, normal saline solution, sterile                      | 500 mL                     | 1/1/2000 | N/A        | normal saline solution 500 cc   Indicated as a source of water and electrolytes. Also indicated for use as a priming solution hemodialysis procedures.   | n 6            | 186    | N/A                                       | N/A | N/A          | Υ | Υ | 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 hydratic   | on. 15         | 200    | N/A                                       | N/A | N/A          | Υ | Y | 10/10/2018 |
| Drugs       | J7050 | Infusion, normal saline<br>solution, 250 cc                    | 250 cc                     | 1/1/2000 | N/A        | normal saline solution 250 cc   sodium chloride injection)   Indicated as a source of water and electrolytes. Also indicated for use as a priming solution hemodialysis procedures.  | n 6            | 186    | N/A                                       | N/A | N/A          | Υ | Υ | 6/7/2019   |
| Drugs       | J7060 | 5% Dextrose/water (500 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 hydratic   | on. 15         | 200    | N/A                                       | N/A | N/A          | Υ | 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 require clinical condition of the patient.   | d by 8         | 124    | N/A                                       | N/A | N/A          | Υ | Υ | 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          | Υ | Υ | 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        | DSLR (5% dextrose in lactated indicated for parenteral replacement of extracellular losses of fluid and electrolytes, with or ringer's injection) without minimal carbohydrate calories, 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-kwh injection, for subcutaneous use deficiency with or without actor VIII deficiency with or without factor VIII deficiency with or without factor VIII ill inhibitors.   | adult<br>1,680 | 5,040  | N/A                                       | N/A | N/A          | Y | Υ |            |
| Biologicals | J7175 | Injection, factor X,<br>(human), 1 IU                          | 110                        | 1/1/2017 | Coagadex*  | ***Expanded Indications Approved 9/21/2018*** Indicated in adults and children with hereditary Factor X deficiency for:  **On-demand treatment and control of bleeding episodes  **Perioperative management of bleeding in patients with mild and moderate hereditary Fac deficiency  Nophilized powder for solution for intravenous injection  **New Indication Approved 9/21/2018*** Indicated in adults and children with hereditary Factor X deficiency for:  **Routine prophylaxis to reduce the frequency of bleeding episodes | or X<br>8,400  | 84,000 | N/A                                       | N/A | N/A          | Υ | Y | 9/25/2018  |
|             |       |  |                            |          |            | Limitation of Use: Perioperative management of bleeding in major surgery in patients with severe hereditary F X deficiency has not been studied.   | actor          |        |   |     |              |   |   |            |

| 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 afibrinogenemia and hypofibrinogenemia. Fibryga is not indicated for dysfibrinogenemia.  | 9,800   | 9,800   | 12 years                              | N/A | N/A | Y | Υ |  | 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 | Υ |  | 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 | Υ |  | 9/21/2018  |
| Biologicals | J7180 | Injection, factor XIII<br>(antihemophilic factor,<br>human), 1 IU   | 110          | 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:  - Routine prophylactic treatment  - Peri-operative management of surgical bleeding.  | 5,000   | 10,000  | N/A                                   | N/A | N/A | Υ | Υ |  | 10/10/2018 |
| Biologicals | J7181 | Injection, factor XIII A-<br>subunit, (recombinant),<br>per IU  | 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.  Not for use in patients with congenital factor XIII B-subunit deficiency.   | 4,900   | 9,800   | N/A                                   | N/A | N/A | Y | Υ |  | 6/8/2019   |
| Biologicals | J7182 | Injection, factor VIII,<br>(antihemophilic factor,<br>recombinant),<br>(Novoeight), per IU                  | 1 IU         | 1/1/2015 | Novoeight*                   | antihemophilic factor<br>(recombinant) for<br>intravenous injection<br>lyophilized powder for<br>solution                               | Adults and children with hemophilia A for: Control and prevention of bleeding: Perioperative management; Routine prophylaxis to prevent or reduce the frequency of bleeding episodes.  | 7,000   | 168,000 | N/A                                   | N/A | N/A | Y | Υ |  | 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<br>factor/coagulation factor VIII<br>complex (human) lyophilized<br>powder for solution for<br>intravenous injection     | Indicated in children and adults with von Willebrand disease for:  • On-demand treatment and control of bleeding episodes.  • Perioperative management of bleeding.  Wilate is not indicated for treatment of hemophilia A.  | 16,800  | 81,200  | N/A                                   | N/A | N/A | Y | Υ |  | 6/7/2019   |
| Biologicals | J7185 | Injection, factor VIII<br>(antihemophilic factor,<br>recombinant) (Xyntha),<br>per IU                       | 110          | 1/1/2010 | Xyntha*                      | factor VIII (antihemophilic<br>factor, recombinant) for<br>intravenous injection  | Indicated in adults and children with hemophilia A for control and prevention of bleeding episodes and for perioperative management.     Xyntha is not indicated in patients with von Willebrand's disease.  | 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:  • Control and prevention of bleeding in adult and pediatric patients with hemophilia A.  • Surgical and/or invasive procedures in adult and pediatric patients with von Willebrand Disease in whom desmopressin (DDAVP) 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 | Υ | 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.   | 9/21/2018  |
| Biologicals | J7187 | Injection, Von Willebrand<br>factor complex (Humate-<br>P), per IU, VWF:RCO                                 | 110          | 1/1/2007 | Humate-P*                    | antihemophilic factor/von<br>Willebrand factor complex<br>(human), lyophilized powder<br>for reconstitution for<br>intravenous use only | Indicated for:  • Hemophilia A – Treatment and prevention of bleeding in adults.  • Von Willebrand disease (IWD) – in adults and pediatric patients in the (3) Treatment of spontaneous and trauma-induced bleeding episodes, and (2) Prevention of excessive bleeding during and after surgery. This applies to patients with severe VWD as well as patients with mild to moderate VWD where the use of desmopressin is known 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 | Y | γ | Indication specific age restrictions:  • Hemophilia A: 18 years of age and older  • Von Willebrand disease (VWD): None  Max Units: Although the daily dose can exceed this amount, use of higher doses administered by a provider must be supported with adequate documentation supplied to DMA and established in the medical 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   | Indicated for:  * Treatment of bleeding episodes and peri-operative management in adults and children with hemophila A or B with inhibitors, congenital Factor VII (FVII) deficiency, and Glanzmann's thrombasthenia with refractoriness to platelet transfusions, with or without antibodies to platelets.  * 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   | 110    | 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 patients with hemophilia A (hereditary Factor VIII deficiency). Limitation of Use: Koate is not indicated for the treatment of von Willebrand disease.  Monoclate-P: Indicated for treatment of classical hemophilia (Hemophilia A). Affected individuals frequently require therapy following minor accidents. Surgery, when required in such individuals, must be preceded by temporary corrections of the clotting abnormality. Surgical prophylaxis in severe AHF deficiency can be accomplished with an appropriately-dosed pre-surgical IV bolus of Monoclate-P followed by intermittent maintenance doses. Monoclate P is not effective in controlling the bleeding of patients with von Willebrand disease.  Hemofil M: Indicated in hemophilia A (classical hemophilia) for the prevention and control of hemorrhagic episodes. Hemofil M is not indicated in von Willebrand disease.  | 6,000  | 24,000  | N/A      | N/A | N/A | Y | Y | 10/10/2018 |
|-------------|-------|--|--------|----------|---|--|---|--------|---------|----------|-----|-----|---|---|------------|
| Biologicals | J7192 | Factor VIII<br>(antihemophilic factor,<br>recombinant) per IU, not<br>otherwise specified          | 110    | 1/1/2000 | Advate®,<br>Helikate® F5,<br>Kogenate® F5,<br>Recombinate™,<br>Refacto®,<br>Bioclate® | factor VIII (antihemophilic<br>factor, recombinant) for<br>intravenous use                             | Kogenate: Indicated for:  On-demand treatment and control of bleeding episodes in adults and children with hemophilia A.  Perioperative management of bleeding in adults and children with hemophilia A.  Routine prophylaxis to reduce the frequency of bleeding episodes in children with hemophilia A and to reduce the risk of joint damage.  Routine prophylaxis to reduce the frequency of bleeding episodes in adults with hemophilia A concerns to the prophylaxis to reduce the frequency of bleeding episodes in adults with hemophilia A. Kogenate is not indicated for the treatment of von Willebrand disease.  Advate: Indicated for use in children and adults with hemophilia A for:  Control and prevention of bleeding episodes.  Perioperative management.  Routine prophylaxis to prevent or reduce the frequency of bleeding episodes.  Advate is not indicated for the treatment of von Willebrand disease.  Recombinate: indicated in hemophilia A:  For the prevention and control of hemorrhagic episodes.  Perioperative management.  Recombinate is not indicated in von Willebrand's disease. | 6,000  | 54,000  | N/A      | N/A | N/A | Y | Y | 10/10/2018 |
| Biologicals | J7193 | Factor IX (antihemophilic<br>factor, purified, non-<br>recombinant) per IU                         | 110    | 1/1/2002 | Mononine®,<br>AlphaNine® SD   | coagulation factor IX (human)  | Indicated for the prevention and control of bleeding episodes in patients with Factor IX deficiency (hemophilia 8, Christmas disease).  | 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® VH,<br>Profilnine® SD,<br>Profilnine®  | factor IX complex for intravenous administration   | Bebulin: Indicated for the prevention and control of bleeding episodes in adult patients with hemophilia B (congenital Factor IX deficiency or Christmas disease). Bebulin is not indicated for use in the treatment of Factor VII deficiency. No clinical studies have been conducted to show benefit from this product for treating deficiencies other than Factor IX deficiency.  Profilinine: Indicated for the prevention and control of bleeding in patients with factor IX deficiency (hemophilia B). Profilinine 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:  • Control and prevention of bleeding episodes in adult and pediatric patients with hemophilia B.  • Peri-operative management in adult and pediatric patients with hemophilia B.  Limitations of Use: Benefix is not indicated for the treatment of other factor deficiencies (e.g. factors II, VII, VIII, and X), hemophilia A patients with inhibitors to factor VIII, reversal of coumarin-induced anticoagulation, and bleeding due to low levels of liver-dependent coagulation factors.   | 6,000  | 42,000  | N/A      | N/A | N/A | Y | Y | 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 patients.   | 300    | 1,100   | 18 years | N/A | N/A | Y | Υ | 9/25/2018  |
| Biologicals | J7197 | Antithrombin III (human),<br>per IU  | 110    | 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:  • Treatment and prevention of thromboembolism  • 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:  - Control and prevention of bleeding episodes  - Perioperative management  - Routine prophylaxis to prevent or reduce the frequency of bleeding episodes.  Feiba is not indicated for the treatment of bleeding episodes resulting from coagulation factor deficiencies in the absence of inhibitors to factor VIII or factor IX.  | 56,000 | 560,000 | N/A      | N/A | N/A | Y | Y | 9/21/2018  |

| Biologicals   | J7199 | Hemophilia clotting<br>factor, not otherwise<br>classified   | 110                   | 1/1/2000 | 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 deficiency) for:  On-demand treatment and control of bleeding episodes  • Perioperative management of bleeding  • Routine prophylaxis to reduce the frequency of bleeding episodes  Limitations of use:  Jivi is not indicated for use in children < 12 years of age due to a greater risk for hypersensitivity reactions.  Jivi is not indicated for use in previously untreated patients (PUPs).  Jivi is not indicated for the treatment of von Willebrand disease. | 18,000 | 180,000 | 12 years       | N/A | N/A          | Y | Y | 9/25/2018  |
|---------------|-------|--|-----------------------|----------|------------|---|---|--------|---------|----------------|-----|--------------|---|---|------------|
| Biologicals   | J7200 | Injection, factor IX,<br>(antihemophilic factor,<br>recombinant), Rixubis,<br>per IU                   | 1 IU                  | 1/1/2015 | Rixubis*   | coagulation factor IX<br>(recombinant) for<br>intravenous injection   | Indicated in adults and children with hemophilia B for control and prevention of bleeding<br>episodes, perioperative management, and routine prophylaxis. Rixubis is not indicated for<br>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                        | 110                   | 1/1/2017 | Alprolix®  | coagulation factor IX<br>(recombinant), Fc fusion<br>protein, lyophilized powder<br>for solution for intravenous<br>injection |   | 24,000 | 72,000  | N/A            | N/A | N/A          | Υ | 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:  • On-demand treatment and control and prevention of bleeding episodes  • Perioperative management of bleeding  • Routine prophylasis to reduce the frequency of bleeding episodes  Limitations of Use: Idelvion is not indicated for immune tolerance induction in patients with Hemophilia B.   | 10,769 | 96,921  | N/A            | N/A | N/A          | Υ | Y | 6/6/2019   |
| Biologicals   | J7203 | Injection factor ix,<br>(antihemophilic factor,<br>recombinant),<br>glycopegylated, (rebinyn),<br>1 iu | 110                   | 1/1/2019 | Rebinyn®   | coagulation factor IX<br>(recombinant),<br>glycoPEGylated, lyophilized<br>powder for solution for<br>intravenous injection    | Indicated for use in adults and children with hemophilia B for:  • On-demand treatment and control of bleeding episodes  • Perioperative management of bleeding  Limitations of Use. Rebinyn is not indicated for routine prophylaxis in the treatment of patients with hemophilia B or for immune 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:  • On-demand treatment and control of bleeding episodes.  • Perioperative management of bleeding.  • Routine prophylaxis to reduce the frequency of bleeding episodes.  Limitation of Use: Eloctate is not indicated for the treatment of von Willebrand disease.   | 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                 | 1 IU                  | 1/1/2017 | Adynovate* | antihemophilic factor<br>(recombinant), PEGylated<br>lyophilized powder for<br>solution for intravenous<br>injection          | Indicated in children and adult patients with hemophilia A (congenital factor VIII deficiency) for:  • On-demand treatment and control of bleeding episodes  • Perioperative management  • Routine prophylaxis to reduce the frequency of bleeding episodes  Adynovate is not indicated for the treatment of von Willebrand disease.  | 21,000 | 210,000 | N/A            | N/A | N/A          | Υ | 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:  • On-demand treatment and control of bleeding episodes  • Perioperative management of bleeding  • Routine prophylaxis to reduce the frequency of bleeding episodes  Nuwiq 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      | Indicated in adults and children with hemophilia A (congenital Factor VIII deficiency) for:  On-demand treatment and control of bleeding episodes.  Routine prophylaxis to reduce the frequency of bleeding episodes.  Perioperative management of bleeding.  Limitation of Use:  Afstyla 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   | 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:  • On-demand treatment and control of bleeding episodes  • Perioperative management of bleeding  • Routine prophylaxis to reduce the frequency of bleeding episodes  Kovaltry is not indicated for the treatment of von Willebrand disease.   | 21,000 | 210,000 | N/A            | N/A | N/A          | Υ | 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 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 intrauterine system  | Indicated for the prevention of pregnancy for up to 5 years.  | 1      | 1       | After menarche | N/A | Females Only | Υ | Y | 10/26/2018 |
| Drugs         | J7298 | Levonorgestrel-releasing<br>intrauterine<br>contraceptive system<br>(Mirena), 52 mg                    | 52 mg                 | 1/1/2017 | Mirena®    | levonorgestrel-releasing intrauterine system  | Indicated for: Intrauterine contraception for up to 5 years. Treatment of heavy menstrual bleeding in women who choose to use intrauterine contraception as their method of 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®  | contraceptive   | Indicated for intrauterine contraception for up to 10 years.  | 1      | 1       | 16 years       | N/A | Females Only | Y | Υ | 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 HCI<br>for topical administration,<br>20%, single unit dosage<br>form (354 mg) | 354 mg                | 1/1/2004 | Levulan®<br>Kerastick® | aminolevulinic acid HCI for<br>topical solution, 20%   | Indicated for photodynamic therapy (treatment) of minimally to moderately thick actinic keratoses of the face or scalp, or actinic keratoses of the upper extremities. FDA approval of upper extremity treatment approved 3/6/2018.  | 1                        | 1                        | 18 years                              | N/A | N/A          | Υ | Y |  | 9/25/2018  |
| Drugs               | J7311 | Fluocinolone acetonide,<br>intravitreal implant  | 1 implant             | 1/1/2007 | Retisert®              | fluocinolone acetonide<br>intravitreal implant   | Indicated for the treatment of chronic noninfectious uveitis affecting the posterior segment of the eye.   | 2                        | 2                        | 12 years                              | N/A | N/A          | Υ | Υ |  | 10/10/2018 |
| Drugs               | J7312 | Injection,<br>dexamethasone,<br>intravitreal implant, 0.1<br>mg                                    | 0.1 mg                | 1/1/2011 | Ozurdex*               | dexamethasone intravitreal 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 | Υ |  | 6/6/2019   |
| Drugs               | J7313 | Injection, fluocinolone<br>acetonide intravitreal<br>implant, 0.01 mg                              | 0.01 mg               | 1/1/2016 | lluvien®, Yutiq™       | fluocinolone acetonide<br>intravitreal implant   | Iluvien: Indicated for the treatment of diabetic macular edema in patients who have been<br>previously treated with a course of corticosteroids and did not have a clinically significant rise in<br>intraocular pressure.  Yutiq: Indicated for the treatment of non-infectious uveitis affecting the posterior segment of the<br>eye.  | Iluvien: 38<br>Yutiq: 36 | Iluvien: 38<br>Yutiq: 36 | 18 years                              | N/A | N/A          | Υ | Υ |  | 2/28/2019  |
| 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 | Υ |  | 7/16/2018  |
| Drugs               | J7336 | Capsaicin 8% patch, per<br>square centimeter   | 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          | Υ | Υ |  | 6/6/2019   |
| Drugs               | J7342 | Installation, ciprofloxacin<br>otic suspension, 6 mg   | 6 mg                  | 1/1/2017 | Otiprio*               | ciprofloxacin otic suspension,<br>for intratympanic or otic use  | <ul> <li>Indicated for the treatment of pediatric patients (age 6 months and older) with billateral othtis media with effusion undergoing tympanostomy tube placement.</li> <li>Indicated for the treatment of acute othtis externa in patients 6 months of age and older due to Pseudomonas aeruginosa and Staphylococcus aureus.</li> </ul>  | 10                       | 10                       | 6 months                              | N/A | N/A          | Υ | Υ |  | 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 globulin,<br>anti-thymocyte globulin<br>(equine), sterile solution for<br>intravenous use only | Indicated for:  *Renal transplant rejection.  *Aplastic anemia (moderate to severe) in patients unsuitable for bone marrow transplantation.  Limitations of Use: The usefulness of Atgam has not been demonstrated in patients with aplastic anemia who are suitable candidates for bone marrow transplantation or in patients with aplastic anemia secondary to neoplastic disease, storage disease, myelofibrosis, Fancon'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          | Υ | Y |  | 9/12/2018  |
| Drugs               | 19000 | Injection, doxorubicin<br>hydrochloride, 10 mg   | 10 mg                 | 1/1/2000 | Adriamycin*            | doxorubicin hydrochloride for injection, for intravenous use   | Indicated:  * As a component of multiagent adjuvant chemotherapy for treatment of women with axillary lymph node involvement following resection of primary breast cancer.  * For the treatment of: acute lymphoblastic leukemia, acute myeloblastic leukemia, Hodgkin lymphoma, Non-Hodgkin lymphoma, metastatic breast cancer, metastatic Wilms' tumor, metastatic neuroblastoma, metastatic soft tissue sarcoma, metastatic consolinal cell bladder carcinoma, metastatic thyroid carcinoma, metastatic transitional cell bladder carcinoma, metastatic thyroid carcinoma, metastatic gastric carcinoma, metastatic trosnical cell bladder carcinoma. | 19                       | 38                       | N/A                                   | N/A | N/A          | Y | Υ |  | 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 | Υ |  | 6/6/2019   |
| Drugs               | J9017 | Injection, arsenic trioxide,   | 1 mg                  | 1/1/2000 | Trisenox®              | arsenic trioxide injection, for intravenous use  | • Indicated for induction of remission and consolidation in patients with acute promyelocytic leukemia (APL) who are refractory to, or have relapsed from, retinoid and anthracycline chemotherapy, and whose APL is characterized by the presence of the t(15;17) translocation or PML/RAR-alpha gene expression. • Indicated in combination with tretinoin for treatment of adults with newly-diagnosed low-risk acute promyelocytic leukemia (APL) whose APL is characterized by the presence of the t(15;17) translocation or PML/RAR-alpha gene expression.   | 21                       | 651                      | Indication Specific<br>(see comments) | N/A | N/A          | Υ | Y | Indication specific age restrictions: • In combination with tretinoin: 18 years of age and older • As a single agent: 5 years of age and older | 9/25/2018  |
| 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 leukemia (ALL) who have developed hypersensitivity to E. coliderived asparaginase.   | 70                       | 420                      | 1 year                                | N/A | N/A          | Y | Y |  | 6/4/2019   |

|             | I     |  |                  |          |            |  | Indicated for the treatment of patients with:  |     |       |          |     | 1   |   | 1 |           |
|-------------|-------|--|------------------|----------|------------|--|--|-----|-------|----------|-----|-----|---|---|-----------|
| Biologicals | J9022 | Injection, atezolizumab,<br>10 mg              | 10 mg            | 1/1/2018 | Tecentriq* | atezolizumab injection, for intravenous use                          | Indicated for the treatment of patients with:  Locally advanced or metastatic unothelial carcinoma who:  Or Are not eligible for cisplatin-containing chemotherapy, and whose tumors express PD-L1 (PD-L1 stained tumor-infiltrating immune cells [IC] covering greater than or equal to 5% of the tumor area), or  Or Are not eligible for any platinum-containing chemotherapy regardless of level of tumor PD-L1 expression, or  Or Have disease progression during or following any platinum-containing chemotherapy, or within 12 months of neoadjuvant or adjuvant chemotherapy.  *Metastatic non-small cell lung cancer who have disease progression during or following platinum-containing chemotherapy. Patients with EGR or  Alk genomic tumor aberrations should have disease progression on FDA approved therapy for these aberrations prior to receiving Tecentric,  Triple-Negative Breast Cancer (TNBC)  *in combination with paclitaxel protein-bound for the treatment of adult patients with unresectable locally advanced or metastatic TNBC whose tumors express PD-L1 (PD-L1 stained tumor-infiltrating immune cells [IC] of any intensity covering ≥ 1% of the tumor area), as determined by an FDA approved test.  Small Cell Lung Cancer (SCLC)  *in combination with carboplatin and etoposide, for the first-line treatment of adult patients with with extensive-stage small cell lung cancer (ES-SCLC). | 120 | 252   | 18 years | N/A | N/A | Y | ٧ | 5/1/2019  |
| Biologicals | J9023 | Injection, avelumab, 10 mg                     | 10 mg            | 1/1/2018 | Bavencio*  | avelumab injection, for<br>intravenous use                           | • Indicated for the treatment of adults and pediatric patients 12 years and older with metastatic Mercki cell carcinoma (MCC). • 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. • First-line treatment, in combination with axitinib, of patients with advanced renal cell carcinoma (RCC).   | 80  | 240   | 12 years | N/A | N/A | Υ | Y | 7/2/2018  |
| Drugs       | J9025 | Injection, azacitidine, 1<br>mg                | 1 mg             | 1/1/2006 | Vidaza*    | azacitidine for injection, for<br>subcutaneous or intravenous<br>use | Indicated for the treatment of patients with the following FAB myelodysplastic syndrome (MDS) subtypes: refractory anemia (RA) or refractory anemia with ringed sideroblasts (RARS) (if accompanied by neutropenia or thrombocytopenia or requiring transfusions), refractory anemia with excess blasts (RAEB), refractory anemia with excess blasts in transformation (RAEB-T) and chronic myelomonocytic leukemia (CMMOL).   | 250 | 2,500 | 18 years | N/A | N/A | Υ | Y | 9/25/2018 |
| Biologicals | J9031 | bCG (intravesical), per<br>installation        | 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<br>for the prophylaxis of primary or recurrent stage Ta and/or T1 papillary tumors following<br>transurethral resection (TUR). Tice BCG is not recommended for stage TaG1 papillary tumors,<br>unless they are judged to be at high risk of tumor recurrence. Tice BCG is not indicated for<br>papillary tumors, of stages higher than T1.  | 1   | 5     | 18 years | N/A | N/A | Υ | Y | 6/8/2019  |
| Drugs       | J9032 | Injection, belinostat, 10<br>mg                | 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 | Υ | Y | 4/10/2019 |
| Drugs       | J9033 | Injection, bendamustine<br>HCI (Treanda), 1 mg | 1 mg             | 1/1/2017 | Treanda®   |  | Indicated for treatment of patients with:  • Chronic lymphocytic leukemia (CLL). Efficacy relative to first line therapies other than  | 300 | 1,200 | 18 years | N/A | N/A | Υ | Υ | 9/25/2018 |
| Drugs       | J9034 | Injection, bendamustine<br>HCI (Bendeka), 1 mg | 1 mg             | 1/1/2017 | Bendeka®   | bendamustine hydrochloride<br>injection, for intravenous use         | Indicated for treatment of patients with:  Chronic lymphocytic leukemia (CLL). Efficacy relative to first line therapies other than chloramy unit has not been established.  | 300 | 1,200 | 18 years | N/A | N/A | Υ | Y | 9/25/2018 |
| Biologicals | J9035 | Injection, bevacizumab,<br>10 mg               | 10 mg            | 1/1/2005 | Avastin*   | bevacizumab injection, for intravenous use                           | Indicated for the treatment of:  Metastatic colorectal cancer, in combination with intravenous 5-fluorouracil-based chemotherapy for first- or second-line treatment.  Metastatic colorectal cancer, in combination with fluoropyrimidine-irinotecan-or fluoropyrimidine-vasilplatin-based chemotherapy for second-line treatment in patients who have progressed on a first-line Avastin-containing regimen.  Limitation of Use: Avastin is not indicated for adjuvant treatment of colon cancer.  Unresectable, locally advanced, recurrent or metastatic non-squamous non-small cell lung cancer, in combination with carboplatin and paclitaxel for first-line treatment.  Recurrent glioblastoma in adduts.  Metastatic renal cell carcinoma in combination with interferon alfa.  Persistent, recurrent, or metastatic cervical cancer, in combination with paclitaxel and cisplatin, or paclitaxel and topotocan.  Epithelial ovarian, fallopian tube, or primary peritoneal cancer:  In combination with paclitaxel, pegylated liposomal doxorubicin, or topotecan for platinum-resistant recurrent disease who received no more than 2 prior chemotherapy regimens.  In combination with carboplatin and paclitaxel or carboplatin and genicitable, followed by Avastin as a single agent, for rstage lil or IV disease following initial surgical resection.   | 210 | 420   | 18 years | N/A | N/A | Υ | Y | 7/26/2018 |
| Biologicals | J9039 | Injection, blinatumomab,<br>1 mcg              | 1 mcg            | 1/1/2016 | Blincyto®  | blinatumomab for injection,<br>for intravenous use                   | Treatment of adults and children with:  Relapsed or refractory B-cell precursor acute lymphoblastic leukemia (ALL).  B-cell precursor acute lymphoblastic leukemia (ALL) in first or second complete remission with minimal residual disease (MRD) ≥ 0.1%.   | 28  | 784   | N/A      | N/A | N/A | Υ | 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:  • Squamous Cell Carcinoma: Head and neck (including mouth, tongue, tonsil, nasopharyrx, oropharynx, sixus, palate, lip, buccal mucoas, gingivae, epiglottis, skin, larynxh, penis, cervix, and vulva. The response to bleomycin is poorer in patients with previously irradiated head and neck cancer.  • Lymphomas: Hodgkin's disease, non-Hodgkin's disease  • Testicular Carcinoma: Embryonal cell, choriocarcinoma, and teratocarcinoma  • Malignant Pleural Effusion: Biomycin is effective as a sclerosing agent for the treatment of malignant pleural effusion and prevention of recurrent pleural effusions.  | 5   | 27    | N/A      | N/A | N/A | Y | Y | 4/10/2019 |

|             |       | Injection, bortezomib                                     |        |          |           |  | Indicated for treatment of patients with:  |     |     |          |     |            |   |   |           |
|-------------|-------|---|--------|----------|-----------|--|--|-----|-----|----------|-----|------------|---|---|-----------|
| Drugs       | J9041 | (velcade), 0.1 mg   | 0.1 mg | 1/1/2005 | Velcade*  | subctuaneous or intravenous<br>use                     | Multiple myeloma     Mantie cell lymphoma  | 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* | brentuximab vedotin for injection, for intravenous use | Indicated for:  • Previously untreated Stage III or IV classical Hodgkin lymphoma (cHL), in combination with doxorubicin, vinblastine, and dacarbazine.  • Classical Hodgkin lymphoma (cHL) at high risk of relapse or progression as post-autologous hematopoietic stem cell transplantation (auto-HSCT) consolidation.  • Classical Hodgkin lymphoma (cHL) after failure of auto-HSCT or after failure of at least two prior multi-agent chemotherapy regimens in patients who are not auto-HSCT candidates.  • Previously untreated systemic anaplastic large cell lymphoma (aLCL) or other CO30-expressing peripheral T-cell lymphomas (PTCL), including angioimmunoblastic T-cell lymphoma and PTCL not otherwise specified, in combination with cyclophosphamide, doxorubicin, and prednisone.  • Systemic anaplastic large cell lymphoma (sALCL) after failure of at least one prior multi-agent chemotherapy regimen.  • Primary cutaneous anaplastic large cell lymphoma (pcALCL) or CD30-expressing mycosis fungoides (MF) who have received prior systemic therapy. | 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®  | cabazitaxel injection, for intravenous use             | Indicated in combination with prednisone for treatment of patients with hormone-refractory metastatic prostate cancer previously treated with a docetaxel-containing treatment regimen.  | 120 | 240 | 18 years | N/A | Males Only | Y | Y | 9/27/2018 |
| Drugs       | J9044 | Injection, bortezomib, not otherwise specified, 0.1 mg    | 0.1 mg | 1/1/2019 | N/A       | bortezomib for injection, for intravenous use          | Indicated for:  • treatment of patients with multiple myeloma  • treatment of patients with mantle cell lymphoma who have received at least 1 prior therapy  | 35  | 245 | 18 years | N/A | N/A        | Υ | Y | 2/5/2019  |
| Drugs       | J9045 | Injection, carboplatin, 50<br>mg                          | 50 mg  | 1/1/2000 | N/A       | carboplatin injection for intravenous use              | Indicated for the initial treatment of advanced ovarian carcinoma in established combination with other approved chemotherapeutic agents and for the palliative treatment of patients with ovarian carcinoma recurrent after prior chemotherapy, including patients who have previously been treated with cisplatin.   | 18  | 36  | 18 years | N/A | N/A        | Υ | Y | 4/10/2019 |
| Drugs       | J9047 | Injection, carfilzomib, 1<br>mg                           | 1 mg   | 1/1/2014 | Kyprolis* | carfilzomib for injection, for intravenous use         | Indicated:  In combination with dexamethasone or with lenalidomide plus dexamethasone for the treatment of patients with relapsed or refractory multiple myeloma who have received one to three lines of therapy.  As a single agent for the treatment of patients with relapsed or refractory multiple myeloma who have received one or more lines of therapy.  | 154 | 992 | 18 years | N/A | N/A        | Y | Y | 6/5/2019  |
| Drugs       | 19050 | Injection, carmustine, 100 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 agents in the following:  Brain tumors - glioblastoma, brainstem glioma, medulloblastoma, astrocytoma, ependymoma, and metastatic brain tumors.  Multiple myeloma - in combination with prednisone.  Hodgikin's disease - as secondary therapy in combination with other approved drugs in patients who relapse while being treated with primary therapy, or who fail to respond to primary therapy.  Non-Hodgikin's lymphomas - as secondary therapy in combination with other approved drugs for patients who relapse while being treated with primary therapy, or who fail to respond to primary therapy.  | 5   | 5   | 18 years | N/A | N/A        | Υ | Y | 5/20/2019 |
| Biologicals | J9055 | Injection, cetuximab, 10 mg                               | 10 mg  | 1/1/2005 | Erbitux®  | cetuximab injection, for<br>intravenous use            | Indicated for:  Squamous Cell Carcinoma of the Head and Neck (SCCHN):  -Locally or regionally advanced squamous cell carcinoma of the head and neck in combination with radiation therapy.  -Recurrent locoregional disease or metastatic squamous cell carcinoma of the head and neck in combination with platinum-based therapy with fluorouracil.  -Recurrent or metastatic squamous cell carcinoma of the head and neck progressing after platinum-based therapy.  -K-Ras Wild-type, EGFR-expressing Colorectal Cancer (CRC) as determined by an FDA-approved test:  -In combination with Folfiri for first-line treatment, -In combination with innotecan in patients who are refractory to irinotecan-based chemotherapy, -As a single agent in patients who have failed oxaliplatin- and irinotecan-based chemotherapy or who are intolerant to irinotecan.  Limitations of Use: Erbitux is not indicated for treatment of Ras-mutant colorectal cancer or when the results of the Ras mutation tests are unknown.  | 100 | 380 | 18 years | N/A | N/A        | Y | γ | 6/4/2019  |
| Drugs       | J9057 | Injection, copanlisib, 1 mg                               | 1 mg   | 1/1/2019 | Aliqopa™  | copanlisib injection, for intravenous use              | Indicated for the treatment of adult patients with relapsed follicular lymphoma (FL) who have<br>received at least two prior systemic therapies. Accelerated approval was granted for this<br>indication based on overall response rate. Continued approval for this indication may be<br>contingent upon verification and description of clinical benefit in a confirmatory trial.  | 60  | 240 | 18 years | N/A | N/A        | Y | Y | 10/4/2018 |
| Drugs       | 19060 | Injection, cisplatin,<br>powder or solution, per<br>10 mg | 10 mg  | 1/1/2000 | N/A       | cisplatin injection                                    | Indicated as therapy for:  • Metastatic Testicular Tumors: In established combination therapy with other approved chemotherapeutic agents in patients with metastatic testicular tumors who have already received appropriate surgical and/or radiotherapeutic procedures.  • Metastatic Ovarian Tumors: In established combination therapy with other approved chemotherapeutic agents in patients with metastatic ovarian tumors who have already received appropriate surgical and/or radiotherapeutic procedures. An established combination consists of cisplatin and cyclophosphamide. Cisplatin injection, as a single agent, is indicated as secondary therapy in patients with metastatic ovarian tumors refractory to standard chemotherapy who have not previously received Cisplatin injection therapy.  • Advanced Bladder Cancer: indicated as a single agent for patients with transitional cell bladder cancer which is no longer amenable to local treatments, such as surgery and/or radiotherapy.   | 25  | 50  | 18 years | N/A | N/A        | Y | Y | 9/27/2018 |

|             |       | Injection cladelles  |              |          |                         |   | Indicated for the treatment of active Hairy Call Landaudia and American Indiana. 19  |     |       |          |     |            |   |   |            |
|-------------|-------|--|--------------|----------|-------------------------|---|--|-----|-------|----------|-----|------------|---|---|------------|
| Drugs       | J9065 | Injection, cladribine, per 1<br>mg                                   | 1 mg         | 1/1/2000 | N/A                     | cladribine injection  | Indicated for the treatment of active Hairy Cell Leukemia as defined by clinically significant<br>anemia, neutropenia, thrombocytopenia, or disease-related symptoms.<br>Indicated for the treatment of:   | 13  | 91    | 18 years | N/A | N/A        | Y | Y | 6/4/2019   |
| Drugs       | J9070 | Cyclophosphamide, 100<br>mg  | 100 mg       | 1/1/2000 | N/A                     | cyclophosphamide for injection, for intravenous use                       | Malignant Diseases: malignant lymphomas: Hodgkin's disease, lymphocytic lymphoma, mixed-   | 35  | 105   | N/A      | N/A | N/A        | Υ | Υ | 6/4/2019   |
| Drugs       | J9098 | Injection, cytarabine<br>liposome, 10 mg                             | 10 mg        | 1/1/2004 | DepoCyt®                | cytarabine liposome injection<br>for intrathecal use                      | n Indicated for the intrathecal treatment of lymphomatous meningitis.  | 5   | 15    | 18 years | N/A | N/A        | Υ | Υ | 10/4/2018  |
| Drugs       | 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 adults and pediatric patients. It has also been found useful in the treatment of acute lymphocytic leukemia and the blast phase of chronic myelocytic leukemia. Intrathecal administration of cytarabine injection (preservative-free preparations only) is indicated in the prophylaxis and treatment of meningeal leukemia.   | 5   | 35    | N/A      | N/A | N/A        | Y | Y |            |
| Drugs       | 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:  - adult and pediatric patients with Wilms tumor, as part of a multi-phase, combination chemotherapy regimen  - adult and pediatric patients with rhabdomyosarcoma, as part of a multi-phase, combination chemotherapy regimen  - adult and pediatric patients with Ewing sarcoma, as part of a multi-phase, combination chemotherapy regimen  - adult and pediatric patients with metastatic, nonseminomatous testicular cancer, as part of a multi-phase, combination chemotherapy regimen - post-mearchal patients with gestational trophoblastic neoplasia, as a single agent or as part of a combination chemotherapy regimen - adult patients with locally recurrent or locoregional solid malignancies, as a component of palliative or adjunctive regional perfusion   | 14  | 42    | N/A      | N/A | N/A        | Υ | Y | 9/25/2018  |
| Drugs       | 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 effective agents for Hodkin's disease.  | 10  | 91    | N/A      | N/A | N/A        | Υ | Y | 6/10/2019  |
| Biologicals | J9145 | Injection, daratumumab,  | 10 mg        | 1/1/2017 | Darzalex®               | daratumumab injection, for<br>intravenous use                             | Indicated in combination with lenalidomide and dexamethasone, or bortezomib and dexamethasone, for the treatment of patients with multiple myeloma who have received at least one prior therapy. Indicated as monotherapy, for the treatment of patients with multiple myeloma who have received at least three prior lines of therapy including a proteasome inhibitor (PI) and an immunomodulatory agent or who are double-refractory to a PI and an immunomodulatory agent. Indicated in combination with pomalidomide and dexamethasone for the treatment of patients with multiple myeloma who have received at least two prior therapies including lenalidomide and a proteasome inhibitor.  Indicated in combination with bortezomib, melphalan and prednisone for the treatment of patients with newly diagnosed multiple myeloma who are lineligible for autologous stem cell transplant. | 224 | 1,120 | 18 years | N/A | N/A        | Y | Y | 10/31/2018 |
| Drugs       | 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 leukemia (myelogenous, monocytic, erythroid) of adults and for remission induction in acute lymphocytic leukemia of children and adults.  | 12  | 60    | N/A      | N/A | N/A        | Y | Y | 6/10/2019  |
| Drugs       | 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 with less than advanced HIV-related Kaposi's sarcoma.  | 10  | 30    | 18 years | N/A | N/A        | Y | Y | 10/4/2018  |
| Drugs       | J9153 | Injection, liposomal, 1 mg<br>daunorubicin and 2.27 mg<br>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 myelodysplasia-related changes (AML-MRC).  | 132 | 660   | 18 years | N/A | N/A        | Y | Y | 2/5/2019   |
| Drugs       | J9155 | Injection, degarelix, 1 mg   | 1 mg         | 1/1/2010 | Firmagon®               | degarelix for injection for<br>subcutaneous administration                | Indicated for the treatment of patients with advanced prostate cancer.   | 240 | 320   | 18 years | N/A | Males Only | Υ | Y | 10/4/2018  |
| Drugs       | J9171 | Injection, docetaxel, 1 mg   | 1 mg         | 1/1/2010 | Taxotere®,<br>Docefrez® | docetaxel injection<br>concentrate, intravenous<br>infusion               | Indicated for:  Breast Cancer (BC): single agent for locally advanced or metastatic BC after chemotherapy failure; and with dosorubicin and cyclophosphamide as adjuvant treatment of operable node-positive BC.  Non-Small Cell Lung Cancer (NSCLC): single agent for locally advanced or metastatic NSCLC after platinum therapy failure; and with cisplatin for unresectable, locally advanced or metastatic untreated NSCLC.  Hormone Refractory Prostate Cancer (HRPC): with prednisone in androgen independent (hormone refractory) metastatic prostate cancer.  Castric Adenocarcinoma (SC): with cisplatin and fluorouracil for untreated, advanced GC, including the gastroesophageal junction.  Squamous Cell Carcinoma of the Head and Neck Cancer (SCCHN): with cisplatin and fluorouracil for induction treatment of locally advanced SCCHN.  | 250 | 500   | N/A      | N/A | N/A        | Υ | 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:  - Locally advanced or metastatic urothelial carcinoma who:  - Have disease progression during or following platinum-containing chemotherapy.  - Have disease progression within 12 months of neoadjuvant or adjuvant treatment with platinum-containing chemotherapy.  This indication is approved under accelerated approval based on tumor response rate and duration of response. Continued approval for this indication may be contingent upon verification and description of clinical benefit in confirmatory trials.  - Unresectable, Stage III non-amal Icel liung cancer (NSCLC) whose disease has not progressed following concurrent platinum-based chemotherapy and radiation therapy  | 140 | 420   | 18 years | N/A | N/A        | Υ | Y | 2/5/2019   |

| Biologicals |                    | elotuzumab, 1<br>mg          | 1 mg   | 1/1/2017 | Empliciti®              | elotuzumab for injection, for intravenous use                   | Indicated in:  • combination with lenalidomide and dexamethasone for the treatment of adult patients with resulting multiple myeloma who have received one to three prior therapies.  • combination with pomalidomide and dexamethasone for the treatment of adult patients with multiple myeloma who have 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       | 19178              | pirubicin HCl, 2             | 2 mg   | 1/1/2004 | Ellence*                | epirubicin hydrochloride  | Indicated as a component of adjuvant therapy in patients with evidence of axillary node tumor   | 150   | 300   | 18 years                              | N/A | N/A  | Υ | Υ |  | 10/10/2018 |
| Drugs       | Injectio           | on, eribulin                 | 0.1 mg | 1/1/2012 | Halaven®                | injection eribulin mesylate injection, for intravenous use      | Involvement following resection of primary breast cancer.  Indicated for the treatment of patients with:  Metastatic breast cancer who have previously received at least two chemotherapeutic regimens for the treatment of metastatic disease. Prior therapy should have included an anthracycline and a taxane in either the adjuvant or metastatic setting.  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       |                    | etoposide, 10<br>mg          | 10 mg  | 1/1/2000 | Toposar™,<br>Etopophos® | etoposide phosphate for injection, for intravenous use          | Indicated for the treatment of patients with:   | 30    | 300   | 18 years                              | N/A | N/A  | Υ | Υ |  | 6/10/2019  |
| Drugs       |                    | , fludarabine<br>late, 50 mg | 50 mg  | 1/1/2000 | N/A                     | fludarabine phosphate for injection for intravenous use         | Indicated for the treatment of adult patients with B-cell chronic lymphocytic leukemia (CLL) who  | 2     | 16    | 18 years                              | N/A | N/A  | Υ | Y |  | 10/10/2018 |
| Drugs       |                    | fluorouracil,<br>00 mg       | 500 mg | 1/1/2000 | Adrucil*                | fluorouracil injection for intravenous use                      | Indicated for the treatment of patients with:  • Adenocarcinoma of the colon and rectum  • Adenocarcinoma of the breast  • Gastric adenocarcinoma  • Pancreatic adenocarcinoma  | 15    | 45    | 18 years                              | N/A | N/A  | Υ | Y |  | 4/10/2019  |
| Drugs       |                    | loxuridine, 500<br>mg        | 500 mg | 1/1/2000 | N/A                     | floxuridine for injection, for intra-arterial infusion          | Effective in the palliative management of gastrointestinal adenocarcinoma metastatic to the<br>liver, when given by continuous regional intra-arterial infusion in carefully selected patients who<br>are considered incurable by surgery or other means. Patients with known disease extending<br>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       |                    | gemcitabine<br>oride, 200 mg | 200 mg | 1/1/2000 | Gemzar®                 | gemcitabine for injection, fo<br>intravenous use                | Indicated:  In combination with carboplatin, for the treatment of advanced ovarian cancer that has relapsed at least 6 months after completion of platinum-based therapy.  In the combination with paclitaxel, for first-line treatment of metastatic breast cancer after failure of prior anthrocycline-containing adjuvant chemotherapy, unless anthracyclines were clinically contraindicated.  In combination with cisplatin for the treatment of non-small cell lung cancer.  As a single agent for the treatment of pancreatic cancer.  | 16    | 64    | 18 years                              | N/A | N/A  | Y | Y |  | 6/4/2019   |
| Drugs       |                    | tlin acetate<br>, per 3.6 mg | 3.6 mg | 1/1/2000 | Zoladex*                | goserelin acetate implant                                       | Product Specific: 3.6 mg: Use in combination with flutamide for the management of locally confined carcinoma of the prostate. Palliative treatment of advanced carcinoma of the prostate. The management of endometriosis. Use as an endometrial-thinning agent prior to endometrial ablation for dysfunctional uterine bleeding. Use in the palliative treatment of advanced breast cancer in pre- and perimenopausal women.  10.8 mg: Use in combination with flutamide for the management of locally confined carcinoma of the prostate. Use a palliative treatment of advanced carcinoma of the prostate. | 3     | 3     | 18 years                              | N/A | 3.6 mg implant:<br>None<br>10.8 mg<br>implant: Males<br>Only | Y | Y |  | 10/26/2018 |
| Biologicals |                    | gemtuzumab<br>iicin, 0.1 mg  | 0.1 mg | 1/1/2018 | Mylotarg™               | gemtuzumab ozogamicin<br>injection, for intravenous usu         | Indicated for 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 | Υ | Indication specific age restrictions:  Newly-diagnosed CD33-positive acute myeloid leukemia: 18 years of age and older  Relapsed or refractory CD33-positive AML: 2 years of age and older | 7/2/2018   |
| Drugs       |                    | n, irinotecan<br>ome, 1 mg   | 1 mg   | 1/1/2017 | Onivyde™                | irinotecan liposome injectior<br>for intravenous use            | Indicated, in combination with fluorouracil and leucovorin, for the treatment of patients with<br>metastatic adenocarcinoma of the pancreas after disease progression following gemcitabline-<br>based therapy.  Limitation of Use: Onlyyde is not indicated as a single agent for the treatment of patients with<br>metastatic adenocarcinoma of the pancreas.   | 172   | 516   | 18 years                              | N/A | N/A  | Y | Y |  | 6/6/2019   |
| Drugs       |                    | irinotecan, 20<br>mg         | 20 mg  | 1/1/2000 | Camptosar®              | irinotecan injection,<br>intravenous infusion                   | Indicated for:  - First-line therapy in combination with 5-fluorouracil and leucovorin for patients with metastatic carcinoma of the colon or rectum.  - Patients with metastatic carcinoma of the colon or rectum whose disease has recurred or progressed following initial fluorouracil-based therapy.   | 44    | 88    | 18 years                              | N/A | N/A  | Υ | Y |  | 4/10/2019  |
| Drugs       |                    | ixabepilone, 1<br>mg         | 1 mg   | 1/1/2009 | Ixempra®                | ixabepilone kit for injection,<br>for intravenous infusion only | kempra as monotherapy is indicated for the treatment of metastatic or locally advanced breast cancer in patients after failure of an anthracycline, a taxane, and capecitabine.   | 90    | 180   | 18 years                              | N/A | N/A  | Υ | Y |  | 10/26/2018 |
| Drugs       |                    | 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<br>chemotherapy of germ cell testicular cancer. It should be used in combination with mesna for<br>prophylaxis of hemorrhagic cystitis.   | 3     | 30    | 18 years                              | N/A | N/A  | Υ | Υ |  | 6/4/2019   |
| Drugs       | J9209 Injection, m | nesna, 200 mg                | 200 mg | 1/1/2000 | Mesnex®                 | 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  | Υ | Y |  | 6/10/2019  |

|             |       | Injection, idarubicin  |                 |          |                            | idarubicin hydrochloride for   | Indicated in combination with other approved antileukemic drugs for the treatment of acute   |       |       |                                       |     |            |   |   |   |            |
|-------------|-------|--|-----------------|----------|----------------------------|--|--|-------|-------|---------------------------------------|-----|------------|---|---|---|------------|
| Drugs       | J9211 | hydrochloride, 5 mg  | 5 mg            | 1/1/2000 | Idamycin*                  | injection  | myeloid leukemia in adults. This includes French-American-British (FAB) classifications M1 through M7.   | 6     | 36    | 18 years                              | N/A | N/A        | Y | Y | to directly a small of 10 years   | 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 B. 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                | 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 | older   | 10/4/2018  |
| Biologicals | J9216 | Injection, interferon, gamma-1b, 3 million units                             | 3 million units | 1/1/2000 | Actimmune®                 | interferon gamma-1b<br>injection, for subcutaneous<br>use                        | Indicated for:  • Reducing the frequency and severity of serious infections associated with Chronic Granulomatous Disease (CGD)  • 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 depot suspension), 7.5 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 | Υ | Υ |   | 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 | Υ | Υ |   | 6/4/2019   |
| Drugs       | J9225 | Histrelin implant (Vantas),<br>50 mg   | 50 mg           | 1/1/2006 | Vantas®                    | histrelin acetate<br>subcutaneous implant  | Indicated for the palliative treatment of advanced prostate cancer.  | 1     | 1     | 18 years                              | N/A | Males Only | Υ | Υ |   | 10/26/2018 |
| Drugs       | J9226 | Histrelin implant<br>(Supprelin LA), 50 mg                                   | 50 mg           | 1/1/2008 | Supprelin® 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        | Υ | Υ |   | 10/26/2018 |
| Biologicals | J9228 | Injection, ipilimumab, 1<br>mg   | 1 mg            | 1/1/2012 | Yervoy*                    | ipilimumab injection, for intravenous use  | Indicated for:  * Adjuvant treatment of patients with cutaneous melanoma with pathologic involvement of regional lymph nodes of more than 1 mm who have undergone complete resection, including total lymphadenectomy.  * Treatment of unresectable or metastatic melanoma in adults and pediatric patients (12 years and older).  * Treatment of patients with intermediate or poor risk, previously untreated advanced renal cell carcinoma (RCC), in combination with nivolumab.  * Treatment of adult and pediatric patients 12 years of age and older with microsatellite instability-high (MSI-H) or mismatch repair deficient (dMMR) metastatic colorectal cancer that has progressed following treatment with a fluoropyrimidine, oxaliplatin, and irinotecan, in combination with nivolumab.  | 1,400 | 2,800 | 12 years                              | N/A | N/A        | Υ | Y |   | 4/9/2019   |
| Biologicals | J9229 | Injection, inotuzumab 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        | Υ | Υ |   | 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        | Υ | Y |   | 10/26/2018 |
| Drugs       | J9245 | Injection, melphalan<br>hydrochloride, 50 mg                                 | 50 mg           | 1/1/2000 | Evomela®                   | melphalan for injection, for intravenous use                                     | Indicated for:  • use as a high-dose conditioning treatment prior to hematopoietic progenitor (stem) cell transplantation in patients with multiple myeloma.  • palliative treatment of patients with multiple myeloma for whom oral therapy is not appropriate.   | 5     | 10    | 18 years                              | N/A | N/A        | Υ | Y |   | 9/27/2018  |
| Drugs       | J9250 | Methotrexate sodium, 5 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 and/dyddifform 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 used alone or in combination with other anticancer agents in the treatment of breast cancer, epidermolid cancers of the head and neck, advanced mycosis fungioides (cutaneous T cell lymphoma), and lung cancer, particularly squamous cell and small cell types. Methotrexate is also used in combination with other chemotherapeutic agents in the treatment of advanced stage non-Hodgkin's lymphomas.  Methotrexate in high doses followed by leucovorin rescue in combination with other chemotherapeutic agents in the treatment of advanced stage non-Hodgkin's lymphomas.  Methotrexate is discated in the symptomatic control of severe, recalcitrant, disabling psoriais that is not adequately responsive to other forms of therapy, but only when the diagnosis has been established, as by biopsy and/or after dermatologic consultation. It is important to ensure that a psoriais' flare' is not due to an undiagnosed concomitant disease affecting immune responses.  Methotrexate is indicated in the management of selected adults with severe, active rheumatoid arthritis (ACR citeria), or children with active polyarticular-course juvenile rheumatoid arthritis, who have had an insufficient therapeutic response to, or are intolerant of, an adequate trial of first-line therapeutic sepsonses.  Methotrexates is indicated in the management of selected adults with severe, active rheumatoid arthritis, kore to the proper of the prope | 9     | 135   | Indication Specific<br>(see comments) | N/A | N/A        | ٧ | Y | Indication specific age restrictions:  • Cancer chemotherapy: None • Polyarticular-course juvenile rheumatoid arthritis: 2 years of age and older  • All other indications: 18 years of age and older | 10/26/2018 |

| Drugs       | J9260 | Methotrexate sodium, 50 mg                                | 50 mg                              | 1/1/2000  | N/A       | methotrexate sodium<br>injection, 50 mg  | I Methotrexate is indicated in the treatment of gestational choriocarcinoma, chorioadenoma destruens and hydatdiform 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, peldermoid cancers of the head and neck, advanced mycosis fungoides (cutaneous T cell lymphoma), and lung cancer, particularly squamous cell and small cell types. Methotrexate is also used in combination with other chemotherapeutic agents in the treatment of advanced stage non-Hodgkin's lymphomas.  Methotrexate in high doses followed by leucovorin rescue in combination with other chemotherapeutic agents is effective in prolonging relapse-free survival in patients with non-metastatic osteosarcoma who have undergone surgical resection or amputation for the primary tumor.  Methotrexate is indicated in the symptomatic control of severe, recalcitrant, disabiling psoriasis that is not adequately responsive to other forms of therapy, but only when the diagnosis has been established, as by biopsy and/or after dermatologic consultation. It is important to ensure that a psoriasis "firer" is not due to an undiagnosed concomitant disease affecting immune responses.  Methotrexate is indicated in the management of selected adults with severe, active rheumatoid arthritis, McR criteria), or children with active polyarticular-course juvenile rheumatoid arthritis, who have had an insufficient therapeutic response to, or are intolerant of, an adequate trial of first-line therapy including full dose non-steroidal anti-inflammatory agents (NSAIDs), Agpirin, NSAIDs, and/or low-dose steroids may be continued, although the possibility of increased toxicity with concomitant use of NSAIDs including salicylates has not been fully explored. Steroids may be re | 750   | 3,000  | Indication Specific<br>(see comments) | N/A | N/A | ٧ | Y | Indication specific. Cancer chemotherapy: None Polyarticular-course juvenile rheumatoid arthrite: 2 years of age and older All other indications: 18 years of age and older | 6/5/2019  |
|-------------|-------|---|------------------------------------|-----------|-----------|--|---|-------|--------|---------------------------------------|-----|-----|---|---|---|-----------|
| Drugs       | J9261 | Injection, nelarabine, 50<br>mg                           | 50 mg                              | 1/1/2007  | Arranon®  | nelarabine injection, for intravenous use  | and may increase the incidence of advance offects. Beet and obsciotherany as indirated should be<br>indicated for the treatment of patients with T-cell acute lymphoblastic leukemia and T-cell<br>lymphoblastic lymphoma whose disease has not responded to or has relapsed following<br>treatment with at least two chemotherapy regimens. This use is based on the induction of<br>complete responses. Randomized trials demonstrating increased survival or other clinical benefit<br>have not been conducted.  | 75    | 450    | N/A                                   | N/A | N/A | Y | Y |   | 4/10/2019 |
| Drugs       | J9262 | Injection, omacetaxine 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 and/or intolerance to two or more tyrosine kinase inhibitors.  | 625   | 10,625 | 18 years                              | N/A | N/A | Υ | Y |   | 9/21/2018 |
| Drugs       | J9263 | Injection, oxaliplatin, 0.5 mg                            | 0.5 mg                             | 1/1/2004  | Eloxatin* | oxaliplatin injection for intravenous use  | Indicated for:  • Adjuvant treatment of stage III colon cancer in patients who have undergone complete resection of the primary tumor.  • Treatment of advanced colorectal cancer.  | 500   | 1,500  | 18 years                              | N/A | N/A | Υ | Y |   | 6/4/2019  |
| Drugs       | J9264 | Injection, paclitaxel<br>protein-bound particles, 1<br>mg | 1 mg                               | 1/1/2006  | Abraxane* | paclitaxel protein-bound<br>particles for injectable<br>suspension, (albumin-bound | Indicated for the treatment:  - Metastatic breast cancer, after failure of combination chemotherapy for metastatic disease or relapse within six months of adjuvant chemotherapy. Prior therapy should have included an anthracycline unless clinically contraindicated.  - Locally advanced or metastatic non-small cell lung cancer (NSCLC), as first-line treatment in   | 650   | 1,300  | 18 years                              | N/A | N/A | Y | Y |   | 7/16/2018 |
| Biologicals | J9266 | Injection, pegaspargase,<br>per single dose vial          | per single dose vial<br>(3,750 IU) | 1/1/2000  | Oncaspar* | pegaspargase injection, for intramuscular or intravenous                           | gemcitabline.  Indicated as a component of a multi-agent chemotherapeutic regimen for treatment of patients with:  • First line acute lymphoblastic leukemia  | 2     | 6      | 1 year                                | N/A | N/A | Υ | Y |   | 8/24/2018 |
| Drugs       | J9267 | Injection, paclitaxel, 1 mg                               | 1 mg                               | 1/1/2015  | Taxol*    | use paclitaxel injection   | Acute lymphoblastic leukemia and hypersensitivity to asparaginase     Indicated for breast cancer, ovarian cancer, non-small cell lung cancer, and AIDS-related karposi   | 437.5 | 875    | 18 years                              | N/A | N/A | Y | Y |   | 9/27/2018 |
| Drugs       | J9268 | Injection, pacitaxer, 1 mg                                | 10 mg                              | 7/15/2001 | Nipent®   | pentostatin for injection  | sarcoma. See package insert for full details of each indication.  Indicated as single-agent treatment for both untreated and alpha-interferon-refractory hairy cell leukemia patients with active disease as defined by clinically significant anemia, neutropenia,   | 1     | 3      | 18 years                              | N/A | N/A | Y | Y |   | 9/21/2018 |
| Drugs       | 19200 | 10 mg   | 10 mg                              | 7/13/2001 | Nipelic   | pentostatii ioi injection  | thrombocytopenia, or disease-related symptoms.  Melanoma:   | 1     | 3      | 10 years                              | N/A | N/A | ' | ' |   | 5/21/2018 |
| Biologicals | J9271 | Injection,<br>pembrolizumab, 1 mg                         | 1 mg                               | 1/1/2016  | Keytruda® | pembrolizumab injection, foi<br>intravenous use                                    | Indicated for the treatment of patients with unresectable or metastatic melanoma. Indicated for the adjuvant treatment of patients with melanoma with involvement of lymph node(s) following complete resection.  Non-Small Cell Lung Cancer (NSCLC):  1. Indicated in combination with pemetrexed and platinum chemotherapy, as first-line treatment of patients with metastatic nonsquamous NSCLC, with no EGFR or ALK genomic tumor aberrations.  2. Indicated as a single agent for the treatment of patients with metastatic NSCLC whose tumors express PD-L1 (TPS ≥ 1%) as determined by an FDA-approved test, with disease progression on or after platinum-containing chemotherapy. Patients with EGFR or ALK genomic tumor aberrations should have disease progression on FDA-approved therapy for these aberrations prior to receiving Keyruda.  3. Indicated as a single agent for the first-line treatment of patients with stage III NSCLC, who are not candidates for surgical resection or definitive chemoradiation, or metastatic NSCLC, and whose tumors express PD-L1 [Tumor Proportion Score (TPS) ≥1%] as determined by an FDA-approved test, with no EGFR or ALK genomic tumor aberrations.  4. Indicated in combination with carboplatin and either pacitaxel or nab-paclitaxel, as first-line treatment of patients with metastatic squamous NSCLC.  Head and Neck Squamous Cell Cancer (HNSCC): Indicated for the treatment of patients with recurrent or metastatic HNSCC with disease progression on or after platinum-containing chemotherapy.  Classical Hodgkin Lymphoma (cHL): Indicated for the treatment of adult and pediatric patients with refractory CHL, or who have releapes all after 3 or more prior il times of therapy.  | 200   | 400    | N/A                                   | N/A | N/A | Y | Y |   | 4/9/2019  |

| 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 adenocarcinoma of the stomach or pancreas in proven combinations with other approved chemotheraputic agents and as palliative treatment when other modalities have failed. Mitomycin is not recommended to replace appropriate surgery and/or radiotherapy.   | 10  | 10    | 18 years | N/A | N/A | Υ | Y |  | 6/7/2019   |
|-------------|-------|--|-------|----------|------------|---|--|-----|-------|----------|-----|-----|---|---|--|------------|
| Biologicals | J9285 | Injection, olaratumab, 10<br>mg                    | 10 mg | 1/1/2018 | Lartruvo™  | olaratumab injection, for intravenous use         | Indicated, in combination with doxorubicin, for the treatment of adult patients with soft tissue sarcoma (STS) with a histologic subtype for which an anthracycline-containing regimen is appropriate and which is not amenable to curative treatment with radiotherapy or surgery. This indication is approved under accelerated approval. Continued approval for this indication may be 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 | Indicated:  • For reducing neurologic disability and/or the frequency of clinical relapses in patients with secondary (chronic) progressive, progressive relapsing, or worsening relapsing-remitting multiple sclerosis (i.e., patients whose neurologic status is significantly abnormal between relapses). Mitroxantrone is not indicated in the treatment of patients with primary progressive multiple sclerosis.  • In combination with corticosteroids is indicated as initial chemotherapy for the treatment of patients with pain related to advanced hormone-refractory prostate cancer.  • In combination with other approved drug(s) is indicated in the initial therapy of acute nonlymphocytic leukemia (ANLL) in adults. This category includes myelogenous, promyelocytic, monocytic, and erythroid acute leukemias.  | 7   | 30    | 18 years | N/A | N/A | Y | Y | 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 intravenous use        | Indicated, in combination with gemcitabine and cisplatin, for first-line treatment of patients with metastatic squamous non-small cell lung cancer.<br>Limitation of Use: Portrazza is not indicated for treatment of non-squamous non-small cell lung cancer.   | 800 | 3,200 | 18 years | N/A | N/A | Υ | Y |  | 7/2/2018   |
| Biologicals | J9299 | Injection, nivolumab, 1<br>mg                      | 1 mg  | 1/1/2016 | Opdivo*    | nivolumab injection, for<br>intravenous use       | Indicated for unresectable or metastatic melanoma, as a single agent or in combination with pillimumab. (Indication simplified 37/7019)  Indicated for the treatment of patients with metastatic non-small cell lung cancer and progression on or after platinum-based chemotherapy. Patients with EGFR or ALK genomic tumor abherations should have disease progression on FDA-approved therapy for these aberrations prior to receiving Opdivo.  Indicated for the treatment of patients with advanced renal cell carcinoma who have received prior anti-anglogenic therapy.  Indicated for the treatment of patients with recurrent or metastatic squamous cell carcinoma of the head and neck with disease progression on or after a platinum-based therapy.  Indicated for the treatment of patients with locally advanced or metastatic unchelial 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.  ***New Indication 4/25/2017***  Indicated for the treatment of adult patients with classical Hodgkin lymphoma that has relapsed or progressed after: autologous hematopoletic stem cell transplantation (HSCT) and brentuximab vedotin, or 3 or more lines of systemic therapy that includes autologous HSCT.  ****Updated Indication 7/31/2017****  Indicated for the treatment of adult and pediatric (12 years and older) patients with microsatellite instability-high (MSH-h) or mismatch repair deficient (dMMR) metastatic colorectal cancer that has progressed following treatment with a fluoropyrimidine, oxaliplatin, and irinotecan, as a single agent or in combination with pillimumab. | 480 | 960   | 12 years | N/A | N/A | Y | Y |  | 5/13/2019  |
| Biologicals | J9301 | Injection, obinutuzumab,<br>10 mg                  | 10 mg | 1/1/2015 | Gazyva®    | obinutuzumab Injection, for intravenous use       | Indicated:  In combination with chlorambucil, for the treatment of patients with previously untreated chronic lymphocytic leukemia.  In combination with bendamustine followed by Gazyva monotherapy, for the treatment of patients with follicular lymphoma who relapsed after, or are refractory to, a rituximab-containing regimen.  In combination with chemotherapy followed by Gazyva monotherapy in patients achieving at least a partial remission, for the treatment of adult patients with previously untreated stage II bulky, III or V follicular lymphoma.  | 100 | 400   | 18 years | N/A | N/A | Y | Y |  | 7/16/2018  |
| Biologicals | J9302 | Injection, ofatumumab,<br>10 mg                    | 10 mg | 1/1/2011 | Arzerra*   | ofatumumab injection, for intravenous use         | Indicated for the treatment of chronic lymphocytic leukemia (CLL):  • in combination with chlorambucil, for the treatment of previously untreated patients with CLL for whom fludarabine-based therapy is considered inappropriate.  • in combination with fludarabine and cyclophosphamide for the treatment of patients with relapsed CLL.  • for extended treatment of patients who are in complete or partial response after at least two lines of therapy for recurrent or progressive CLL.  • for the treatment of patients with CLL refractory to fludarabine and alemtuzumab.  | 200 | 1,000 | 18 years | N/A | N/A | Y | Y | Pregnancy: May cause fetal B-<br>cell depletion. | 7/16/2018  |
| Biologicals | 19303 | Injection, panitumumab,<br>10 mg                   | 10 mg | 1/1/2008 | Vectibix*  | panitumumab injection, for 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 for this use) metastatic colorectal cancer (mCRC):  - In combination with Folfox for first-line treatment.  - As monotherapy following disease progression after prior treatment with fluoropyrimidine, oxaliplatin, and irinotecan-containing chemotherapy.  Limitation of Use: Vectibix is not indicated for the treatment of patients with RAS-mutant mCRC or for whom RAS mutation status is unknown.   | 90  | 270   | 18 years | N/A | N/A | Υ | Y |  | 6/4/2019   |

| Drugs                | 19305          | Injection, pemetrexed, 10 mg                                  | 10 mg | 1/1/2005 | Alimta*            | pemetrexed for injection, for<br>intravenous use                             | alter prior chemotherapy.  Initial treatment, in combination with cisplatin, of patients with malignant pleural mesothelioma whose disease is unresectable or who are otherwise not candidates for curative surgery.  In combination with carboplatin and pembrolizumab for the initial treatment of patients with metastatic, non-squamous NSCLC.  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 | Υ | Y | 10/31/2018 |
|----------------------|----------------|---|-------|----------|--------------------|--|--|-----|-------|----------|-----|-----|---|---|------------|
| Biologicals          | 19306          | Injection, pertuzumab, 1<br>mg                                | 1 mg  | 1/1/2014 | Perjeta*           | pertuzumab injection, for intravenous use                                    | Indicated for:  - Use in combination with trastuzumab and docetaxel for treatment of patients with HER2- positive metastatic breast cancer (MBC) who have not received prior anti-HER2 therapy or chemotherapy for metastatic disease.  - Use in combination with trastuzumab and chemotherapy as O Neoadjuvant treatment of patients with HER2-positive, locally advanced, inflammatory, or early stage breast cancer (either greater than 2 cm in diameter or node positive) as part of a complete treatment regimen for early breast cancer.  - Adjuvant treatment of patients with HER2-positive early breast cancer at high risk of recurrence.   | 840 | 1,260 | 18 years | N/A | N/A | Υ | Y | 7/2/2018   |
| Drugs<br>Biologicals | J9307<br>J9308 | Injection, pralatrexate, 1  mg  Injection, ramucirumab, 5  mg | 1 mg  | 1/1/2011 | Folotyn®  Cyramza® | intravenous use  intravenous use  ramucirumab injection, for intravenous use | Indicated:  * As a single agent or in combination with paclitaxel, for treatment of advanced gastric or gastro- sophageal junction adenocarcinoma, with disease progression on or after prior fluoropyrimidine or platinum-containing chemotherapy. In combination with docetaxel, for treatment of metastatic non-small cell lung cancer with disease progression on or after platinum-based chemotherapy. Patients with EGFR or ALK genomic tumor aberrations should have disease progression on DA-approved therapy for these aberrations prior to receiving Cyramza. In combination with Foldris, for the treatment of metastatic colorectal cancer with disease progression on or after prior therapy with bevactumab, oxaliplatin, and a fluoropyrimidine. * As a single agent, for the treatment of hepatocellular carcinoma in patients who have an alpha fetoprotein of 2400 ng/mL and have been treated with sorafenib.  | 280 | 672   | 18 years | N/A | N/A | Y | 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      | Indicated for the treatment of adult patients with:  Follicular Lymphoma (FL):  Relapsed or effractory, follicular lymphoma as a single agent or Previously untreated follicular lymphoma in combination with first line chemotherapy and, in patients achieving a complete or partial response to ritusimab in combination with chemotherapy, as single-agent maintenance therapy or Non-progressing (including stable disease), follicular lymphoma as a single agent after first-line cyclophosphamide, vincristine, and prednisone (CVP) chemotherapy  **Diffuse large B-cell Lymphoma (DLBCL): or Previously untreated diffuse large B-cell lymphoma in combination with cyclophosphamide, doxorubicin, vincristine, prednisone (CHOP) or other anthracycline-based chemotherapy regimens  **Chronic Lymphocytic Leukemia (CLL): or Previously untreated and previously treated CLL in combination with fludarabine and cyclophosphamide (FC)  Limitations of Use:  **Initiate treatment with Rituxan Hycela only after patients have received at least one full dose of ritusimab product by intravenous infusion.  **Rituxan Hycela is not indicated for the treatment of non-malignant conditions.   | 160 | 700   | 18 years | N/A | N/A | γ | Y | 4/19/2019  |
| 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:  Non-Hodgkin's Lymphoma (NHL)  Relapsed or refractory, low grade or follicular, CD20-positive B-cell NHL as a single agent.  - Previously untreated follicular, CD20-positive, B-cell NHL in combination with first line chemotherapy and, in patients achieving a complete or partial response to Rituxan in combination with chemotherapy, as single-agent maintenance therapy.  Non-progressing (including stable disease), low-grade, CD20-positive, B-cell NHL as a single agent after first-line cyclophosphamide, vincristine, and prednisone (CVP) chemotherapy.  - Previously untreated diffuse large B-cell, CD20-positive NHL in combination with (cyclophosphamide, doxorubicin, vincristine, and prednisone) (CHOP) or other anthracycline-based chemotherapy regimens.  - Chronic Lymphocytic Leukemia (CLL)  - Previously untreated and previously treated CD20-positive CLL in combination with fludarabine and cyclophosphamide (FC).  - Rheumatoid Arthritis (RA) in combination with methotrevate in adult patients with moderately-to severely-active RA who have inadequate response to one or more TNF antagonist therapies.  - Granulomatosis with Polyangitis (GPA) (Wegener's Granulomatosis) and Microscopic Polyangitis (MPA) in adult patients in combination with glucocorticoids.  - Moderate to severe pemphigus vulgaris (PV) in adult patients. | 130 | 500   | 18 years | N/A | N/A | Υ | Y | 5/21/2019  |

|                      | т     |  |                      |          |               | 1   | 1   |     | 1     | 1        |     |     |   |   |           |
|----------------------|-------|--|----------------------|----------|---------------|---|---|-----|-------|----------|-----|-----|---|---|-----------|
| Drugs                | J9315 | Injection, romidepsin, 1<br>mg   | 1 mg                 | 1/1/2011 | Istodax®      | romidepsin for injection, for intravenous use                                     | Indicated for:  - Treatment of cutaneous T-cell lymphoma (CTCL) in patients who have received at least one prior systemic therapy.  - 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 | Υ | 8/29/2018 |
| D                    | J9320 | Injection, streptozocin, 1   |                      | 1/1/2000 | Zanosar*      | streptozocin powder, for  | Indicated in the treatment of metastatic islet cell cancer of pancreas.   | 4   | 20    | N/A      | N/A | N/A | γ | γ | 6/7/2019  |
| Drugs<br>Biologicals | J9325 | gram Injection, talimogene laherparepvec, per 1 million plaque forming units | 1 g<br>1 million PFU | 1/1/2000 | Imlygic*      | solution<br>talimogene laherparepvec<br>suspension for intralesional<br>injection | indicated for the local treatment of unresectable cutaneous, subcutaneous, and nodal lesions in<br>patients with melanoma recurrent after initial surgery.  Limitations of Use: Imlygic has not been shown to improve overall survival or have an effect on<br>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:  Newly diagnosed glioblastoma multiforme (GBM) concomitantly with radiotherapy and then as maintenance treatment.  Refractory anaplastic astrocytoma patients who have experienced disease progression on a drug regimen containing nitrosourea and procarbazine.   | 400 | 6,200 | 18 years | N/A | N/A | Y | Y | 9/12/2018 |
| Drugs                | J9330 | Injection, temsirolimus, 1<br>mg   | 1 mg                 | 1/1/2009 | Torisel*      | temsirolimus injection, for<br>intravenous use                                    | Indicated for the treatment of advanced renal cell carcinoma.   | 25  | 125   | N/A      | N/A | N/A | Y | Υ | 9/25/2018 |
| Drugs                | J9340 | Injection, thiotepa, 15 mg   | 15 mg                | 1/1/2000 | N/A           | 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 results have been seen in the following tumors: adenocarcinoma of the breast; denocarcinoma of the vary; for controlling intracavitary effusions secondary to diffuse or localized neoplastic diseases of various serosal cavities; for the treatment of superficial papillary carcinoma of the urinary bladder. Thiotepa has been effective against other lymphomas, such as lymphosarcoma and Hodgkin's disease.  | 8   | 20    | 18 years | N/A | N/A | Y | Υ | 9/21/2018 |
| Drugs                | J9351 | Injection, topotecan, 0.1 mg   | 0.1 mg               | 1/1/2011 | Hycamtin*     | topotecan for injection   | Indicated for:  Metastatic carcinoma of the ovary after disease progression on or after initial or subsequent chemotherapy.  Small cell lung cancer platinum-sensitive 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 a menable to curative treatment.   | 40  | 400   | 18 years | N/A | N/A | Y | Υ | 9/12/2018 |
| Drugs                | J9352 | Injection, trabectedin, 0.1  | 0.1 mg               | 1/1/2017 | Yondelis*     |   | Indicated for the treatment of patients with unresectable or metastatic liposarcoma or  | 40  | 80    | 18 years | N/A | N/A | Υ | Υ | 9/12/2018 |
| Biologicals          | J9354 | mg Injection, ado- trastuzumab emtansine, 1 mg                               | 1 mg                 | 1/1/2014 | Kadcyla®      | intravenous use ado-trastuzumab emtansine for injection, for intravenous use      | leiomyosarcoma who received a prior anthracycline-containing regimen.  Indicated, as a single agent, for the treatment of patients with HER2-positive, metastatic breast cancer who previously received trastuzumab and a taxane, separately or in combination. Patients should have either:  • received prior therapy for metastatic disease, or  • developed disease recurrence during or within six months of completing adjuvant therapy.  • The adjuvant treatment of patients with HER2-positive early breast cancer who have residual invasive disease after neoadjuvant taxane and trastuzumab-based treatment.                     | 580 | 1,160 | 18 years | N/A | N/A | Y | Y | 6/4/2019  |
| Biologicals          | J9355 | Injection, trastuzumab,<br>10 mg   | 10 mg                | 1/1/2000 | Herceptin®    | trastuzumab for injection, for<br>intravenous use                                 | Indicated for:  * The treatment of HER2-overexpressing breast cancer.  * The treatment of HER2-overexpressing metastatic gastric or gastroesophageal junction adenocarcinoma.  Select patients for therapy based on an FDA-approved companion diagnostic for Herceptin.   | 112 | 196   | 18 years | N/A | N/A | Y | Υ | 9/12/2018 |
| Drugs                | J9357 | Injection, valrubicin,<br>intravesical, 200 mg                               | 200 mg               | 1/1/2000 | Valstar*      | valrubicin solution,<br>concentrate, for intravesical<br>use                      | Indicated for intravesical therapy of Bacillus Calmette-Guérin (BCG) -refractory carcinoma in situ (CIS) of the urinary bladder in patients for whom immediate cystectomy would be associated with unacceptable morbidity or mortality.   | 4   | 20    | 18 years | N/A | N/A | Y | Y | 9/12/2018 |
| Drugs                | J9360 | Injection, vinblastine<br>sulfate, 1 mg                                      | 1 mg                 | 1/1/2009 | N/A           | vinblastine sulfate injection   | Indicated in the palliative treatment of the following: Frequently Responsive Malignancies - Generalized Hodgkin's disease (Stages III and IV, Ann Arbor modification of Rye staging system) - Lymphocytic (Iymphoma (nodular and diffuse, poorly and well differentiated) - Histocytic lymphoma - Mycosis fungioles (advanced stages) - Advanced carcinoma of the testis - Kaposi's sarcoma - Letterer-Siwe disease (histiocytosis X) - Lest Frequently Responsive Malignancies - Choriocarcinoma resistant to other chemotherapeutic agents - Carcinoma of the breast, unresponsive to appropriate endocrine surgery and hormonal therapy | 50  | 250   | N/A      | N/A | N/A | Y | Y | 9/12/2018 |
| Drugs                | J9370 | Vincristine sulfate, 1 mg  | 1 mg                 | 1/1/2000 | Vincasar PFS® | vincristine sulfate injection solution  | Indicated in acute leukemia. Vincasar PFS has also been shown to be useful in combination with<br>other oncolytic agents in Hodgkin's disease, non Hodgkin's malignant lymphomas,<br>rhabdomyosarcoma, neuroblastoma, and Wilms' tumor.   | 4   | 20    | N/A      | N/A | N/A | Y | Y | 9/12/2018 |
| Drugs                | J9371 | Injection, vincristine 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<br>lymphoblastic leukemia (ALL) in second or greater relapse or whose disease has progressed<br>following two or more anti-leukemia therapies. This indication is based on overall response rate.<br>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                | J9390 | Injection, vinorelbine tartrate, per 10 mg                                   | 10 mg                | 1/1/2000 | Navelbine*    | vinorelbine tartrate injection,<br>for intravenous use                            | Indicated:  • In combination with cisplatin for first-line treatment of patients with locally advanced or metastatic non-small cell lung cancer (NSCLC).  • 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 |

| Drugs       | 19395 | Injection, fulvestrant, 25<br>mg                  | 25 mg | 1/1/2004 | Faslodex*                | fulvestrant injection, for<br>intramuscular use                          | Indicated for the treatment of HR-positive advanced breast cancer in postmenopausal women with disease progression following endocrine therapy.  Indicated for the treatment of HR-positive, HER2-negative advanced or metastatic breast cancer in combination with palbocicib in women with disease progression after endocrine therapy.  ***New Indication 8/25/2017*** Indicated for the treatment of hormone receptor (HR)-positive, human epidermal growth receptor 2 (HER2)-negative advanced breast cancer in postmenopausal women not previously treated with endocrine therapy.  ***New Indication 11/14/2017*** Indicated for the treatment of HR-positive, HER2-negative advanced or metastatic breast cancer in combination with abemacicib in women with disease progression after endocrine therapy. | 20    | 60     | 18 years                           | N/A | Females only | Y | Y |  | 10/10/2018 |
|-------------|-------|---|-------|----------|--------------------------|--|--|-------|--------|------------------------------------|-----|--------------|---|---|--|------------|
| 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<br>of patients with metastatic colorectal cancer (mCRC) that is resistant to or has progressed<br>following an oxaliplatin-containing regimen.   | 600   | 1,800  | 18 years                           | N/A | N/A          | Υ | Υ |  | 6/7/2019   |
| Drugs       | 19600 | Injection, porfimer<br>sodium, 75 mg              | 75 mg | 1/1/2000 | Photofrin®               | porfimer sodium injection  | Indicated for:  Esophageal Cancer  Palliation of patients with completely obstructing esophageal cancer, or of patients with partially obstructing esophageal cancer who, in the opinion of their physician, cannot be satisfactorily treated with Md:YAG laser therapy Endobronchial Cancer  Treatment of microinvasive endobronchial non-small-cell lung cancer (NSCLC) in patients for whom surgery and radiotherapy are not indicated  Reduction of obstruction and palliation of symptoms in patients with completely or partially obstructing endobronchial NSCLC  High-Grade Dysplasia in Barrett's Esophagus  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          | Y | Y |  | 6/6/2019   |
| Biologicals | J9999 | Not otherwise classified,<br>antineoplastic drugs | 1 mcg | 1/1/2000 | Elzonris™                | tagraxofusp-erzs injection, for intravenous use                          | Indicated for the treatment of blastic plasmacytoid dendritic cell neoplasm (BPDCN) in adults and in pediatric patients 2 years and older.   | 2,000 | 20,000 | 2 years                            | N/A | N/A          | Y | Y |  | 5/9/2019   |
| Drugs       | 19999 | Not otherwise classified,<br>antineoplastic drugs | 10 mg | 1/1/2000 | Infugem™                 | gemcitabine in sodium<br>chloride injection, for<br>intravenous use      | Indicated:  • In combination with carboplatin, for the treatment of advanced ovarian cancer that has relapsed at least 6 months after completion of platinum-based therapy.  • In combination with paclitaxel, for first-line treatment of metastatic breast cancer after failure of prior anthracycline-containing adjuvant chemotherapy, unless anthracyclines were clinically contraindicated.  • In combination with cisplatin for the treatment of non-small cell lung cancer.  • as a single agent for the treatment of pancreatic cancer.   | 320   | 1,280  | 18 years                           | N/A | N/A          | Y | Y |  | 5/9/2019   |
| Biologicals | 19999 | Not otherwise classified, antineoplastic drugs    | 1 mg  | 1/1/2000 | Libtayo®                 | cemiplimab-rwlc injection, for intravenous use                           | Indicated for the treatment of patients with metastatic cutaneous squamous cell carcinoma (CSCC) or locally advanced CSCC who are not candidates for curative surgery or curative radiation.   | 350   | 700    | 18 years                           | N/A | N/A          | Y | Y |  | 10/25/2018 |
| Biologicals | 19999 | Not otherwise classified,<br>antineoplastic drugs | 1 mg  | 1/1/2000 | 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 systemic therapies, including treatment with a purine nucleoside analog (PNA).  Limitations of Use:  Not recommended in patients with severe renal impairment (CrCl < 29 mL/min).  | 6     | 30     | 18 years                           | N/A | N/A          | Y | Υ |  | 4/9/2019   |
| Biologicals | 19999 | Not otherwise classified,<br>antineoplastic drugs | 1 mg  | 1/1/2000 | Poteligeo®               | mogamulizumab-kpkc injection, for intravenous use                        | Indicated for the treatment of adult patients with relapsed or refractory mycosis fungoides or<br>Sézary syndrome after at least one prior systemic therapy.   | 140   | 700    | 18 years                           | N/A | N/A          | Y | Y |  | 10/25/2018 |
| Biologicals | 19999 | Not otherwise classified,<br>antineoplastic drugs | 1 mg  | 1/1/2000 | 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 companion diagnostic for trastuzumab.   | 600   | 1,200  | 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 intravenous use                               | Indicated, in combination with granulocyte-macrophage colony-stimulating factor (GM-CSF),<br>interleukin-2 (It-2), and 13-dis-retinoic acid (RA), for the treatment of pediatric patients with high-<br>risk neuroblastom awho achieve at least a partial response to prior first-line multiagent,<br>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:  • Emergency treatment of hypovolemic shock • Burn therapy  • Cardiopulmonary bypass • Acute liver failure • Sequestration of protein rich fluids  Albutein: Indicated for: • Hypovolemia • Cardiopulmonary bypass procedures • Hypoalbuminemia • Plasma exchange  | 50    | 1,550  | Product Specific (see<br>comments) | N/A | N/A          | Y | Y | Product specific age<br>restrictions:<br>• Plasbumin: 18 years of age<br>and older<br>• Albutein: None (use only if<br>clearly needed) | 9/25/2018  |

| Biologicals | P9047 | Infusion, albumin<br>(human), 25%, 50 mL   | 50 mL  | 1/1/2002 | Albuminar*,<br>Albutein*,<br>Plasbumin*,<br>Flexbumin,<br>Kedbumin*,<br>Albuked | albumin (human), 25%                                      | Plasbumin and Albuked: Indicated for:  • Emergency treatment of hypovolemic shock  Burn therapy  + Hypoproteinemia with or without edema  • Adult respiratory distress syndrome (ARDS)  • Cardiopulmonary bypass  • Acute liver failure  • Neonatal hemohytic disease  • Sequestration of protein rich fluids  • Erythrocyte resuspension  • Acute nephrosis  • Renal dialysis  Flexbumin: Indicated for:  • Hypovolemia  • Hyposlbuminemia: Burns, Adult Respiratory Distress Syndrome (ARDS) and Nephrosis  • Cardiopulmonary bypass surgery  • Hemolytic disease of the newborn (HDN)  Limitation of Use: Albumin is not indicated as an intravenous nutrient.  Albutein: Indicated for:  • Hypovolemia  • Cardiopulmonary bypass  • Acute nephrosis  • Authority respiratory  • Authority of the syndrome (ARDS)  • Ovarian hyperstimulation syndrome  • Neonatal hyperbilirubinemia  • Adult respiratory distress syndrome (ARDS)  | 10  | 310   | Product Specific (see<br>comments) | N/A | N/A        | Y | Y | Product specific age restrictions:  * Kedbumin: 12 years of age and older  • Albuked: 18 years of age and older  • Albuminar: None  • Albuminar: None  • Albuminar: None  • Plasbumin: 18 years of age and older  • Flexbumin: None  • plasbumin: 18 years of age and older | 9/25/2018  |
|-------------|-------|--|--------|----------|---|---|---|-----|-------|------------------------------------|-----|------------|---|---|---|------------|
| Drugs       | Q0138 | Injection, ferumoxytol,<br>for treatment of iron<br>deficiency anemia, 1 mg<br>(non-ESRD use)  | 1 mg   | 1/1/2010 | Feraheme®   | ferumoxytol injection, for intravenous use (non-ESRD use) | Indicated for the treatment of iron deficiency anemia in adult patients with chronic kidney dispare (CKD)   | 510 | 1,020 | 18 years                           | N/A | N/A        | Υ | 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 intravenous use (ESRD use)     | Indicated for the treatment of iron deficiency anemia in adult patients  • With chronic kidney disease (CKD) or  • Who have intolerance to oral iron or have had unsatisfactory response to oral iron.  | 510 | 1,020 | 18 years                           | N/A | N/A        | Υ | Y |   | 10/26/2018 |
| Drugs       | Q0144 | Azithromycin dihydrate,<br>oral, capsule/powder, 1 g   | 1g     | 1/1/2000 | Zithromax*  | azithromycin, oral  | Approved indication for use in the PADP:  * Sexually Transmitted Diseases  Other FDA approved indications: Indicated for the treatment of mild to moderate infections caused by designated, susceptible bacteria:  * Acute bacterial exacerbations of chronic bronchitis in adults  * Acute bacterial sinusitis in adults  * Uncomplicated skin and skin structure infections in adults  * Uncomplicated skin and skin structure infections in adults  * Urethritis and cervicitis in adults  * Genital ulcer disease in men  * Acute otitis media in pediatric patients  * Community-acquired pneumonia in adults and pediatric patients  * Pharyngitis/tonsilitis in adults and pediatric patients  * Mycobacterial infections  Limitations of Use:  * Azithromycin should note used in patients with pneumonia who are judged to be inappropriate for oral therapy because of moderate to severe illness or risk factors.  * To reduce the development of drug-resistant bacteria and maintain the effectiveness of azithromycin and other antibacterial drugs, azithromycin should be used only to treat infections that are proven or strongly suspected to be caused by susceptible bacteria. | 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 with<br>PAP-GM-CSF, including<br>leukapheresis and all<br>other preparatory<br>procedures, per infusion | 250 mL | 7/1/2011 | Provenge®   | sipuleucel-T, suspension for intravenous infusion         | Indicated for the treatment of asymptomatic or minimally symptomatic metastatic castrate-<br>resistant (hormone refractory) prostate cancer.  | 1   | 3     | N/A                                | N/A | Males Only | Υ | Y |   | 7/16/2018  |
| Drugs       | Q2049 | Injection, doxorubicin<br>hydrochloride, ilposomal,<br>imported Lipodox, 10 mg   | 10 mg  | 7/1/2012 | Lipodox*  | doxorubicin hydrochloride<br>liposome injection           | Indicated:  • For treatment of metastatic carcinoma of the ovary in patients with disease that is refractory to both pacitiaxel and platinum based chemotherapy regimens. Refractory disease is defined as disease that has progressed while on treatment or within 6 months of completing treatment.  • As monotherapy for the treatment of metastatic breast cancer, where there is an increased cardiac risk.  • For the treatment of AIDS related Kaposi's Sarcoma in patients with extensive mucocutaneous or visceral disease that has progressed on prior combination therapy (consisting of two of the following agents: a vinca alkaloid, bleomycin and standard doxorubicin or another anthracycline) or in patients who are intolerant to such therapy.  | 13  | 26    | 18 years                           | N/A | N/A        | Y | 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:  Ovarian cancer after failure of platinum-based chemotherapy.  AIDS-related Kaposi's Sarcoma after failure of prior systemic chemotherapy or intolerance to such therapy.  Multiple Myeloma in combination with bortezomib in patients who have not previously received bortezomib and have received at least one prior therapy.  | 15    | 30     | 18 years                              | N/A | N/A | Y | Υ | 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 Zidowudine in patients with HIV-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: 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 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 cancer receiving myelosuppressive chemotherapy in whom the anemia can be managed by transfusion 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 anemia can be managed by transfusion 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 anemia can be managed by transfusion As a substitute for RBC transfusions in patients who require immediate correction of anemia. | 140   | 1,960  | 18 years                              | N/A | N/A | Y | 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:  Decrease the incidence of infection, as manifested by febrile neutropenia, in patients with nonmyeloid malignancies receiving myelosuppressive anticancer drugs associated with a significant incidence of severe neutropenia with feve.  Reduce the time to neutrophil recovery and the duration of fever, following induction or consolidation chemotherapy treatment of patients with acute myeloid leukemia (AML).  | 1,920 | 59,520 | N/A                                   | N/A | N/A | Y | 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: Crohn's Disease: - reducing signs and symptoms and inducing and maintaining clinical remission in adult patients with moderately to severely active disease who have had an inadequate response to conventional therapy reducing signs and symptoms and inducing and maintaining fistulas and maintaining fistula closure in adult patients with fistulizing disease Reducing signs and symptoms and inducing and maintaining clinical remission in pediatric patients with moderately to severely active disease who have had an inadequate response to conventional therapy.  Ulcerative Colitis: - reducing signs and symptoms, inducing and maintaining clinical remission and mucosal healing, and eliminating corticosteroid use in adult patients with moderately to severely active disease who have had an inadequate response to conventional therapy.  Rheumatoid Arthritis in combination with methotrexate: - reducing signs and symptoms, inibiliting the progression of structural damage, and improving physical function in patients with moderately to severely active disease.  Ankylosing Spondylitis: - reducing signs and symptoms in patients with active disease Pooriatic Arthritis: - reducing signs and symptoms of active arthritis, inhibiting the progression of structural damage, and improving physical function.  Plaque Pooriasis - retauting signs and symptoms of active arthritis, inhibiting the progression of structural damage, and improving physical function.  | 140   | 140    | Indication Specific<br>(see comments) | N/A | N/A | Y | Υ | Crohn's Disease: 6 years of age and older All other indications: 18 years of age and older |

| Biologicals | Q5105 | Injection, epoetin alfa,<br>biosimilar, (Retacrit) (for<br>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: O Chronic kidney disease (CKD) in patients on dialysis and not on dialysis. O Zidovudine in patients with HIV-infection. O The effects of concomitant myelosuppressive chemotherapy, and upon initiation, there is a minimum of two additional months of planned chemotherapy. Indicated for the reduction of allogeneic RBC transfusions in patients undergoing elective, noncardiac, nonvascular surgery. Limitations of Use: Retacrit has not been 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 myelosuppressive chemotherapy. 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 undergoing cardiac via sculpting to donate autologous blood. In patients undergoing cardiac or vascular surgery. As a substitute for RBC transfusions in patients who require immediate correction of anemia.      | 140   | 1,820  | 1 month                               | N/A | N/A | Y | Y |   | 7/26/2018  |
|-------------|-------|--|------------------------------|-----------|-------------|--|--|-------|--------|---------------------------------------|-----|-----|---|---|---|------------|
| Biologicals | Q5106 | Injection, epoetin alfa,<br>biosimilar, (Retacrit) (for<br>non-ESRD use), 1000 units         | 1,000 units                  | 7/1/2018  | Retacrit™   | epoetin alfa-epbx injection,<br>for intravenous or<br>subcutaneous use (for non-<br>ESRD use)          | Indicated for the treatment of anemia due to: O Chronic kidney disease (KCD) in patients on dialysis and not on dialysis. O Zidovudine in patients with HIV-infection. O The effects of concomitant myelosuppressive chemotherapy, and upon initiation, there is a minimum of two additional months of planned chemotherapy. Indicated for the reduction of allogeneic RBC transfusions in patients undergoing elective, noncardiac, nonvascular surgery.  Limitations of Use: Retacrit has not been 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 myelosuppressive chemotherapy. 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 surfacision. In patients surfacision. In patients surfacision. In patients undergoing cardiac or vascular surgery.  As a substitute for RBC transfusions in patients who require immediate correction of anemia. | 84    | 630    | Indication Specific<br>(see comments) | N/A | N/A | Υ | Υ | Indication specific age restrictions:  • Anemia due to concomitant myelosuppressive chemotherapy: 5 years of age and older  • Zidovudine-treated, anemia, patients with HIV infection: 8 months and older | 7/26/2018  |
| 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 receiving myelosuppressive anti-cancer drugs associated with a clinically significant incidence of febrile neutropenia.  Limitations of Use: Fulphila is not indicated for the mobilization of peripheral blood progenitor cells for hematopoietic stem cell transplantation.  | 12    | 24     | N/A                                   | N/A | N/A | Y | Y |   | 7/26/2018  |
| 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:  Decrease the incidence of infection, as manifested by febrile neutropenia, in patients with nonmyeloid malignancies receiving myelosuppressive anti-cancer drugs associated with a significant incidence of severe neutropenia with fever.  Reduce the time to neutrophil recovery and the duration of fever, following induction or consolidation chemotherapy treatment of patients with acute myeloid leukemia (AML).  Reduce the duration of neutropenia and neutropenia-related clinicial sequelae, e.g., febrile neutropenia, in patients with nonmyeloid malignancies undergoing myeloablative chemotherapy followed by bone marrow transplantation (BMT).  Mobilize autologous hematopoietic progenitor cells into the peripheral blood for collection by leukapheresis.  Reduce the incidence and duration of sequelae of severe neutropenia (e.g., fever, infections, oropharyngeal ulcers) in symptomatic patients with congenital neutropenia, cyclic neutropenia, or idiopathic neutropenia.   | 1,920 | 59,520 | N/A                                   | N/A | N/A | Y | 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 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    | 24     | N/A                                   | N/A | N/A | Υ | Y |   | 2/28/2019  |
| 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 buprenorphine-containing product, followed by dose adjustment for a minimum of 7 days.  | 1     | 2      | 18 years                              | N/A | N/A | Υ | 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 buprenorphine-containing product, followed by dose adjustment for a minimum of 7 days.  | 1     | 2      | 18 years                              | N/A | N/A | Y | Υ |   | 9/27/2018  |
| Drugs       | S0080 | Injection, pentamidine isethionate, 300 mg   | 300 mg                       | 1/1/2000  | Pentam® 300 | pentamidine isethionate for injection  | Indicated for the treatment and prevention of pneumonia caused by Pneumocystis carinii.  | 2     | 42     | 4 months                              | N/A | N/A | Y | Υ |   | 8/24/2018  |

| Biologicals | S0145  | Injection, pegylated<br>interferon alfa-2a, 180<br>mcg per mL | 180 mcg  | 7/1/2005  | Pegasys*                  | Chronic Hepatitis C (CHC):  *Adult Patients: In combination therapy with other hepatitis C virus drugs for adults with compensated liver disease. Pegasys monotherapy is indicated only if patient has contraindication significant intolerance to other HCV drugs.  *Pediatric Patients: In combination with ribavirin for pediatric patients 5 years of age and older with compensated liver disease.  Chronic Hepatitis B (CHB):  *Adult Patients: Treatment of adults with HBeAg-positive and HBeAg-negative chronic hepatitis (CHB) infection who have compensated liver disease and evidence of viral replication and liver infiammation.  *Pediatric Patients: Treatment of non-cirrhotic pediatric patients 3 years of age and older with HBeAg-positive CHB and evidence of viral replication and elevations in serum alanine aminotransferase (ALT). | 1    | 5   | Indication Specific<br>(see comments) | N/A      | N/A          | Υ | Y | indication specific age<br>restrictions: • Chronic Hepatitis C: S years<br>of age and older • Chronic Hepatitis B: 3 years<br>of age and older   | 7/2/2018  |
|-------------|--------|---|----------|-----------|---------------------------|--|------|-----|---------------------------------------|----------|--------------|---|---|--|-----------|
| Biologicals | S0148  | Injection, pegylated interferon alfa-2b, 10 mcg               | 10 mcg   | 10/1/2010 | PegIntron®                | peginterferon alfa-2b injection, for subcutaneous indicated for treatment of Chronic Hepatitis C (CHC) in patients with compensated liver disease use  | 21   | 105 | 3 years                               | N/A      | N/A          | Υ | Y |  | 6/7/2019  |
| Drugs       | S0166  | Injection, olanzapine, 2.5<br>mg                              | 2.5 mg   | 10/1/2004 | Zyprexa*<br>Intramuscular | olanzapine injection, powder, for solution Indicated for the treatment of acute agitation associated with schizophrenia and bipolar I mani   | . 12 | 372 | 13 years                              | N/A      | N/A          | Υ | Υ |  | 9/21/2018 |
| Drugs       | S0189  | Testosterone pellet, 75<br>mg                                 | 75 mg    | 1/1/2002  | Testopel®                 | Indicated for replacement therapy in conditions associated with a deficiency or absence of endogenous testosterone:  testosterone pellets for subcutaneous implantation bilateral torsion, orchitis, vanishing testes syndrome; or orchiectomy.  Hypogonadotropic hypogonadism (congenital or acquired) - gonadotropic LHRH deficiency, or pitultary - hypothalamic injury from tumors, trauma or radiation.   | 6    | 6   | N/A                                   | N/A      | Males Only   | Υ | Y |  | 9/21/2018 |
| Drugs       | S0190  | Mifepristone, oral, 200<br>mg                                 | 200 mg   | 1/1/2000  | Mifeprex®                 | mifepristone tablets, for oral 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 | Υ | Υ |  | 3/15/2019 |
| Drugs       | S0191  | Misoprostol, oral, 200<br>mcg                                 | 200 mcg  | 1/1/2000  | Cytotec*                  | misoprostol tablets, for oral Indicated, in a regimen with mifepristone, for the medical termination of intrauterine pregnance use through 70 days gestation.  | 4    | 4   | N/A                                   | N/A      | Females Only | Υ | Υ |  | 5/30/2019 |
| Drugs       | \$4993 | Contraceptive pills for birth control                         | 1 tablet | 4/1/2002  | N/A                       | contraceptive pills for birth control indicated as birth control.  | 91   | 91  | 11 years                              | 55 years | Females Only | Y | Y | Max Daily: Birth control pack cannot be broken - max daily indicates one pack of 28 or 91 birth control jills depending on specific product  Max Monthly: Birth control packs cannot be broken - max monthly indicates up to two packs of 28 birth control pills depending on specific product | 6/19/2019 |