

# PROVIDER ALERT

**\*CORRECTED\***  
 Prior Authorization List Updates  
 Effective 07/01/2021

April 30<sup>th</sup>, 2021

The Northwest Physicians Network (NPN)/OptumCare Network (OCN) will require prior authorization and medical necessity review for the following codes in addition to the codes previously on the Prior Authorization List (PAL). This will be effective **July 1<sup>st</sup>, 2021**.

| HCPCS Code | HCPCS Description                                    |
|------------|--|
| C9399      | Unclassified biologics, chemotherapy, or other drugs |
| J0178      | Eylea, aflibercept                                   |
| J0179      | Beovu, brolocuzumab-dbll                             |
| J0567      | Brineura, cerliponase alfa                           |
| J1096      | Dextenza, dexamethasone (lacrima)                    |
| J1428      | Exondys 51, eteplisren                               |
| J1429      | Vyondys 53, golodirsen                               |
| J1446      | Granix, Tbo-filgrastim                               |
| J2503      | Macugen, pegaptanib sodium                           |
| J2778      | Lucentis, ranibizumab                                |
| J3490      | Unclassified biologics, chemotherapy, or other drugs |
| J3590      | Unclassified biologics, chemotherapy, or other drugs |
| J3999      | Unclassified biologics, chemotherapy, or other drugs |
| J7311      | Retisert, fluocinolone acetonide                     |
| J7312      | Ozurdex, dexamethasone                               |
| J7313      | Iluvien, fluocinolone acetonide                      |
| J7314      | Yutiq, fluocinolone acetonide                        |
| J7318      | Durolane, hyaluronic acid                            |
| J7325      | Synvisc, hyaluronic acid                             |
| J7328      | Gelsyn-3, hyaluronic acid                            |
| J9310      | Rituxan, rituximab                                   |
| J9999      | Unclassified biologics, chemotherapy, or other drugs |
| Q5104      | Renflexis, infliximab-abda                           |
| Q5122      | Nyvepria, pegfilgrastim-apgf                         |
| C9449      | Blincyto, blinatumomab                               |
| Q5103      | Inflectra, infliximab-dyyb                           |

