1199SEIU Benefit Funds Outpatient Medical Oncology Program

ONCOLOGY PRIMARY AND SUPPORTIVE THERAPIES DRUG LIST
MEDICAL ONCOLOGY CLINICAL PATHWAY CERTIFICATION REFERENCE DOCUMENT

Effective October 1, 2026

Refer to website at www.evicore.com or call toll-free at (888) 910-1199



All of the following drugs require prior authorization when being used to treat cancer or for the prevention or treatment of side effects associated with cancer treatment.

Prior authorization requirements may also apply to new drugs approved to the market that do not appear on the list and/or are in the process of being added.

For the symbol ♦ next to a drug name: if the indication is CANCER, please contact EviCore at (888) 910-1199 for Prior Authorization. If the indication is NOT cancer, and pharmacy service is being requested please contact CVS/Caremark for Prior Authorization.

	Generic Name	Type of Therapy	Reimb Code(s)
5FU, Adrucil	5-fluorouracil	Primary	J9192
5FU, Favlyxa	5-fluorouracil	Primary	J9191
5FU Cream, Efudex, Carac, Fluoroplex	5-fluorouracil - topical	Primary	J3490
Abraxane	paclitaxel (albumin-bound)	Primary	J9264
Actemra ♦	tocilizumab	Primary	J3262
Actemra ♦	tocilizumab	Supportive	J3262
Actimmune ♦	interferon, gamma-1b	Primary	J9216
Actinomycin	dactinomycin	Primary	J9120
Adcetris	brentuximab vedotin	Primary	J9042
Adriamycin	doxorubicin HCL	Primary	J9000
Adrucil	5-fluorouracil	Primary	J9190
Adstiladrin	nadofaragen firadenovec-vncg	Primary	J9029
Afinitor ♦	everolimus - oral	Primary	J8999
Akeega	niraparib and abiraterone Acetate	Primary	J8999
Akynzeo	netupitant/palonosetron - oral	Supportive	J8655
Akynzeo	fosnetupitant/palonosetron - inj	Supportive	J1454
Alecensa	alectinib - oral	Primary	J8999
Alimta	pemetrexed	Primary	J9305
Alkeran	melphalan HCL, NOS - inj	Primary	J9245
Aloxi ♦	palonosetron	Supportive	J2469
Alunbrig	brigatinib	Primary	J8999
Alymsys	bevacizumab-maly	Primary	Q5126
Alymsys	bevacizumab-maly	Supportive	Q5126

NOTE: All therapies may be subject to claim edits.
NOTE: Please review list regularly, as codes are subject to change.

	Generic Name	Type of Therapy	Reimb Code(s)
Androxy	fluoxymesterone - oral	Primary	J8499
Anktiva	nogapendekin alfa inbakicept-pmln	Primary	J9028
Anzemet	dolasetron mesylate	Supportive	J8597
Aponvie	aprepitant emulsion IV inj	Supportive	J8502
Aprepitant	aprepitant - inj.	Supportive	J0185
Aprepitant	aprepitant - oral.	Supportive	J8501
Ara-C	cytarabine	Primary	J9100
Aranesp ♦	darbepoetin alfa	Supportive	J0881
Aredia♦	pamidronate disodium	Supportive	J2430
Armlupeg	Pegfilgrastim-unne	Supportive	Q5169
Arranon	nelarabine	Primary	J9261
Arzerra	ofatumumab	Primary	J9302
Asparlas	calaspargase pegol-mknl	Primary	J9118
ATRA	all-trans retinoic acid - oral	Primary	J8999
Augtyro	repotrectinib – oral	Primary	J8999
Aukelso	denosumab-kyqq	Primary	Q5161
Aukelso	denosumab-kyqq	Supportive	Q5161
Avastin ♦	bevacizumab	Primary	J9035
Avastin ♦	bevacizumab	Supportive	J9035
Avgemsi	gemcitabine (avyxa)	Primary	J9184
Avmapki Fakzynja Co-pack	avutometinib and defactinib	Primary	J8999
Avopef	etoposide – inj.	Primary	J9186
Avtozma♦	tocilizumab-anoh	Primary	Q5156
Avtozma♦	tocilizumab-anoh	Supportive	Q5156
Avzivi	bevacizumab-tnjn	Primary	C9399, J9999
Avzivi	bevacizumab-tnjn	Supportive	C9399, J9999
Axtle	pemetrexed (avyxa)	Primary	J9292
Ayvakit	avapritinib – oral	Primary	J8999
Balversa	erdafitinib – oral	Primary	J8999
Bavencio	avelumab	Primary	J9023
Beizray	docetaxel (beizray)	Primary	J9174
Beleodaq	belinostat	Primary	J9032
Belrapzo	bendamustine HCL	Primary	J9036
Bendeka	bendamustine HCL	Primary	J9034
Besponsa	inotuzumab ozogamicin	Primary	J9229
Besremi	ropeginterferon alfa-2b-njft	Primary	J9999, C9399
BiCNU	carmustine	Primary	J9050
Bildyos ♦	denosumab-nxxp	Supportive	Q5162
Bilprevda	denosumab-nxxp	Primary	Q5162
Bilprevda	denosumab-nxxp	Supportive	Q5162
Bizengri	zenocutuzumab-zbco	Primary	J9382
Blenoxane	bleomycin	Primary	J9040
Blenrep	belantamab mafodotin-blmf	Primary	J9053

NOTE: All therapies may be subject to claim edits.
NOTE: Please review list regularly, as codes are subject to change.

	Generic Name	Type of Therapy	Reimb Code(s)
Blincyto	blinatumomab	Primary	J9039
Bomyntra	denosumab-bnht	Primary	Q5158
Bomyntra	denosumab-bnht	Supportive	Q5158
Bortezomib (Hospira)	bortezomib (Hospira)	Primary	J9049
Bortezomib (Maia)	bortezomib (Maia)	Primary	J9051
Boruzu	bortezomib (boruzu)	Primary	J9054
Bosaya♦	denosumab-kyqq	Supportive	Q5161
Bosulif	bosutinib - oral	Primary	J8999
Braftovi	encorafenib - oral	Primary	J8999
Brukinsa	zanubrutinib - oral	Primary	J8999
Cabometyx	cabozantinib - oral	Primary	J8999
Calquence	acalabrutinib	Primary	J8999
Camcevi	leuprolide mesylate	Primary	J1952
Camptosar	irinotecan	Primary	J9206
Caprelsa	vandetanib - oral	Primary	J8999
Carmustine (Accord)	carmustine (Accord)	Primary	J9052
CCNU, Gleostine	lomustine - oral	Primary	S0178
Cerubidine	daunorubicin	Primary	J9150
Cinvanti	aprepitant	Supportive	J0185
Clolar	clofarabine	Primary	J9027
Columvi	glofitamab-gxbm	Primary	J9286
Cometriq	cabozantinib - oral	Primary	J8999
Conexxence♦	denosumab-bnht	Supportive	Q5158
Copiktra	duvelisib - oral	Primary	J8999
Cosela	trilaciclib	Supportive	J1448
Cosmegen	dactinomycin	Primary	J9120
Cotellic	cobimetinib - oral	Primary	J8999
Crysvita ♦	burosumab	Supportive	J0584
Cyclophosphamide – inj (AuroMedics)♦	cyclophosphamide – inj AuroMedics) 10 mg	Primary	J9071
Cyclophosphamide - inj (Dr. Reddy's/Ingenus)♦	cyclophosphamide - inj (Dr. Reddy's/ Ingenus)	Primary	J9073
Cyclophosphamide - inj (Sandoz)♦	cyclophosphamide - inj (Sandoz)	Primary	J9074
Cyclophosphamide - inj (Baxter)♦	cyclophosphamide - inj (Baxter)	Primary	J9076
Cyclophosphamide Inj, not otherwise specified	cyclophosphamide Inj, not otherwise specified	Primary	J9075
Cyramza	ramucirumab	Primary	J9308
Dacogen	decitabine	Primary	J0894
Danyelza	naxitamab-gqgk	Primary	J9348
Danziten	nilotinib tartrate – oral	Primary	J8999
Darzalex	daratumumab	Primary	J9145
Darzalex Faspro	daratumumab and hyaluronidase-fihj	Primary	J9144
Datroway	datopotamab deruxtecan-dlnk	Primary	J9011

NOTE: All therapies may be subject to claim edits.
NOTE: Please review list regularly, as codes are subject to change.

	Generic Name	Type of Therapy	Reimb Code(s)
Daurismo	glasdegib – oral	Primary	J8999
Decitabine (Sun Pharma)	decitabine (sun pharma)	Primary	J0893
Decnupaz	pivekimab sunirine-pvzy	Primary	C9313
Docetaxel (Hospira)	docetaxel (Hospira)	Primary	J9232
Docivyx	docetaxel (Docivyx)	Primary	J9172
Doxil	doxorubicin HCL (liposomal)	Primary	Q2050
DTIC-Dome	dacarbazine	Primary	J9130
Elahere	mirvetuximab soravtansine-gynx	Primary	J9063
Eligard	leuprolide acetate	Primary	J1950, J9217, J9218
Ellence	epirubicin	Primary	J9178
Eloxatin	oxaliplatin	Primary	J9263
Elrexfio	elranatamab-bcmm	Primary	J1323
Elzonris	tagraxofusp-erzs	Primary	J9269
Emcyt	estramustine	Primary	J8999
Emend♦	aprepitant - oral	Supportive	J8501
Emend♦	fosaprepitant - inj	Supportive	J1453
Empliciti	elotuzumab	Primary	J9176
Emrelis	telisotuzumab vedotin-tllv	Primary	J9326
Enhertu	fam-traztuzumab deruxtecan-nxki	Primary	J9358
Ensacove	ensartinib - oral	Primary	J8999
Enoby♦	denosumab-qbde	Supportive	Q5167
Epkinly	epcoritamab-bysp	Primary	J9321
Epogen ♦	epoetin alfa	Supportive	J0885
Erbitux	cetuximab	Primary	J9055
Erivedge	vismodegib - oral	Primary	J8999
Erleada	apalutamide - oral	Primary	J8999
Etopophos	Etoposide – inj	Primary	J9187
Evdi	tabrectedin	Primary	C9312
Evomela	melphalan HCL	Primary	J9246
Exkivity	mobocertinib - oral	Primary	J8999
Faslodex	fulvestrant	Primary	J9395
Filkri	filgrastim-laha	Supportive	Q5172
Firmagon	degarelix	Primary	J9155
Fludara	fludarabine phosphate	Primary	J9185
Focinvez	fosaprepitant dimeglumine	Supportive	J1434
Folex♦	methotrexate sodium - inj	Primary	J9260
Folotyn	pralatrexate	Primary	J9307
Fosaprepitant (Teva)	fosaprepitant (Teva) - inj	Supportive	J1456
Fotivda	tivozanib - oral	Primary	J8999
Frindovyx	cyclophosphamide – inj (Avyxa)	Primary	J9072
Fruzaqla	fruquintinib - oral	Primary	J8999
FUDR	floxuridine	Primary	J9200
Fulphila	pegfilgrastim-jmdb	Supportive	Q5108
Fulvestrant	fulvestrant (Fresenius Kabi)	Primary	J9394

NOTE: All therapies may be subject to claim edits.
NOTE: Please review list regularly, as codes are subject to change.

	Generic Name	Type of Therapy	Reimb Code(s)
Fusilev	levoleucovorin	Primary	J0641
Fyarro	sirolimus protein-bound particles for injectable suspension (albumin bound)	Primary	J9331
Fylnetra	pegfilgrastim-pbbk	Supportive	Q5130
Gavreto	pralsetinib - oral	Primary	J8999
Gazyva	obinutuzumab	Primary	J9301
Gemcitabine Hydrochloride (Accord)	gemcitabine hydrochloride (Accord)	Primary	J9196
Gemzar	gemcitabine	Primary	J9201
Gilotrif	afatinib - oral	Primary	J8999
Gleevec	imatinib - oral	Primary	S0088
Gleostine	lomustine - oral	Primary	S0178
Gomekli	mirdametinib – oral	Primary	J8999
Granix	tbo-filgrastim	Supportive	J1447
Halaven	eribulin mesylate	Primary	J9179
Hepzato	melphalan (hepzato)	Primary	J9248
Herceptin	trastuzumab	Primary	J9355
Herceptin Hylecta	trastuzumab and hyaluronidase-oysk	Primary	J9356
Hercessi	Trastuzumab-strf	Primary	Q5146
Hernexeos	zongertinib – oral	Primary	J8999
Herzuma	trastuzumab-pkrb	Primary	Q5113
Hycamtin	topotecan - inj	Primary	J9351
Hycamtin	topotecan - oral	Primary	J8705
Hyrnuo	Sevabertinib - oral	Primary	J8999
Ibrance	palbociclib - oral	Primary	J8999
Ibtrozi	taletrectinib - oral	Primary	J8999
Iclusig	ponatinib - oral	Primary	J8999
Idamycin	idarubicin HCL - inj	Primary	J9211
Idhifa	enasidenib - oral	Primary	J8999
Ifex	ifosfamide	Primary	J9208
Imbruvica ♦	ibrutinib - oral	Primary	J8999
Imdelltra	tarlatamab-dlle	Primary	J9026
Imfinzi	durvalumab	Primary	J9173
Imkeldi	imatinib mesylate – oral	Primary	J8999
Imjudo	tremelimumab-acti	Primary	J9347
Imlygic	talimogene laherparepvec	Primary	J9325
Inlexzo	gemcitabine intravesical	Primary	J9183
Inluriyo	imlunestrant – oral	Primary	J8999
Inlyta	axitinib - oral	Primary	J8999
Inqovi	decitabine and cedazuridine - oral	Primary	J8999
Inrebic	fedratinib - oral	Primary	J8999
Interleukin-2	aldesleukin	Primary	J9015
Iressa	gefitinib - oral	Primary	J8565
Istodax	romidepsin, lyophilized	Primary	J9319

NOTE: All therapies may be subject to claim edits.
NOTE: Please review list regularly, as codes are subject to change.

	Generic Name	Type of Therapy	Reimb Code(s)
Itovebi	Inavolisib – oral	Primary	J8999
IVRA	melphalan (Apotex)	Primary	J9249
Iwilfin	eflornithine - oral	Primary	J8999
Itovebi	inavolisib - oral	Primary	J8999
Ixempra	ixabepilone	Primary	J9207
Jakafi ♦	ruxolitinib - oral	Primary	J8999
Jaypirca	pirtobrutinib - oral	Primary	J8999
Jelmyto	mitomycin	Primary	J9281
Jemperli	dostarlimab-gxly	Primary	J9272
Jevtana	cabazitaxel	Primary	J9043
Jideytro	zidesamtinib - oral	Primary	J8999
Jobevne	bevacizumab-nwgd	Primary	Q5160
Jobevne	bevacizumab-nwgd	Supportive	Q5160
Jubbonti♦	denosumab-bbdz	Supportive	Q5136
Jubereq	denosumab-desu	Primary	Q5166
Jubereq	denosumab-desu	Supportive	Q5166
Kadcyla	ado-trastuzumab emtansine	Primary	J9354
Kanjinti	trastuzumab-anns	Primary	Q5117
Keytruda	pembrolizumab	Primary	J9271
Keytruda Qlex	pembrolizumab and berahyaluronidase alfa-pmph	Primary	J9277
Khapzory	levoleucovorin	Primary	J0642
Kimmtrak	tebentafusp-tebn	Primary	J9274
Kisqali	ribociclib - oral	Primary	J8999
Komzifti	ziftomenib - oral	Primary	J8999
Koselugo ♦	selumetinib - oral	Primary	J8999
Krazati	adagrasib - oral	Primary	J8999
Kyprolis	carfilzomib	Primary	J9047
Kyxata	carboplatin (Avyxa)	Primary	J9278
Lanreotide (Cipla) – inj ♦	lanreotide injection (Cipla)	Primary	J1932
Lazcluze	lazertinib - oral	Primary	J8999
Lenvima	lenvatinib - oral	Primary	J8999
Leucovorin - inj♦	leucovorin - inj	Primary	J0643
Leucovorin - oral♦	leucovorin - oral	Primary	J8999
Leukeran ♦	chlorambucil - oral	Primary	S0172
Leukine	sargramostim	Supportive	J2820
Lutrate Depot	leuprolide acetate	Primary	J1954
Leustatin♦	cladribine	Primary	J9065
Libtayo	cemiplimab-rwlc	Primary	J9119
Lifyorli	relacorilant – oral	Primary	J8999
Lonsurf	trifluridine/tipiracil - oral	Primary	J8999
Loqtorzi	toripalimab-tpzi	Primary	J3263
Lorbrena	lorlatinib	Primary	J8999
Lumakras	sotorasib - oral	Primary	J8999

NOTE: All therapies may be subject to claim edits.
NOTE: Please review list regularly, as codes are subject to change.

	Generic Name	Type of Therapy	Reimb Code(s)
Lunsumio	mosunetuzumab-axgb	Primary	J9350
Lupron ♦	leuprolide acetate	Primary	J9217, J9218
Lupron Depot ♦	leuprolide acetate	Primary	J9217, J9218
Lymphir	denileukin diftitox-cxdl	Primary	J9161
Lynozyfic	linvoseltamab-gcpt	Primary	J9601
Lynparza	olaparib - oral	Primary	J8999
Lysodren	mitotane - oral	Primary	J8999
Lytgobi	futibatinib - oral	Primary	J8999
Margenza	margetuximab-cmkb	Primary	J9353
Matulane	procarbazine - oral	Primary	J8999, S0182
Mekinist	trametinib - oral	Primary	J8999
Mektovi	binimetinib - oral	Primary	J8999
Mesnex	mesna	Supportive	J9209
Methotrexate♦	methotrexate sodium - inj	Primary	J9260
Methotrexate (Accord)♦	methotrexate (Accord) - inj	Primary	J9255
Mimrylo	rusfertide	Primary	C9399, J3490, J3590, J9999
Mitoxana	ifosfamide	Primary	J9208
Modeyso	dordaviprone – oral	Primary	J8999
Monjuvi	tafasitamab-cxix	Primary	J9349
Mutamycin	mitomycin	Primary	J9280
Mvasi	bevacizumab-awwb	Primary	Q5107
Mvasi	bevacizumab-awwb	Supportive	Q5107
Mylotarg	gemtuzumab ozogamicin	Primary	J9203
Navelbine	vinorelbine tartrate	Primary	J9390
Nerlynx	neratinib - oral	Primary	J8999
Neulasta	pegfilgrastim, excludes biosimilar, 0.5 mg	Supportive	J2506
Neupogen ♦	filgrastim	Supportive	J1442
Nexavar	sorafenib tosylate - oral	Primary	J8999
Ninlaro	ixazomib - oral	Primary	J8999
Nipent	pentostatin	Primary	J9268
Nivestym ♦	filgrastim-aafi	Supportive	Q5110
Novantrone	mitoxantrone HCL	Primary	J9293
Nov-Onxol	paclitaxel	Primary	J9267
Nplate	romiplostim	Primary	J2802
Nplate	romiplostim	Supportive	J2802
Nubeqa	darolutamide - oral	Primary	J8999
Nypozi	filgrastim-txid	Supportive	Q5148
Nyvepria	pegfilgrastim-apgf	Supportive	Q5122
Odomzo	sonidegib - oral	Primary	J8999
Oforta	fludarabine phosphate	Primary	J9185
Ogivri	trastuzumab-dkst	Primary	Q5114
Ogsiveo	nirogacestat - oral	Primary	J8999
Ojemda	tovorafenib - oral	Primary	J8999
Ojjaara	momelotinib - oral	Primary	J8499

NOTE: All therapies may be subject to claim edits.
NOTE: Please review list regularly, as codes are subject to change.

	Generic Name	Type of Therapy	Reimb Code(s)
Oncaspar	pegaspargase	Primary	J9266
Oncovin	vincristine sulfate	Primary	J9370
Onivyde	irinotecan liposome	Primary	J9205
Ontruzant	traztuzumab-dttb	Primary	Q5112
Onureg	azacitidine - oral	Primary	J8999
Opdivo	nivolumab	Primary	J9299
Opdivo Qvantig	nivolumab and hyaluronidase-nvhy	Primary	J9289
Opdualag	nivolumab and relatlimab--rmbw	Primary	J9298
Orgovyx	relugolix - oral	Primary	J8999
Orserdu	elacestrant - Oral	Primary	J8999
Osenvelt	denosumab-bmwo	Primary	Q5157
Osenvelt	denosumab-bmwo	Supportive	Q5157
Ospomyv♦	denosumab-dssb	Supportive	Q5159
Osvyrti	denosumab-desu	Supportive	Q5166
Padcev	enfortumb vedotin-ejfv	Primary	J9177
Paraplatin	carboplatin	Primary	J9045
Pedmark	sodium Thiosulfate Injection	Supportive	J0208
Pegasys ♦	peginterferon, alfa-2a	Primary	S0145
Pemazyre	pemigatinib - oral	Primary	J8999
Pemetrexed (Accord)	pemetrexed (Accord)	Primary	J9296
Pemetrexed Bluepoint)	pemetrexed (Bluepoint)	Primary	J9322
Pemetrexed (Hospira)	pemetrexed (Hospira)	Primary	J9294
Pemetrexed (Sandoz)	pemetrexed (Sandoz)	Primary	J9297
Pemetrexed (Teva)	pemetrexed (Teva)	Primary	J9314
PEMRYDI RTU	pemetrexed	Primary	J9324
Pemfexy	pemetrexed	Primary	J9304
Perjeta	pertuzumab	Primary	J9306
Phesgo	pertuzumab, trastuzumab, and hyaluronidase(fixed dose combination)	Primary	J9316
Photofrin	porfimer sodium	Primary	J9600
Phyrago	dasatinib – oral	Primary	J8999
Piqray	alpelisib - oral	Primary	J8999
Platinol	cisplatin	Primary	J9060
Polivy	polatuzumab vendotin-piiq	Primary	J9309
Pomalyst	pomalidomide - oral	Primary	J8999
Portrazza	necitumumab	Primary	J9295
Poteligeo	mogamulizumab-kpkc	Primary	J9204
Procrit♦	epoetin alfa	Supportive	J0885
Proleukin	aldesleukin	Primary	J9015
Prolia♦	denosumab	Supportive	J0897
Posfrea	palonosetron (Avyxa)	Supportive	J2468
Provenge	sipuleucel-t	Primary	Q2043
Qinlock	ripretinib - oral	Primary	J8999
Rasonque	daraxonrasib - oral	Primary	J8999

NOTE: All therapies may be subject to claim edits.
NOTE: Please review list regularly, as codes are subject to change.

	Generic Name	Type of Therapy	Reimb Code(s)
Reblozyl♦	luspatercept-aamt	Supportive	J0896
Releuko♦	filgrastim-ayow	Supportive	Q5125
Retacrit♦	epoetin alfa-epbx	Supportive	Q5106
Retevmo	selpercatinib - oral	Primary	J8999
Revlimid	lenalidomide - oral	Primary	J8999
Revtorpyk	Gedatolisib	Primary	C9399, J9999
Revuforj	revumenib – oral	Primary	J8999
Rezlidhia	olutasidenib - oral	Primary	J8999
Riabni♦	rituximab-arrx	Primary	Q5123
Rituxan♦	rituximab	Primary	J9312
Rituxan Hycela	rituximab and hyaluronidase human	Primary	J9311
Rolvedon	eflapegrastim-xnst	Supportive	J1449
Romidepsin, non-lyophilized	romidepsin, non-lyophilized	Primary	J9318
Romvimza	vimseltinib - oral	Primary	J8999
Rozlytrek	entrectinib - oral	Primary	J8999
Rubraca	rucaparib - oral	Primary	J8999
Ruxience♦	rituximab-pvvr	Primary	Q5119
Rybrevant	amivantamab-vmjw	Primary	J9061
Rybrevant Faspro	amivantamab and hyaluronidase-lpuj	Primary	J9062
Rydapt	midostaurin – oral	Primary	J8999
Rylaze	asparaginase erwinia chrysanthemi (recombinant)-rywn	Primary	J9021
Rytelo	Imetelstat	Primary	J0870
Ryzneuta	efbemalenograstim alfa-vuxw	Primary	J9361
Sandostatin ♦	octreotide non-depot	Primary	J2354
Sandostatin ♦	octreotide non-depot	Supportive	J2354
Sandostatin LAR♦	octreotide depot	Primary	J2353
Sandostatin LAR♦	octreotide depot	Supportive	J2353
Sarclisa	Isatuximab-irfc	Primary	J9227
Sarclisa Escena	Isatuximab-irfc	Primary	C9399, J9999
Scemblix	asciminib – oral	Primary	J8999
Sodium Thiosulfate injection (Hope)	sodium Thiosulfate injection (Hope)	Supportive	J0209
Soriatane♦	acitretin – oral	Primary	J8499
Somatuline Depot ♦	lanreotide	Primary	J1930
Sprycel	dasatinib – oral	Primary	J8999
Stimufend	pegfilgrastim-fpgk	Supportive	Q5127
Stivarga	regorafenib - oral	Primary	J8999
Stoboclo♦	denosumab-bmwo	Supportive	Q5157
Sustol	granisetron	Supportive	J1627
Sutent	sunitinib - oral	Primary	J8999
Sylvant	siltuximab	Primary	J2860
Tabrecta	capmatinib - oral	Primary	J8999

NOTE: All therapies may be subject to claim edits.
NOTE: Please review list regularly, as codes are subject to change.

	Generic Name	Type of Therapy	Reimb Code(s)
Tafinlar	dabrafenib - oral	Primary	J8999
Tagrisso	osimertinib - oral	Primary	J8999
Talvey	talquetamab-tgvs	Primary	J3055
Talzenna	talazoparib - oral	Primary	J8999
Tarceva	erlotinib - oral	Primary	J8999
Targretin	bexarotene - oral	Primary	J8999
Targretin gel	bexarotene - topical	Primary	J3490, C9399
Tasigna	nilotinib - oral	Primary	J8999
Taxol	paclitaxel	Primary	J9267
Taxotere	docetaxel	Primary	J9171
Tazverik	tazemetostat – oral	Primary	J8999
Tecentriq	atezolizumab	Primary	J9022
Tecentriq Hybreza	atezolizumab and hyaluronidase-tqjs	Primary	J9024
Tecvayli	teclistamab-cqyv	Primary	J9380
Temodar	temozolomide - inj	Primary	J9328
Temodar	temozolomide - oral	Primary	J8700
Tepmetko	tepotinib - oral	Primary	J8999
Tepylute	thiotepa	Primary	J9341
Tevimbra	tislelizumab-jsgr	Primary	J9329
Thalomid ♦	thalidomide - oral	Primary	J8999
TheraCys	BCG live, intravesical	Primary	J9030
Thiotepa Injection, not otherwise specified	thiotepa Injection, not otherwise specified	Primary	J9342
Tibsovo	ivosidenib - oral	Primary	J8999
TICE	BCG live, intravesical	Primary	J9030
Tivdak	tisotumab vedotin-tftv	Primary	J9273
Tofidence	tocilizumab-bavi	Primary	Q5133
Tofidence	tocilizumab-bavi	Supportive	Q5133
Toposar	etoposide - inj	Primary	J9187
Toposar	etoposide - oral	Primary	J8560
Torisel	temsirolimus	Primary	J9330
Trazimera	trastuzumab-qyyp	Primary	Q5116
Treanda	bendamustine	Primary	J9033
Trelstar	triptorelin pamoate	Primary	J3315
Tretinoin	all-trans retinoic acid - oral	Primary	J8999
Trisenox	arsenic trioxide	Primary	J9017
Trodelvy	sacituzumab govitecan-hziy	Primary	J9317
Truqap	capivasertib – oral	Primary	J8999
Truxima ♦	rituximab-abbs	Primary	Q5115
Tudriqev	vusolimogene oderparepvec-wtpg	Primary	C9399, J9999
Tukysa	tucatinib - oral	Primary	J8999
Turalio	pexidartinib - oral	Primary	J8999
Tyenne ♦	tocilizumab-aazg	Primary	Q5135
Tyenne ♦	tocilizumab-aazg	Supportive	Q5135

NOTE: All therapies may be subject to claim edits.
NOTE: Please review list regularly, as codes are subject to change.

	Generic Name	Type of Therapy	Reimb Code(s)
Tykerb	lapatinib - oral	Primary	J8999
Udenyca	pegfilgrastim-cbqv	Supportive	Q5111
Unituxin	dinutuximab	Primary	J9999, C9399
Unloxcyt	cosibelimab-ipdl	Primary	J9275
Valchlor	mechlorethamine - topical	Primary	J9999
Valstar	valrubicin	Primary	J9357
Vanflyta	quizartinib-oral	Primary	J8999
Varubi	rolapitant- oral	Supportive	J8670
Vectibix	panitumumab	Primary	J9303
Vegzelma	bevacizumab-adcd	Primary	Q5129
Vegzelma	bevacizumab-adcd	Supportive	Q5129
Velban	vinblastine sulfate	Primary	J9360
Velcade	bortezomib	Primary	J9041
Venclexta	venetoclax - oral	Primary	J8999
VePesid	Etoposide – inj	Primary	J9187
Veppanu	vepdegestrant - oral	Primary	J8999
Verzenio	abemaciclib - oral	Primary	J8999
Vidaza	azacitidine	Primary	J9025
Vitrakvi	larotrectinib - oral	Primary	J8999
Vivimusta	bendamustine HCL	Primary	J9056
Vizimpro	dacomitinib – oral	Primary	J8999
Vonjo	pacritinib - oral	Primary	J8999
Voranigo	vorasidenib - oral	Primary	J8999
Votrient	pazopanib - oral	Primary	J8999
Vyloy	zolbetuximab-clzb	Primary	J1326
Vyxeos	liposome-encapsulated combination of daunorubicin and cytarabine	Primary	J9153
Welireg	belzutifan - oral	Primary	J8999
Wyost	denosumab-bbdz	Primary	Q5136
Wyost	denosumab-bbdz	Supportive	Q5136
Xalkori	crizotinib - oral	Primary	J8999
Xbryk	denosumab-dssb	Primary	Q5159
Xbryk	denosumab-dssb	Supportive	Q5159
Xeloda	capecitabine - oral	Primary	J8522
Xermelo	telotristat ethyl	Supportive	J8499
Xgeva	denosumab	Primary	J0897
Xgeva	denosumab	Supportive	J0897
Xospata	gilteritinib - oral	Primary	J8999
Xpovio	selinexor – oral	Primary	J8999
Xtandi	enzalutamide – oral	Primary	J8999
Xtrenbo	denosumab-qbde	Primary	Q5167
Xtrenbo	denosumab-qbde	Supportive	Q5167
Yervoy	ipilumumab	Primary	J9228
Yondelis	trabectedin	Primary	J9362

NOTE: All therapies may be subject to claim edits.
NOTE: Please review list regularly, as codes are subject to change.

	Generic Name	Type of Therapy	Reimb Code(s)
Yonsa	abiraterone acetate – oral	Primary	J8999
Zaltrap	zivafibercept	Primary	J9400
Zanosar	streptozocin	Primary	J9320
Zarxio♦	filgrastim-sndz	Supportive	Q5101
Zejula	niraparib - oral	Primary	J8999
Zelboraf	vemurafenib - oral	Primary	J8999
Zenbexus	iberdomide - oral	Primary	C9399, J8999
Zepzelca	lurbinectedin	Primary	J9223
Ziextenzo	pegfilgrastim-bmez	Supportive	Q5120
Ziihera	zanidatamab-hrii	Primary	J9276
Zirabev	bevacizumab-bvzr	Primary	Q5118
Zirabev	bevacizumab-bvzr	Supportive	Q5118
Zoladex♦	goserelin acetate implant	Primary	J9202
Zoledronic acid♦	zoledronic acid	Supportive	J3489
Zolinza	vorinostat - oral	Primary	J8999
Zusduri	mitomycin (intravesical solution)	Primary	J9282
Zydelig	idelalisib - oral	Primary	J8999
Zykadia	ceritinib - oral	Primary	J8999
Zynlonta	loncastuximab tesirine-lpyl	Primary	J9359
Zynyz	retifanlimab-dlwr	Primary	J9345
Zytiga	abiraterone acetate - oral	Primary	J8999

NOTE: All therapies may be subject to claim edits.
NOTE: Please review list regularly, as codes are subject to change.