



Medical benefit specialty drug update bulletin – December 2024

Specialty drug program updates for UnitedHealthcare Commercial, Community Plan, Medicare Advantage and Individual & Family Plans

Specialty medical injectable drugs added to Review at Launch					
Drug Name	HCPCs Code(s)	UnitedHealthcare Commercial	UnitedHealthcare Community Plan	UnitedHealthcare Medicare Advantage	UnitedHealthcare Individual & Family
Hypavzi™ (marstacimab-hncq)	J3490/J3590/C9399	X	X		X
Pavblu™ (afibercept-ayyh) <i>Biosimilar to Eylea®</i>	J3490/J3590/C9399	X	X	X	X
Tremfya® IV (guselkumab)	J1628	X	X		X

Note: Drugs added to Review at Launch may not yet be available in the marketplace.



To view the **UnitedHealthcare Commercial Plan** Review at Launch Medication List, visit UHCprovider.com > Resources > Health plans, policies, protocols and guides > For Commercial Plans > Medical & Drug Policies for UnitedHealthcare Commercial Plans > *Review at Launch for New to Market Medications – Commercial Medical Benefit Drug Policy* > **Review at Launch Medication List**.

To view the **UnitedHealthcare Community Plan** Review at Launch Drug List Plan, visit UHCprovider.com > Resources > Health plans, policies, protocols and guides > For Community Plans > Medical & Drug Policies for Community Plan > *Review at Launch for New to Market Medications – Community Plan Medical Benefit Drug Policy* > **Review at Launch Medication List**.



For **UnitedHealthcare Medicare Advantage**, Review at Launch drugs are added as Review at Launch Part B Medications in the *Medications/Drugs (Outpatient/Part B) Coverage Summary*. To view the summary, visit UHCprovider.com > Resources > Health plans, policies, protocols and guides > For Medicare Advantage Plans > Medical Policies for Medicare Advantage Plans > *Medications/Drugs (Outpatient/Part B) – Medicare Advantage Coverage Summary* > Supporting Information > **Other Examples of Specific Drugs/Medications.**

To view the **UnitedHealthcare Individual & Family Plan** Review at Launch Medication List, visit UHCprovider.com > Resources > Health plans, policies, protocols and guides > For Individual Exchange Plans > Medical & Drug Policies for UnitedHealthcare Individual Exchange Plans > *Review at Launch for New to Market Medications – Individual Exchange Medical Benefit Drug Policy* > **Review at Launch Medication List.**

Updates to drug program requirements and drug policies						
Drug Name	Effective Date	UnitedHealthcare Commercial	UnitedHealthcare Community Plan	UnitedHealthcare Medicare Advantage	UnitedHealthcare Individual & Family	Summary of Changes
Eylea® HD (afibercept)	1/1/25	X				<ul style="list-style-type: none"> Remove from Review at Launch No prior authorization required

Specialty medical injectable drugs added to Medication Sourcing for Outpatient Hospital Providers Only – UnitedHealthcare Commercial			
Drug Name	Effective Date	HCPCs Code(s)	Specialty Pharmacy
Alyglo™ (immune globulin intravenous, human-stwk)	1/1/2025	J1552	Accredo Health Group
Kisunla™ (donanemab-azbt)	1/1/2025	J0175	Amber Specialty Pharmacy
Ocrevus Zunovo™ (ocrelizumab and hyaluronidase-ocsq)	1/1/2025	J3490/J3590/C9399	Accredo Health Group



Outpatient hospitals are required to obtain the medications listed in the [Medication Sourcing Protocol - Requirements to use a participating specialty pharmacy for certain medications document](#) from the indicated specialty pharmacies for distribution of these medications, unless otherwise authorized by us. When the specialty medication is obtained through the specialty pharmacy, the specialty pharmacy will bill us directly for these medications under the member's medical benefit. The facility administering the specialty drug is not to bill us for the medication obtained through the specialty pharmacy but may bill us for the administration of the medication to the member.



New and Updated Procedure Codes for Injectable Medications – Effective January 1, 2025

Centers for Medicare & Medicaid Services (CMS) has issued new procedure codes for certain injectable medications effective January 1, 2025. Correct coding rules dictate that assigned and permanent codes should be used when available. The injectable medications listed below will have new codes and may require prior authorization.

Note: Drugs with newly assigned CMS codes may not yet be available in the marketplace.

- **Alyglo** (immune globulin intravenous, human-stwk) – J1552
- **Beqvez™** (fidanacogene elaparvovec-dzkt) – J1414
- **Bkemv™** (eculizumab-aeeb) – Q5139
- **Casgevvy®** (exagamglogene autotemcel) – J3392
- **Nplate®** (romiplostim) – J2802
- **Piasky™** (crovalimab-akkz) – J1307
- **Pyzchiva® SC** (ustekinumab-ttwe) – Q9996
- **Pyzchiva® IV** (ustekinumab-ttwe) – Q9997
- **Nypozi™** (filgrastim-txid) – C9173
- **Selarsdi™** (ustekinumab-aekn) – Q9998

