

OHSU Health Services Injectable Medication Post-Service Claims Edits Program

In collaboration with MagellanRx, the post-service, pre-payment claims edits program monitors and promotes appropriate use, safety, and cost effectiveness of injectable and infused medications given in a professional office, home, or outpatient setting. Claims are reviewed for appropriate frequency, correct units, and eligible diagnosis codes based on FDA label and drug compendia approved uses.

Prior authorization criteria *do not apply* for these medications. If the services billed do not meet the guidelines, the claims will be subject to review and potentially disallowed. The program is limited to the following injectable and/or infusion medications:

Effective April 1, 2020	
Procedure code	Brand name
A9590	Azedra® (iobenguane I-131)
J9046, J9048, J9049, J9051, J9999	Bortezomib
J0185	Cinvanti® (aprepitant)
J1453, J1456	Fosaprepitant: Emend®; Fosaprepitant Ψ; Focinvez Ψ
J9201, J9196	Gemcitabine: Gemzar®; Gemcitabine Ψ
A9517	Hicon® (Sodium Iodide I - 131)
J1950, J9217, J1950, J9217, J1952, J1954, J1951	Leuprolide Suspension: Lupron Depot®, Lupron Depot-Ped®, Eligard®, Fensolvi®, Camcevi™, Leuprolide Acetate Depot Ψ
A9513	Lutathera® (lutetium Lu 177 dotatate)
A9600	Metastron™ (Strontium-89 Chloride)
A9699	Pluvicto® (lutetium Lu 177 vipivotide tetraxetan)
A9604	Quadramet® (Samarium Sm 153 Lexidronam)
J7352	Scenesse® (afamelanotide)
J3315	Trelstar® (triptorelin)
A9606	Xofigo® (radium Ra 223 dichloride)
A9543	Zevalin® (ibritumomab tiuxetan)
J9202	Zoladex® (goserelin acetate)

This list is subject to change. Updates will be posted to this page as the program is expanded.