

Orencia® (abatacept) (Intravenous/Subcutaneous)

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I. Length of Authorization

Initial coverage will be provided for 6 months and may be renewed annually thereafter, unless otherwise specified.

- Therapy for the Management of Immune Checkpoint Inhibitor-Related Toxicities and Prophylaxis for Acute Graft Versus Host Disease (aGVHD) may not be renewed.

II. Dosing Limits

Max Units (per dose and over time) [HCPCS Unit]:

- Management of Immune-Checkpoint Inhibitor-Related Toxicities
 - 675 billable units per 56 days
- Prophylaxis for aGVHD
 - 400 billable units per 29 days
- All other indications
 - Loading: 100 billable units at weeks 0, 2, & 4
 - Maintenance: 100 billable units per 4 weeks

III. Initial Approval Criteria ¹

Coverage is provided in the following conditions:

- Patient is at least 18 years of age (unless otherwise specified); **AND**
- Patient is up to date with all age-appropriate vaccinations, in accordance with current vaccination guidelines, prior to initiating therapy; **AND**

- Patient has been evaluated and screened for the presence of hepatitis B virus (HBV) prior to initiating treatment; **AND**

Universal Criteria ¹

- Patient has been evaluated and screened for the presence of latent tuberculosis (TB) infection prior to initiating treatment and will receive ongoing monitoring for the presence of TB during treatment; **AND**
- Patient does not have an active infection, including clinically important localized infections; **AND**
- Patient will not receive live vaccines during therapy; **AND**
- Patient is not on concurrent treatment with another biologic therapy or targeted synthetic therapy unless otherwise specified; **AND**

Rheumatoid Arthritis (RA) † ^{1,27,30}

- Physician has assessed baseline disease severity utilizing an objective measure/tool; **AND**
- Documented moderate to severe active disease; **AND**
 - Patient has had at least a 3-month trial and failed previous therapy with ONE conventional synthetic disease modifying anti-rheumatic drug (csDMARD) (e.g., methotrexate, azathioprine, auranofin, hydroxychloroquine, penicillamine, sulfasalazine, leflunomide, etc.); **OR**
 - Patient is already established on biologic or targeted synthetic therapy for the treatment of RA; **AND**
- May be used as a single agent or in combination with csDMARDs (e.g., methotrexate, hydroxychloroquine, leflunomide, sulfasalazine, etc.); **AND**

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- Patient must try and have an inadequate response, contraindication, or intolerance to at least a three (3) month trial of ONE of the following: adalimumab*, Enbrel (etanercept), Xeljanz (tofacitinib)‡, or tocilizumab SC**;
- Patient is continuing treatment

***Note: Preferred products are Hadlima (adalimumab-bwwd) and adalimumab-adaz**

‡ Note: Xeljanz (tofacitinib) is indicated in those who have had an inadequate response or intolerance to one or more TNF blockers

****Note: Preferred product is Tyenne SC (tocilizumab-aazg)**

For Medicaid Members Only

- Patient must try and have an inadequate response, contraindication, or intolerance to at least a three (3) month trial of ONE of the following: adalimumab*, Enbrel (etanercept), or tocilizumab SC**;

- Patient is continuing treatment

***Note: Preferred products are Hadlima (adalimumab-bwwd) and adalimumab-adaz**

****Note: Preferred product is Tyenne SC (tocilizumab-aazg)**

Polyarticular Juvenile Idiopathic Arthritis (pJIA) † 1,16

- Patient is at least 2 years of age (6 years of age for the IV formulation); **AND**
- Physician has assessed baseline disease severity utilizing an objective measure/tool; **AND**
- Documented moderate to severe active polyarticular disease; **AND**
 - Patient has had at least a 1-month trial and failure (unless contraindicated or intolerant) of previous therapy with either oral non-steroidal anti-inflammatory drugs (NSAIDs) OR a conventional synthetic disease-modifying anti-rheumatic drug (csDMARD) (e.g., methotrexate, leflunomide, sulfasalazine, etc.); **OR**
 - Patient is already established on biologic or targeted synthetic therapy for the treatment of pJIA; **AND**
- May be used as single agent or in combination with methotrexate; **AND**

For Commercial Members Only

- Patient must try and have an inadequate response, contraindication, or intolerance to at least a three (3) month trial of ONE of the following: adalimumab*, Enbrel (etanercept), Xeljanz (tofacitinib)‡, or tocilizumab SC**; **OR**
- Patient is continuing treatment

***Note: Preferred products are Hadlima (adalimumab-bwwd) and adalimumab-adaz**

‡ Note: Xeljanz (tofacitinib) is indicated in those who have had an inadequate response or intolerance to one or more TNF blockers

****Note: Preferred product is Tyenne SC (tocilizumab-aazg)**

For Medicaid Members Only

- Patient must try and have an inadequate response, contraindication, or intolerance to at least a three (3) month trial of ONE of the following: adalimumab*, Enbrel (etanercept), or tocilizumab SC**; **OR**
- Patient is continuing treatment

***Note: Preferred products are Hadlima (adalimumab-bwwd) and adalimumab-adaz**

****Note: Preferred product is Tyenne SC (tocilizumab-aazg)**

Adult Psoriatic Arthritis (PsA) † 1,18,28,33,37,40

- Physician has assessed baseline disease severity utilizing an objective measure/tool; **AND**
- Documented moderate to severe active disease; **AND**

- For patients with predominantly axial disease OR enthesitis, a failure of at least a 4-week trial of ONE non-steroidal anti-inflammatory drug (NSAID), unless use is contraindicated; **OR**
- For patients with peripheral arthritis OR dactylitis, a failure of at least a 3-month trial of ONE conventional synthetic disease-modifying anti-rheumatic drug (csDMARD) (e.g., methotrexate, azathioprine, sulfasalazine, leflunomide, hydroxychloroquine, etc.); **OR**
- Patient is already established on biologic or targeted synthetic therapy for the treatment of PsA; **AND**
- May be used as a single agent or in combination with csDMARDs (e.g. methotrexate, hydroxychloroquine, leflunomide, sulfasalazine, etc.); **AND**

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- Patient must try and have an inadequate response, contraindication, or intolerance to at least a three (3) month trial of ONE of the following: adalimumab*, Enbrel (etanercept), Cosentyx SC (secukinumab), ustekinumab SC^, Tremfya SC (guselkumab), Xeljanz (tofacitinib) ‡, or Otezla (apremilast); **OR**
- Patient is continuing treatment

**Note: Preferred products are Hadlima (adalimumab-bwwd) and adalimumab-adaz*

^Note: Preferred products are Selarsdi SC (ustekinumab-aekn), Yesintek SC (ustekinumab-kfce), and Steqeyma SC (ustekinumab-stba)

‡ Note: Xeljanz (tofacitinib) is indicated in those who have had an inadequate response or intolerance to one or more TNF blockers

For Medicaid Members Only

- Patient must try and have an inadequate response, contraindication, or intolerance to at least a three (3) month trial of ONE of the following: adalimumab*, Enbrel (etanercept), Cosentyx SC (secukinumab), or ustekinumab SC^; **OR**
- Patient is continuing treatment

**Note: Preferred products are Hadlima (adalimumab-bwwd) and adalimumab-adaz*

^Note: Preferred products are Selarsdi SC (ustekinumab-aekn), Yesintek SC (ustekinumab-kfce), and Steqeyma SC (ustekinumab-stba)

Juvenile Psoriatic Arthritis (JPsa) † 1,4,16

- Patient is at least 2 years of age; **AND**
- Physician has assessed baseline disease severity utilizing an objective measure/tool; **AND**
- Documented moderate to severe active polyarticular disease; **AND**
- May be used as a single agent or in combination with methotrexate; **AND**
 - Patient has had at least a 1-month trial and failure (unless contraindicated or intolerant) of previous therapy with either oral non-steroidal anti-inflammatory drugs (NSAIDs) OR a

conventional synthetic disease-modifying anti-rheumatic drug (csDMARD) (e.g., methotrexate, leflunomide, sulfasalazine, etc.); **OR**

- Patient is already established on biologic or targeted synthetic therapy for the treatment of JPsA; **AND**

- For patients aged 6 years and older: patient must try and have an inadequate response, contraindication, or intolerance to at least a three (3) month trial of ONE of the following: Cosentyx SC (secukinumab), Enbrel (etanercept), or ustekinumab SC[^]; **OR**
- For patients aged 2 years and older: patient must try and have an inadequate response, contraindication, or intolerance to at least a three (3) month trial of ONE of the following: Cosentyx SC (secukinumab) or Enbrel (etanercept); **OR**
- Patient is continuing treatment

[^]Note: Preferred products are Selarsdi SC (ustekinumab-aekn), Yesintek SC (ustekinumab-kfce), and Steqeyma SC (ustekinumab-stba)

Treatment of Chronic Graft Versus Host Disease (cGVHD) ‡ ^{1,19,20,22}

- Patient is post-allogeneic hematopoietic cell transplant (generally 3 or more months); **AND**
- Used as additional therapy in combination with systemic corticosteroids; **AND**
- Patient has no response (e.g., steroid-refractory disease) to first-line therapy options

Prophylaxis of Acute Graft Versus Host Disease (aGVHD) (IV formulation only) † ^{1,35,36}

- Patient is undergoing a hematopoietic stem cell transplant (HSCT) from a matched or 1 allele-mismatched unrelated-donor; **AND**
- Patient is at least 2 years of age; **AND**
- Used in combination with a calcineurin inhibitor and methotrexate; **AND**
- Patient will receive antiviral prophylactic treatment for Epstein-Barr Virus (EBV) reactivation and prophylaxis will continue for 6 months post-transplantation; **AND**
- Patient will be monitored for both EBV reactivation and cytomegalovirus (CMV) infection/reactivation

Management of Immune Checkpoint Inhibitor-Related Toxicities (IV formulation only) ‡ ^{19,21,23}

- Patient has been receiving therapy with an immune checkpoint inhibitor; **AND**
 - Used as a single agent; **AND**
 - Used for the management of immunotherapy-related myocarditis; **AND**
 - Patient has had no improvement within 24-48 hours of starting high-dose methylprednisolone; **OR**
 - Used in combination with ruxolitinib; **AND**

- Used for the management of immunotherapy-related concomitant myositis and myocarditis

† FDA Approved Indication(s); ‡ Compendia Recommended Indication(s); ◊ Orphan Drug

IV. Renewal Criteria ¹

Coverage can be renewed based upon the following criteria:

- Patient continues to meet the universal and other indication-specific relevant criteria identified in section III; **AND**
- Duration of authorization has not been exceeded (*refer to Section I*); **AND**
- Absence of unacceptable toxicity from the drug. Examples of unacceptable toxicity include: serious infections, severe hypersensitivity reactions, respiratory adverse events in those with predisposing conditions, reactivation of CMV or EBV, etc.; **AND**

Rheumatoid Arthritis ⁹⁻¹¹

- Disease response as indicated by improvement in signs and symptoms compared to baseline such as the number of tender and swollen joint counts, reduction of C reactive protein, improvement of patient global assessment, and/or an improvement on a disease activity scoring tool [e.g. an improvement on a composite scoring index such as Disease Activity Score-28 (DAS28) of 1.2 points or more or a ≥20% improvement on the American College of Rheumatology-20 (ACR20) criteria, an improvement of disease severity on RAPID3 assessment, etc.].

Polyarticular Juvenile Idiopathic Arthritis ^{12,13}

- Disease response as indicated by improvement in signs and symptoms compared to baseline such as the number of tender and swollen joint counts, reduction of C-reactive protein, improvement of patient global assessment, and/or an improvement on a disease activity scoring tool [e.g., an improvement on a composite scoring index such as Juvenile Arthritis Disease Activity Score (JADAS) or the American College of Rheumatology (ACR) Pediatric (ACR-Pedi 30) of at least 30% improvement from baseline in three of six variables].

Adult Psoriatic Arthritis ^{14,34,41}

- Disease response as indicated by improvement in signs and symptoms compared to baseline such as the number of tender and swollen joint counts, reduction of C-reactive protein, improvement of patient global assessment, improvement on imaging (X-ray, ultrasound, or MRI), and/or an improvement on a disease activity scoring tool.

Juvenile Psoriatic Arthritis (JPsA) ^{1,12,13,41}

- Disease response as indicated by improvement in signs and symptoms compared to baseline such as the number of tender and swollen joint counts, reduction of C-reactive protein, improvement of patient global assessment, improvement on imaging (X-ray, ultrasound, or MRI), and/or an improvement on a disease activity scoring tool [e.g. an improvement on a composite scoring index such as Juvenile Arthritis Disease Activity Score (JADAS) or the American College of Rheumatology (ACR) Pediatric (ACR-Pedi 30) of at least 30% improvement from baseline in three of six variables].

Treatment of Chronic Graft Versus Host Disease (cGVHD) ^{20,22}

- Response to therapy with an improvement in one or more of the following:
 - Clinician assessments (e.g., NIH Skin Score, Upper GI Response Score, NIH Lung Symptom Score, etc.)
 - Patient-reported symptoms (e.g., Lee Symptom Scale, etc.)

V. Dosage/Administration ^{1,22,23,39}

| Indication | Dose |
|---------------------------|---|
| Rheumatoid Arthritis | <p><u>Intravenous Dosing</u></p> <ul style="list-style-type: none"> • Weight < 60kg: <ul style="list-style-type: none"> ○ 500 mg at weeks 0, 2, & 4, then every 4 weeks thereafter • Weight 60 to 100 kg: <ul style="list-style-type: none"> ○ 750 mg at weeks 0, 2, & 4, then every 4 weeks thereafter • Weight > 100 kg: <ul style="list-style-type: none"> ○ 1,000 mg at weeks 0, 2, & 4, then every 4 weeks thereafter <p><u>Subcutaneous Dosing (Orencia ClickJect or Orencia prefilled syringes)</u></p> <ul style="list-style-type: none"> • Administer 125 mg by subcutaneous injection once weekly <ul style="list-style-type: none"> ○ May initiate with or without an IV loading dose ○ If initiated with an IV loading dose, a single weight-based IV infusion (see below) should be followed by the first 125 mg subcutaneous injection within a day <ul style="list-style-type: none"> ○ Weight < 60 kg: 500 mg ○ Weight 60 to 100 kg: 750 mg ○ Weight >100 kg: 1,000 mg <p>Patients transitioning from Orencia intravenous therapy to subcutaneous administration should administer the first subcutaneous dose instead of the next scheduled intravenous dose.</p> |
| Adult Psoriatic Arthritis | <p><u>Intravenous Dosing</u></p> |

| | |
|---|---|
| | <ul style="list-style-type: none"> Weight < 60kg: <ul style="list-style-type: none"> 500 mg at weeks 0, 2, & 4, then every 4 weeks thereafter Weight 60 to 100 kg: <ul style="list-style-type: none"> 750 mg at weeks 0, 2, & 4, then every 4 weeks thereafter Weight > 100 kg: <ul style="list-style-type: none"> 1,000 mg at weeks 0, 2, & 4, then every 4 weeks thereafter <p><u>Subcutaneous Dosing (Orencia ClickJect or Orencia prefilled syringes)</u></p> <ul style="list-style-type: none"> Administer 125 mg by subcutaneous injection once weekly <ul style="list-style-type: none"> No IV loading dose is needed <p>Patients transitioning from Orencia intravenous therapy to subcutaneous administration should administer the first subcutaneous dose instead of the next scheduled intravenous dose</p> |
| Juvenile Psoriatic Arthritis | <p><u>Subcutaneous Dosing (Orencia ClickJect or Orencia prefilled syringes)</u></p> <ul style="list-style-type: none"> Weight 10 to < 25 kg: 50 mg weekly Weight 25 to < 50 kg: 87.5 mg weekly Weight ≥ 50 kg: 125 mg weekly |
| Polyarticular Juvenile Idiopathic Arthritis | <p><u>Intravenous Dosing (patients aged 6 years or older ONLY)</u></p> <ul style="list-style-type: none"> Weight < 75 kg: <ul style="list-style-type: none"> 10 mg/kg at weeks 0, 2, & 4, then every 4 weeks thereafter Weight 75 to 100 kg: <ul style="list-style-type: none"> 750 mg at weeks 0, 2, & 4, then every 4 weeks thereafter Weight > 100 kg: <ul style="list-style-type: none"> 1,000 mg at weeks 0, 2, & 4, then every 4 weeks thereafter <p><u>Subcutaneous Dosing (Orencia ClickJect or Orencia prefilled syringes and ONLY in patients aged 2 years or older)</u></p> <ul style="list-style-type: none"> Weight 10 to < 25 kg: 50 mg weekly Weight 25 to < 50 kg: 87.5 mg weekly Weight ≥ 50 kg: 125 mg weekly |
| Treatment of Chronic GVHD | <p><u>Intravenous/Subcutaneous Dosing</u></p> <ul style="list-style-type: none"> Up to 10 mg/kg (with a maximum dose of 1,000mg) at weeks 0, 2, & 4, then every 4 weeks thereafter until disease progression or unacceptable toxicity |
| Prophylaxis for Acute GVHD | <p><u>Intravenous Dosing</u></p> <ul style="list-style-type: none"> Patients ≥ 6 years old: 10 mg/kg (with a maximum dose of 1,000 mg) on the day before transplantation (Day -1), followed by administration on Days 5, 14, and 28 after transplantation Patients 2 to < 6 years old: 15 mg/kg on the day before transplantation (Day -1), followed by 12 mg/kg on Days 5, 14, and 28 after transplantation |

| | |
|---|--|
| Management of Immune Checkpoint Inhibitor-Related Toxicities | <u>Intravenous Dosing</u> <ul style="list-style-type: none"> Single agent: 500 mg every 2 weeks for a total of 5 doses In combination with ruxolitinib: Up to 20mg/kg on days 0, 5 and 14. |
|---|--|

VI. Billing Code/Availability Information

HCPCS Code:

- J0129 – Injection, abatacept, 10 mg; 1 billable unit = 10 mg
(Code may be used for Medicare when drug is administered under the direct supervision of a physician; NOT for use when drug is self-administered)

NDC(s):

- Orencia 250 mg single-dose vial: 00003-2187-xx
- Orencia 125 mg/mL single-dose ClickJect™ Autoinjector: 00003-2188-xx
- Orencia 50 mg/0.4 mL single-dose prefilled syringe: 00003-2814-xx
- Orencia 87.5 mg/0.7 mL single-dose prefilled syringe: 00003-2818-xx
- Orencia 125 mg/mL single-dose prefilled syringe: 00003-2188-xx

VII. References

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Appendix 1 – Covered Diagnosis Codes

| ICD-10 | ICD-10 Description |
|---------|---|
| D89.810 | Acute graft-versus-host disease |
| D89.811 | Chronic graft-versus-host disease |
| D89.812 | Acute on chronic graft-versus-host disease |
| D89.813 | Graft-versus-host disease, unspecified |
| I30.8 | Other forms of acute pericarditis |
| I30.9 | Acute pericarditis, unspecified |
| I40.8 | Other acute myocarditis |
| I40.9 | Acute myocarditis, unspecified |
| L40.50 | Arthropathic psoriasis, unspecified |
| L40.51 | Distal interphalangeal psoriatic arthropathy |
| L40.52 | Psoriatic arthritis mutilans |
| L40.53 | Psoriatic spondylitis |
| L40.54 | Psoriatic juvenile arthropathy |
| L40.59 | Other psoriatic arthropathy |
| M05.10 | Rheumatoid lung disease with rheumatoid arthritis of unspecified site |
| M05.111 | Rheumatoid lung disease with rheumatoid arthritis of right shoulder |
| M05.112 | Rheumatoid lung disease with rheumatoid arthritis of left shoulder |
| M05.119 | Rheumatoid lung disease with rheumatoid arthritis of unspecified shoulder |
| M05.121 | Rheumatoid lung disease with rheumatoid arthritis of right elbow |
| M05.122 | Rheumatoid lung disease with rheumatoid arthritis of left elbow |

| ICD-10 | ICD-10 Description |
|---------|---|
| M05.129 | Rheumatoid lung disease with rheumatoid arthritis of unspecified elbow |
| M05.131 | Rheumatoid lung disease with rheumatoid arthritis of right wrist |
| M05.132 | Rheumatoid lung disease with rheumatoid arthritis of left wrist |
| M05.139 | Rheumatoid lung disease with rheumatoid arthritis of unspecified wrist |
| M05.141 | Rheumatoid lung disease with rheumatoid arthritis of right hand |
| M05.142 | Rheumatoid lung disease with rheumatoid arthritis of left hand |
| M05.149 | Rheumatoid lung disease with rheumatoid arthritis of unspecified hand |
| M05.151 | Rheumatoid lung disease with rheumatoid arthritis of right hip |
| M05.152 | Rheumatoid lung disease with rheumatoid arthritis of left hip |
| M05.159 | Rheumatoid lung disease with rheumatoid arthritis of unspecified hip |
| M05.161 | Rheumatoid lung disease with rheumatoid arthritis of right knee |
| M05.162 | Rheumatoid lung disease with rheumatoid arthritis of left knee |
| M05.169 | Rheumatoid lung disease with rheumatoid arthritis of unspecified knee |
| M05.171 | Rheumatoid lung disease with rheumatoid arthritis of right ankle and foot |
| M05.172 | Rheumatoid lung disease with rheumatoid arthritis of left ankle and foot |
| M05.179 | Rheumatoid lung disease with rheumatoid arthritis of unspecified ankle and foot |
| M05.19 | Rheumatoid lung disease with rheumatoid arthritis of multiple sites |
| M05.20 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified site |
| M05.211 | Rheumatoid vasculitis with rheumatoid arthritis of right shoulder |
| M05.212 | Rheumatoid vasculitis with rheumatoid arthritis of left shoulder |
| M05.219 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified shoulder |
| M05.221 | Rheumatoid vasculitis with rheumatoid arthritis of right elbow |
| M05.222 | Rheumatoid vasculitis with rheumatoid arthritis of left elbow |
| M05.229 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified elbow |
| M05.231 | Rheumatoid vasculitis with rheumatoid arthritis of right wrist |
| M05.232 | Rheumatoid vasculitis with rheumatoid arthritis of left wrist |
| M05.239 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified wrist |
| M05.241 | Rheumatoid vasculitis with rheumatoid arthritis of right hand |
| M05.242 | Rheumatoid vasculitis with rheumatoid arthritis of left hand |
| M05.249 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified hand |
| M05.251 | Rheumatoid vasculitis with rheumatoid arthritis of right hip |
| M05.252 | Rheumatoid vasculitis with rheumatoid arthritis of left hip |

| ICD-10 | ICD-10 Description |
|---------|--|
| M05.259 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified hip |
| M05.261 | Rheumatoid vasculitis with rheumatoid arthritis of right knee |
| M05.262 | Rheumatoid vasculitis with rheumatoid arthritis of left knee |
| M05.269 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified knee |
| M05.271 | Rheumatoid vasculitis with rheumatoid arthritis of right ankle and foot |
| M05.272 | Rheumatoid vasculitis with rheumatoid arthritis of left ankle and foot |
| M05.279 | Rheumatoid vasculitis with rheumatoid arthritis of unspecified ankle and foot |
| M05.29 | Rheumatoid vasculitis with rheumatoid arthritis of multiple sites |
| M05.30 | Rheumatoid heart disease with rheumatoid arthritis of unspecified site |
| M05.311 | Rheumatoid heart disease with rheumatoid arthritis of right shoulder |
| M05.312 | Rheumatoid heart disease with rheumatoid arthritis of left shoulder |
| M05.319 | Rheumatoid heart disease with rheumatoid arthritis of unspecified shoulder |
| M05.321 | Rheumatoid heart disease with rheumatoid arthritis of right elbow |
| M05.322 | Rheumatoid heart disease with rheumatoid arthritis of left elbow |
| M05.329 | Rheumatoid heart disease with rheumatoid arthritis of unspecified elbow |
| M05.331 | Rheumatoid heart disease with rheumatoid arthritis of right wrist |
| M05.332 | Rheumatoid heart disease with rheumatoid arthritis of left wrist |
| M05.339 | Rheumatoid heart disease with rheumatoid arthritis of unspecified wrist |
| M05.341 | Rheumatoid heart disease with rheumatoid arthritis of right hand |
| M05.342 | Rheumatoid heart disease with rheumatoid arthritis of left hand |
| M05.349 | Rheumatoid heart disease with rheumatoid arthritis of unspecified hand |
| M05.351 | Rheumatoid heart disease with rheumatoid arthritis of right hip |
| M05.352 | Rheumatoid heart disease with rheumatoid arthritis of left hip |
| M05.359 | Rheumatoid heart disease with rheumatoid arthritis of unspecified hip |
| M05.361 | Rheumatoid heart disease with rheumatoid arthritis of right knee |
| M05.362 | Rheumatoid heart disease with rheumatoid arthritis of left knee |
| M05.369 | Rheumatoid heart disease with rheumatoid arthritis of unspecified knee |
| M05.371 | Rheumatoid heart disease with rheumatoid arthritis of right ankle and foot |
| M05.372 | Rheumatoid heart disease with rheumatoid arthritis of left ankle and foot |
| M05.379 | Rheumatoid heart disease with rheumatoid arthritis of unspecified ankle and foot |
| M05.39 | Rheumatoid heart disease with rheumatoid arthritis of multiple sites |
| M05.40 | Rheumatoid myopathy with rheumatoid arthritis of unspecified site |

| ICD-10 | ICD-10 Description |
|---------|---|
| M05.411 | Rheumatoid myopathy with rheumatoid arthritis of right shoulder |
| M05.412 | Rheumatoid myopathy with rheumatoid arthritis of left shoulder |
| M05.419 | Rheumatoid myopathy with rheumatoid arthritis of unspecified shoulder |
| M05.421 | Rheumatoid myopathy with rheumatoid arthritis of right elbow |
| M05.422 | Rheumatoid myopathy with rheumatoid arthritis of left elbow |
| M05.429 | Rheumatoid myopathy with rheumatoid arthritis of unspecified elbow |
| M05.431 | Rheumatoid myopathy with rheumatoid arthritis of right wrist |
| M05.432 | Rheumatoid myopathy with rheumatoid arthritis of left wrist |
| M05.439 | Rheumatoid myopathy with rheumatoid arthritis of unspecified wrist |
| M05.441 | Rheumatoid myopathy with rheumatoid arthritis of right hand |
| M05.442 | Rheumatoid myopathy with rheumatoid arthritis of left hand |
| M05.449 | Rheumatoid myopathy with rheumatoid arthritis of unspecified hand |
| M05.451 | Rheumatoid myopathy with rheumatoid arthritis of right hip |
| M05.452 | Rheumatoid myopathy with rheumatoid arthritis of left hip |
| M05.459 | Rheumatoid myopathy with rheumatoid arthritis of unspecified hip |
| M05.461 | Rheumatoid myopathy with rheumatoid arthritis of right knee |
| M05.462 | Rheumatoid myopathy with rheumatoid arthritis of left knee |
| M05.469 | Rheumatoid myopathy with rheumatoid arthritis of unspecified knee |
| M05.471 | Rheumatoid myopathy with rheumatoid arthritis of right ankle and foot |
| M05.472 | Rheumatoid myopathy with rheumatoid arthritis of left ankle and foot |
| M05.479 | Rheumatoid myopathy with rheumatoid arthritis of unspecified ankle and foot |
| M05.49 | Rheumatoid myopathy with rheumatoid arthritis of multiple sites |
| M05.50 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified site |
| M05.511 | Rheumatoid polyneuropathy with rheumatoid arthritis of right shoulder |
| M05.512 | Rheumatoid polyneuropathy with rheumatoid arthritis of left shoulder |
| M05.519 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified shoulder |
| M05.521 | Rheumatoid polyneuropathy with rheumatoid arthritis of right elbow |
| M05.522 | Rheumatoid polyneuropathy with rheumatoid arthritis of left elbow |
| M05.529 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified elbow |
| M05.531 | Rheumatoid polyneuropathy with rheumatoid arthritis of right wrist |
| M05.532 | Rheumatoid polyneuropathy with rheumatoid arthritis of left wrist |
| M05.539 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified wrist |

| ICD-10 | ICD-10 Description |
|---------|---|
| M05.541 | Rheumatoid polyneuropathy with rheumatoid arthritis of right hand |
| M05.542 | Rheumatoid polyneuropathy with rheumatoid arthritis of left hand |
| M05.549 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified hand |
| M05.551 | Rheumatoid polyneuropathy with rheumatoid arthritis of right hip |
| M05.552 | Rheumatoid polyneuropathy with rheumatoid arthritis of left hip |
| M05.559 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified hip |
| M05.561 | Rheumatoid polyneuropathy with rheumatoid arthritis of right knee |
| M05.562 | Rheumatoid polyneuropathy with rheumatoid arthritis of left knee |
| M05.569 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified knee |
| M05.571 | Rheumatoid polyneuropathy with rheumatoid arthritis of right ankle and foot |
| M05.572 | Rheumatoid polyneuropathy with rheumatoid arthritis of left ankle and foot |
| M05.579 | Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified ankle and foot |
| M05.59 | Rheumatoid polyneuropathy with rheumatoid arthritis of multiple sites |
| M05.60 | Rheumatoid arthritis of unspecified site with involvement of other organs and systems |
| M05.611 | Rheumatoid arthritis of right shoulder with involvement of other organs and systems |
| M05.612 | Rheumatoid arthritis of left shoulder with involvement of other organs and systems |
| M05.619 | Rheumatoid arthritis of unspecified shoulder with involvement of other organs and systems |
| M05.621 | Rheumatoid arthritis of right elbow with involvement of other organs and systems |
| M05.622 | Rheumatoid arthritis of left elbow with involvement of other organs and systems |
| M05.629 | Rheumatoid arthritis of unspecified elbow with involvement of other organs and systems |
| M05.631 | Rheumatoid arthritis of right wrist with involvement of other organs and systems |
| M05.632 | Rheumatoid arthritis of left wrist with involvement of other organs and systems |
| M05.639 | Rheumatoid arthritis of unspecified wrist with involvement of other organs and systems |
| M05.641 | Rheumatoid arthritis of right hand with involvement of other organs and systems |
| M05.642 | Rheumatoid arthritis of left hand with involvement of other organs and systems |
| M05.649 | Rheumatoid arthritis of unspecified hand with involvement of other organs and systems |
| M05.651 | Rheumatoid arthritis of right hip with involvement of other organs and systems |
| M05.652 | Rheumatoid arthritis of left hip with involvement of other organs and systems |
| M05.659 | Rheumatoid arthritis of unspecified hip with involvement of other organs and systems |
| M05.661 | Rheumatoid arthritis of right knee with involvement of other organs and systems |
| M05.662 | Rheumatoid arthritis of left knee with involvement of other organs and systems |
| M05.669 | Rheumatoid arthritis of unspecified knee with involvement of other organs and systems |

| ICD-10 | ICD-10 Description |
|---------|--|
| M05.671 | Rheumatoid arthritis of right ankle and foot with involvement of other organs and systems |
| M05.672 | Rheumatoid arthritis of left ankle and foot with involvement of other organs and systems |
| M05.679 | Rheumatoid arthritis of unspecified ankle and foot with involvement of other organs and systems |
| M05.69 | Rheumatoid arthritis of multiple sites with involvement of other organs and systems |
| M05.7A | Rheumatoid arthritis with rheumatoid factor of other specified site without organ or systems involvement |
| M05.711 | Rheumatoid arthritis with rheumatoid factor of right shoulder without organ or systems involvement |
| M05.712 | Rheumatoid arthritis with rheumatoid factor of left shoulder without organ or systems involvement |
| M05.719 | Rheumatoid arthritis with rheumatoid factor of unspecified shoulder without organ or systems involvement |
| M05.721 | Rheumatoid arthritis with rheumatoid factor of right elbow without organ or systems involvement |
| M05.722 | Rheumatoid arthritis with rheumatoid factor of left elbow without organ or systems involvement |
| M05.729 | Rheumatoid arthritis with rheumatoid factor of unspecified elbow without organ or systems involvement |
| M05.731 | Rheumatoid arthritis with rheumatoid factor of right wrist without organ or systems involvement |
| M05.732 | Rheumatoid arthritis with rheumatoid factor of left wrist without organ or systems involvement |
| M05.739 | Rheumatoid arthritis with rheumatoid factor of unspecified wrist without organ or systems involvement |
| M05.741 | Rheumatoid arthritis with rheumatoid factor of right hand without organ or systems involvement |
| M05.742 | Rheumatoid arthritis with rheumatoid factor of left hand without organ or systems involvement |
| M05.749 | Rheumatoid arthritis with rheumatoid factor of unspecified hand without organ or systems involvement |
| M05.751 | Rheumatoid arthritis with rheumatoid factor of right hip without organ or systems involvement |
| M05.752 | Rheumatoid arthritis with rheumatoid factor of left hip without organ or systems involvement |
| M05.759 | Rheumatoid arthritis with rheumatoid factor of unspecified hip without organ or systems involvement |
| M05.761 | Rheumatoid arthritis with rheumatoid factor of right knee without organ or systems involvement |
| M05.762 | Rheumatoid arthritis with rheumatoid factor of left knee without organ or systems involvement |
| M05.769 | Rheumatoid arthritis with rheumatoid factor of unspecified knee without organ or systems involvement |
| M05.771 | Rheumatoid arthritis with rheumatoid factor of right ankle and foot without organ or systems involvement |
| M05.772 | Rheumatoid arthritis with rheumatoid factor of left ankle and foot without organ or systems involvement |
| M05.779 | Rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot without organ or systems involvement |
| M05.79 | Rheumatoid arthritis with rheumatoid factor of multiple sites without organ or systems involvement |
| M05.8A | Other rheumatoid arthritis with rheumatoid factor of other specified site |
| M05.811 | Other rheumatoid arthritis with rheumatoid factor of right shoulder |
| M05.812 | Other rheumatoid arthritis with rheumatoid factor of left shoulder |
| M05.819 | Other rheumatoid arthritis with rheumatoid factor of unspecified shoulder |
| M05.821 | Other rheumatoid arthritis with rheumatoid factor of right elbow |

| ICD-10 | ICD-10 Description |
|---------|---|
| M05.822 | Other rheumatoid arthritis with rheumatoid factor of left elbow |
| M05.829 | Other rheumatoid arthritis with rheumatoid factor of unspecified elbow |
| M05.831 | Other rheumatoid arthritis with rheumatoid factor of right wrist |
| M05.832 | Other rheumatoid arthritis with rheumatoid factor of left wrist |
| M05.839 | Other rheumatoid arthritis with rheumatoid factor of unspecified wrist |
| M05.841 | Other rheumatoid arthritis with rheumatoid factor of right hand |
| M05.842 | Other rheumatoid arthritis with rheumatoid factor of left hand |
| M05.849 | Other rheumatoid arthritis with rheumatoid factor of unspecified hand |
| M05.851 | Other rheumatoid arthritis with rheumatoid factor of right hip |
| M05.852 | Other rheumatoid arthritis with rheumatoid factor of left hip |
| M05.859 | Other rheumatoid arthritis with rheumatoid factor of unspecified hip |
| M05.861 | Other rheumatoid arthritis with rheumatoid factor of right knee |
| M05.862 | Other rheumatoid arthritis with rheumatoid factor of left knee |
| M05.869 | Other rheumatoid arthritis with rheumatoid factor of unspecified knee |
| M05.871 | Other rheumatoid arthritis with rheumatoid factor of right ankle and foot |
| M05.872 | Other rheumatoid arthritis with rheumatoid factor of left ankle and foot |
| M05.879 | Other rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot |
| M05.89 | Other rheumatoid arthritis with rheumatoid factor of multiple sites |
| M05.9 | Rheumatoid arthritis with rheumatoid factor, unspecified |
| M06.0A | Rheumatoid arthritis without rheumatoid factor, other specified site |
| M06.011 | Rheumatoid arthritis without rheumatoid factor, right shoulder |
| M06.012 | Rheumatoid arthritis without rheumatoid factor, left shoulder |
| M06.019 | Rheumatoid arthritis without rheumatoid factor, unspecified shoulder |
| M06.021 | Rheumatoid arthritis without rheumatoid factor, right elbow |
| M06.022 | Rheumatoid arthritis without rheumatoid factor, left elbow |
| M06.029 | Rheumatoid arthritis without rheumatoid factor, unspecified elbow |
| M06.031 | Rheumatoid arthritis without rheumatoid factor, right wrist |
| M06.032 | Rheumatoid arthritis without rheumatoid factor, left wrist |
| M06.039 | Rheumatoid arthritis without rheumatoid factor, unspecified wrist |
| M06.041 | Rheumatoid arthritis without rheumatoid factor, right hand |
| M06.042 | Rheumatoid arthritis without rheumatoid factor, left hand |
| M06.049 | Rheumatoid arthritis without rheumatoid factor, unspecified hand |

| ICD-10 | ICD-10 Description |
|---------|--|
| M06.051 | Rheumatoid arthritis without rheumatoid factor, right hip |
| M06.052 | Rheumatoid arthritis without rheumatoid factor, left hip |
| M06.059 | Rheumatoid arthritis without rheumatoid factor, unspecified hip |
| M06.061 | Rheumatoid arthritis without rheumatoid factor, right knee |
| M06.062 | Rheumatoid arthritis without rheumatoid factor, left knee |
| M06.069 | Rheumatoid arthritis without rheumatoid factor, unspecified knee |
| M06.071 | Rheumatoid arthritis without rheumatoid factor, right ankle and foot |
| M06.072 | Rheumatoid arthritis without rheumatoid factor, left ankle and foot |
| M06.079 | Rheumatoid arthritis without rheumatoid factor, unspecified ankle and foot |
| M06.08 | Rheumatoid arthritis without rheumatoid factor, vertebrae |
| M06.09 | Rheumatoid arthritis without rheumatoid factor, multiple sites |
| M06.8A | Other specified rheumatoid arthritis, other specified site |
| M06.811 | Other specified rheumatoid arthritis, right shoulder |
| M06.812 | Other specified rheumatoid arthritis, left shoulder |
| M06.819 | Other specified rheumatoid arthritis, unspecified shoulder |
| M06.821 | Other specified rheumatoid arthritis, right elbow |
| M06.822 | Other specified rheumatoid arthritis, left elbow |
| M06.829 | Other specified rheumatoid arthritis, unspecified elbow |
| M06.831 | Other specified rheumatoid arthritis, right wrist |
| M06.832 | Other specified rheumatoid arthritis, left wrist |
| M06.839 | Other specified rheumatoid arthritis, unspecified wrist |
| M06.841 | Other specified rheumatoid arthritis, right hand |
| M06.842 | Other specified rheumatoid arthritis, left hand |
| M06.849 | Other specified rheumatoid arthritis, unspecified hand |
| M06.851 | Other specified rheumatoid arthritis, right hip |
| M06.852 | Other specified rheumatoid arthritis, left hip |
| M06.859 | Other specified rheumatoid arthritis, unspecified hip |
| M06.861 | Other specified rheumatoid arthritis, right knee |
| M06.862 | Other specified rheumatoid arthritis, left knee |
| M06.869 | Other specified rheumatoid arthritis, unspecified knee |
| M06.871 | Other specified rheumatoid arthritis, right ankle and foot |
| M06.872 | Other specified rheumatoid arthritis, left ankle and foot |

| ICD-10 | ICD-10 Description |
|---------|---|
| M06.879 | Other specified rheumatoid arthritis, unspecified ankle and foot |
| M06.88 | Other specified rheumatoid arthritis, vertebrae |
| M06.89 | Other specified rheumatoid arthritis, multiple sites |
| M06.9 | Rheumatoid arthritis, unspecified |
| M08.0A | Unspecified juvenile rheumatoid arthritis, other specified site |
| M08.011 | Unspecified juvenile rheumatoid arthritis, right shoulder |
| M08.012 | Unspecified juvenile rheumatoid arthritis, left shoulder |
| M08.019 | Unspecified juvenile rheumatoid arthritis, unspecified shoulder |
| M08.021 | Unspecified juvenile rheumatoid arthritis, right elbow |
| M08.022 | Unspecified juvenile rheumatoid arthritis, left elbow |
| M08.029 | Unspecified juvenile rheumatoid arthritis, unspecified elbow |
| M08.031 | Unspecified juvenile rheumatoid arthritis, right wrist |
| M08.032 | Unspecified juvenile rheumatoid arthritis, left wrist |
| M08.039 | Unspecified juvenile rheumatoid arthritis, unspecified wrist |
| M08.041 | Unspecified juvenile rheumatoid arthritis, right hand |
| M08.042 | Unspecified juvenile rheumatoid arthritis, left hand |
| M08.049 | Unspecified juvenile rheumatoid arthritis, unspecified hand |
| M08.051 | Unspecified juvenile rheumatoid arthritis, right hip |
| M08.052 | Unspecified juvenile rheumatoid arthritis, left hip |
| M08.059 | Unspecified juvenile rheumatoid arthritis, unspecified hip |
| M08.061 | Unspecified juvenile rheumatoid arthritis, right knee |
| M08.062 | Unspecified juvenile rheumatoid arthritis, left knee |
| M08.069 | Unspecified juvenile rheumatoid arthritis, unspecified knee |
| M08.071 | Unspecified juvenile rheumatoid arthritis, right ankle and foot |
| M08.072 | Unspecified juvenile rheumatoid arthritis, left ankle and foot |
| M08.079 | Unspecified juvenile rheumatoid arthritis, unspecified ankle and foot |
| M08.08 | Unspecified juvenile rheumatoid arthritis, vertebrae |
| M08.09 | Unspecified juvenile rheumatoid arthritis, multiple sites |
| M08.2A | Juvenile rheumatoid arthritis with systemic onset, other specified site |
| M08.211 | Juvenile rheumatoid arthritis with systemic onset, right shoulder |
| M08.212 | Juvenile rheumatoid arthritis with systemic onset, left shoulder |
| M08.219 | Juvenile rheumatoid arthritis with systemic onset, unspecified shoulder |

| ICD-10 | ICD-10 Description |
|---------|---|
| M08.221 | Juvenile rheumatoid arthritis with systemic onset, right elbow |
| M08.222 | Juvenile rheumatoid arthritis with systemic onset, left elbow |
| M08.229 | Juvenile rheumatoid arthritis with systemic onset, unspecified elbow |
| M08.231 | Juvenile rheumatoid arthritis with systemic onset, right wrist |
| M08.232 | Juvenile rheumatoid arthritis with systemic onset, left wrist |
| M08.239 | Juvenile rheumatoid arthritis with systemic onset, unspecified wrist |
| M08.241 | Juvenile rheumatoid arthritis with systemic onset, right hand |
| M08.242 | Juvenile rheumatoid arthritis with systemic onset, left hand |
| M08.249 | Juvenile rheumatoid arthritis with systemic onset, unspecified hand |
| M08.251 | Juvenile rheumatoid arthritis with systemic onset, right hip |
| M08.252 | Juvenile rheumatoid arthritis with systemic onset, left hip |
| M08.259 | Juvenile rheumatoid arthritis with systemic onset, unspecified hip |
| M08.261 | Juvenile rheumatoid arthritis with systemic onset, right knee |
| M08.262 | Juvenile rheumatoid arthritis with systemic onset, left knee |
| M08.269 | Juvenile rheumatoid arthritis with systemic onset, unspecified knee |
| M08.271 | Juvenile rheumatoid arthritis with systemic onset, right ankle and foot |
| M08.272 | Juvenile rheumatoid arthritis with systemic onset, left ankle and foot |
| M08.279 | Juvenile rheumatoid arthritis with systemic onset, unspecified ankle and foot |
| M08.28 | Juvenile rheumatoid arthritis with systemic onset, vertebrae |
| M08.29 | Juvenile rheumatoid arthritis with systemic onset, multiple sites |
| M08.3 | Juvenile rheumatoid polyarthritis (seronegative) |
| M08.3 | Juvenile rheumatoid polyarthritis (seronegative) |
| M08.4A | Pauciarticular juvenile rheumatoid arthritis, other specified site |
| M08.411 | Pauciarticular juvenile rheumatoid arthritis, right shoulder |
| M08.412 | Pauciarticular juvenile rheumatoid arthritis, left shoulder |
| M08.419 | Pauciarticular juvenile rheumatoid arthritis, unspecified shoulder |
| M08.421 | Pauciarticular juvenile rheumatoid arthritis, right elbow |
| M08.422 | Pauciarticular juvenile rheumatoid arthritis, left elbow |
| M08.429 | Pauciarticular juvenile rheumatoid arthritis, unspecified elbow |
| M08.431 | Pauciarticular juvenile rheumatoid arthritis, right wrist |
| M08.432 | Pauciarticular juvenile rheumatoid arthritis, left wrist |
| M08.439 | Pauciarticular juvenile rheumatoid arthritis, unspecified wrist |

| ICD-10 | ICD-10 Description |
|---------|--|
| M08.441 | Pauciarticular juvenile rheumatoid arthritis, right hand |
| M08.442 | Pauciarticular juvenile rheumatoid arthritis, left hand |
| M08.449 | Pauciarticular juvenile rheumatoid arthritis, unspecified hand |
| M08.451 | Pauciarticular juvenile rheumatoid arthritis, right hip |
| M08.452 | Pauciarticular juvenile rheumatoid arthritis, left hip |
| M08.459 | Pauciarticular juvenile rheumatoid arthritis, unspecified hip |
| M08.461 | Pauciarticular juvenile rheumatoid arthritis, right knee |
| M08.462 | Pauciarticular juvenile rheumatoid arthritis, left knee |
| M08.469 | Pauciarticular juvenile rheumatoid arthritis, unspecified knee |
| M08.471 | Pauciarticular juvenile rheumatoid arthritis, right ankle and foot |
| M08.472 | Pauciarticular juvenile rheumatoid arthritis, left ankle and foot |
| M08.479 | Pauciarticular juvenile rheumatoid arthritis, unspecified ankle and foot |
| M08.48 | Pauciarticular juvenile rheumatoid arthritis, vertebrae |
| M08.80 | Other juvenile arthritis, unspecified site |
| M08.811 | Other juvenile arthritis, right shoulder |
| M08.812 | Other juvenile arthritis, left shoulder |
| M08.819 | Other juvenile arthritis, unspecified shoulder |
| M08.821 | Other juvenile arthritis, right elbow |
| M08.822 | Other juvenile arthritis, left elbow |
| M08.829 | Other juvenile arthritis, unspecified elbow |
| M08.831 | Other juvenile arthritis, right wrist |
| M08.832 | Other juvenile arthritis, left wrist |
| M08.839 | Other juvenile arthritis, unspecified wrist |
| M08.841 | Other juvenile arthritis, right hand |
| M08.842 | Other juvenile arthritis, left hand |
| M08.849 | Other juvenile arthritis, unspecified hand |
| M08.851 | Other juvenile arthritis, right hip |
| M08.852 | Other juvenile arthritis, left hip |
| M08.859 | Other juvenile arthritis, unspecified hip |
| M08.861 | Other juvenile arthritis, right knee |
| M08.862 | Other juvenile arthritis, left knee |
| M08.869 | Other juvenile arthritis, unspecified knee |

| ICD-10 | ICD-10 Description |
|---------|---|
| M08.871 | Other juvenile arthritis, right ankle and foot |
| M08.872 | Other juvenile arthritis, left ankle and foot |
| M08.879 | Other juvenile arthritis, unspecified ankle and foot |
| M08.88 | Other juvenile arthritis, other specified site |
| M08.89 | Other juvenile arthritis, multiple sites |
| M08.9A | Juvenile arthritis, unspecified, other specified site |
| M08.911 | Juvenile arthritis, unspecified, right shoulder |
| M08.912 | Juvenile arthritis, unspecified, left shoulder |
| M08.919 | Juvenile arthritis, unspecified, unspecified shoulder |
| M08.921 | Juvenile arthritis, unspecified, right elbow |
| M08.922 | Juvenile arthritis, unspecified, left elbow |
| M08.929 | Juvenile arthritis, unspecified, unspecified elbow |
| M08.931 | Juvenile arthritis, unspecified, right wrist |
| M08.932 | Juvenile arthritis, unspecified, left wrist |
| M08.939 | Juvenile arthritis, unspecified, unspecified wrist |
| M08.941 | Juvenile arthritis, unspecified, right hand |
| M08.942 | Juvenile arthritis, unspecified, left hand |
| M08.949 | Juvenile arthritis, unspecified, unspecified hand |
| M08.951 | Juvenile arthritis, unspecified, right hip |
| M08.952 | Juvenile arthritis, unspecified, left hip |
| M08.959 | Juvenile arthritis, unspecified, unspecified hip |
| M08.961 | Juvenile arthritis, unspecified, right knee |
| M08.962 | Juvenile arthritis, unspecified, left knee |
| M08.969 | Juvenile arthritis, unspecified, unspecified knee |
| M08.971 | Juvenile arthritis, unspecified, right ankle and foot |
| M08.972 | Juvenile arthritis, unspecified, left ankle and foot |
| M08.979 | Juvenile arthritis, unspecified, unspecified ankle and foot |
| M08.98 | Juvenile arthritis, unspecified, vertebrae |
| M08.99 | Juvenile arthritis, unspecified, multiple sites |
| M60.811 | Other myositis, right shoulder |
| M60.812 | Other myositis, left shoulder |
| M60.819 | Other myositis, unspecified shoulder |

| ICD-10 | ICD-10 Description |
|---------|---|
| M60.821 | Other myositis, right upper arm |
| M60.822 | Other myositis, left upper arm |
| M60.829 | Other myositis, unspecified upper arm |
| M60.831 | Other myositis, right forearm |
| M60.832 | Other myositis, left forearm |
| M60.839 | Other myositis, unspecified forearm |
| M60.841 | Other myositis, right hand |
| M60.842 | Other myositis, left hand |
| M60.849 | Other myositis, unspecified hand |
| M60.851 | Other myositis, right thigh |
| M60.852 | Other myositis, left thigh |
| M60.859 | Other myositis, unspecified thigh |
| M60.861 | Other myositis, right lower leg |
| M60.862 | Other myositis, left lower leg |
| M60.869 | Other myositis, unspecified lower leg |
| M60.871 | Other myositis, right ankle and foot |
| M60.872 | Other myositis, left ankle and foot |
| M60.879 | Other myositis, unspecified ankle and foot |
| M60.88 | Other myositis, other site |
| M60.89 | Other myositis, multiple sites |
| T86.09 | Other complications of bone marrow transplant |
| Z94.81 | Bone marrow transplant status |

Appendix 2 – Centers for Medicare and Medicaid Services (CMS)

The preceding information is intended for non-Medicare coverage determinations. Medicare coverage for outpatient (Part B) drugs is outlined in the Medicare Benefit Policy Manual (Pub. 100-2), Chapter 15, §50 Drugs and Biologicals. In addition, National Coverage Determinations (NCDs) and/or Local Coverage Determinations (LCDs) may exist and compliance with these policies is required where applicable. Local Coverage Articles (LCAs) may also exist for claims payment purposes or to clarify benefit eligibility under Part B for drugs which may be self-administered. The following link may be used to search for NCD, LCD, or LCA documents: <https://www.cms.gov/medicare-coverage-database/search.aspx>. Additional indications, including any preceding information, may be applied at the discretion of the health plan.

Medicare Part B Covered Diagnosis Codes (applicable to existing NCD/LCD/LCA): N/A

| Medicare Part B Administrative Contractor (MAC) Jurisdictions | | |
|---|---|---|
| Jurisdiction | Applicable State/US Territory | Contractor |
| E (1) | CA, HI, NV, AS, GU, CNMI | Noridian Healthcare Solutions, LLC |
| F (2 & 3) | AK, WA, OR, ID, ND, SD, MT, WY, UT, AZ | Noridian Healthcare Solutions, LLC |
| 5 | KS, NE, IA, MO | Wisconsin Physicians Service Insurance Corp (WPS) |
| 6 | MN, WI, IL | National Government Services, Inc. (NGS) |
| H (4 & 7) | LA, AR, MS, TX, OK, CO, NM | Novitas Solutions, Inc. |
| 8 | MI, IN | Wisconsin Physicians Service Insurance Corp (WPS) |
| N (9) | FL, PR, VI | First Coast Service Options, Inc. |
| J (10) | TN, GA, AL | Palmetto GBA |
| M (11) | NC, SC, WV, VA (excluding below) | Palmetto GBA |
| L (12) | DE, MD, PA, NJ, DC (includes Arlington & Fairfax counties and the city of Alexandria in VA) | Novitas Solutions, Inc. |
| K (13 & 14) | NY, CT, MA, RI, VT, ME, NH | National Government Services, Inc. (NGS) |
| 15 | KY, OH | CGS Administrators, LLC |