

**Bendamustine:****Belrapzo®; Bendamustine; Bendeka®; Treanda®; Vivimusta®  
(Intravenous)****-E-**

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07/2022, 08/2022, 10/2022, 01/2023, 03/2023, 04/2024, 03/04/2025, 09/04/2025, 10/02/2025**I. Length of Authorization** <sup>1-6,9,14,18</sup>

- Initial: Prior authorization validity will be provided initially for 6 months, unless otherwise specified.
  - Multiple Myeloma: Prior authorization validity will be provided initially for a maximum of 8 months (16 doses).
- Renewal: Prior authorization validity may NOT be renewed.

**II. Dosing Limits****Max Units (per dose and over time) [HCPCS Unit]:****NHL:**

- 600 billable units every 21 days

**WM/LPL:**

- 450 billable units every 28 days

**Hodgkin Lymphoma:**

- 600 billable units every 28 days

**CLL/SLL, Systemic Light Chain Amyloidosis & Multiple Myeloma:**

- 500 billable units every 28 days

**HSCT Conditioning:**

- 500 billable units for 2 doses

### III. Initial Approval Criteria <sup>1-4</sup>

Prior authorization validity is provided in the following conditions:

- Patient must have had an inadequate response to an adequate trial of Treanda (J9033), unless contraindicated or not tolerated, prior to consideration of another bendamustine product; **AND**

Patient is at least 18 years of age, unless otherwise specified; **AND**

Patient must not have received bendamustine in a previous line of therapy, unless otherwise specified; **AND**

#### **Non-Hodgkin Lymphoma (NHL) † ‡ Φ <sup>1-5,16,27</sup>**

- Prior authorization validity is provided for B-Cell Lymphomas when † ‡
  - Used as subsequent therapy; **AND**
    - Used as a single agent for indolent lymphoma †; **OR**
    - Used in combination with rituximab for:
      - Classic Follicular Lymphoma (cFL)
      - Extranodal Marginal Zone Lymphoma (EMZL) of the Stomach & Nongastric Sites (Noncutaneous)
      - Mantle Cell Lymphoma (*may also be used as a component of RBAC500 [rituximab, bendamustine, and cytarabine]*)
      - Nodal Marginal Zone Lymphoma
      - Splenic Marginal Zone Lymphoma; **OR**
    - Used in combination with obinutuzumab for:
      - Classic Follicular Lymphoma (cFL)
      - Extranodal Marginal Zone Lymphoma (EMZL) of the Stomach & Nongastric Sites (Noncutaneous)
      - Nodal Marginal Zone Lymphoma
      - Splenic Marginal Zone Lymphoma; **OR**
    - Used in combination with polatuzumab and rituximab for:
      - HIV-Related Diffuse Large B-Cell Lymphoma (DLBCL) or HHV8-positive DLBCL, not otherwise specified (NOS)
      - DLBCL
      - Histologic Transformation of Indolent Lymphomas to DLBCL
      - High-Grade B-Cell Lymphomas
      - Monomorphic Post-Transplant Lymphoproliferative Disorder (B-cell type); **OR**
  - Used as first line therapy; **AND**

- Used in combination with a rituximab-based regimen for:
  - Classic Follicular Lymphoma (cFL)
  - Extranodal Marginal Zone Lymphoma (EMZL) of the Stomach & Nongastric Sites (Noncutaneous)
  - Mantle Cell Lymphoma
  - Nodal Marginal Zone Lymphoma
  - Splenic Marginal Zone Lymphoma; **OR**
- Used in combination with obinutuzumab for:
  - Classic Follicular Lymphoma (cFL)
  - Nodal Marginal Zone Lymphoma; **OR**
- Used as CAR T-cell bridging therapy after leukapheresis; **AND**
  - Used in combination with polatuzumab and rituximab for:
    - HIV-Related Diffuse Large B-Cell Lymphoma (DLBCL) or HHV8-positive DLBCL, not otherwise specified (NOS)
    - High-Grade B-Cell Lymphomas
    - DLBCL
    - Monomorphic Post-Transplant Lymphoproliferative Disorder (B-cell type)
- Prior authorization validity is provided for the following T-Cell Lymphomas ‡ <sup>41e</sup>
  - Peripheral T-Cell Lymphoma (*includes all of the following: anaplastic large cell lymphoma [ALCL], peripheral T-cell lymphoma not otherwise specified [PTCL-NOS], angioimmunoblastic T-cell lymphoma [AITL], enteropathy-associated T-cell lymphoma [EATL], monomorphic epitheliotropic intestinal T-cell lymphoma [MEITL], nodal peripheral T-cell lymphoma with TFH phenotype/nodal TFH cell lymphoma [Nodal PTCL/TFH], or follicular T-cell lymphoma [FTCL]*)
    - Used as subsequent therapy as a single agent for relapsed or refractory disease

### **Chronic Lymphocytic Leukemia/Small Lymphocytic Lymphoma (CLL/SLL) † ‡ Φ <sup>1-</sup> 5,17,52e-55e,57e,60e-62e**

- Used as first-line therapy; **AND**
  - Used as a single agent †; **OR**
  - Used in combination with rituximab or obinutuzumab for disease without del(17p)/TP53 mutations (*excluding use in frail patients*); **OR**
- Used as subsequent therapy; **AND**
  - Patient has relapsed or refractory disease after prior Bruton Tyrosine Kinase inhibitor- and venetoclax-based regimens; **AND**

- Used in combination with rituximab for disease without del(17p)/TP53 mutations in patients <65 years of age without significant comorbidities

### **Waldenström Macroglobulinemia/Lymphoplasmacytic Lymphoma (WM/LPL) ‡**

4,13,23,24,29,65e

- Used in combination with rituximab; **AND**
  - Used as primary therapy; **OR**
  - Used for relapse, if previously used as primary therapy that was well tolerated and elicited a prolonged response; **OR**
  - Used as alternative therapy for previously treated disease with persistent symptoms following primary therapy OR that does not respond to primary therapy; **OR**
  - Used for progressive or relapsed disease

### **Adult Hodgkin Lymphoma ‡** <sup>5,6,10-12,74e,83e,100e</sup>

- Patient has classic Hodgkin Lymphoma (cHL); **AND**
  - Used as second-line or subsequent therapy (if not used second-line) for relapsed or refractory disease; **AND**
    - Used in combination with gemcitabine and vinorelbine; **OR**
    - Used in combination with brentuximab vedotin; **OR**
  - Used as subsequent therapy for disease refractory to at least 3 prior lines of therapy; **AND**
    - Used as a single agent; **AND**
      - Patient did not relapse within 3 months of autologous stem cell transplant (ASCT) or was ineligible for ASCT; **OR**
    - Used in combination with carboplatin and etoposide; **OR**
  - Used as palliative therapy for relapsed or refractory disease; **AND**
    - Used as a single agent; **AND**
    - Patient did not relapse within 3 months of autologous stem cell transplant (ASCT) or was ineligible for ASCT

### **Pediatric Hodgkin Lymphoma ‡** <sup>5,6</sup>

- Patient is 18 years of age and under\*; **AND**
- Used in combination with brentuximab vedotin for relapsed or refractory disease; **OR**
- Used in combination with nivolumab and brentuximab vedotin; **AND**
  - Patient has relapsed or refractory disease; **AND**
  - Patient is heavily pre-treated with platinum or anthracycline-based chemotherapy or a decrease in cardiac function is observed; **AND**
    - Used as re-induction therapy in combination with involved site radiation therapy (ISRT) in patients with highly favorable disease^; **OR**

- Used as re-induction or subsequent therapy

\* Pediatric Hodgkin Lymphoma may be applicable to adolescent and young adult (AYA) patients up to the age of 39 years.

^ Recommended for those who may avoid ASCR: initial stage other than IIIB or IVB, no prior exposure to RT, duration of CR1 >1 year, absence of extranodal disease or B symptoms at relapse.

### Multiple Myeloma ‡ Φ<sup>5,14,22</sup>

- Used for relapsed or refractory disease after 3 prior therapies; **AND**
- Used in combination with dexamethasone AND either bortezomib, carfilzomib, or lenalidomide

### Systemic Light Chain Amyloidosis ‡<sup>5,18</sup>

- Patient has relapsed or refractory disease; **AND**
- Used in combination with dexamethasone

### Hematopoietic Cell Transplantation ‡<sup>5,19</sup>

- Used as conditioning for autologous transplant; **AND**
- Used in combination with etoposide, cytarabine and melphalan (BEAM); **AND**
- Patient has Non-Hodgkin Lymphoma without CNS disease or Hodgkin Lymphoma

**Preferred therapies and recommendations are determined by review of clinical evidence. NCCN category of recommendation is taken into account as a component of this review. Regimens deemed equally efficacious (i.e., those having the same NCCN categorization) are considered to be therapeutically equivalent.**

#### Enhanced Oncology Value (EOV) Program – Redacted indications

Uses not listed above have inadequate data to support efficacy and are excluded from prior authorization validity.

Other treatment options including, but are not limited to, the following may be appropriate: radiation therapy, surgery, traditional chemotherapy (e.g., platinum, taxane), compassionate use/expanded access programs, clinical trials, supportive care, integrative and complementary therapies.

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

## IV. Renewal Criteria<sup>1-5</sup>

- Duration of authorization has not been exceeded (*refer to Section I*)

## V. Dosage/Administration <sup>1-6,9,14,18,26,29</sup>

| Indication   | Dose  |
|--|---|
| Non-Hodgkin Lymphoma                                     | Up to 120 mg/m <sup>2</sup> intravenously on days 1 and 2 of a 21-day cycle, up to 8 cycles |
| CLL/SLL & Systemic Light Chain Amyloidosis               | Up to 100 mg/m <sup>2</sup> intravenously on days 1 and 2 of a 28-day cycle, up to 6 cycles |
| Waldenström Macroglobulinemia/Lymphoplasmacytic Lymphoma | Up to 90 mg/m <sup>2</sup> intravenously on days 1 and 2 of a 28-day cycle, up to 6 cycles  |
| Hodgkin Lymphoma   | Up to 120 mg/m <sup>2</sup> intravenously on days 1 and 2 of a 28-day cycle, up to 6 cycles |
| Multiple Myeloma   | Up to 100 mg/m <sup>2</sup> intravenously on days 1 and 2 of a 28-day cycle, up to 8 cycles |
| HSCT Conditioning  | Up to 200 mg/m <sup>2</sup> intravenously on days –7 and –6 leading up to transplant.       |

## VI. Billing Code/Availability Information

### HCPCS Code(s):

- J9033 – Injection, bendamustine hydrochloride, 1 mg; 1 billable unit = 1 mg
- J9034 – Injection, bendamustine hcl (bendeka), 1 mg; 1 billable unit = 1 mg
- J9036 – Injection, bendamustine hydrochloride, (belrapzo/bendamustine), 1 mg; 1 billable unit = 1 mg
- J9056 – Injection, bendamustine hydrochloride (vivimusta), 1 mg; 1 billable unit = 1 mg

### NDC(s):

- Treanda 100 mg lyophilized powder in a single-dose vial for reconstitution: 63459-0391-xx
- Treanda 25 mg lyophilized powder in a single-dose vial for reconstitution: 63459-0390-xx
- Treanda 45 mg/0.5 mL solution in a single dose vial: 63459-0395-xx\* §
- Treanda 45 mg/0.5 mL solution in a single dose vial: 63459-0396-xx\* §
- Bendeka 100 mg/4 mL ready-to-dilute solution in a multi-dose vial: 63459-0348-xx\*\* § Ψ
- Belrapzo 100 mg/4 mL ready-to-dilute solution in a multi-dose vial: 42367-0521-xx Ψ
- Vivimusta 100 mg/4 mL solution in a multi-dose vial: 24338-0270-xx Ψ

– \* No longer commercially available;

– § Available generically from various manufacturers;

Ψ Designated products approved by the FDA as a 505(b)(2) NDA of the innovator product. These products are not rated as therapeutically equivalent to their reference listed drug in the Food and Drug Administration's (FDA) Orange Book and are therefore considered single source products based on the statutory definition of "single source drug" in section 1847A(c)(6) of the Act. For a complete list of all approved 505(b)(2) NDA products please reference the latest edition of the Orange Book:

## VII. References (STANDARD)

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## Appendix A – Non-Quantitative Treatment Limitations (NQTL) Factor Checklist

Non-quantitative treatment limitations (NQTLs) refer to the methods, guidelines, standards of evidence, or other conditions that can restrict how long or to what extent benefits are provided under a health plan. These may include things like utilization review or prior authorization. The utilization management NQTL applies comparably, and not more stringently, to mental health/substance use disorder (MH/SUD) Medical Benefit Prescription Drugs and medical/surgical (M/S) Medical Benefit Prescription Drugs. The table below lists the factors that were considered in designing and applying prior authorization to this drug/drug group, and a summary of the conclusions that Prime's assessment led to for each.

| Factor                     | Conclusion            |
|----------------------------|-----------------------|
| Indication                 | Yes: Consider for PA  |
| Safety and efficacy        | No: PA not a priority |
| Potential for misuse/abuse | No: PA not a priority |

Cost of drug

Yes: Consider for PA

## Appendix 1 – Covered Diagnosis Codes

| ICD-10 | ICD-10 Description  |
|--------|---|
| C81.10 | Nodular sclerosis Hodgkin lymphoma, unspecified site                                |
| C81.11 | Nodular sclerosis Hodgkin lymphoma, lymph nodes of head, face, and neck             |
| C81.12 | Nodular sclerosis Hodgkin lymphoma, intrathoracic lymph nodes                       |
| C81.13 | Nodular sclerosis Hodgkin lymphoma, intra-abdominal lymph nodes                     |
| C81.14 | Nodular sclerosis Hodgkin lymphoma, lymph nodes of axilla and upper limb            |
| C81.15 | Nodular sclerosis Hodgkin lymphoma, lymph nodes of inguinal region and lower limb   |
| C81.16 | Nodular sclerosis Hodgkin lymphoma, intrapelvic lymph nodes                         |
| C81.17 | Nodular sclerosis Hodgkin lymphoma, spleen  |
| C81.18 | Nodular sclerosis Hodgkin lymphoma, lymph nodes of multiple sites                   |
| C81.19 | Nodular sclerosis Hodgkin lymphoma, extranodal and solid organ sites                |
| C81.20 | Mixed cellularity Hodgkin lymphoma, unspecified site                                |
| C81.21 | Mixed cellularity Hodgkin lymphoma, lymph nodes of head, face, and neck             |
| C81.22 | Mixed cellularity Hodgkin lymphoma, intrathoracic lymph nodes                       |
| C81.23 | Mixed cellularity Hodgkin lymphoma, intra-abdominal lymph nodes                     |
| C81.24 | Mixed cellularity Hodgkin lymphoma, lymph nodes of axilla and upper limb            |
| C81.25 | Mixed cellularity Hodgkin lymphoma, lymph nodes of inguinal region and lower limb   |
| C81.26 | Mixed cellularity Hodgkin lymphoma, intrapelvic lymph nodes                         |
| C81.27 | Mixed cellularity Hodgkin lymphoma, spleen  |
| C81.28 | Mixed cellularity Hodgkin lymphoma, lymph nodes of multiple sites                   |
| C81.29 | Mixed cellularity Hodgkin lymphoma, extranodal and solid organ sites                |
| C81.30 | Lymphocyte depleted Hodgkin lymphoma, unspecified site                              |
| C81.31 | Lymphocyte depleted Hodgkin lymphoma, lymph nodes of head, face, and neck           |
| C81.32 | Lymphocyte depleted Hodgkin lymphoma, intrathoracic lymph nodes                     |
| C81.33 | Lymphocyte depleted Hodgkin lymphoma, intra-abdominal lymph nodes                   |
| C81.34 | Lymphocyte depleted Hodgkin lymphoma, lymph nodes of axilla and upper limb          |
| C81.35 | Lymphocyte depleted Hodgkin lymphoma, lymph nodes of inguinal region and lower limb |
| C81.36 | Lymphocyte depleted Hodgkin lymphoma, intrapelvic lymph nodes                       |
| C81.37 | Lymphocyte depleted Hodgkin lymphoma, spleen  |
| C81.38 | Lymphocyte depleted Hodgkin lymphoma, lymph nodes of multiple sites                 |
| C81.39 | Lymphocyte depleted Hodgkin lymphoma, extranodal and solid organ sites              |
| C81.40 | Lymphocyte-rich Hodgkin lymphoma, unspecified site                                  |

| ICD-10 | ICD-10 Description  |
|--------|---|
| C81.41 | Lymphocyte-rich Hodgkin lymphoma, lymph nodes of head, face, and neck           |
| C81.42 | Lymphocyte-rich Hodgkin lymphoma, intrathoracic lymph nodes                     |
| C81.43 | Lymphocyte-rich Hodgkin lymphoma, intra-abdominal lymph nodes                   |
| C81.44 | Lymphocyte-rich Hodgkin lymphoma, lymph nodes of axilla and upper limb          |
| C81.45 | Lymphocyte-rich Hodgkin lymphoma, lymph nodes of inguinal region and lower limb |
| C81.46 | Lymphocyte-rich Hodgkin lymphoma, intrapelvic lymph nodes                       |
| C81.47 | Lymphocyte-rich Hodgkin lymphoma, spleen  |
| C81.48 | Lymphocyte-rich Hodgkin lymphoma, lymph nodes of multiple sites                 |
| C81.49 | Lymphocyte-rich Hodgkin lymphoma, extranodal and solid organ sites              |
| C81.70 | Other Hodgkin lymphoma unspecified site   |
| C81.71 | Other Hodgkin lymphoma lymph nodes of head, face, and neck                      |
| C81.72 | Other Hodgkin lymphoma intrathoracic lymph nodes                                |
| C81.73 | Other Hodgkin lymphoma intra-abdominal lymph nodes                              |
| C81.74 | Other Hodgkin lymphoma lymph nodes of axilla and upper limb                     |
| C81.75 | Other Hodgkin lymphoma lymph nodes of inguinal region and lower limb            |
| C81.76 | Other Hodgkin lymphoma intrapelvic lymph nodes                                  |
| C81.77 | Other Hodgkin lymphoma spleen   |
| C81.78 | Other Hodgkin lymphoma lymph nodes of multiple sites                            |
| C81.79 | Other Hodgkin lymphoma extranodal and solid organ sites                         |
| C81.90 | Hodgkin lymphoma, unspecified, unspecified site                                 |
| C81.91 | Hodgkin lymphoma, unspecified, lymph nodes of head, face, and neck              |
| C81.92 | Hodgkin lymphoma, unspecified, intrathoracic lymph nodes                        |
| C81.93 | Hodgkin lymphoma, unspecified, intra-abdominal lymph nodes                      |
| C81.94 | Hodgkin lymphoma, unspecified, lymph nodes of axilla and upper limb             |
| C81.95 | Hodgkin lymphoma, unspecified, lymph nodes of inguinal region and lower limb    |
| C81.96 | Hodgkin lymphoma, unspecified, intrapelvic lymph nodes                          |
| C81.97 | Hodgkin lymphoma, unspecified, spleen   |
| C81.98 | Hodgkin lymphoma, unspecified, lymph nodes of multiple sites                    |
| C81.99 | Hodgkin lymphoma, unspecified, extranodal and solid organ sites                 |
| C82.00 | Follicular lymphoma grade I, unspecified site                                   |
| C82.01 | Follicular lymphoma grade I, lymph nodes of head, face and neck                 |
| C82.02 | Follicular lymphoma, grade I, intrathoracic lymph nodes                         |
| C82.03 | Follicular lymphoma grade I, intra-abdominal lymph nodes                        |

| ICD-10 | ICD-10 Description  |
|--------|---|
| C82.04 | Follicular lymphoma grade I, lymph nodes of axilla and upper limb                         |
| C82.05 | Follicular lymphoma grade I, lymph nodes of inguinal regional and lower limb              |
| C82.06 | Follicular lymphoma grade I, intrapelvic lymph nodes                                      |
| C82.07 | Follicular lymphoma grade I, spleen   |
| C82.08 | Follicular lymphoma grade I, lymph nodes of multiple sites                                |
| C82.09 | Follicular lymphoma grade I, extranodal and solid organ sites                             |
| C82.10 | Follicular lymphoma grade II, unspecified site  |
| C82.11 | Follicular lymphoma grade II, lymph nodes of head, face and neck                          |
| C82.12 | Follicular lymphoma, grade II, intrathoracic lymph nodes                                  |
| C82.13 | Follicular lymphoma grade II, intra-abdominal lymph nodes                                 |
| C82.14 | Follicular lymphoma grade II, lymph nodes of axilla and upper limb                        |
| C82.15 | Follicular lymphoma grade II, lymph nodes of inguinal region and lower limb               |
| C82.16 | Follicular lymphoma grade II, intrapelvic lymph nodes                                     |
| C82.17 | Follicular lymphoma grade II, spleen  |
| C82.18 | Follicular lymphoma grade II, lymph nodes of multiple sites                               |
| C82.19 | Follicular lymphoma grade II, extranodal and solid organ sites                            |
| C82.20 | Follicular lymphoma grade III, unspecified, unspecified site                              |
| C82.21 | Follicular lymphoma grade III, unspecified, lymph nodes of head, face and neck            |
| C82.22 | Follicular lymphoma, grade III, unspecified, intrathoracic lymph nodes                    |
| C82.23 | Follicular lymphoma grade III, unspecified, intra-abdominal lymph nodes                   |
| C82.24 | Follicular lymphoma grade III, unspecified, lymph nodes of axilla and upper limb          |
| C82.25 | Follicular lymphoma grade III, unspecified, lymph nodes of inguinal region and lower limb |
| C82.26 | Follicular lymphoma grade III, unspecified, intrapelvic lymph nodes                       |
| C82.27 | Follicular lymphoma grade III, unspecified, spleen  |
| C82.28 | Follicular lymphoma grade III, unspecified, lymph nodes of multiple sites                 |
| C82.29 | Follicular lymphoma grade III, unspecified, extranodal and solid organ sites              |
| C82.30 | Follicular lymphoma grade IIIa, unspecified site  |
| C82.31 | Follicular lymphoma grade IIIa, lymph nodes of head, face and neck                        |
| C82.32 | Follicular lymphoma, grade IIIa, intrathoracic lymph nodes                                |
| C82.33 | Follicular lymphoma grade IIIa, intra-abdominal lymph nodes                               |
| C82.34 | Follicular lymphoma grade IIIa, lymph nodes of axilla and upper limb                      |
| C82.35 | Follicular lymphoma grade IIIa, lymph nodes of inguinal region and lower limb             |
| C82.36 | Follicular lymphoma grade IIIa, intrapelvic lymph nodes                                   |



| ICD-10 | ICD-10 Description  |
|--------|---|
| C82.37 | Follicular lymphoma grade IIIa, spleen  |
| C82.38 | Follicular lymphoma grade IIIa, lymph nodes of multiple sites                     |
| C82.39 | Follicular lymphoma grade IIIa, extranodal and solid organ sites                  |
| C82.40 | Follicular lymphoma grade IIIb, unspecified site                                  |
| C82.41 | Follicular lymphoma grade IIIb, lymph nodes of head, face and neck                |
| C82.42 | Follicular lymphoma, grade IIIb, intrathoracic lymph nodes                        |
| C82.43 | Follicular lymphoma grade IIIb, intra-abdominal lymph nodes                       |
| C82.44 | Follicular lymphoma grade IIIb, lymph nodes of axilla and upper limb              |
| C82.45 | Follicular lymphoma grade IIIb, lymph nodes of inguinal region and lower limb     |
| C82.46 | Follicular lymphoma grade IIIb, intrapelvic lymph nodes                           |
| C82.47 | Follicular lymphoma grade IIIb, spleen  |
| C82.48 | Follicular lymphoma grade IIIb, lymph nodes of multiple sites                     |
| C82.49 | Follicular lymphoma grade IIIb, extranodal and solid organ sites                  |
| C82.50 | Diffuse follicle center lymphoma unspecified site                                 |
| C82.51 | Diffuse follicle center lymphoma lymph nodes of head, face, and neck              |
| C82.52 | Diffuse follicle center lymphoma intrathoracic lymph nodes                        |
| C82.53 | Diffuse follicle center lymphoma intra-abdominal lymph nodes                      |
| C82.54 | Diffuse follicle center lymphoma lymph nodes of axilla and upper limb             |
| C82.55 | Diffuse follicle center lymphoma lymph nodes of inguinal region and lower limb    |
| C82.56 | Diffuse follicle center lymphoma intrapelvic lymph nodes                          |
| C82.57 | Diffuse follicle center lymphoma spleen   |
| C82.58 | Diffuse follicle center lymphoma lymph nodes of multiple sites                    |
| C82.59 | Diffuse follicle center lymphoma extranodal and solid organ sites                 |
| C82.60 | Cutaneous follicle center lymphoma, unspecified site                              |
| C82.61 | Cutaneous follicle center lymphoma, lymph nodes of head, face and neck            |
| C82.62 | Cutaneous follicle center lymphoma, intrathoracic lymph nodes                     |
| C82.63 | Cutaneous follicle center lymphoma, intra-abdominal lymph nodes                   |
| C82.64 | Cutaneous follicle center lymphoma, lymph nodes of axilla and upper limb          |
| C82.65 | Cutaneous follicle center lymphoma, lymph nodes of inguinal region and lower limb |
| C82.66 | Cutaneous follicle center lymphoma, intrapelvic lymph nodes                       |
| C82.67 | Cutaneous follicle center lymphoma, spleen  |
| C82.68 | Cutaneous follicle center lymphoma, lymph nodes of multiple sites                 |
| C82.69 | Cutaneous follicle center lymphoma, extranodal and solid organ sites              |



| ICD-10 | ICD-10 Description   |
|--------|--|
| C82.80 | Other types of follicular lymphoma unspecified site                              |
| C82.81 | Other types of follicular lymphoma lymph nodes of head, face, and neck           |
| C82.82 | Other types of follicular lymphoma intrathoracic lymph nodes                     |
| C82.83 | Other types of follicular lymphoma intra-abdominal lymph nodes                   |
| C82.84 | Other types of follicular lymphoma lymph nodes of axilla and upper limb          |
| C82.85 | Other types of follicular lymphoma lymph nodes of inguinal region and lower limb |
| C82.86 | Other types of follicular lymphoma intrapelvic lymph nodes                       |
| C82.87 | Other types of follicular lymphoma spleen  |
| C82.88 | Other types of follicular lymphoma lymph nodes of multiple sites                 |
| C82.89 | Other types of follicular lymphoma extranodal and solid organ sites              |
| C82.90 | Follicular lymphoma, unspecified, unspecified site                               |
| C82.91 | Follicular lymphoma, unspecified, lymph nodes of head, face and neck             |
| C82.92 | Follicular lymphoma, unspecified, intrathoracic lymph nodes                      |
| C82.93 | Follicular lymphoma, unspecified, intra-abdominal lymph nodes                    |
| C82.94 | Follicular lymphoma, unspecified, lymph nodes of axilla and upper limb           |
| C82.95 | Follicular lymphoma, unspecified lymph nodes of inguinal region and lower limb   |
| C82.96 | Follicular lymphoma, unspecified, intrapelvic lymph nodes                        |
| C82.97 | Follicular lymphoma, unspecified, spleen   |
| C82.98 | Follicular lymphoma, unspecified, lymph nodes of multiple sites                  |
| C82.99 | Follicular lymphoma, unspecified, extranodal and solid organ sites               |
| C83.00 | Small cell B-cell lymphoma, unspecified site                                     |
| C83.01 | Small cell B-cell lymphoma, lymph nodes of head, face and neck                   |
| C83.02 | Small cell B-cell lymphoma, intrathoracic lymph nodes                            |
| C83.03 | small cell B-cell lymphoma, intra-abdominal lymph nodes                          |
| C83.04 | Small cell B-cell lymphoma, lymph nodes of axilla and upper limb                 |
| C83.05 | Small cell B-cell lymphoma, lymph nodes of inguinal region and lower limb        |
| C83.06 | Small cell B-cell lymphoma, intrapelvic lymph nodes                              |
| C83.07 | Small cell B-cell lymphoma, spleen   |
| C83.08 | Small cell B-cell lymphoma, lymph nodes of multiple sites                        |
| C83.09 | Small cell B-cell lymphoma, extranodal and solid organ sites                     |
| C83.10 | Mantle cell lymphoma, unspecified site   |
| C83.11 | Mantle cell lymphoma, lymph nodes of head, face and neck                         |
| C83.12 | Mantle cell lymphoma, intrathoracic lymph nodes                                  |

| ICD-10  | ICD-10 Description   |
|---------|--|
| C83.13  | Mantle cell lymphoma, intra-abdominal lymph nodes  |
| C83.14  | Mantle cell lymphoma, lymph nodes of axilla and upper limb                                   |
| C83.15  | Mantle cell lymphoma, lymph nodes of inguinal region and lower limb                          |
| C83.16  | Mantle cell lymphoma, intrapelvic lymph nodes  |
| C83.17  | Mantle cell lymphoma, spleen   |
| C83.18  | Mantle cell lymphoma, lymph nodes of multiple sites  |
| C83.19  | Mantle cell lymphoma, extranodal and solid organ sites                                       |
| C83.30  | Diffuse large B-cell lymphoma, unspecified site  |
| C83.31  | Diffuse large B-cell lymphoma, lymph nodes of head, face and neck                            |
| C83.32  | Diffuse large B-cell lymphoma intrathoracic lymph nodes                                      |
| C83.33  | Diffuse large B-cell lymphoma, intra-abdominal lymph nodes                                   |
| C83.34  | Diffuse large B-cell lymphoma, lymph nodes of axilla and upper limb                          |
| C83.35  | Diffuse large B-cell lymphoma, lymph nodes of inguinal region and lower limb                 |
| C83.37  | Diffuse large B-cell lymphoma, spleen  |
| C83.38  | Diffuse large B-cell lymphoma, lymph nodes of multiple sites                                 |
| C83.398 | Diffuse large B-cell lymphoma of other extranodal and solid organ sites                      |
| C83.80  | Other non-follicular lymphoma, unspecified site  |
| C83.81  | Other non-follicular lymphoma, lymph nodes of head, face and neck                            |
| C83.82  | Other non-follicular lymphoma, intrathoracic lymph nodes                                     |
| C83.83  | Other non-follicular lymphoma, intra-abdominal lymph nodes                                   |
| C83.84  | Other non-follicular lymphoma, lymph nodes of axilla and upper limb                          |
| C83.85  | Other non-follicular lymphoma, lymph nodes of inguinal region and lower limb                 |
| C83.86  | Other non-follicular lymphoma, intrapelvic lymph nodes                                       |
| C83.87  | Other non-follicular lymphoma, spleen  |
| C83.88  | Other non-follicular lymphoma, lymph nodes of multiple sites                                 |
| C83.89  | Other non-follicular lymphoma, extranodal and solid organ sites                              |
| C83.90  | Non-follicular (diffuse) lymphoma, unspecified site  |
| C83.91  | Non-follicular (diffuse) lymphoma, unspecified lymph nodes of head, face, and neck           |
| C83.92  | Non-follicular (diffuse) lymphoma, unspecified intrathoracic lymph nodes                     |
| C83.93  | Non-follicular (diffuse) lymphoma, unspecified intra-abdominal lymph nodes                   |
| C83.94  | Non-follicular (diffuse) lymphoma, unspecified lymph nodes of axilla and upper limb          |
| C83.95  | Non-follicular (diffuse) lymphoma, unspecified lymph nodes of inguinal region and lower limb |
| C83.96  | Non-follicular (diffuse) lymphoma, unspecified intrapelvic lymph nodes                       |

| ICD-10 | ICD-10 Description  |
|--------|---|
| C83.97 | Non-follicular (diffuse) lymphoma, unspecified spleen                                       |
| C83.98 | Non-follicular (diffuse) lymphoma, unspecified lymph nodes of multiple sites                |
| C83.99 | Non-follicular (diffuse) lymphoma, unspecified extranodal and solid organ sites             |
| C84.40 | Peripheral T-cell lymphoma, not classified, unspecified site                                |
| C84.41 | Peripheral T-cell lymphoma, not classified, lymph nodes of head, face, and neck             |
| C84.42 | Peripheral T-cell lymphoma, not classified, intrathoracic lymph nodes                       |
| C84.43 | Peripheral T-cell lymphoma, not classified, intra-abdominal lymph nodes                     |
| C84.44 | Peripheral T-cell lymphoma, not classified, lymph nodes of axilla and upper limb            |
| C84.45 | Peripheral T-cell lymphoma, not classified, lymph nodes of inguinal region and lower limb   |
| C84.46 | Peripheral T-cell lymphoma, not classified, intrapelvic lymph nodes                         |
| C84.47 | Peripheral T-cell lymphoma, not classified, spleen  |
| C84.48 | Peripheral T-cell lymphoma, not classified, lymph nodes of multiple sites                   |
| C84.49 | Peripheral T-cell lymphoma, not classified, extranodal and solid organ sites                |
| C84.60 | Anaplastic large cell lymphoma, ALK-positive, unspecified site                              |
| C84.61 | Anaplastic large cell lymphoma, ALK-positive, lymph nodes of head, face, and neck           |
| C84.62 | Anaplastic large cell lymphoma, ALK-positive, intrathoracic lymph nodes                     |
| C84.63 | Anaplastic large cell lymphoma, ALK-positive, intra-abdominal lymph nodes                   |
| C84.64 | Anaplastic large cell lymphoma, ALK-positive, lymph nodes of axilla and upper limb          |
| C84.65 | Anaplastic large cell lymphoma, ALK-positive, lymph nodes of inguinal region and lower limb |
| C84.66 | Anaplastic large cell lymphoma, ALK-positive, intrapelvic lymph nodes                       |
| C84.67 | Anaplastic large cell lymphoma, ALK-positive, spleen  |
| C84.68 | Anaplastic large cell lymphoma, ALK-positive, lymph nodes of multiple sites                 |
| C84.69 | Anaplastic large cell lymphoma, ALK-positive, extranodal and solid organ sites              |
| C84.70 | Anaplastic large cell lymphoma, ALK-negative, unspecified site                              |
| C84.71 | Anaplastic large cell lymphoma, ALK-negative, lymph nodes of head, face, and neck           |
| C84.72 | Anaplastic large cell lymphoma, ALK-negative, intrathoracic lymph nodes                     |
| C84.73 | Anaplastic large cell lymphoma, ALK-negative, intra-abdominal lymph nodes                   |
| C84.74 | Anaplastic large cell lymphoma, ALK-negative, lymph nodes of axilla and upper limb          |
| C84.75 | Anaplastic large cell lymphoma, ALK-negative, lymph nodes of inguinal region and lower limb |
| C84.76 | Anaplastic large cell lymphoma, ALK-negative, intrapelvic lymph nodes                       |
| C84.77 | Anaplastic large cell lymphoma, ALK-negative, spleen  |
| C84.78 | Anaplastic large cell lymphoma, ALK-negative, lymph nodes of multiple sites                 |
| C84.79 | Anaplastic large cell lymphoma, ALK-negative, extranodal and solid organ sites              |

| ICD-10 | ICD-10 Description   |
|--------|--|
| C85.10 | Unspecified B-cell lymphoma, unspecified site  |
| C85.11 | Unspecified B-cell lymphoma, lymph nodes of head, face, and neck                             |
| C85.12 | Unspecified B-cell lymphoma, intrathoracic lymph nodes                                       |
| C85.13 | Unspecified B-cell lymphoma, intra-abdominal lymph nodes                                     |
| C85.14 | Unspecified B-cell lymphoma, lymph nodes of axilla and upper limb                            |
| C85.15 | Unspecified B-cell lymphoma, lymph nodes of inguinal region and lower limb                   |
| C85.16 | Unspecified B-cell lymphoma, intrapelvic lymph nodes   |
| C85.17 | Unspecified B-cell lymphoma, spleen  |
| C85.18 | Unspecified B-cell lymphoma, lymph nodes of multiple sites                                   |
| C85.19 | Unspecified B-cell lymphoma, extranodal and solid organ sites                                |
| C85.20 | Mediastinal (thymic) large B-cell lymphoma unspecified site                                  |
| C85.21 | Mediastinal (thymic) large B-cell lymphoma lymph nodes of head, face, and neck               |
| C85.22 | Mediastinal (thymic) large B-cell lymphoma intrathoracic lymph nodes                         |
| C85.23 | Mediastinal (thymic) large B-cell lymphoma intra-abdominal lymph nodes                       |
| C85.24 | Mediastinal (thymic) large B-cell lymphoma lymph nodes of axilla and upper limb              |
| C85.25 | Mediastinal (thymic) large B-cell lymphoma lymph nodes of inguinal region and lower limb     |
| C85.26 | Mediastinal (thymic) large B-cell lymphoma intrapelvic lymph nodes                           |
| C85.27 | Mediastinal (thymic) large B-cell lymphoma spleen  |
| C85.28 | Mediastinal (thymic) large B-cell lymphoma lymph nodes of multiple sites                     |
| C85.29 | Mediastinal (thymic) large B-cell lymphoma extranodal and solid organ sites                  |
| C85.80 | Other specified types of non-Hodgkin lymphoma, unspecified site                              |
| C85.81 | Other specified types of non-Hodgkin lymphoma, lymph nodes of head, face, and neck           |
| C85.82 | Other specified types of non-Hodgkin lymphoma, intrathoracic lymph nodes                     |
| C85.83 | Other specified types of non-Hodgkin lymphoma, intra-abdominal lymph nodes                   |
| C85.84 | Other specified types of non-Hodgkin lymphoma, lymph nodes of axilla and upper limb          |
| C85.85 | Other specified types of non-Hodgkin lymphoma, lymph nodes of inguinal region and lower limb |
| C85.86 | Other specified types of non-Hodgkin lymphoma, intrapelvic lymph nodes                       |
| C85.87 | Other specified types of non-Hodgkin lymphoma, spleen  |
| C85.88 | Other specified types of non-Hodgkin lymphoma, lymph nodes of multiple sites                 |
| C85.89 | Other specified types of non-Hodgkin lymphoma, extranodal and solid organ sites              |
| C86.20 | Enteropathy-type (intestinal) T-cell lymphoma not having achieved remission                  |
| C86.50 | Angioimmunoblastic T-cell lymphoma not having achieved remission                             |
| C88.00 | Waldenström macroglobulinemia not having achieved remission                                  |

| ICD-10 | ICD-10 Description   |
|--------|--|
| C88.40 | Extranodal marginal zone B-cell lymphoma of mucosa-associated lymphoid tissue (MALT-lymphoma) <b>not having</b> achieved remission |
| C90.00 | Multiple myeloma not having achieved remission   |
| C90.02 | Multiple myeloma in relapse  |
| C90.10 | Plasma cell leukemia not having achieved remission   |
| C90.12 | Plasma cell leukemia in relapse  |
| C90.20 | Extramedullary plasmacytoma not having achieved remission  |
| C90.22 | Extramedullary plasmacytoma in relapse   |
| C90.30 | Solitary plasmacytoma not having achieved remission  |
| C90.32 | Solitary plasmacytoma in relapse   |
| C91.10 | Chronic lymphocytic leukemia of B-cell type not having achieved remission  |
| C91.12 | Chronic lymphocytic leukemia of B-cell type in relapse   |
| D47.Z1 | Post-transplant lymphoproliferative disorder (PTLD)  |
| E85.3  | Secondary systemic amyloidosis   |
| E85.4  | Organ-limited amyloidosis  |
| E85.81 | Light chain (AL) amyloidosis   |
| E85.89 | Other amyloidosis  |
| E85.9  | Amyloidosis, unspecified   |
| Z85.71 | Personal history of Hodgkin lymphoma   |
| Z85.72 | Personal history of non-Hodgkin lymphomas  |
| Z85.79 | Personal history of other malignant neoplasms of lymphoid, hematopoietic and related tissues                                       |
| Z94.81 | Bone marrow transplant status  |
| Z94.84 | Stem cells transplant status   |
| Z94.9  | Transplanted organ and tissue status, unspecified  |

## 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                           |