

Summary of Medicare Preauthorization and Notification List Changes

Last updated: Feb. 7, 2024

This list contains a summary of changes made to the current copy of the Medicare Preauthorization and Notification List. At Humana, we are dedicated to ensuring that every business decision we make reflects our commitment to improving the health and well-being of our members. To that end, we continuously evaluate our clinical programs, current medical literature, legislation and coding practices to help our members achieve their best health.

A copy of the most recent Medicare Preauthorization and Notification List can be found on our webpage at <u>Humana.com/PAL</u>.

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	Dec. 15, 2021	Jan. 1, 2022	Effective Jan. 1, 2022 Humana will be adding Imfliximab as Preferred in the Immunologic drugs class

Drug class	Drug name	Status	Billing Code	Operator
Immunologic drugs — autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Infliximab	Preferred	J1745	AND

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	Dec. 15, 2021	Jan. 1, 2022	Effective Jan. 1 Humana will be adding Procrit as Preferred in the ESA drug class

Drug class	Drug name	Status	Billing Code	Operator
Erythropoiesis-				
stimulating	Procrit	Preferred	J0885	
agents				

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	Dec. 22, 2021	Jan. 22, 2022	Effective January 22, 2022, Humana will replace Ruconest with icatibant as the preferred product in the following class on the Part B Step list.

Drug Class	Drug Name	Status	Billing Code	Operator
Hereditary angioedema	icatibant	Preferred	11744	OR
acute use	icatibalit	Ficienteu	31744	OK
Hereditary angioedema	Berinert	Nonpreferred	J0597	
acute use	berniert	Nonpreterred	10397	
Hereditary angioedema	Eirozur	Nonpreferred	11744	
– acute use	Firazyr	Nonpreterreu	J1/44	
Hereditary angioedema	Kalbitor	Nonpreferred	J1290	
– acute use	Kaibitoi	Nonpreterred	11290	
Hereditary angioedema	Ruconest	Nonproferred	J0596	
– acute use	Ruconest	Nonpreferred	10396	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490, J3590	Add	Jan. 5, 2022	Jan. 1, 2022	New-to-market specialty drug (Vyvgart) will require preauthorization for service dates on/after Jan. 1
Specialty Drugs	C9399, J3490	Remove	Jan. 12, 2022	Jan. 12, 2022	Veklury will no longer require preauthorization for service dates on/after Jan. 12, 2022

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490	Add	Jan. 12, 2022	Jan. 1, 2022	New-to-market specialty drug (Leqvio) will require preauthorization for service dates on/after Jan. 1
Specialty Drug	C9399, J3490, J3590	Add	Jan. 19, 2022	Jan. 8, 2022	New-to-market specialty drug (Tezpire) will require preauthorization for service dates on/after Jan. 8
Specialty Drugs	See list below	Step Therapy	Jan. 19, 2022	Jan. 8, 2022	Effective Jan. 8, 2022, Humana will update an existing Part B Step drug class. SynoJoynt will be added to nonpreferred drug list.

Drug class	Drug name	Status	Billing Code	Operator
Viscosupplements	SynoJoynt	Nonpreferred	J7331	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	J9318	Remove	Jan. 26, 2022	Jan. 26, 2022	Pepaxto will no longer require preauthorization for service dates on/after Jan. 26, 2022
Specialty Drugs	See list below	Step Therapy	Feb. 9, 2022	Mar. 16, 2022	Effective Mar. 16, 2022, Humana will update an existing Part B Step drug class. Susvimo will be added to nonpreferred drug list.

Drug Class	Drug Name	Status	Billing Code	Operator
Ophthalmic disorders - VEGF inhibitors	Avastin	Preferred	C9257, J9035	OR
Ophthalmic disorders - VEGF inhibitors	Beovu	Nonpreferred	J0179	
Ophthalmic disorders - VEGF inhibitors	Eylea	Nonpreferred	J0178	
Ophthalmic disorders - VEGF inhibitors	Lucentis	Nonpreferred	J2778	
Ophthalmic disorders - VEGF inhibitors	Macugen	Nonpreferred	J2503	
Ophthalmic disorders - VEGF inhibitors	Susvimo	Nonpreferred	C9399, J3490	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490, J3590, J9999	Add	Feb. 9, 2022	Jan. 29, 2022	New-to-market specialty drug (Kimmtrak) will require preauthorization for service dates on/after Jan. 29
Specialty Drug	J1930	Add	Feb. 9, 2022	Jan. 29, 2022	New-to-market specialty drug (Lanreotide) will require preauthorization for service dates on/after Jan. 29
Specialty Drug	J9304	Add	Feb. 9, 2022	Jan. 29, 2022	New-to-market specialty drug (Pemfexy) will require preauthorization for service dates on/after Jan. 29

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	Feb. 16, 2022	Feb. 5, 2022	Effective Feb. 5, 2022, Humana will update an existing Part B Step drug class. Vabysmo will be added to nonpreferred drug list.

Drug Class	Drug Name	Status	Billing Code	Operator
Ophthalmic disorders -	Avastin	Preferred	C9257, J9035	OR
VEGF inhibitors	Avastiii	Fielefieu	C9237, 19033	OK
Ophthalmic disorders -	Beovu	Nonpreferred	J0179	
VEGF inhibitors	Beovu	Nonpreferred	30179	
Ophthalmic disorders -	Eylea	Nonpreferred	J0178	
VEGF inhibitors	Еуїеа	Nonpreferred	30178	
Ophthalmic disorders -	Lucentis	Nonpreferred	J2778	
VEGF inhibitors	Lucentis	Nonpreferred	J2778	
Ophthalmic disorders -	Macugen	Nonpreferred	J2503	
VEGF inhibitors	iviacugeii	Nonpreferred	12303	
Ophthalmic disorders -	Susvimo	Nonpreferred	C9399, J3490	
VEGF inhibitors	Susvillio	Nonpreferred	C9399, 13490	
Ophthalmic disorders -	Vabysmo	Nonpreferred	C9399, J3490	
VEGF inhibitors	vabysiilo	Nonpreferred	C3333, 1343U	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490, J9999	Add	Mar. 16, 2022	Mar. 5, 2022	New-to-market specialty drug (Carvykti) will require preauthorization for service dates on/after Mar. 05
Specialty Drugs	See list below	Step Therapy	Mar. 16, 2022	Mar. 5, 2022	Effective Mar. 5, 2022, Humana will update an existing Part B Step drug class. Releuko will be added to nonpreferred drug list.

Drug Class	Drug Name	Status	Billing Code	Operator
Colony-stimulating factors – leukocyte growth factors (shortacting)	Nivestym	Preferred	Q5110	AND
Colony-stimulating factors – leukocyte growth factors (shortacting)	Zarxio	Preferred	Q5101	
Colony-stimulating factors – leukocyte growth factors (shortacting)	Granix	Nonpreferred	J1447	
Colony-stimulating factors – leukocyte growth factors (short- acting)	Neupogen	Nonpreferred	J1442	
Colony-stimulating factors – leukocyte growth factors (shortacting)	Releuko	Nonpreferred	C9399, J3490, J3590, J9999	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490	Add	Mar. 23, 2022	Mar. 12, 2022	New-to-market specialty drug (Korsuva) will require preauthorization for service dates on/after Mar. 12
Specialty Drug	C9399, J3490, J3590, J9999	Add	Apr. 6, 2022	Mar. 26, 2022	New-to-market specialty drug (Opdualag) will require preauthorization for service dates on/after Mar. 26

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	Apr. 6, 2022	Mar. 26, 2022	Effective Mar. 26, 2022, Humana will update an existing Part B Step drug class. Opdualag will be added to nonpreferred drug list.

Drug Class	Drug Name	Status	Billing Code	Operator
Melanoma	Opdivo	Preferred	J9299	OR
Melanoma	Keytruda	Preferred	J9271	OR
Melanoma	Opdivo plus	Preferred	J9299, J9228	OR
	Yervoy			
Melanoma	Opdualag	Nonpreferred	C9399, J3490, J3590,	
			19999	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490, J9999	Add	Apr. 13, 2022	Apr. 2, 2022	New-to-market specialty drug (Pluvicto) will require preauthorization for service dates on/after Apr. 2
Specialty Drugs	See list below	Step Therapy	Apr. 20, 2022	Apr. 9, 2022	Effective Apr. 9, 2022, Humana will update an existing Part B Step drug class. Paclitaxel protein-bound will be added to nonpreferred drug list.

Drug Class	Drug Name	Status	Billing Code	Operator
Neoplasms (excluding pancreatic)	docetaxel	Preferred	J9171	OR
Neoplasms (excluding pancreatic)	paclitaxel	Preferred	J9267	OR
Neoplasms (excluding pancreatic)	Abraxane	Nonpreferred	J9264	
Neoplasms (excluding pancreatic)	paclitaxel protein-bound	Nonpreferred	J9264	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	May 18, 2022	May 7, 2022	Effective May 7, 2022, Humana will update an existing Part B Step drug class. bortezomib protein-bound will be added to nonpreferred drug list.

Drug Class	Drug Name	Status	Billing Code	Operator
Velcade	Bortezomib	Preferred	J9044	
	(505(b)(2))			
Velcade	Velcade	Nonpreferred	J9041	
Velcade	bortezomib	Nonpreferred	J9041	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	June 1, 2022	July 1, 2022	Effective July 1, 2022 Humana will be adding two new drug classes to Part B Step list.

Drug Class	Drug Name	Status	Billing Code	Operator
Osteoarthritis of the knee (intra-articular steroids)	triamcinolone	Preferred	J3301, J3302, J3303	OR
Osteoarthritis of the knee (intra-articular steroids)	methylprednisolone	Preferred	J1020, J1030, J1040, J2920, J2930	OR
Osteoarthritis of the knee (intra-articular steroids)	betamethasone	Preferred	J0702	OR
Osteoarthritis of the knee (intra-articular steroids)	dexamethasone	Preferred	J1094, J1100	OR
Osteoarthritis of the knee (intra-articular steroids)	Zilretta	Nonpreferred	J3304	

Drug Class	Drug Name	Status	Billing Code	Operator
Multiple sclerosis	Ocrevus	Preferred	J2350	OR
Multiple sclerosis	Tysabri	Nonpreferred	J2323	
Multiple sclerosis	Lemtrada	Nonpreferred	J0202	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	J9305	Add	June 15, 2022	June 4, 2022	New-to-market specialty drug (Pemetrexed) will require preauthorization for service dates on/after June 4
Specialty Drugs	See list below	Step Therapy	June 15, 2022	June 4, 2022	Effective June 4, 2022 Humana will be adding a new drug classes to Part B Step list.

Drug Class	Drug Name	Status	Billing Code	Operator
Bevacizumab (oncology)	Avastin	Preferred	J9035	OR
Bevacizumab (oncology)	Mvazi	Preferred	Q5107	OR
Bevacizumab (oncology)	Zirabev	Preferred	Q5118	OR
Povacizumah (oncology)	Alymsys	Nonpreferred	C9399, J3490, J3590,	
Bevacizumab (oncology)			J9999	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	June 22, 2022	June 11, 2022	Effective June 11, 2022, Humana will update an existing Part B Step drug class. Byooviz will be added to nonpreferred drug list.

Drug Class	Drug Name	Status	Billing Code	Operator
Ophthalmic disorders -	Avastin	Preferred	C9257, J9035	OR
VEGF inhibitors	Avastiii	Ficiented	63237,13033	OK
Ophthalmic disorders -	Beovu	Nonpreferred	J0179	
VEGF inhibitors	beovu	Nonpreterreu	30179	
Ophthalmic disorders -	Byooviz	Nonpreferred	Q5124	
VEGF inhibitors	БУООУІЗ	Nonpreterred	Q3124	
Ophthalmic disorders -	Eylea	Nonpreferred	J0178	
VEGF inhibitors	Eyled	Nonpreterred	30178	
Ophthalmic disorders -	Lucentis	Nonpreferred	J2778	
VEGF inhibitors	Luceiitis	Nonpreterred	J2778	
Ophthalmic disorders -	Macugen	Nonpreferred	J2503	
VEGF inhibitors	iviacugeii	Nonpreterreu	12303	
Ophthalmic disorders -	Susvimo	Nonpreferred	C9399, J340	
VEGF inhibitors	Jusviilio	Nonpreterreu	CJJJJ, 1540	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	J9304	Add	June 22, 2022	June 11, 2022	Pemetrexed has been updated to include billing code J9304
Specialty Drug	C9399, J9999	Removal	June 22, 2022	June 11, 2022	Obsolete drug, Sylatron has been removed from the PAL
Specialty Drug	C9399, J3490	Add	July 6, 2022	June 25, 2022	New-to-market specialty drug (Amvuttra) will require preauthorization for service dates on/after June 25, 2022
Specialty Drugs	See list below	Step Therapy	July 6, 2022	June 25, 2022	Effective June 25, 2022, Humana will update an existing Part B Step drug class. Skyrizi IV will be added to the preferred drug list.

Drug Class	Drug Name	Status	Billing Code	Operator
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Inflectra	Preferred	Q5103	AND
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Infliximab	Nonpreferred	J1745	AND
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Remicade	Preferred	J1745	AND
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Simponi Aria	Preferred	J1602	AND
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Skyrizi IV	Preferred	C9399, J3490, J3590	AND
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Stelara	Preferred	J3358	AND
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Actemra IV	Nonpreferred	J3262	
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Avsola	Nonpreferred	Q5121	
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Entyvio	Nonpreferred	J3380	

Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Ilumya	Nonpreferred	J3245	
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Orencia IV	Nonpreferred	J0129	
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Renflexis	Nonpreferred	Q5104	
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Rituxan IV	Nonpreferred	J9312	
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Truxima	Nonpreferred	Q5115	
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Tysabri	Nonpreferred	J2323	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9094, J3490, J3590	Add	July 12, 2022	Feb. 12, 2022	New-to-market specialty drug (Enjaymo) will require preauthorization for service dates on/after Feb. 12, 2022

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	Aug. 10, 2022	Sept. 7, 2022	Effective Sept. 7, 2022, Humana will update an existing Part B Step drug class. Skyrizi IV will be removed from the preferred drug list.

Drug Class	Drug Name	Status	Billing Code	Operator
Immunologic drugs – autoimmune disorders (arthritis, psoriasis, inflammatory bowel disease)	Skyrizi IV	Preferred	C9399, J3490, J3590	AND

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	J0219	Add	August 12, 2022	August 12, 2022	Nexviazyme has been updated to include billing code J0219
Specialty Drugs	See list below	Step Therapy	Sept. 14 2022	Jan. 1, 2023	Effective Jan. 1, 2023, Humana will be updating preferred and nonpreferred medical drugs for the drug classes listed below.

Drug Class	Drug Name	Status	Billing Code	Operator
Bevacizumab (oncology)	Mvazi	Preferred	Q5107	OR
Bevacizumab (oncology)	Zirabev	Preferred	Q5118	OR
Bevacizumab (oncology)	Avastin	Nonpreferred	J9035	
Bevacizumab (oncology)	Alymsys	Nonpreferred	C9399, J3490, J3590, J9999	

Drug Class	Drug Name	Status	Billing Code	Operator
Trastuzumab and hyaluronidase-oysk	Kanjinti	Preferred	Q5117	OR
Trastuzumab and hyaluronidase-oysk	Trazimera	Preferred	Q5116	OR
Trastuzumab and hyaluronidase-oysk	Herceptin (IV)	Nonpreferred	J9355	
Trastuzumab and hyaluronidase-oysk	Herceptin Hylecta	Nonpreferred	J9356	
Trastuzumab and hyaluronidase-oysk	Herzuma	Nonpreferred	Q5113	
Trastuzumab and hyaluronidase-oysk	Ogivri	Nonpreferred	Q5114	
Trastuzumab and hyaluronidase-oysk	Ontruzant	Nonpreferred	Q5112	

Drug Class	Drug Name	Status	Billing Code	Operator
Rituximab and	Ruxience	Preferred	Q5119	OR
hyaluronidase	Ruxience	rielelleu	Q3119	OK
Rituximab and	Riabni	Preferred	Q5123	OB
hyaluronidase	Kidbili	Preierred	Q5125	OR
Rituximab and	Truxima	Nonproformed	OF11F	
hyaluronidase	Truxima	Nonpreferred	Q5115	
Rituximab and	Rituxan IV	N1 C	10242	
hyaluronidase	RILUXAII IV	Nonpreferred	J9312	
Rituximab and	Diturca Uraala	Namenatawa	J9311	
hyaluronidase	Rituxan Hycela	Nonpreferred	19311	

Drug Class	Drug Name	Status	Billing Code	Operator
Ophthalmic disorders - VEGF inhibitors	Avastin	Preferred	C9257, J9035	OR
Ophthalmic disorders - VEGF inhibitors	Beovu	Nonpreferred	J0179	
Ophthalmic disorders - VEGF inhibitors	Byooviz	Nonpreferred	Q5124	
Ophthalmic disorders - VEGF inhibitors	Eylea	Nonpreferred	J0178	
Ophthalmic disorders - VEGF inhibitors	Lucentis	Nonpreferred	J2778	
Ophthalmic disorders - VEGF inhibitors	Susvimo	Nonpreferred	J2779	
Ophthalmic disorders - VEGF inhibitors	Vabysmo	Nonpreferred	C9097, J3490	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	Sept. 14 2022	Jan. 1, 2023	Effective Jan. 1, 2023, Humana will be removing the following drug classes from Part B ST strategy

Drug Class	Drug Name	Status	Billing Code	Operator
Doxorubicin (liposomal)	doxorubicin conventional	Preferred	J9000	OR
Doxorubicin (liposomal)	epirubicin	Preferred	J9178	OR
Doxorubicin (liposomal)	Doxil	Nonpreferred	Q2050	

Drug Class	Drug Name	Status	Billing Code	Operator
Myelodysplastic syndrome	azacitidine	Preferred	J9025	OR
Myelodysplastic syndrome	Dacogen	Nonpreferred	J0894	
Myelodysplastic syndrome	decitabine	Nonpreferred	J0894	

Drug Class	Drug Name	Status	Billing Code	Operator
Vincristine (liposomal)	vincristine sulfate	Preferred	J9370	OR
Vincristine (liposomal)	Marqibo	Nonpreferred	J9371	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	Sept. 14, 2022	Jan. 1, 2023	Effective Jan. 1, 2023 Humana will be adding a new drug classes to Part B Step list.

Drug Class	Drug Name	Status	Billing Code	Operator
Botulinum toxins	Botox	Preferred	J0585	OR
Botulinum toxins	Xeomin	Preferred	J0588	OR
Botulinum toxins	Dysport	Nonpreferred	J0586	
Botulinum toxins	Myobloc	Nonpreferred	J0587	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490, J3590	Add	Sept. 21, 2022	Sept. 10, 2022	New-to-market specialty drug (Spevigo) will require preauthorization for service dates on/after Sept. 10
Specialty Drug	C9399, J3490	Add	Sept. 21, 2022	Sept. 10, 2022	New-to-market specialty drug (Xenpozyme) will require preauthorization for service dates on/after Sept. 10
Specialty Drug	C9399, J3590, J3490	Add	Sept. 24, 2022	Sept. 24, 2022	New-to-market specialty drug (Cimerli) will require preauthorization for service dates on/after Sept. 24

Drug Class	Drug Name	Status	Billing Code	Operator
	Avastin	Preferred	C9257, J9035	OR
	Mvasi	Preferred	Q5107	OR
	Beovu	Nonpreferred	J0179	
	Byooviz	Nonpreferred	Q5124	
Ophthalmic disorders - VEGF	Cimerli	Nonpreferred	C9399, J3490, J3590	
inhibitors	Eylea	Nonpreferred	J0178	
	Lucentis	Nonpreferred	J2778	
	Macugen	Nonpreferred	J2503	
	Susvimo	Nonpreferred	C9093, J3490	
	Vabysmo	Nonpreferred	J2777	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490, J3590, J9999	Add	Oct. 12, 2022	Oct. 1, 2022	New-to-market specialty drug (Pedmark IV solution) will require preauthorization for service dates on/after Oct, 1, 2022
Specialty Drugs	See list below	Step Therapy	Oct. 12, 2022	Oct. 1, 2022	Effective Oct. 1, 2022, Humana will update an existing Part B Step drug class. Fylnetra will be added to the nonpreferred drug list.

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Fulphila	Preferred	Q5108	OR
	Neulasta / Neulasta Onpro	Preferred	J2506	OR
Colony-stimulating factors –	Udenyca	Preferred	Q5111	OR
leukocyte growth factors (long- acting)	Fylnetra	Nonpreferred	C9399, J3590, J3490, J9999	OR
	Nyvepria	Nonpreferred	Q5122	
	Ziextenzo	Nonpreferred	Q5120	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	Oct. 19, 2022	Oct. 8, 2022	Effective Oct. 8, 2022, Humana will update an existing Part B Step drug class. Rolvedo will be added to the nonpreferred drug list.

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Fulphila	Preferred	Q5108	OR
	Neulasta / Neulasta Onpro	Preferred	J2506	OR
	Udenyca	Preferred	Q5111	OR
Colony-stimulating factors – leukocyte growth factors	Fylnetra	Nonpreferred	C9399, J3590, J3490, J9999	OR
(long-acting)	Nyvepria	Nonpreferred	Q5122	
	Rolvedon	Nonpreferred	C9399, J3590, J3490, J9999	OR
	Ziextenzo	Nonpreferred	Q5120	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	Oct. 19, 2022	Jan. 1, 2023	Effective Jan. 1, 2023 Humana will be removing the Velcade drug class from the Part B Step Therapy drug list.

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Bortezomib (505(b)(2))	Preferred	J9044	OR
Velcade	Velcade	Nonpreferred	J9041	
	bortezomib	Nonpreferred	J9041	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490, J3590, J9999	Add	Nov. 9, 2022	Oct. 29, 2022	New-to-market specialty drug (Imjudo and Tecvayli) will require preauthorization for service dates on/after Oct. 29, 2022

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490, J3590, J9999	Add	Nov. 30, 2022	Nov. 19, 2022	New-to-market specialty drug (Elahere) will require preauthorization for service dates on/after Nov. 19, 2022
Specialty Drug	J9307	Add	Nov. 30, 2022	Nov. 19, 2022	New-to-market specialty drug (pralatrexate IV) will require preauthorization for service dates on/after Nov. 19, 2022
Specialty Drugs	See list below	Step Therapy	Nov. 30, 2022	Jan. 1, 2023	Effective Jan. 1, 2023 Humana will be adding a new drug classes to Part B Step list.

Drug Class	Drug Name	Status	Billing Code	AND/OR
Ovarian cancer	Mvasi	Preferred	Q5107	OR
	Zirabev	Preferred	Q5118	OR
	Elahere	Nonpreferred	C9399, J3490,	
			J3590, J9999	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490, J3590	Add	Dec. 7, 2022	Nov. 26, 2022	New-to-market specialty drug (Tzield) will require preauthorization for service dates on/after Nov. 26, 2022

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490, J3590, J7199	Add	Dec. 14, 2022	Dec. 3, 2022	New-to-market specialty drug (Hemgenix) will require preauthorization for service dates on/after Dec. 3, 2022
Specialty Drug	C9399, J3490	Add	Dec. 21, 2022	Dec. 10, 2022	New-to-market specialty drug (Vivimusta) will require preauthorization for service dates on/after Dec. 10, 2022
Specialty Drug	C9399, J3490, J3590	Add	Dec. 28, 2022	Dec. 17, 2022	New-to-market specialty drug (Daxxify) will require preauthorization for service dates on/after Dec. 17, 2022
Specialty Drugs	See list below	Add/Step Therapy	Dec. 28, 2022	Dec. 17, 2022	New-to-market specialty drug (Stimufend) will require preauthorization and may require Step Therapy through a preferred drug for service dates on/after Dec. 17, 2022

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Fulphila	Preferred	Q5108	OR
	Neulasta / Neulasta Onpro	Preferred	J2506	OR
	Udenyca	Preferred	Q5111	OR
Colony Stimulating Factors -	Fylnetra	Nonpreferred	C9399, J3590, J3490, J9999	OR
Leukocyte Growth Factors (long-	Nyvepria	Nonpreferred	Q5122	OR
acting)	Rolvedon	Nonpreferred	C9399, J3590, J3490, J9999	OR
	Stimufend	Nonpreferred	C9399, J3590, J3490, J9999	OR
	Ziextenzo	Nonpreferred	Q5120	OR

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490, J3590, J9999	Add	Jan. 11, 2023	Dec. 31, 2022	New-to-market specialty drug (Lunsumio) will require preauthorization for service dates on/after Dec. 31, 2022
Specialty Drug	C9399, J3490, J3590	Add	Jan. 18, 2023	Jan. 7, 2023	New-to-market specialty drug (Briumvi) will require preauthorization for service dates on/after Jan. 7

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	C9399, J3490, J3590	Add	Jan. 25, 2023	Jan. 14, 2023	New-to-market specialty drug (Leqembi) will require preauthorization for service dates on/after Jan. 14
Specialty Drug	C9399, J3490, J3590	Add	Feb. 22, 2023	Feb. 11, 2023	New-to-market specialty drug (Tezspire subcutaneous pen injector) will require preauthorization for service dates on/after Feb. 11
Specialty Drugs	See list below	Add/Step Therapy	Mar. 1, 2023	Feb. 18, 2023	New-to-market specialty drug (Takhzyro subcutaneous) will require preauthorization and may require Step Therapy through a preferred drug for service dates on/after Feb. 18, 2023

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Haegarda	Preferred	J0599	
	Cinryze	Nonpreferred	J0598	
Hereditary angioedema –	Takhzyro	Nonpreferred	J0593	
prophylaxis	Takhzyro Subcutaneous	Nonpreferred	C9399, J3490, J3590	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Add/Step Therapy	Mar. 1, 2023	Feb. 18, 2023	New-to-market specialty drug (Vegzelma) will require preauthorization and may require Step Therapy through a preferred drug for service dates on/after Feb. 18, 2023

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Avastin	Preferred	J9035	
	Mvazi	Preferred	Q5107	
	Zirabev	Preferred	Q5118	
Bevacizumab (oncology)	Alymsys	Nonpreferred	C9142, J3490, J3590, J9999	
	Vegzelma	Nonpreferred	C9399, J3490, J3590, J9999	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	C9399, J3490, J3590	Add	Mar. 8, 2023	Feb. 25, 2023	New-to-market specialty drug (Lamzede) will require preauthorization for service dates on/after Feb. 25

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	C9399, J3490, J3590	Add	Mar. 8, 2023	Feb. 25, 2023	New-to-market specialty drug (Syfovre) will require preauthorization for service dates on/after Feb. 25
Specialty Drugs	J0886	Remove	Mar. 22, 2023	Mar. 22, 2023	This code is no longer applicable to specialty drug (Procrit)
Specialty Drugs	See list below	Add/Step Therapy	Mar. 22, 2023	Mar. 11, 2023	Effective Mar 11, 2020, Humana will be updating the preferred medical drugs for the drug class listed below.

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Advate	Preferred	J7192	OR
	Adynovate	Preferred	J7207	OR
	Afstyla	Preferred	J7210	OR
	Altuviiio	Preferred	C9399, J3490, J3590, J7199	OR
	Eloctate	Preferred	J7205	OR
	Esperoct	Preferred	J7204	OR
	Helixate FS	Preferred	J7192	OR
	Hemofil-M	Preferred	J7190	OR
I I a ser a della d	Jivi	Preferred	J7208	OR
Hemophilia A	Koate-DVI	Preferred	J7190	OR
	Kogenate FS	Preferred	J7192	OR
	Kovaltry	Preferred	J7211	OR
	Monoclate-P	Preferred	J7190	OR
	NovoEight	Preferred	J7182	OR
	Nuwiq	Preferred	J7209	OR
	Recombinate	Preferred	J7192	OR
	Xyntha	Preferred	J7185	OR
	Hemlibra	Nonpreferred	J7170	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	C9399, J3490, J3590, J9999	Add	Apr. 12, 2023	Apr. 1, 2023	New-to-market specialty drug (Zynyz) will require preauthorization for service dates on/after Apr. 1
Specialty Drugs	See list below	Add/Step Therapy	May 5, 2023	June 6, 2023	Effective June 6, 2023, Humana will be updating the nonpreferred medical drugs for the drug class listed below.

Drug Class	Drug Name	Status	Billing Code	AND/OR
Multiple sclerosis	Ocrevus	Preferred	J2350	OR
	Briumvi	Nonpreferred	C9399, J3490, J3590	
·	Lemtrada	Nonpreferred	J0202	
	Tysabri	Nonpreferred	J2323	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	C9399, J3490	Add	May. 10, 2023	Apr. 29, 2023	New-to-market specialty drug (Qalsody) will require preauthorization for service dates on/after Apr. 29

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	May 6, 2023	June 14, 2023	Effective June 14, 2023 Humana will be removing the Ovarian Cancer drug class from the Part B Step Therapy drug list.

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Mvasi	Preferred	Q5107	OR
Overien concer	Zirabev	Preferred	Q5118	OR
Ovarian cancer	Elahere	Nonpreferred	C9146, J3490, J3590, J9999	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	C9399, J3490, J3590	Add	May. 24, 2023	May. 13, 2023	New-to-market specialty drug (Sogryoa) will require preauthorization for service dates on/after May. 13, 2023
Specialty Drugs	See list below	Add/Step Therapy	May. 24, 2023	May. 13, 2023	Effective May. 13, 2023, Humana will be updating the preferred medical drugs for the drug class listed below.

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Fulphila	Preferred	Q5108	OR
	Neulasta / Neulasta Onpro	Preferred	J2506	OR
	Udenyca	Preferred	Q5111	OR
	Udenyca Autoinjector	Preferred	Q5111	OR
Colony Stimulating Factors -Leukocyte Growth Factors	Ziextenzo	Preferred	Q5120	OR
(long-acting)	Fylnetra	Nonpreferred	Q5130	OR
(long deting)	Nyvepria	Nonpreferred	Q5122	OR
	Rolvedon	Nonpreferred	J1449	OR
	Stimufend	Nonpreferred	Q5127	OR
	Ziextenzo	Nonpreferred	Q5120	OR

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	C9399, J3490, J3590	Add	May. 31, 2023	May. 20, 2023	New-to-market specialty drug (Elfabrio IV) will require preauthorization for service dates on/after May. 20, 2023
Specialty Drugs	C9399, J3490, J3590, J9999	Add	June 7, 2023	May. 27, 2023	New-to-market specialty drug (Epkinly) will require preauthorization for service dates on/after May. 27
Specialty Drugs	C9399, J3490	Add	June 14, 2023	June 3, 2023	New-to-market specialty drug (Brixadi) will require preauthorization for service dates on/after June 3, 2023

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	C9399, J3490, J3590	Add	June 21, 2023	June 10, 2023	New-to-market specialty drug (Vyjuvek) will require preauthorization for service dates on/after June 10, 2023
Specialty Drugs	C9399, J3490, J3590, J9999	Add	July 5, 2023	June 24, 2023	New-to-market specialty drug (Columvi) will require preauthorization for service dates on/after June 24, 2023
Specialty Drugs	C9399, J3490, J3590	Add	July 5, 2023	June 24, 2023	New-to-market specialty drug (Vyvgart Hytrulo) will require preauthorization for service dates on/after June 24, 2023
Specialty Drugs	C9399, J3490, J3590, J9999	Add	July 12, 2021	July 1, 2023	New-to-market specialty drug (Elevidys) will require preauthorization for service dates on/after July 1 st , 2023
Specialty Drugs	See list below	Add/Step Therapy	July 12, 2021	July 1, 2023	Effective July 1 st , 2021, Humana will be adding a new drug class to Part B Step list.

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Soliris	Preferred	J1300	
	Ultomiris	Preferred	J1303	
Myasthenia gravis	Vyvgart	Preferred	J9332	
	Vyvgart Hytrulo	Preferred	C9399, J3490, J3590	
	Rystiggo	Nonpreferred	C9399, J3490, J3590	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	J2562	Add	July 26, 2023	July 15, 2023	New-to-market specialty drug (plerixafor) will require preauthorization for service dates on/after July 15
Specialty Drugs	C9399, J3490, J3590, J9999	Add	Aug. 2, 2023	July 22, 2023	New-to-market specialty drug (Adstiladrin) will require preauthorization for service dates on/after July 22
Specialty Drugs	C9399, J3490, J3590, J7170	Add	Aug. 2, 2023	July 22, 2023	New-to-market specialty drug (Roctavian) will require preauthorization for service dates on/after July 22
Specialty Drugs	C9399, J3490, J3590	Add	Aug. 16, 2023	Aug. 5, 2023	New-to-market specialty drug (Ngenla) will require preauthorization for service dates on/after Aug. 5th
Specialty Drugs	See list below	Step Therapy	Aug. 23, 2023	Sept. 27, 2023	Effective Sept 27, 2023 Humana will be removing the PD-1/PDL-1 drug class from the Part B Step Therapy drug list.

Drug Class Drug Name		Status	Billing Code	AND/OR
	Keytruda	Preferred	J9271	OR
PD-1/PDL-1	Jemperli	Nonpreferred	J9272	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	C9399, J3490	Add	Aug. 23, 2023	Aug. 12, 2023	New-to-market specialty drug (Izervay) will require preauthorization for service dates on/after Aug. 12
Specialty Drugs	C9399, J3490, J3590, J9999	Add	Aug. 30, 2023	Aug. 19, 2023	New-to-market specialty drug (Elrexfio) will require preauthorization for service dates on/after Aug. 19
Specialty Drugs	C9399, J3490, J3590, J9999	Add	Aug. 30, 2023	Aug. 19, 2023	New-to-market specialty drug (Talvey) will require preauthorization for service dates on/after Aug. 19
Specialty Drugs	See list below	Step Therapy	Aug. 30, 2023	Oct. 1, 2023	Effective Oct. 1, 2023, Humana will be updating the preferred medical drugs for the drug class listed below.

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Botox	Preferred	J0585	
	Xeomin	Preferred	J0588	
Botulinum toxin	Dysport	Preferred	J0586	
	Myobloc	Preferred	J0587	
	Daxxify	Nonpreferred	J3590	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	C9399, J3490	Add	Sept. 6, 2023	Aug. 26, 2023	New-to-market specialty drug (Eylea HD) will require preauthorization for service dates on/after Aug. 26
Specialty Drugs	C9399, J3490, J3590	Add	Sept. 6, 2023	Aug. 26, 2023	New-to-market specialty drug (Veopoz) will require preauthorization for service dates on/after Aug. 26
Specialty Drugs	See list below	Step Therapy	Sept. 6, 2023	Aug. 26, 2023	Effective Aug 26, 2023, Humana will be updating the preferred medical drugs for the drug class listed below.

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Avastin	Preferred	C9257, J9035	OR
Ophthalmic disorders -	Beovu	Nonpreferred	J0179	
VEGF inhibitors	Byooviz	Nonpreferred	Q5124	
	Cimerli	Nonpreferred	Q5128	
	Eylea	Nonpreferred	J0178	
	Lucentis	Nonpreferred	J2778	
	Susvimo	Nonpreferred	C9093, J3490	
	Eylea HD	Nonpreferred	C9399, J3490	
	Vabysmo	Nonpreferred	J2777	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	C9399, J3490	Add	Oct. 4, 2023	Sept. 23, 2023	New-to-market specialty drug (Aphexda) will require preauthorization for service dates on/after Sept. 23 rd
Specialty Drug	J0894	Removal	Oct. 11, 2023	Jan. 1, 2024	Dacogen has been removed from the PAL
Specialty Drug	J9025	Removal	Oct. 11, 2023	Jan. 1, 2024	Vidaza has been removed from the PAL
Specialty Drugs	J7195	Remove	Oct. 11, 2023	Oct. 11, 2023	This code is no longer applicable to specialty drug (Ixinity)
Specialty Drugs	C9399, J3490, J3590	Add	Oct. 18, 2023	Oct. 7, 2023	New-to-market specialty drug (Pombiliti) will require preauthorization for service dates on/after Oct. 7 th .
Specialty Drugs	C9399, J3490, J3590	Add	Oct. 25, 2023	Oct. 25, 2023	New-to-market specialty drug (Lantidra) will require preauthorization for service dates on/after Oct. 25th.
Specialty Drugs	C9399, J3490, J3590	Add	Oct. 25, 2023	Oct. 25, 2023	New-to-market specialty drug (Omisirge) will require preauthorization for service dates on/after Oct. 25 th .

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	C9399, J3490, J3590	Add	Oct. 25, 2023	Oct. 25, 2023	New-to-market specialty drug (Rethymic) will require preauthorization for service dates on/after Oct. 25 th .
Specialty Drugs	C9399, J3490, J3590	Add	Oct. 25, 2023	Oct. 25, 2023	New-to-market specialty drug (Skysona) will require preauthorization for service dates on/after Oct. 25th.
Specialty Drugs	C9399, J3490, J3590	Add	Oct. 25, 2023	Oct. 25, 2023	New-to-market specialty drug (Zynteglo) will require preauthorization for service dates on/after Oct. 25 th .
Specialty Drugs	C9399, J3490, J3590	Add	Nov. 8, 2023	Oct. 29, 2023	New-to-market specialty drug (Cosentyx IV) will require preauthorization for service dates on/after Oct. 29 TH .

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	Nov. 8, 2023	Nov. 8, 2023	Effective Nov. 8, 2023, Humana will be updating the preferred medical drugs for the drug class listed below.

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Inflectra	Preferred	Q5103	AND
	Infliximab	Preferred	J1745	AND
	Remicade	Preferred	J1745	AND
	Simponi Aria	Preferred	J1602	AND
	Stelara	Preferred	J3358	
Immunologic drugs –	Actemra IV	Nonpreferred	J3262	
autoimmune disorders	Avsola	Nonpreferred	Q5121	
(arthritis, psoriasis,	Cosentyx IV	Nonpreferred	C9399, J3490, J3590	
inflammatory bowel	Entyvio	Nonpreferred	J3380	
disease)	Ilumya	Nonpreferred	J3245	
	Orencia IV	Nonpreferred	J0129	
	Renflexis	Nonpreferred	Q5104	
	Rituxan IV	Nonpreferred	J9312	
	Truxima	Nonpreferred	Q5115	
	Tysabri	Nonpreferred	J2323	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	Nov. 8, 2023	Jan. 1, 2024	Effective Jan. 1, 2024 Humana will be updating the preferred medical drugs for the drug class listed below.

Drug Class	Drug Name	Status	Billing Code	AND/OR
Alpha-1s	Zemaira	Preferred	J0256	OR
	Aralast	Nonpreferred	J0256	
	Glassia	Nonpreferred	J0257	
	Prolastin-C	Nonpreferred	J0256	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Addition	Nov. 15, 2023	Nov. 4, 2023	Effective Nov. 4, 2023 Humana will be updating the nonpreferred medical drugs for the drug class listed below.

Drug Class	Drug Name	Status	Billing Code	AND/OR
	Inflectra	Preferred	Q5103	AND
Immunologic	Infliximab	Preferred	J1745	AND
drugs –	Remicade	Preferred	J1745	AND
autoimmune	Simponi Aria	Preferred	J1602	AND
disorders	Stelara	Preferred	J3358	AND
(arthritis,	Actemra IV	Nonpreferred	J3262	
psoriasis,	Avsola	Nonpreferred	Q5121	
inflammatory bowel disease)	Entyvio IV	Nonpreferred	J3380	
	Cosentyx IV	Nonpreferred	C9399, J3490, J3590	
	Ilumya	Nonpreferred	J3245	

Omvoh IV	Nonpreferred	C9399, J3490, J3590	
Orencia IV	Nonpreferred	J0129	
Renflexis	Nonpreferred	Q5104	
Rituxan IV	Nonpreferred	J9312	
Truxima	Nonpreferred	Q5115	
Tysabri	Nonpreferred	J2323	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drug	J0893	Removal	Nov. 15, 2023	Jan. 1, 2024	decitabine (Sun Pharma) has been removed from the PAL
Specialty Drug	C9154, J3490	Removal	Nov. 15, 2023	Jan. 1, 2024	Brixadi has been removed from the PAL
Specialty Drug	Q9991, Q9992	Removal	Nov. 15, 2023	Jan. 1, 2024	Sublocade has been removed from the PAL
Specialty Drug	C9399, J3490	Removal	Dec. 6, 2023	Jan. 1, 2024	Gattex has been removed from the PAL
Specialty Drugs	See list below	Step Therapy	Dec. 4, 2023	Jan. 24, 2024	Effective Jan. 24, 2024, Humana will be adding a new drug class to Part B Step list.

Drug Class	Drug Name	Status	Billing Code	AND/OR
Reblozyl	Retacrit	Preferred	Q5106	OR
	Procrit	Preferred	J0885	
	Reblozyl	Nonpreferred	J0896	

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	C9399, J3490, J3590	Add	Dec. 13, 2023	Dec. 2, 2023	New-to-market specialty drug (Adzynma) will require preauthorization for service dates on/after Dec. 2 nd
Specialty Drugs	C9399, J3490, J3590, J9999	Add	Dec. 13, 2023	Dec. 2, 2023	New-to-market specialty drug (Loqtorzi) will require preauthorization for service dates on/after Dec. 2 nd
Specialty Drugs	C9399, J3490	Add	Dec. 27, 2023	Dec. 16, 2023	New-to-market specialty drug (Casgevy) will require preauthorization for service dates on/after Dec.
Specialty Drugs	C9399, J3490	Add	Dec. 27, 2023	Dec. 16, 2023	New-to-market specialty drug (Lyfgenia) will require preauthorization for service dates on/after Dec. 16 th
Specialty Drugs	C9399, J3490, J3590	Remove	Jan. 1, 2024	Jan. 1, 2024	These codes are no longer applicable to specialty drug (Daxxify)

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	J9264, J9259	Remove	Jan. 1, 2024	Jan. 1, 2024	These codes are no longer applicable to specialty drug (paclitaxel protein-bound)
Specialty Drugs	C9399, J3490, J3590	Remove	Jan. 1, 2024	Jan. 1, 2024	These codes are no longer applicable to specialty drug (Rystiggo)
Specialty Drugs	C9399, J3490	Add	Jan. 2, 2024	Dec. 23, 2023	New-to-market specialty drug (iDose TR 75mcg intracameral implant) will require preauthorization for service dates on/after Dec. 23 rd
Specialty Drugs	C9399, J3490	Add	Jan.10, 2024	Dec. 30, 2023	New-to-market specialty drug (Wainua) will require preauthorization for service dates on/after Dec. 30 th
Specialty Drugs	Q5111	Add	Feb. 7, 2024	Jan. 27, 2024	New-to-market specialty drug (Udenyca Onbody) will require preauthorization for service dates on/after Jan. 27 th

Category	Codes	Action	Notification date (last updated)	Effective Date	Notes
Specialty Drugs	See list below	Step Therapy	Feb. 7, 2023	Jan. 27, 2024	Effective Jan. 27, 2024 Humana will be updating the preferred medical drugs for the drug class listed below.

Drug Class	Drug Name	Status	Billing Code	AND/OR
Colony- stimulating factors – leukocyte growth factors (long-acting)	Fulphila	Preferred	Q5108	OR
	Neulasta / Neulasta Onpro	Preferred	J2506	OR
	Udenyca	Preferred	Q5111	OR
	Udenyca Autoinjector	Preferred	Q5111	OR
	Udenyca Onbody	Preferred	Q5111	OR
	Fylnetra	Nonpreferred	Q5130	
	Nyvepria	Nonpreferred	Q5122	
	Rolvedon	Nonpreferred	J1449	
	Stimufend	Nonpreferred	Q5127	
	Ziextenzo	Nonpreferred	Q5120	