

Medical Prior Authorization List

(For Drugs Administered in an Office, Home or Outpatient Setting)



Effective October 3, 2026 - PROVIDER COPY

THIS LIST APPLIES TO ALL COMMERCIAL MEMBERS

Certain drugs require prior authorization in order to be covered under your health plan. Prior authorization review is the process of determining the medical necessity of a proposed procedure, surgery or treatment (including prescribed drug intervention) relative to approved criteria. Prior authorization is required to ensure that the drug is medically necessary, and you will receive the benefits to which you are entitled.

Requests for prior authorization must be received before the services or drugs are provided/ administered. Failure of a network provider to contact SummaCare for required authorization of items covered under your benefit plan will relieve the health plan and you from any financial responsibility for the service if those services are rendered before notifying the plan.

NOTE: Network providers are responsible for obtaining authorization at least 48 hours before administering these prescription drugs. If the provider is not in the plan network, it is the member's responsibility to verify that prior authorization has been obtained.

How to request prior authorization for drugs covered under the medical benefit:

- Preferred method of submission: Please use Guiding Care portal and select **PHARMACY-MEDICAL PHARMACY** template when submitting your prior authorization requests.
- Alternative method of submission: Fax **330-996-8992** or Call **330-996-8710 / 888-996-8710**
- Oncology Requests go to EviCore via Fax or Portal: Fax **800-540-2406**

SummaCare provides coverage under the medical benefit for many drugs that are administered in an office, home or outpatient setting. We require certain drugs to receive prior authorization before being administered. The following drugs may require prior authorization:

How to use these table columns:

- **EVICORE:** A "YES" indicates the request should be submitted to EviCore for review.
- **SUMMACARE:** A "YES" indicates the request should be submitted to SummaCare for review.
- **SITE OF CARE:** A "YES" indicates that Site of Care guidelines apply.
- **SPECIAL INSTRUCTIONS:** Review this column for additional requirements, exceptions, or drug-specific instructions.

Medical Prior Authorization List

(For Drugs Administered in an Office, Home or Outpatient Setting)



BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
5FU	fluorouracil	J9190	YES			
ABECMA	idecabtagene vicleucel	Q2055	YES			CAR-T
ABRAXANE	paclitaxel	J9264	YES			
ACTEMRA IV	tocilizumab	J3262	YES	YES	YES	Send to EviCore or Summacare depending on diagnosis
ACTHAR GEL	corticotropin	J0801 J0802		YES		
ACTIMMUNE	interferon gamma-1b	J9216	YES	YES		Send to EviCore or Summacare depending on diagnosis
ADAKVEO	crizanlizumab-tmca	J0791		YES		
ADCETRIS	brentuximab vedotin	J9042	YES			
ADRIAMYCIN	doxorubicin	J9000	YES			
ADVATE	factor product	J7192		YES		
ADYNOVATE	factor product	J7207		YES		
ADZYNMA	adamts13	C9167 J3590		YES		
AFSTYLA	factor product	J7210		YES		
ADSTILADRIN	nadofaragen firadenovec-vncg	J9029	YES			
AHZANTIVE	aflibercept-mrbb	Q5150		YES		
AKYNZEO IV	fosnetupitant/pal onosetron	J1454	YES			
ALHEMO	concizumab-mtci	J7173		YES		
ALIMTA	pemetrexed disodium	J9304 J9305 J9294 J9296	YES			
ALKERAN	melphalan	J9245 J9248 J9249	YES			
ALOXI	palonosetron	J2469	YES			No auth required for non-oncology indications
ALDURAZYME	laronidase	J1931		YES	YES	
ALPHANATE	antihemophilic factor	J7186		YES		
ALPHANATE SD	factor product	J7193		YES		

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
ALPROLIX	factor product	J7201		YES		
ALTUVIIIIO	antihemophilic factor	J7214		YES		
ALYGLO	immune globulin	J1599		YES	YES	
ALYMSYS	bevacizumab-maly	Q5126	YES			
AMONDYS	casimersen	J1426		YES		
AMTAGVI	lifilucel	C9399 J3490 J3590 J9999	YES			
ANKTIVA	nogapendekin alfa inbakicept	J9028	YES			
AMVUTTRA	vutrisiran	J0225		YES		
APHEXDA	motixafortide	J2277		YES		
ARA-C	cytarabine	J9100	YES			
ARALAST	alpha proteinase inhibitor	J0256		YES	YES	
ARANESP	darbepoetin alfa	J0881	YES			No auth required for non-oncology indications
AREDIA	pamidronate disodium	J2430	YES			No auth required for non-oncology indications
ARRANON	nelarabine	J9262	YES			
ARZERRA	ofatumumab	J9302	YES			
ARCALYST	rilonacept	J2793		YES		
ASCENIV	immune globulin	J1554		YES	YES	
ASPARLAS	calaspargase pegol-mknl	J9118	YES			
AUCATZYL	obecabtagene autoleicel	C9301 J9999 C9399	YES			
AUKELSO	denosumab-kyqq	Q5161	YES			
AVASTIN	bevacizumab	J9035 C9257	YES			Requests for the eye do not require auth (use code C9257)
AVLAYAH	tividenofusp alfa-eknm	J3590		YES		
AVSOLA	infliximab-axxq	Q5121		YES	YES	
AVTOZMA	tocilizumab-anoh	Q5156	YES	YES		Send to EviCore or Summacare

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
						depending on diagnosis
AVZIVI	bevacizumab-tjnj	C9399 J3490 J3590 J9999	YES			
BAVENCIO	avelumab	J9023	YES			
BCNU	carmustine	J9050 J9052	YES			
BELEODAQ	belinostat	J9032	YES			
BELRAPZO	bendamustine	J9036	YES			
BENDAMUSTINE	bendamustine	J9056	YES			
BENDEKA	bendamustine	J9034	YES			
BENEFIX	Factor IX recombinant	J7195		YES		
BEOVU	brovacizumab	J0179		YES		
BENLYSTA IV	belimumab	J0490 J3590		YES		
BEQVEZ	fidanacogene elaparvovec	C9172		YES		
BERINERT	c1 esterase inhibitor	J0597		YES	YES	
BESPONSA	inotuzumab ozogamicin	J9229	YES			
BESREMI	ropeginterferon alfa-2b-njft	C9399 J9999	YES			
BILDYOS	denosumab-nxxp	Q5162		YES	YES	
BILPREVDA	denosumab-nxxp	Q5162	YES			
BIVIGAM	immune globulin	J1556		YES	YES	
BKEMV	eculizumab-aeeb	Q5152		YES		
BLENOXANE	bleomycin	J9040	YES			No auth required for non-oncology indications
BLNREP	belantamab mafodotin-blmf	J9037	YES			Withdrawn from Market
BLINCYTO	blinatumomab	J9039	YES			
BOMYNTRA	denosumab-bnht	Q5158	YES			
BONCRESA	denosumab-mobz	Q5171		YES	YES	
BORTEZOMIB	bortezomib	J9049 J9051 J9054	YES			
BOSAYA	denosumab-kyqq	Q5161		YES	YES	
BOTOX	onabotulinumtoxin A	J0585		YES		

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BREYANZI	lisocabtagene maraleucel	C9076 J9999 Q2054	YES			CAR-T
BRINEURA	cerliponase alfa	J0567		YES		
BRIUMVI	ublituximab-xiiy	J2329		YES		
BYOOVIZ	ranibizumab-nuna	Q5124		YES		
CABLIVI IV	caplacizumab-yhdp	C9047		YES		
CAMCEVI	leuprolide mesylate	J1952	YES	YES		Send to EviCore or Summacare depending on diagnosis
CAMPTOSAR	irinotecan	J9206	YES			
CASGEVY	exagamglogene autotemcel	J3392		YES		
CARVYKTI	ciltacabtagene autoleucel	Q2056	YES			CAR-T
CERUBIDINE	daunorubicin	J9150	YES			
CEREZYME	imiglucerase	J1786		YES	YES	
CIMZIA	certolizumab pegol	J0717		YES		
CIMERLI	ranibizumab-eqrn	Q5128		YES		
CINQAIR	reslizumab	J2786		YES		
CINRYZE	C1 inhibitor, human	J0598		YES	YES	
CINVANTI	aprepitant	J0185	YES			
CLOLAR	clofarabine	J9027	YES			
COAGADEX	factor product	J7175		YES		
COLUMVI	glofitamab-gxbm	J9286	YES			
CONEXXENCE	denosumab-bnht	Q5158		YES	YES	
CORIFACT 1000-1600	Factor XIII Concentrate, human	J7180		YES		
COSELA	trilaciclib	J1448	YES			
COSENTYX IV	secukinumab	J3247		YES		
COSMEGEN	dactinomycin	J9120	YES			
CRYSVITA	burosumab-twza	J0584	YES	YES		Send to EviCore or Summacare depending on diagnosis
CUTAQUIG	immune globulin	J1551		YES		
CUVITRU	immune globulin	J1555		YES		

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CYRAMZA	ramucirumab	J9308	YES			
CYTOXAN	cyclophosphamide	J9071 J9072 J9073 J9074 J9075	YES			
DACOGEN	decitabine	J0893 J0894	YES			
DANYELZA	naxitamab-gqgk	J9348	YES			
DARZALEX	daratumumab	J9145	YES			
DARZALEX FASPRO	daratumumab-hyaluronidase	J9144	YES			
DATROWAY	datopotamab deruxtecandlnk	J9011	YES			
DAXXIFY	daxibotulinumtoxin-na-lanm	J0589		YES		
DECNUPAZ	pivekimab sunirine-pvzy	C9399	YES			
DOXIL	doxorubicin-liposome	Q2050	YES			
DTIC-DOME	dacarbazine	J9130	YES			
DUROLANE	hyaluronate and derivatives	J7318		YES		
DYSPOORT	abobotulinumtoxin A	J0586				No auth required
ELAHERE	mirvetuximab soratansine-gynx	J9063	YES			
ELAPRASE	idursulfase	J1743		YES	YES	
ELELYSO	taliglucerase-alfa	J3060		YES		
ELEVIDYS	delandistrogene moxeparvovec	J1413		YES		
ELFABRIO	pegunigalsidase alfa-iwxj	J2508		YES		
ELIGARD	leuprolide acetate	J1950	YES	YES		Send to EviCore or Summacare depending on diagnosis
ELLENCE	epirubicin	J9178	YES			
ELOCTATE	factor product	J7205		YES		
ELOXATIN	oxaliplatin	J9263	YES			
ELREXFIO	elranatamab-bcmm	J1323	YES			
ELZONRIS	tagraxofusp-erzs	J9269	YES			
EMEND IV	fosaprepitant	J1453 J1456	YES			
EMPAVELI	pegcetacoplan	C9399 J3490		YES		

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
EMPLICITI	elotuzumab	J9176	YES			
EMRELIS	telisotuzumab vedotin-tllv	J9326	YES			
ENCELTO	revakinagene taroretsel-iwey	J3403		YES		
ENHERTU	fam-trastuzumab deruxtecan-nxki	J9358	YES			
ENJAYMO	sutimlimab-jome	J1302		YES		
ENOBY	denosumab-qbde	Q5167		YES	YES	
ENTYVIO	vedolizumab	J3380		YES	YES	
ENZEEVU	aflibercept-abzv	Q5149		YES		
EPKINILY	epcoritamab- bysp	J9321	YES			
EPOGEN	epoetin alfa	J0885 Q4081	YES	YES		Send to EviCore or Summacare depending on diagnosis
EPYSQLI	eculizumab-aagh	Q5151		YES		
ERBITUX	cetuximab	J9055	YES			
ERWINAZE	asparaginase	J9019	YES			
ESPEROCT	factor product	J7204		YES		
EUFLEXXA	hyaluronate and derivatives	J7323		YES		
EVENITY	romosozumab- aqgg	J3111		YES		
EVKEEZA	evinacumab- dgnb	J1305		YES		
EVOMELA	melphalan	J9246	YES			
EXDENSUR	depemokimab- ulaa	J2361		YES		
EXONDYS 51	eteplirsen	J1428		YES		
EYDENZELT	aflibercept	Q5170		YES		
EYLEA	aflibercept	J0178		YES		
EYLEA HD	aflibercept	J0177		YES		
FABRAZYME	agalsidase	J0180		YES		
FASENRA	benralizumab	J0517		YES		Pharmacy benefit only (autoinjector) - Send to MedImpact - Syringe is MB
FASLODEX	fulvestrant	J9394 J9395	YES			
FEIBA NF	factor product	J7198		YES		

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
FENSOLVI	leuprolide acetate	J1951	YES	YES		Send to EviCore or Summacare depending on diagnosis
FIRMAGON	degarelix	J9155	YES			
FIRAZYR	icatibant	J1744		YES		
FLEBOGAMMA	immune globulin, IV	J1572		YES	YES	
FLOLAN	epoprostenol sodium	J1325		YES		
FLUDARA	fludarabine	J9185	YES			
FOLOTYN	pralatrexate	J9307	YES			
FUDR	floxuridine	J9200	YES			
FULPHILA	pegfilgrastim-jmdb	Q5108	YES			
FUSILEV	levoleucovorin	J0641	YES			
FYARRO	sirolimus	J9331	YES			
FYLNETRA	pegfilgrastim-pbbk	Q5130	YES			
GAMIFANT	emapalumab-lzsg	J9210		YES	YES	
GAMMAGARD LIQUID	immune globulin, sq	J1569		YES	YES	
GAMMAGARD S/D LESS IGA	immune globulin, IV	J1566		YES	YES	
GAMMAKED	immune globulin	J1561		YES	YES	
GAMMAPLEX	immune globulin, IV	J1557		YES	YES	
GAMUNEX-C	immune globulin, inj	J1561		YES	YES	
GAZYVA	obinutuzumab	J9301	YES			
GELSYN	hyaluronate and derivatives	J7328		YES		
GENVISC	hyaluronate and derivatives	J7320		YES		
GEMZAR	gemcitabine	J9201 J9196	YES			
GIVLAARI	givosiran	J0223		YES		
GLASSIA	proteinase inhibitor	J0257		YES		
GRANIX	tbo-filgrastim	J1447	YES			
HAEGARDA	C1 esterase inhibitor - human	J0599		YES		
HALAVEN	eribulin mesylate	J9179	YES			
HEMGENIX	etranacogene dezaparvovec (factor)	J1411		YES		

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
HEMLIBRA	emicizumab-kxwh (factor product)	J7170		YES		
HEMOFIL M	antihemophilic factor	J7190		YES		
HERCEPTIN	trastuzumab	J9355	YES			
HERCEPTIN HYLECTA	trastuzumab, 10 mg and Hyaluronidase-oysk	J9356	YES			
HERCESSI	trastuzumab-strf	Q5146	YES			
HERZUMA	trastuzumab-pkrb	Q5113	YES			
HIZENTRA	immune globulin	J1559		YES		
HUMATE P	factor product	J7187		YES		
HYALGAN	hyaluronate and derivatives	J7321		YES		
HYCANTIN	topotecan	J9351	YES			
HYMOVIS	hyaluronate and derivatives	J7322		YES		
HYMPAVZI	marstacimab-hncq	J7172		YES		
HYQVIA	immune globulin	J1575		YES		
IDAMYCIN	idarubicin	J9211	YES			
IDELVION	factor product	J7202		YES		
IFEX	ifosfamide	J9208	YES			
ILUMYA	tildrakizumab-asmn	J3245		YES		
IMAAVY	nipocalimab	J9256		YES		
IMDELLTRA	tarlatamab	C9170	YES			
IMFINZI	durvalumab	J9173	YES			
IMJUDO	tremelimumab-actl	J9347	YES			
IMLYGIC	talimogene laherparepvec	J9325	YES			
IMULDOSA	ustekinumab-srlf	Q5098		YES		
INFLECTRA	infliximab-dyyb	Q5103		YES	YES	
ISTODAX	romidepsin	J9318 J9319	YES			
ITVISMA	onasemnogene abeparvovec-brve	J3405		YES		
IXEMPRA	ixabepilone	J9207	YES			
INJECTAFER	ferric carboxymaltose	J1439		YES		
IXINITY	factor product	J7213		YES		

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
IZERVAY	avacinaptad pegol	J2782		YES		
JELMYTO	mitomycin	J9281	YES			
JEMPERLI	dostarlimab-gxly	J9272	YES			
JEVTANA	cabazitaxel	J9043 J9064	YES			
JIVI	factor product	J7208		YES		
JOBEVNE	bevacizumab-nwgd	Q5160	YES			
JUBBONTI	denosumab-bbdz	Q5136		YES	YES	
JUBEREQ	denosumab-desu	Q5166	YES			
KADCYLA	ado-trastuzumab emtansine	J9354	YES			
KALBITOR	ecallantide	J1290		YES		
KANJINTI	trastuzumab-anns	Q5117	YES			
KANUMA	sebelipase alfa	J2840		YES	YES	
KEYTRUDA	pembrolizumab	J9271	YES			
KHAPZORY	levoleucovorin	J0642	YES			
KEBIDILI	Eladocagene exuparovec			YES		
KISUNLA	donanemab	J0175		YES		
KIMMTRAK	tebentafusp-tebn	J9274	YES			
KOATE	factor product	J7190		YES		
KOGENATE FS	factor product	J7192		YES		
KOVALTRY	factor product	J7211		YES		
KRESLADI	marnetegrage autotemcel	J3590 C9399		YES		
KRYSTEXXA	pegloticase	J2507		YES		
KYMRIAH	tisagenlecleucel	Q2042	YES			CAR-T
KYPROLIS	carfilzomib	J9047	YES			
LARTRUVO	olaratumab	J9285	YES			Lilly Patient Access only - We do not auth
LEMTRADA	alemtuzumab	J0202		YES		
LAMZEDE	velmanase alfa-tycv	J0217		YES		
LENMELDY	atidarsagene autotemcel	J3391		YES		
LEQEMBI	lecanemab	J0174		YES		
LEQVIO	inclisiran	J1306		YES		
LEUCOVORIN	leucovorin	J0640	YES			

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
LEUKINE	sargramostim	J2820	YES	YES		Send to EviCore or Summacare depending on diagnosis
LEUSTATIN	cladribine	J9065	YES			
LIBTAYO	cemiplimab-rwlc	J9119	YES			
LOARGYS	pegzilarginase-nbln	J3590		YES		
LOQTORZI	toripalimab-tpzi	J3263	YES			
LUCENTIS	ranibizumab	J2778		YES		
LUMIZYME	alglucosidase	J0221		YES	YES	
LUNSUMIO	mosunetuzumab-axgb	J9350	YES			
LUPRON DEPOT	leuprolide acetate	J1950 J9217 J9218	YES	YES		Send to EviCore or Summacare depending on diagnosis
LUTRATE/CIP LA BRAND	leuprolide acetate	J1954	YES	YES		Send to EviCore or Summacare depending on diagnosis
LUXTURNA	voretigene neparvovec-rzyl	J3398		YES		
LYFGENIA	lovotibeglogene autotemcel	J3394		YES		
LYMPHIR	denileukin diftitox-cxdl	J9161	YES			
MARGENZA	margetuximab	J9353	YES			
MEPSEVII	vestronidase alfa-vjbk	J3397		YES		
MESNEX	mesna	J9209	YES			
METHOTREXATE	methotrexate	J9255 J9260	YES			No auth required for non-oncology indications
MIRCERA	methoxy polyethylene glycol-epoetin beta	J0887 J0888	YES	YES		Send to EviCore or Summacare depending on diagnosis
MONJUVI	tafasitamab-cxix	J9349	YES			
MONONINE	coagulation factor ix (human)	J7193		YES		
MONOVISC	hyaluronate and derivatives	J7327		YES		

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
MUTAMYCIN	mitomycin	J9280	YES			
MVASI	bevacizumab-awwb	Q5107	YES			
MYLOTARG	gemtuzumab ozogamicin	J9203	YES			
MOZOBIL	plerixafor	J2562		YES		
MYOBLOC	rimabotulinumtoxin b	J0587		YES		
NAGLAZYME	galsulfase	J1458		YES		
NAVELBINE	vinorelbine	J9390	YES			
NEULASTA	pegfilgrastim	J2506	YES			
NEUPOGEN	filgrastim	J1442	YES	YES		Send to EviCore or Summacare depending on diagnosis
NEXVIAZYME	avalglucosidase alfa-ngpt	J0219				
NIPENT	pentostatin	J9268	YES			
NIVESTYM	filgrastim-aafi	Q5110	YES	YES		Send to EviCore or Summacare depending on diagnosis
NOVANTRONE	mitoxantrone	J9293	YES			
NOVOEIGHT	factor product	J7182		YES		
NOVOSEVEN RT	factor product	J7189		YES		
NPLATE	romiplostim	J2802	YES	YES		Send to EviCore or Summacare depending on diagnosis
NUCALA	mepolizumab	J2182		YES		Part D (Auto injector & Syringe) to MedImpact - Part B (Vial) to Pharmacy
NUWIQ	factor product	J7209		YES		
NYPOZI	filgrastim-txid	Q5148	YES	YES		Send to EviCore or Summacare depending on diagnosis
NYVEPRIA	pegfilgrastim-apgf	Q5122	YES			
OBIZUR	antihemophilic factor	J7188		YES		

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
OCREVUS	ocrelizumab	J2350		YES	YES	
OCREVUS ZUNOVO	ocrelizumab	J2351		YES		
OCTAGAM	immune globulin, IV	J1568		YES	YES	
OGIVRI	Trastuzumab-dkst	Q5114	YES			
OMVOH	mirikizumab-mrkz	J2267		YES		
ONCASPAR	pegaspargase	J9266	YES			
ONCOVIN	vincristine sulfate	J9370	YES			
ONIVYDE	irinotecan liposome	J9205	YES			
ONPATTRO	palisiran	J0222		YES		
ONTRUZANT	trastuzumab-dttb	Q5112	YES			
OPDIVO	nivolumab	J9299	YES			
OPDIVO QVANTIG	nivolumab hyaluronidase	J9999 C9399	YES			
OPDUALAG	nivolumab-relatlimab-rmbw	J9298	YES			
OPUVIZ	aflibercept-yszy	J3590		YES		
ORENCIA	abatacept	J0129		YES	YES	
ORTHOVISC	hyaluronate and derivatives	J7324		YES		
OSENVELT	denosumab-bmvo	Q5157	YES			
OSPOMYV	denosumab-dssb	Q5159		YES	YES	
OTARMENI	lunsotogene parvec-cwha	J3590 C9399		YES		
OTULFI	ustekinumab-aauz	Q9999		YES		
OSVYRTI	denosumab-desu	Q5166		YES	YES	
OZILTUS	denosumab-mobz	Q5165	YES			
OXLUMO	lumasiran	J0224		YES		
PADCEV	enfortumab vedotin-ejfv	J9177	YES			
PANZYGA	immune globulin-ifas	J1576		YES	YES	
PAPZIMEOS	zopapogene imadenovac-drba	J3404		YES		
PARAPLATIN	carboplatin	J9045	YES			
PAVBLU	aflibercept-ayyh	Q5147		YES		
PEDMARK	sodium thiosulfate	J0208 J0209	YES			No auth required for non-oncology indications

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
PEGASYS	peginterferon alfa-2a	J3590 S0145	YES	YES		Send to EviCore or Summacare depending on diagnosis
PEMETREXED	pemetrexed	J9304 J9294 J9296 J9297 J9322 J9323 J9324	YES			
PERJETA	pertuzumab	J9306	YES			
PHESGO	pertuzumab, trastuzumab, hyaluronidase	J9316	YES			
PHOTOFRIN	porfimer	J9600	YES			
PIASKY	crovalimab-akkz	J1307		YES		
PLATINOL	cisplatin	J9060	YES			
POLIVY	polatuzumab vedotin-piiq	J9309	YES			
POTELIGEO	mogamulizumab-kpkc	J9204	YES			
PORTRAZZA	necitumumab	J9295	YES			
POMBILITY	cipaglucosidase alfa	J1203		YES		
PRIVIGEN	immune globulin, IV	J1459		YES	YES	
PROCRIT	epoetin alfa	J0885	YES	YES		Send to EviCore or Summacare depending on diagnosis
PROFILNINE SD	factor product	J7194		YES		
PROLASTIN C	alpha proteinase inhibitor	J0256		YES	YES	
PROLEUKIN	aldesleukin	J9015	YES			
PROLIA	denosumab	J0897		YES	YES	
PROVENGE	sipuleucel-t	Q2043	YES			Approved CA Treatment Centers
PYZCHIVA IV	ustekinumab-ttwe	Q9997		YES		
QALSODY	tofersen	J1304		YES		
QFITLIA	fitusiran	J7174		YES		
QIVIGY	immune globulin (human) -ifas	J1577		YES	YES	
RADICAVA	edaravone	J1301		YES	YES	

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
REBINYN	factor product	J7203		YES		
REBLOZYL	luspatercept-aamt	J0896	YES	YES		Send to EviCore or Summacare depending on diagnosis
RECLAST	Zoledronic Acid	J3488		???		No auth required for Osteoporosis
RECOMBINATE	factor product	J7192		YES		
RELEUKO	filgrastim-ayow	Q5125	YES	YES		Send to EviCore or Summacare depending on diagnosis
RELISTOR	methylnaltrexone bromide	J2212		YES		
REMICADE	infliximab	J1745		YES	YES	
REMODULIN	treprostinil	J3285		YES		
RENFLEXIS	infliximab-abda	Q5104		YES	YES	
RETACRIT	epoetin alfa-epbx	Q5105 Q5106	YES	YES		Send to EviCore or Summacare depending on diagnosis
RETHYMIC	allogenic processed thymus tissue-agdc	J3590		YES		
REVATIO	sildenafil	J3490		YES		
REVCovi	elapeademase-livr	J3590		YES		
RIABNI	rituximab-arrx	Q5123	YES	YES		Send to EviCore or Summacare depending on diagnosis
RITUXAN	rituximab	J9312	YES	YES		Send to EviCore or Summacare depending on diagnosis
RITUXAN HYCELA	rituximab-hyaluronidase human	J9311	YES			
RIXUBIS	factor product	J7200		YES		
ROCTAVIAN	valoctocogene roxaparvovec-rvox	J1412		YES		

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
ROLVEDON	eflapegastim-xnst	J1449	YES			
RUCONEST	c1 esterase inhibitor	J0596		YES		
RUXIENCE	rituximab-pvvr	Q5119	YES	YES		Send to EviCore or Summacare depending on diagnosis
RYBREVANT	amivantamab-vmjw	J9061	YES			
RYLAZE	asparaginase	J9021	YES			
RYONCIL	remestemcel-l-rknd	J3402		YES		
RYSTIGGO	rozanolixizumab	J9333		YES		
RYTELO	imetelstt	J0870	YES			
RYZNEUTA	efbemalenograstim	J9361	YES			
SAPHNELO	anifrolumab-fnia	J0491		YES		
SANDOSTATIN	octreotide	J2353 J2354	YES	YES	YES	Send to EviCore or Summacare depending on diagnosis
SARCLISA	isatuximab-irfc	J9227	YES			
SCENESSE	afamelanotide	J7352		YES		
SELARSDI IV	ustekinumab-aekn	Q9998		YES		
SEVENFACT	factor product	J7212		YES		
SIMPONI ARIA	golimumab	J1602		YES	YES	
SKYRIZI IV INDUCTION	risankizumab	J2327		YES		
SKYSONA	elivaldogene autoemcel	J3387		YES		
SOLIRIS	eculizumab	J1299				
SOMATULINE DEPOT	lanreotide	J1930	YES	YES		Send to EviCore or Summacare depending on diagnosis
SPEVIGO	spesolimab	J1747		YES		
SPINRAZA	nusinersen	J2326		YES		
SPRAVATO	esketamine	J0013		YES		
STARJEMZA	ustekinumab-stba	Q5164		YES		
STELARA IV	ustekinumab	J3358		YES		

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
STEQEYMA	ustekinumab-stba	Q5099		YES		
STIMUFEND	pegfilgrastim-fpgk	Q5127	YES			
STOBOCLO	denosumab-bmwo	Q5157		YES	YES	
SUPARTZ FX	hyaluronate and derivatives	J7321		YES		
SUPPRELIN LA	histralin implant	J9226		YES		
SUSTOL	granisetron	J1627	YES			
SYLVANT	siltuximab	J2860	YES			
SYNAGIS	palivizumab	90378		YES		
SYNOJOYNT	hyaluronic acid derivatives	J7331		YES		
SUSVIMO	ranibizumab	J2779		YES		
SYFOVRE	pegcetacoplan	J2781		YES		
TAKHZYRO	lanadelumab-cwvz	J0593		YES		
TALVEY	talquetamab-tgvs	J3055	YES			
TAXOL	paclitaxel	J9267	YES			
TAXOTERE	docetaxel	J9171 J9172	YES			
TECARTUS	brexucabtagene autoleucel	Q2053	YES			CAR-T
TECELRA	afamitresgene autoleucel	Q2057	YES			
TECENTRIQ	atezolizumab	J9022	YES			
TECENTRIQ HYBREZA	atezolizumab-hyaluronidase-tgjs	J9024	YES			
TECVAYLI	teclistamab-cqyv	J9380	YES			
TEMODAR	temozolomide	J9328	YES			
TEPEZZA	teprotumumab-trbw	J3241		YES		
TEPYLUTE	thiotepa	C9399 J9999	YES			
TESTOPEL	testosterone pellets	J1073		YES		
TEVIMBRA	tislelizumab	J9329	YES			
TEZSPIRE	tezepelumab-ekko	J2356		YES		
THERACYS	bcg	J9030	YES			
THIOPLEX	thiotepa	J9340				No auth required for non-oncology indications

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
TICE	bcg	J9030	YES			
TIVDAK	tisotumab vedotin-tftv	J9273	YES			
TOPOSAR	etoposide	J9181	YES			
TORISEL	temsirolimus	J9330	YES			
TRAZIMERA	trastuzumab-qyyp	Q5116	YES			
TREANDA	bendamustine hcl	J9033	YES			
TRELSTAR	triptorelin pamoate	J3315	YES			
TOFIDENCE	tocilizumab-bavi	Q5133	YES	YES		Send to EviCore or Summacare depending on diagnosis
TREMFYA IV	guselkumab	J1628		YES		
TRETTEN	Factor XIII A-Subunit recombinant	J7181		YES		
TRILURON	hyaluronate and derivatives	J7332		YES		
TRISENOX	arsenic trioxide	J9017	YES			
TRIPTODUR	triptorelin pamoate	J3316		YES		
TRIVISC	hyaluronate and derivatives	J7329		YES		
TRODELVY	sacituzumab govitecan-hziy	J9317	YES			
TRUXIMA	rituximab-abbs	Q5115	YES	YES		Send to EviCore or Summacare depending on diagnosis
TROGARZO	ibalizumab-uiyk	J1746		YES	YES	
TYENNE	tocilizumab-aazg	Q5135	YES	YES		Send to EviCore or Summacare depending on diagnosis
TYRUKO	natalizumab	Q5134		YES		
TYSABRI	natalizumab	J2323		YES	YES	
TZIELD	teplizumab-mcwv	J9381		YES		
UDENYCA	pegfilgrastim-cbqv	Q5111	YES			
ULTOMIRIS	ravulizumab-cwvz	J1303		YES	YES	
UNITUXIN	dinutuximab	J9999 C9399	YES			

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
UPLIZNA	inebilizumab-cdon	J1823		YES		
UPTRAVI	Selexipag	J3490		YES		
VABYSMO	faricimab	J2777		YES		
VALSTAR	valrubicin	J9357	YES			
VANTAS	histrelin implant	J9225	YES			Withdrawn from Market
VECTIBIX	panitumumab	J9303	YES			
VEGZELMA	bevacizumab-adcd	Q5129	YES			
VELBAN	vinblastine	J9360	YES			
VELCADE	bortezomib	J9041	YES			
VELETRI	epoprostenol sodium	J1325		YES		
VEOPOZ	pozelimab-bbfg	J9376		YES		
VIDAZA	azacitidine	J9025	YES			
VILTEPSO	viltolarsen	J1427		YES		
VIMIZIM	elosulfase alfa injections	J1322		YES		
VISCO-3	hyaluronate and derivatives	J7333 J7321		YES		
VISUDYNE	verteporfin	J3396		YES		
VONDYS 53	golodirsen	J1429		YES		
VONVENDI	factor product	J7179		YES		
VUMON	teniposide	Q2017	YES			Withdrawn from Market
VPRIV	velaglucerase	J3385		YES	YES	
VYJUVEK	beremagene geperpavec-svdt	J3401		YES		
VYVGART	efgartigimod alfa	J9332		YES	YES	
VYVGART HYTRULO	efgartigimod alfa hyaluronidase-qvfc	J9334		YES	YES	
VYEPTI	eptinezumab-jjmr	J3032		YES		
VYLOY	zolbetuximab-clzb	C9303 J9999	YES			
VYXEOS	daunorubicin/cytarabine liposome	J9153	YES			
WAINUA	eplontersen	J3590 C9399		YES		
WASKYRA	Eplontersen	J3590 C9399				
WEZLANA IV	ustekinumab-auub	Q5138		YES		
WILATE	factor product	J7183		YES		
WYOST	denosumab-bbdz	Q5136	YES			

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
WINREVAIR	sotatercept-csrk	J3590		YES		
XBRYK	denosumab-dssb	Q5159	YES			
XEMBIFY	immune globulin	J1558		YES		
XENPOZYME	olipudase alfa-rpcp	J0218		YES		
XEOMIN	incobotulinumtoxin a	J0588		YES		
XGEVA	denosumab	J0897	YES			
XIAFLEX	collagenase	J0775		YES		
XOLAIR	omalizumab	J2357		YES		
XYNTHA/ XYNTHA SOLOFUSE	antihemophilic factor	J7185		YES		
XTRENBO	denosumab-qbde	Q5167	YES			
YARTEMLEA	narsoplimab-wuug	J1289		YES		
YERVOY	ipilimumab	J9228	YES			
YESAFILI	aflibercept-jbvf	Q5155		YES		
YESCARTA	axicabtagene	Q2041	YES			CAR-T
YESINTEK	ustekinumab-kfce	Q5100		YES		
YIMMUGO	immune globulin	J1553		YES		
YONDELIS	trabectedin	J9352	YES			
ZALTRAP	ziv-aflibercept	J9400	YES			
ZANOSAR	streptozocin	J9320	YES			
ZARXIO	filgrastim-sndz	Q5101	YES	YES		Send to EviCore or Summacare depending on diagnosis
ZEMAIRA	alpha proteinase inhibitor	J0256		YES	YES	
ZEPZELCA	lurbinectedin	J9223	YES			
ZEVASKYN	prademagene zamikeracel	J3389		YES		
ZIEXTENZO	pegfilgrastim-bmez	Q5120	YES			
ZIIHERA	zanidatamab-hrii	C9302 J9999	YES			
ZILRETTA	triamcinolone acetonide	J3304		YES		
ZIRABEV	bevacizumab-bvzr	Q5118	YES			
ZOLADEX	goserelin acetate	J9202	YES	YES		Send to EviCore or Summacare depending on diagnosis

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BRAND NAME	GENERIC NAME	HCPCS	EVICORE	SUMMACARE	SITE OF CARE	SPECIAL INSTRUCTIONS
ZOLGENSMA	onasemnogene abeparvovec	J3399		YES		
ZOMETA	zoledronic acid	J3489	YES			No auth required for osteoporosis
ZYNLONTA	loncastuximab tesirine-lpyl	J9359	YES			
ZYNYZ	retifanlibmab- dlwr	J9345	YES			
ZYNTEGLO	betibeglogene autotemcel	J3393		YES		

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IMPORTANT INFORMATION

1. **This document is not intended to interfere with urgently needed care.** Urgent care is any request for medical care or treatment in which the time periods for SummaCare to make non-urgent care determinations (within 14 days) could result in the following circumstances:
 - Could seriously jeopardize the life or health of the member or the member's ability to regain maximum function, based on a prudent layperson's judgment; or
 - In the opinion of a practitioner with knowledge of the member's medical condition, would subject the member to severe pain that cannot be adequately managed without the care or treatment that is the subject of the request
2. All services, even if authorized, are subject to your benefit plan, contract coverage and exclusions, eligibility and network design. Approvals are not a guarantee of coverage, as your benefit plan contract may retroactively terminate at a future date.
3. Services not listed in this document may not be covered because they are listed as exclusions in your plan contract. Your benefit plan contract exclusions and current status of eligibility may be verified online at SummaCare.com. Call the customer service number on your member identification card to inquire about eligibility and coverage.
4. Providers may visit Plan Central at <https://summacare.myplancentral.com> to view eligibility and benefits or register for a user account. For additional questions, please email contactproviderservices@summacare.com.

To find the most current list of services, surgeries, durable medical equipment or drugs covered under your medical benefit requiring prior authorization, please visit SummaCare.com or call the customer service number located on your member identification card. If you are unsure as to what requires a prior authorization, please call customer service.