

Self-Administered Drug Exclusion List

Brand Name	Generic Name	HCPC Code	Commercial	Medicaid	Medicare
Tymlos	Abaloparatide	J3490	X	X	X
Orencia Clickjet (SQ)	Abatacept	J0129 - JB	X	X	X
Humira	Adalimumab	J0135	X	X	X
Idacio (effective 6/25/2023 for Medicare)	Adalimumab-aacf	C9399, J3490, J3590			X
Hyrimoz (effective 6/25/2023 for Medicare)	Adalimumab-adaz	C9399, J3490, J3590			X
Cyltezo	Adalimumab-adbm	C9399, J3490	X	X	X
Abrilada	Adalimumab-afzb	C9399, J3490, J3590	X	X	X
Yusimry (effective 6/25/2023 for Medicare)	Adalimumab-aqvh	C9399, J3490, J3590			X
Amjevita	Adalimumab-atto	C9399, J3490, J3590	X	X	X
Hadlima (effective 6/25/2023 for Medicare)	Adalimumab-bwwd	C9399, J3490, J3590			X
Hulio (effective 6/25/2023 for Medicare)	Adalimumab-fkjp	C9399, J3490, J3590			X
Tanzeum	Albiglutide	C9399, J3490			X
Praluent	Alirocumab	C9399, J3590	X	X	X
Caverject, Edex, Prostin VR Pediatric	Alprostadil	J0270			X
Trimix	Alprostadil, Papaverine, Phentolamine	J7999	X	X	X
Kineret	Anakinra	J3590	X	X	X
Apokyn	Apomorphine hydrochloride	J0364			X
Strensiq	Asfotase alfa	C9399, J3490	X	X	X
Benlysta	Belimumab	J0490 - JB	X	X	
Fasenra Pen	Benralizumab	J0517	X	X	
Siliq	Brodalumab	C9399, J3590	X	X	X
Haegarda	C1 esterase inhibitor	J0599	X	X	X
Calcimar, Miacalcin, Osteocalcin, Salmonine	Calcitonin salmon	J0630			X
Cablivi	Caplacizumab-yhdp	C9047, J3590	X	X	
Cimzia	Certolizumab pegol	J0717	X	X	
Acthar	Corticotropin Inj Gel	J0800	X	X	X
Fragmin	Dalteparin sodium, porcine	J1645	X	X	
Trulicity	Dulglutide	C9399, J3590	X	X	X
Dupilxent	Dupilumab	C9399, J3590	X	X	X
Fuzeon	Enfuvirtide	J1324	X	X	X
Lovenox	Enoxaparin	J1650	X	X	
Aimovig	Erenumab	C9399, J3590	X	X	X
Enbrel	Etanercept	J1438	X	X	X
Erelzi	Etanercept-szsz	C9399, J3590	X	X	X
Eticovo	Etanercept-ykro	C9399, J3590	X	X	X
Repatha	Evolucumab	C9399, J3590	X	X	X
Bydureon	Exenatide	C9399, J3590	X	X	X
Byetta	Exenatide	J3490	X	X	X
Arixtra	Fondaparinux sodium	J1652	X	X	
Ajovy	Fremanezumab-vfrm	J3031	X	X	X
Furoscix Onbody	Furosemide	J3490	X	X	
Emgality	Galcanezumab-gnlm	J3490	X	X	X
Copaxone	Glatiramer	J1595	X	X	X
Glatopa	Glatiramer	J1595	X	X	
Simponi	Golimumab	C9399, J3590	X	X	X
Tremfya	Guselkumab	J1628	X	X	X
Supprelin LA	Histreltin acetate	J1675			X

Firazyr	Icatibant acetate	J1744	X	X	X
Sajazir	Icatibant acetate	J1744	X	X	
All Insulin Products	Insulin	C9399, J1815, J1817, J3490, J3590	X	X	X
Toujeo	Insulin glargine injection	C9399, J3590			X
Avonex	Interferon beta-1a	J1826, Q3027	X	X	X
Rebif	Interferon beta-1a	J1826, Q3028	X	X	X
Betaseron	Interferon beta-1b	J1830	X	X	X
Extavia	Interferon beta-1b	J1830	X	X	
Actimmune	Interferon gamma-1B, recomb	J9216	X	X	X
Taltz	Ixekizumab	C9399, J3590	X	X	X
Takhzyro	Lanadelumab	J0593	X	X	X
Lupron	Leuprolide acetate	J9218			X
Victoza	Liraglutide	J3490	X	X	X
Skytrofa	Lonapegsomatropin-tcgd	C9399, J3590	X	X	
Increlex, Iplex	Mecasermin	J2170	X	X	X
Nucala	Mepolizumab	J2182	X	X	
Relistor	Methylnaltrexone	J2212			X
Otrexup, Rasuvo	Methotrexate (Solution auto-injector non-chemotherapeutic)	C9399, J3590			X
Myalept	Metreleptin	J3490	X	X	X
Kynamro	Mipomersen sodium	J3490			X
Sandostatin	Octreotide acetate	J2354 - JB			X
Kesimpta	Ofatumumab	J3490			X
Xolair	Omalizumab	J2357	X	X	
Papaverine HCL	Papaverine hcl	J2440			X
Natpara	Parathyroid hormone	J3490	X	X	X
Signifor	Pasireotide diaspertate	J3490	X	X	X
Sylatron, Pegintron	Peginterferon alfa 2-b	J3490			X
Pegasys	Peginterferon alfa-2A	J3590, S0145	X	X	X
Somavert	Pegvisomant	J3590	X	X	X
Plegridy	Pegylated interferon	C9399, J3590	X	X	X
Symlin	Pramlintide acetate	J3490	X	X	X
Skyrizi	Risankizumab	C9399, J3590 - JB	X	X	X
Besremi	Ropeginterferon alfa-2b-njft	C9399, J3490, J3590	X	X	X
Kevzara (effective 7.1.2023 for Commercial and Medicaid)	Sarilumab	J3590	X	X	X
Enspryng	Satralizumab-mwge	C9399, J3590	X	X	
Cosentyx	Secukinumab	C9399, J3590	X	X	X
Ozempic	Semaglutide	C9399, J3490	X	X	X
Geref	Sermorelin Acetate	Q0515			X
Sogroya	Somapacitan-beco	C9399, J3490, J3590			X
Protropin	Somatrem	J2940			X
All Recombinant Human Growth Hormone Products	Somatropin (Recombinant Human Growth Hormone)	J2941	X	X	X
Imitrex	Sumatriptan succinate	J3030	X	X	X
Gattex	Teduglutide	J3490	X	X	
Forteo	Teriparatide	J3110	X	X	X
Teriparatide	Teriparatide	J3110	X	X	X
Egrifta	Tesamorelin acetate	J3490			X
Tezspire (effective 7.1.2023 for Commercial and Medicaid)	Tezepelumab-ekko	J2356	X	X	
Mounjaro	Tirzepatide	C9399, J3490, J3590			X
Actemra prefilled syr or ACTpen	Tocilizumab	J3590, J3262-JB	X	X	
Adbry	Tralokinumab-ldrm	C9399, J3590	X	X	X
Metrodin, Bravelle, Fertinex	Urofollitropin	J3355			X

Stelara	Ustekinumab	J3357	X	X	X
Voxzogo	Vosoritide	C9399, J3490	X	X	

Last update 05/31/2023

Medicare Part B – Refer to Noridian Healthcare Solutions' Self-Administered Drugs (SADs) Policy:

<https://med.noridianmedicare.com/web/jfb/policies/sads>