Medicare Part B – 2025

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Brand	**Generic**	**HCPCS Code**	**Billing Unit**	**Status**
Acromegaly				
Sandostatin LAR Depot	octreotide	J2353	1 Unit = 1 mg	*Non-preferred*
Signifor LAR	pasireotide	J2502	1 Unit = 1 mg	*Non-preferred*
Somatuline Depot	lanreotide	J1930	1 Unit = 1 mg	*Preferred*
Lanreotide Acetate	lanreotide	J1932	1 Unit = 1 mg	*Non-preferred*
Alpha-1 Antitrypsin Deficiency				
Aralast	alpha 1 proteinase inhibitor (human)	J0256	1 Unit = 10 mg	*Non-preferred*
Glassia	alpha 1 proteinase inhibitor (human) (glassia)	J0257	1 Unit = 10 mg	*Non-preferred*
Prolastin-C	alpha 1 proteinase inhibitor (human)	J0256	1 Unit = 10 mg	*Preferred*
Zemaira	alpha 1 proteinase inhibitor (human)	J0256	1 Unit = 10 mg	*Preferred*
Autoimmune - Infliximab				
Avsola	Infliximab-axxq	Q5121	1 Unit = 10 mg	*Non-preferred*
Inflectra	infliximab-dyyb, biosimilar	Q5103	1 Unit = 10 mg	*Preferred*
infliximab	infliximab	J1745	1 Unit = 10 mg	*Non-preferred*
Remicade	infliximab	J1745	1 Unit = 10 mg	*Non-preferred*
Renflexis	infliximab-abda, biosimilar	Q5104	1 Unit = 10 mg	*Preferred*
Autoimmune				
Actemra	tocilizumab	J3262	1 Unit = 1 mg	*Non-preferred*
Cimzia	certolizumab pegol	J0717	1 Unit = 1 mg	*Non-preferred*
Entyvio	vedolizumab	J3380	1 Unit = 1 mg	*Preferred*
Illumya	tildrakizumab	J3245	1 Unit = 1 mg	*Non-preferred*
Orencia	abatacept	J0129	1 Unit = 10 mg	*Non-preferred*
Simponi Aria	golimumab	J1602	1 Unit = 1 mg	*Preferred*
Stelara	ustekinumab (intravenous)	J3358	1 Unit = 1 mg	*Non-preferred*
Avastin/Biosimilars (Oncology)				
Alymsys	bevacizumab-maly	Q5126	1 Unit = 10mg	*Non-preferred*
Avastin	bevacizumab	J9035	1 Unit = 10mg	*Non-preferred*
Mvasi	bevacizumab-awwb	Q5107	1 Unit = 10mg	*Preferred*

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Vegzelma	bevacizumab-adcd	Q5129	1 Unit = 10mg	*Non-preferred*
Zirabev	Bevacizumab-bvzr	Q5118	1 Unit = 10mg	*Preferred*
Botulinum Toxins				
Botox	onabotulinumtoxina	J0585	1 Unit = 1 unit	*Non-preferred*
Dysport	abobotulinumtoxina	J0586	1 Unit = 5 units	*Preferred*
Myobloc	rimabotulinumtoxina	J0587	1 Unit = 100 units	*Non-preferred*
Xeomin	incobotulinumtoxin	J0588	1 Unit = 1 unit	*Preferred*
Complement Inhibitors				
Soliris	eculizumab	J1300	1 Unit = 10 mg	*Preferred*
Ultomiris	ravulizumab-cwvz	J1303	1 Unit = 10mg	*Preferred*
Uplizna	Inebilizumab-cdon	J1823	1 Unit = 1mg	*Non-preferred*
Hematologic Erythropoiesis - Stimulating Agents (ESA)				
Aranesp	darbepoetin alfa (non-esrd use)	J0881	1 Unit = 1 mcg	*Preferred*
	darbepoetin alfa (for esrd on dialysis)	J0882		
Epogen	epoetin alfa (for non-esrd use)	J0885	1 Unit = 1000 units	*Non-preferred*
	epoetin alfa (for esrd on dialysis)	Q4081		
Procrit	epoetin alfa (for non-esrd use)	J0885	1 Unit = 1000 units	*Preferred*
	epoetin alfa (for esrd on dialysis)	Q4081	1 Unit = 100 units	
Mircera	epoetin beta (for esrd on dialysis)	J0887	1 Unit = 1 mcg	*Non-preferred*
	epoetin beta (for non-esrd use)	J0888		
Retacrit	epoetin alfa, biosimilar (for esrd on dialysis)	Q5105	1 Unit = 100 units	*Non-preferred*
	epoetin alfa, biosimilar (for non-esrd use)	Q5106	1 Unit = 1000 units	
Hematologic, Neutropenia Colony Stimulating Factors - Short Acting				
Granix	TBO-filgrastim	J1447	1 Unit = 1 mcg	*Non-preferred*
Leukine	sargramostim	J2820	1 Unit = 50mcg	*Non-preferred*
Neupogen	filgrastim	J1442	1 Unit = 1 mcg	*Non-preferred*
Nivestym	filgrastim-aafi, biosimilar	Q5110	1 Unit = 1 mcg	*Non-preferred*
Releuko	filgrastim-ayow, biosimilar	Q5125	1 Unit = 1 mcg	*Non-preferred*
Zarxio	filgrastim-sndz, biosimilar	Q5101	1 Unit = 1 mcg	*Preferred*

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Hematopoietic Agents - Iron				
Feaheme	ferumoxytol (non-esrd use)	Q0138	1 Unit = 1 mg	*Non-preferred*
	ferumoxytol (for esrd on dialysis)	Q0139	1 Unit = 1 mg	
Ferrlecit	sodium ferric gluconate complex in sucrose injection	J2916	1 Unit = 12.5mg	*Preferred*
Infed	iron dextran	J1750	1 Unit = 50mg	*Preferred*
Injectafer	ferric carboxymaltose	J1439	1 Unit = 1 mg	*Non-preferred*
Monoferric	ferric derisomaltose	J1437	1 Unit = 10 mg	*Non-preferred*
Sodium Ferric Gluconate			1 Unit = 12.5mg	*Preferred*
Venofer	iron sucrose	J1756	1 Unit = 1 mg	*Preferred*
Hemophilia Factor VIII - Recombinant				
Advate	factor viii, (antihemophilic factor, recombinant)	J7192	1 Unit = 1 i. u.	*Non-Preferred*
Afstyla	factor viii, (antihemophilic factor, recombinant)	J7210	1 Unit = 1 i. u.	*Preferred*
Kogenate	factor viii, (antihemophilic factor, recombinant)	J7192	1 Unit = 1 i. u.	*Non-Preferred*
Kovaltry	factor viii, (antihemophilic factor, recombinant)	J7211	1 Unit = 1 i. u.	*Preferred*
Novoeight	antihemophilic factor, recombinant	J7182	1 Unit = 1 i. u.	*Non-Preferred*
Nuwiq	factor viii, (antihemophilic factor, recombinant)	J7209	1 Unit = 1 i. u.	*Non-Preferred*
Recombinate	factor viii, (antihemophilic factor, recombinant)	J7192	1 Unit = 1 i. u.	*Non-Preferred*
Xyntha	factor viii (antihemophilic factor, recombinant)	J7185	1 Unit = 1 i. u.	*Non-Preferred*
Xyntha Solofuse	coagulation factor VIII (recombinant)	J7185	1 Unit = 1 i. u.	*Non-Preferred*
Hemophilia Factor IX - Recombinant				
Alprolix	coagulation factor IX (recombinant), Fc fusion protein	J7201	1 Unit = 1 i. u.	*Preferred*
Idelvion	factor ix, albumin fusion protein, (recombinant)	J7202	1 Unit = 1 i. u.	*Preferred*
Lysosomal Storage Disorders (Gaucher's Disease)				
Cerezyme	imiglucerase	J1786	1 Unit = 10 units	*Preferred*
Elelyso	taliglucerase alfa	J3060	1 Unit = 10 units	*Preferred*

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VPRIV	velaglucerase alfa	J3385	1 Unit = 100 units	*Non-preferred*
Multiple Sclerosis (Infused)				
Briumvi	ublituximab-xiiy	J2329	1 Unit = 1 mg	*Non-Preferred*
Lemtrada	alemtuzumab	J0202	1 Unit = 1 mg	*Non-preferred*
Ocrevus	ocrelizumab	J2350	1 Unit = 1 mg	*Preferred*
Tysabri	natalizumab	J2323	1 Unit = 1 mg	*Preferred*
Prostate Cancer - Luteinizing Hormone Releasing Hormone (LHRH) Antagonists Agents				
Firmagon	degarelix	J9155	1 Unit = 1 mg	*Preferred*
Retinal Disorders Agents				
Avastin	bevacizumab	J9035	1 Unit = 10 mg	*Preferred (Primary)*
Avastin	bevacizumab	C9257	1 Unit = 0.25 mg	*Preferred (Primary)*
Beovu	brolucizumab-dbll, biosimilar	J0179	1 Unit = 1mg	*Non-preferred*
Byooviz	ranibizumab-nuna, biosimilar	Q5124	1 Unit = 0.1mg	*Preferred (Secondary)*
Cimerli	ranibizumab-eqrn, biosimilar	Q5128	1 Unit = 0.1mg	*Non-preferred*
Eylea	aflibercept	J0178	1 Unit = 1 mg	*Preferred (Secondary)*
Eylea HD	aflibercept hd	H0177	1 Unit = 1 mg	*Preferred (Secondary)*
Lucentis	ranibizumab	J2778	1 Unit = 0.1 mg	*Non-preferred*
Susvimo	ranibizumab (device)	J2779	1 Unit = 0.1 mg	*Non-Preferred*
Vabysmo	faricimab-svoa	J2777	1 Unit = 0.1 mg	*Non-Preferred*
Rituxan Products				
Rituxan	rituximab	J9312	1 Unit = 10 mg	*Non-preferred*
Rituxan Hycela	rituximab and hyaluronidase	J9311	1 Unit = 10 mg	*Non-preferred*
Ruxience	rituximab-pvvr, biosimilar	Q5119	1 Unit = 10 mg	*Preferred*
Riabni	rituximab-arrx	Q5123	1 Unit = 10mg	*Non-preferred*
Truxima	rituximab-abbs, biosimilar	Q5115	1 Unit = 10 mg	*Preferred*
Severe Asthma				
Cinqair	reslizumab	J2786	1 Unit = 1mg	*Non-preferred*
Fasenra	benralizumab	J0517	1 Unit = 1mg	*Preferred*
Nucala	mepolizumab	J2182	1 Unit = 1mg	*Non-preferred*
Tezspire	tezepelumab-ekko	J2456	1 Unit = 1 mg	*Non-Preferred*
Xolair	omalizumab	J2357	1 Unit = 5mg	*Preferred*

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Trastuzumab Products				
Herceptin	trastuzumab	J9355	1 Unit = 10 mg	*Non-preferred*
Herceptin Hylecta	trastuzumab and hyaluronidase-oysk	J9356	1 Unit = 10mg	*Non-preferred*
Herzuma	trastuzumab-pkrb	Q5113	1 Unit = 10mg	*Non-preferred*
Kanjinti	trastuzumab-anns	Q5117	1 Unit = 10mg	*Preferred*
Ogivri	trastuzumab-dkst	Q5114	1 Unit = 10mg	*Non-preferred*
Ontruzant	trastuzumab-dttb	Q5112	1 Unit = 10mg	*Non-preferred*
Trazimera	trastuzumab-qyyp	Q5116	1 Unit = 10mg	*Preferred*