



TREATMENT OF Lymphoma

With each publication, *ManagedCare Oncology's* Drug & Administration Compendia highlights a single medication or a group of medications that could be utilized in the management of one of the featured oncology diseases.

This section addresses such topics as:

- Associated ICD-9-CM codes
- Drugs that have been FDA-approved
- Drugs that are compendia-listed for off-label use based on clinical studies that suggest beneficial use in some cases
- Ancillary medications used in cancer treatment
- Reimbursement and coding information
 - HCPCS/CPT® codes and code description
 - Current code price (AWP-based pricing)
 - Most recent Medicare allowable (ASP + 6%), if applicable
 - Possible CPT administration codes that can be utilized with each drug

Associated ICD-9-CM Codes:

The following fifth-digit subclassification is for use with categories 200-202:

- 0 unspecified site, extranodal and solid organ sites
- 1 lymph nodes of head, face, and neck
- 2 intrathoracic lymph nodes
- 3 intra-abdominal lymph nodes
- 4 lymph nodes of axilla and upper limb
- 5 lymph nodes of inguinal region and lower limb
- 6 intrapelvic lymph nodes
- 7 spleen
- 8 lymph nodes of multiple sites

200 Lymphosarcoma and reticulosarcoma and other specified malignant tumors of the lymphatic tissue

- 200.0 Reticulosarcoma
- 200.1 Lymphosarcoma
- 200.2 Burkitt's tumor or lymphoma
- 200.3 Marginal zone lymphoma
- 200.4 Mantle cell lymphoma
- 200.5 Primary central nervous system lymphoma
- 200.6 Anaplastic large-cell lymphoma
- 200.7 Large-cell lymphoma
- 200.8 Other named variants
 - Lymphoma (malignant):
 - lymphoplasmacytoid type
 - Mixed lymphocytic-histiocytic (diffuse)
 - Lymphosarcoma, mixed cell type (diffuse)
 - Reticulolymphosarcoma (diffuse)

201 Hodgkin disease

- 201.0 Hodgkin paraganuloma
- 201.1 Hodgkin granuloma
- 201.2 Hodgkin sarcoma
- 201.4 Lymphocytic-histiocytic predominance
- 201.5 Nodular sclerosis
 - Hodgkin disease, nodular sclerosis:
 - NOS
 - cellular phase
- 201.6 Mixed cellularity
- 201.7 Lymphocytic depletion
 - Hodgkin disease, lymphocytic depletion:
 - NOS
 - diffuse fibrosis
 - reticular type
- 201.9 Hodgkin disease, unspecified
 - Hodgkin: Malignant:
 - disease NOS lymphogranuloma
 - lymphoma NOS lymphogranulomatosis

202 Other malignant neoplasms of lymphoid and histiocytic tissue

- 202.0 Nodular lymphoma
- 202.1 Mycosis fungoides
- 202.2 Sézary's disease
- 202.3 Malignant histiocytosis
- 202.4 Leukemic reticuloendotheliosis
- 202.5 Letterer-Siwe disease
- 202.6 Malignant mast cell tumors
- 202.7 Peripheral T-cell lymphoma
- 202.8 Other lymphomas
 - Lymphoma (malignant)
 - NOS
 - diffuse
 - Excludes benign lymphoma (229.0)*
- 202.9 Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue
 - Follicular dendritic cell sarcoma
 - Interdigitating dendritic cell sarcoma
 - Langerhans cell sarcoma
 - Malignant neoplasm of bone marrow NOS

FDA-Approved Medications Currently Available to Treat Lymphoma

| generic (Brand) Name | HCPCS Code – Code Description | Current Code Price (AWP-Based Pricing) Effective 10/1/11 | Medicare Allowable (ASP + 6%) – Effective 10/1/11-12/31/11 | CPT Administration Code(s) |
|---|--|--|--|---|
| bendamustine (Treanda) | J9033 – injection, bendamustine HCl, 1 mg | \$21.98 | \$18.82 | 96413 |
| betamethasone acetate and betamethasone sodium phosphate (Celestone Soluspan) | J0702 – injection, betamethasone acetate, 3 mg, and betamethasone sodium phosphate, 3 mg | \$8.00 | \$5.53 | 11900, 11901, 20600, 20605, 20610, 96372 |
| betamethasone (Celestone) | J8499* – prescription drug, oral, nonchemotherapeutic, not otherwise specified | NDC level pricing | NDC level pricing | N/A |
| bexarotene (Targretin) | J8999* – prescription drug, oral, chemotherapeutic, not otherwise specified | NDC level pricing | NDC level pricing | N/A |
| bleomycin (Blenoxane) | J9040 – injection, bleomycin sulfate, 15 units | \$41.40 | \$27.63 | 96401, 96409 |
| bortezomib (Velcade) | J9041 – injection, bortezomib, 0.1 mg | \$49.23 | \$41.45 | 96409 |
| brentuximab vedotin (Adcetris) | C9399* – unclassified drugs or biological (hospital outpatient use only) | NDC level pricing | NDC level pricing | 96413 |
| brentuximab vedotin (Adcetris) | J9999* – not otherwise classified, antineoplastic drugs | NDC level pricing | NDC level pricing | 96413 |
| carmustine (BiCNU) | J9050 – injection, carmustine, 100 mg | \$205.69 | \$175.84 | 96413, 96415 |
| chlorambucil (Leukeran) | J8999* – prescription drug, oral, chemotherapeutic, not otherwise specified | NDC level pricing | NDC level pricing | N/A |
| chlorambucil (Leukeran) | S0172 – chlorambucil, oral, 2 mg | \$4.09 | S0172 – not payable by Medicare | N/A |
| cortisone (Cortef) | J8499* – prescription drug, oral, nonchemotherapeutic, not otherwise specified | NDC level pricing | NDC level pricing | N/A |
| cyclophosphamide (Cytoxan) | J8530 – cyclophosphamide, oral, 25 mg | \$2.09 | \$0.83 | N/A |
| cyclophosphamide (Cytoxan) | J9070 – cyclophosphamide, 100 mg | \$18.16 | \$13.69 | 96409, 96413, 96415 |
| dacarbazine (DTIC-Dome) | J9130 – dacarbazine, 100 mg | \$11.34 | \$3.62 | 96409, 96413 |
| denileukin diftitox (Ontak) | J9160 – injection, denileukin diftitox, 300 mcg | \$1,863.60 | \$1,633.84 | 96409, 96413, 96415 |
| dexamethasone (Decadron) | J8540 – dexamethasone, oral, 0.25 mg | \$0.09 | \$0.36 | N/A |
| dexamethasone (Decadron) | J1100 – injection, dexamethasone sodium phosphate, 1 mg | \$0.15 | \$0.10 | 11900, 11901, 20600, 20605, 20610, 96372, 96374 |
| doxorubicin (Adriamycin PFS) | J9000 – injection, doxorubicin HCl, 10 mg | \$13.20 | \$4.81 | 96409 |
| hydrocortisone (Solu-Cortef) | J1720 – injection, hydrocortisone sodium succinate, up to 100 mg | \$2.33 | \$3.73 | 96365, 96366, 96372, 96374 |
| ibritumomab tiuxetan for yttrium-90 (Zevalin Y-90) | A9543 – yttrium-90 ibritumomab tiuxetan, therapeutic, per treatment dose, up to 40 millicuries (Code price is per 40 millicuries.) | \$42,000.00 | N/A | 79403 |
| imatinib (Gleevec) | J8999* – prescription drug, oral, chemotherapeutic, not otherwise specified | NDC level pricing | NDC level pricing | N/A |
| imatinib (Gleevec) | S0088 – imatinib, 100 mg | \$58.78 | S0088 – not payable by Medicare | N/A |
| interferon alfa-2b (Intron-A) | J9214 – injection, interferon alfa-2b, recombinant, 1 million units | \$21.90 | \$17.15 | 96372, 96401 |

FDA-Approved Medications Currently Available to Treat Lymphoma (continued)

| generic (Brand) Name | HCPCS Code – Code Description | Current Code Price (AWP-Based Pricing) Effective 10/1/11 | Medicare Allowable (ASP + 6%) – Effective 10/1/11-12/31/11 | CPT Administration Code(s) |
|---|---|--|--|--|
| lomustine (CeeNu) | J8999* – prescription drug, oral, chemotherapeutic, not otherwise specified | NDC level pricing | NDC level pricing | N/A |
| lomustine (CeeNu) | S0178 – lomustine, oral, 10 mg | \$10.59 | S0178 – not payable by Medicare | N/A |
| mechlorethamine (Mustargen) | J9230 – injection, mechlorethamine HCl, (nitrogen mustard), 10 mg | \$178.71 | \$157.86 | 96409 |
| methotrexate | J8610 – methotrexate, oral, 2.5 mg | \$3.61 | \$0.12 | N/A |
| methotrexate | J9250 – methotrexate sodium, 5 mg | \$0.30 | \$0.17 | 96372, 96374, 96401, 96409, 96450 |
| methotrexate | J9260 – methotrexate sodium, 50 mg | \$2.95 | \$1.68 | 96372, 96374, 96401, 96409, 96450 |
| methylprednisolone (Medrol) | J7509 – methylprednisolone, oral, per 4 mg | \$1.43 | \$1.00 | N/A |
| methylprednisolone acetate (Depo-Medrol) | J1020 – injection, methylprednisolone acetate, 20 mg | \$3.78 | \$1.43 | 11900, 11901, 20600, 20605, 20610, 96372 |
| methylprednisolone acetate (Depo-Medrol) | J1030 – injection, methylprednisolone acetate, 40 mg | \$5.84 | \$3.29 | 11900, 11901, 20600, 20605, 20610, 96372 |
| methylprednisolone acetate (Depo-Medrol) | J1040 – injection, methylprednisolone acetate, 80 mg | \$9.52 | \$8.04 | 11900, 11901, 20600, 20605, 20610, 96372 |
| methylprednisolone sodium succinate (Solu-Medrol) | J2920 – injection, methylprednisolone sodium succinate, up to 40 mg | \$2.35 | \$1.81 | 96365, 96366, 96372, 96374 |
| methylprednisolone sodium succinate (Solu-Medrol) | J2930 – injection, methylprednisolone sodium succinate, up to 125 mg | \$3.92 | \$2.53 | 96365, 96366, 96372, 96374 |
| nelarabine (Arranon) | J9261 – injection, nelarabine, 50 mg | \$135.26 | \$116.18 | 96413, 96415 |
| pralatrexate (Folotylin) | J9307 – injection, pralatrexate, 1 mg | \$187.50 | \$165.63 | 96409 |
| prednisolone (e.g., Millipred, Prelone) | J7510 – prednisolone, oral, per 5 mg | \$0.59 | \$0.03 | N/A |
| prednisone (e.g., Deltasone, Orasone) | J7506 – prednisone, oral, per 5 mg | \$0.07 | \$0.02 | N/A |
| procarbazine (Matulane) | J8999* – prescription drug, oral, chemotherapeutic, not otherwise specified | NDC level pricing | NDC level pricing | N/A |
| procarbazine (Matulane) | S0182 – procarbazine HCl, oral, 50 mg | \$58.56 | S0182 – not payable by Medicare | N/A |
| rituximab (Rituxan) | J9310 – injection, rituximab, 100 mg | \$718.88 | \$627.05 | 96413, 96415 |
| romidepsin (Istodax) | J9315 – injection, romidepsin, 1 mg | \$259.67 | \$224.79 | 96413, 96415 |
| thiotepa (Thiotepa) | J9340 – injection, thiotepa, 15 mg | \$180.00 | \$133.70 | 51720, 96409 |
| tositumomab (Bexxar 131 iodine) | A9545 – iodine-131 tositumomab, therapeutic, per treatment dose | \$34,873.19 | N/A | 79403 |
| vinblastine (Velban) | J9360 – injection, vinblastine sulfate, 1 mg | \$3.18 | \$0.98 | 96409 |
| vincristine (Vincasar PFS) | J9370 – vincristine sulfate, 1 mg | \$5.68 | \$3.92 | 96409 |
| vorinostat (Zolinza) | J8999* – prescription drug, oral, chemotherapeutic, not otherwise specified | NDC level pricing | NDC level pricing | N/A |

*When billing a nonclassified medication using a CMS 1500 claim form, you must include both the HCPCS code (i.e., J8999 for CeeNu) in column 24D and the drug name, strength, and NDC (National Drug Code) in box 19 to ensure appropriate reimbursement.

Compendia-Listed Off-Label-Use Medications Currently Available to Treat Lymphoma

| generic (Brand) Name | HCPCS Code – Code Description | Current Code Price (AWP-Based Pricing) Effective 10/1/11 | Medicare Allowable (ASP + 6%) – Effective 10/1/11-12/31/11 | CPT Administration Code(s) |
|---|--|--|--|----------------------------|
| acyclovir (Zovirax) | J0133 – injection, acyclovir, 5 mg | \$0.17 | \$0.02 | 96365 |
| acyclovir (Zovirax) | J8499* – prescription drug, oral, nonchemotherapeutic, not otherwise specified | NDC level pricing | NDC level pricing | N/A |
| aldesleukin (Proleukin) | J9015 – injection, aldesleukin, per single-use vial | \$1,284.52 | \$988.25 | 96409 |
| alemtuzumab (Campath) | J9010 – injection, alemtuzumab, 10 mg | \$706.00 | \$586.24 | 96413, 96415 |
| asparaginase (Elspar) | J9020 – injection, asparaginase, 10,000 units | \$73.09 | \$63.27 | 96401, 96413 |
| carboplatin (Paraplatin) | J9045 – injection, carboplatin, 50 mg | \$85.10 | \$4.23 | 96409, 96413, 96415 |
| cisplatin (Platinol AQ) | J9060 – injection, cisplatin, powder or solution, per 10 mg | \$4.33 | \$2.15 | 96409, 96413, 96415 |
| cladribine (Leustatin) | J9065 – injection, cladribine, per 1 mg | \$53.10 | \$24.41 | 96413, 96415 |
| cytarabine (Cytosar-U) | J9100 – injection, cytarabine, 100 mg | \$1.25 | \$0.72 | 96409, 96413, 96415, 96450 |
| daunorubicin (Cerubidine) | J9150 – injection, daunorubicin, 10 mg | \$25.20 | \$15.90 | 96409, 96413 |
| daunorubicin citrate liposome (DaunoXome) | J9151 – injection, daunorubicin citrate, liposomal formulation, 10 mg | \$65.28 | \$57.66 | 96413 |
| epirubicin (Ellence) | J9178 – injection, epirubicin HCl, 2 mg | \$5.38 | \$1.90 | 96409, 96413 |
| etanercept (Enbrel) | J1438 – injection, etanercept, 25 mg (Code may be used for Medicare when drug administered under the direct supervision of a physician; not for use when drug is self-administered.) | \$271.46 | \$208.23 | 96372 |
| etoposide (Vepesid) | J8560 – etoposide, oral, 50 mg | \$57.33 | \$38.26 | N/A |
| etoposide (Toposar) | J9181 – injection, etoposide, 10 mg | \$0.53 | \$0.77 | 96413, 96415 |
| fludarabine (Oforta) | J8562 – fludarabine phosphate, oral, 10 mg | \$92.57 | \$77.93 | N/A |
| fludarabine (Fludara) | J9185 – injection, fludarabine phosphate, 50 mg | \$205.14 | \$103.80 | 96413 |
| gallium nitrate (Ganite) | J1457 – injection, gallium nitrate, 1 mg | \$2.40 | \$2.07 | 96365, 96366 |
| ganciclovir (Cytovene) | J1570 – injection, ganciclovir sodium, 500 mg | \$81.06 | \$67.86 | 96365 |
| gemcitabine (Gemzar) | J9201 – injection, gemcitabine HCl, 200 mg | \$124.20 | \$91.37 | 96413 |
| hydroxyurea (Hydrea) | J8999* – prescription drug, oral, chemotherapeutic, not otherwise specified | NDC level pricing | NDC level pricing | N/A |
| hydroxyurea (Hydrea) | S0176 – hydroxyurea, oral, 500 mg | \$1.28 | S0176 – not payable by Medicare | N/A |
| idarubicin (Idamycin PFS) | J9211 – injection, idarubicin HCl, 5 mg | \$144.00 | \$59.44 | 96409 |
| ifosfamide (Ifex) | J9208 – injection, ifosfamide, 1 g | \$42.00 | \$32.64 | 96413, 96415 |
| interferon alfa-n3 (Alferon N) | J9215 – injection, interferon, alfa-n3 (human leukocyte derived), 250,000 IU | \$36.14 | None reported | 11900, 11901 |
| irinotecan (Camptosar) | J9206 – injection, irinotecan, 20 mg | \$31.49 | \$6.55 | 96413, 96415 |
| leucovorin calcium (Wellcovorin) | J0640 – injection, leucovorin calcium, per 50 mg | \$2.53 | \$1.47 | 96372, 96374, 96409 |
| lymphocyte immune globulin antithymocyte globulin (Atgam) | J7504 – lymphocyte immune globulin, antithymocyte globulin, equine, parenteral, 250 mg | \$764.19 | \$567.21 | 96365, 96366 |

Compendia-Listed Off-Label-Use Medications Currently Available to Treat Lymphoma (continued)

| generic (Brand) Name | HCPCS Code – Code Description | Current Code Price (AWP-Based Pricing) Effective 10/1/11 | Medicare Allowable (ASP + 6%) – Effective 10/1/11-12/31/11 | CPT Administration Code(s) |
|-----------------------------|--|--|--|----------------------------|
| melphalan (Alkeran) | J8600 – melphalan, oral, 2 mg | \$8.52 | \$7.33 | N/A |
| mercaptopurine (Purinethol) | J8999* – prescription drug, oral, chemotherapeutic, not otherwise specified | NDC level pricing | NDC level pricing | N/A |
| mercaptopurine (Purinethol) | S0108 – mercaptopurine, oral, 50 mg | \$4.09 | S0108 – not payable by Medicare | N/A |
| mitoxantrone (Novantrone) | J9293 – injection, mitoxantrone HCl, per 5 mg | \$90.00 | \$38.08 | 96409, 96413 |
| oxaliplatin (Eloxatin) | J9263 – injection, oxaliplatin, 0.5 mg | \$12.01 | \$10.15 | 96413, 96415 |
| paclitaxel (Taxol) | J9265 – injection, paclitaxel, 30 mg | \$15.84 | \$9.52 | 96413, 96415 |
| pegaspargase (Oncaspar) | J9266 – injection, pegaspargase, per single-dose vial | \$3,280.00 | \$2,726.85 | 96401, 96413, 96415 |
| pentostatin (Nipent) | J9268 – injection, pentostatin, per 10 mg | \$1,569.96 | \$1,104.95 | 96409, 96413 |
| temsirolimus (Torisel) | J9330 – injection, temsirolimus, 1 mg | \$61.09 | \$51.54 | 96413 |
| teniposide (Vumon) | Q2017 – injection, teniposide, 50 mg | \$376.55 | \$322.39 | 96413, 96415 |
| vinorelbine (Navelbine) | J9390 – injection, vinorelbine tartrate, per 10 mg | \$36.48 | \$17.79 | 96409 |
| zidovudine (Retrovir) | J8499* – prescription drug, oral, nonchemotherapeutic, not otherwise specified | NDC level pricing | NDC level pricing | N/A |
| zidovudine (Retrovir) | S0104 – zidovudine, oral, 100 mg | \$2.02 | S0104 – not payable by Medicare | N/A |

*When billing a nonclassified medication using a CMS 1500 claim form, you must include both the HCPCS code (i.e., J8999 for CeeNu) in column 24D and the drug name, strength, and NDC (National Drug Code) in box 19 to ensure appropriate reimbursement.

Ancillary Medications Used in Cancer Treatment

| generic (Brand) Name | HCPCS Code – Code Description | Current Code Price (AWP-Based Pricing) Effective 10/1/11 | Medicare Allowable (ASP + 6%) – Effective 10/1/11-12/31/11 | CPT Administration Code(s) |
|----------------------|--|--|--|----------------------------|
| aprepitant (Emend) | J8501 – aprepitant, oral, 5 mg | \$7.62 | \$6.18 | N/A |
| granisetron (Kytril) | J1626 – injection, granisetron HCl, 100 mcg | \$3.93 | \$0.87 | 96374 |
| granisetron (Kytril) | Q0166 – granisetron HCl, 1 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at time of chemotherapy treatment, not to exceed a 24-hour dosage regimen | \$59.01 | \$1.23 | N/A |
| granisetron (Kytril) | S0091 – granisetron HCl, 1 mg (For circumstances falling under the Medicare statute, use Q0166.) | \$59.01 | S0091 – not payable by Medicare | N/A |
| ondansetron (Zofran) | J2405 – injection, ondansetron HCl, per 1 mg | \$0.60 | \$0.10 | 96372, 96374 |
| ondansetron (Zofran) | Q0179 – ondansetron HCl, 8 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at time of chemotherapy treatment, not to exceed a 48-hour dosage regimen (Code price is per 8 mg.) | \$39.36 | \$0.68 | N/A |
| ondansetron (Zofran) | S0181 – ondansetron HCl, 4 mg, oral (For circumstances falling under the Medicare statute, use Q0179.) | \$23.98 | S0181 – not payable by Medicare | N/A |
| palonosetron (Aloxi) | J2469 – injection, palonosetron HCl, 25 mcg | \$44.52 | \$19.19 | 96374 |

CPT Administration Code Descriptions

| CPT Administration Code | Code Description |
|-------------------------|---|
| 11900 | Injection, intralesional; up to and including seven lesions |
| 11901 | Injection, intralesional; more than seven lesions |
| 20600 | Arthrocentesis, aspiration and/or injection; small joint or bursa (e.g., fingers, toes) |
| 20605 | Arthrocentesis, aspiration and/or injection; intermediate joint or bursa (e.g., temporomandibular, acromioclavicular, wrist, elbow, ankle, olecranon bursa) |
| 20610 | Arthrocentesis, aspiration and/or injection; major joint or bursa (e.g., shoulder, hip, knee joint, subacromial bursa) |
| 79403 | Radiopharmaceutical therapy, radiolabeled monoclonal antibody by intravenous infusion |
| 96365 | Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); initial, up to one hour |
| 96366 | Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); each additional hour (List separately in addition to code for primary procedure.) (Use 96366 in conjunction with 96365, 96367.) |
| 96401 | Chemotherapy administration, subcutaneous or intramuscular; nonhormonal antineoplastic |
| 96409 | Chemotherapy administration, intravenous push technique; single or initial substance/drug |
| 96413 | Chemotherapy administration, intravenous infusion technique; up to one hour, single or initial substance/drug |
| 96415 | Chemotherapy administration, intravenous infusion technique; each additional hour (List separately in addition to code for primary procedure.) (Use 96415 in conjunction with 96413.) |
| 96450 | Chemotherapy administration into central nervous system (e.g., intrathecal), requiring and including spinal puncture |
| 96372 | Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular |
| 96374 | Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); intravenous push, single or initial substance/drug |

References

- HCPCS Level II Expert 2011.
- Current Procedural Terminology (CPT) 2011.
- American Medical Association. *ICD-9-CM for Professionals, Volumes 1 and 2*. Chicago: AMA Press. 2011.
- RJ Health Systems International, LLC. *The Drug Reimbursement Coding and Pricing Guide*. Volume 8, Number 4, Fourth Quarter, 2011.
- FDA-approved indication (product-prescribing information).
- Compendia references available upon request.
- www.ReimbursementCodes.com. Powered by RJ Health Systems International, LLC, Rocky Hill, Conn.
- CMS (Centers for Medicare & Medicaid Services) – Medicare-Allowable Fourth Quarter 2011 – Effective Dates 10/1/11-12/31/11.

CPT copyright 2011 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association.

This information was supplied by RJ Health Systems International, LLC, located in Rocky Hill, Conn. Prices and information supplied herein are effective as of October 1, 2011.

Oncology-Related HCPCS Codes

This reference chart will assist the Oncology Office (office manager, oncology nurse, physician, and ancillary staff) and payor with the appropriate codes to utilize when billing or reimbursing for medication(s).

| generic (Brand) Name | HCPCS Code – Code Description | FDA-Approved Uses | Compendia-Listed Off-Label Uses | Current Code Price (AWP-Based Pricing)* | Medicare Allowable (ASP + 6%)** | CPT Admin Code(s) |
|----------------------|--------------------------------------|--|--|---|---------------------------------|-------------------------|
| azacitidine (Vidaza) | J9025 – injection, azacitidine, 1 mg | Myeloid leukemia – chronic (205.1_) Low-grade myelodysplastic syndrome lesions (238.72) High-grade myelodysplastic syndrome lesions (238.73) Myelodysplastic syndrome with 5q deletion (238.74) Myelodysplastic syndrome, unspecified (238.75) | Malignant neoplasm of retroperitoneum and peritoneum – specified parts of peritoneum (158.8) Malignant neoplasm of retroperitoneum and peritoneum – peritoneum, unspecified (158.9) Malignant neoplasm of pleura (163._) Malignant neoplasm of thymus, heart, and mediastinum – heart (164.1) Myeloid leukemia – acute (205.0_) Hereditary hemolytic anemias – other thalassemia (282.49) Sickle-cell disease (282.6_) | \$6.03 | \$5.25 | 96401 96409 96413 |
| cetuximab (Erbix) | J9055 – injection, cetuximab, 10 mg | Malignant neoplasm of lip (140._) Malignant neoplasm of tongue (141._) Malignant neoplasm of major salivary glands (142._) Malignant neoplasm of gum (143._) Malignant neoplasm of floor of mouth (144._) Malignant neoplasm of other and unspecified parts of mouth (145._) Malignant neoplasm of oropharynx (146._) Malignant neoplasm of nasopharynx (147._) Malignant neoplasm of hypopharynx (148._) Malignant neoplasms of other and ill-defined sites within the lip, oral cavity, and pharynx (149._) Malignant neoplasm of colon (153._) Malignant neoplasm of rectum, rectosigmoid junction, and anus (154._) Malignant neoplasm of nasal cavities, middle ear, and accessory sinuses (160._) Malignant neoplasm of larynx (161._) Malignant neoplasm of other and ill-defined sites – head, face, and neck (195.0) Secondary and unspecified malignant neoplasm of lymph nodes – lymph nodes of head, face, and neck (196.0) | Malignant neoplasm of trachea, bronchus, and lung (162._) | \$58.46 | \$50.48 | 96413 96415 |
| clofarabine (Clolar) | J9027 – injection, clofarabine, 1 mg | Lymphoid leukemia – acute (204.0_) | Myeloid leukemia – acute (205.0_) Low-grade myelodysplastic syndrome lesions (238.72) High-grade myelodysplastic syndrome lesions (238.73) Myelodysplastic syndrome with 5q deletion (238.74) Myelodysplastic syndrome, unspecified (238.75) | \$141.75 | \$121.99 | 96413 96415 |

| generic (Brand) Name | HCPCS Code – Code Description | FDA-Approved Uses | Compendia-Listed Off-Label Uses | Current Code Price (AWP-Based Pricing)* | Medicare Allowable (ASP + 6%)** | CPT Admin Code(s) |
|-------------------------|---|--|--|---|---------------------------------|-------------------|
| dactinomycin (Cosmegen) | J9120 – injection, dactinomycin, 0.5 mg | Malignant neoplasm of retroperitoneum and peritoneum – retroperitoneum (158.0) Malignant neoplasm of bone and articular cartilage (170._) Malignant neoplasm of connective and other soft tissue (171._) Malignant neoplasm of placenta (181) Malignant neoplasm of testis – undescended testis (186.0) Malignant neoplasm of testis – other and unspecified testis (186.9) Malignant neoplasm of kidney and other and unspecified urinary organs – kidney, except pelvis (189.0) Neoplasm of uncertain behavior of genitourinary organs – placenta (236.1) | Malignant melanoma of skin (172._) Kaposi’s sarcoma (176._) Malignant neoplasm of ovary and other uterine adnexa (183._) Malignant neoplasm of other and unspecified female genital organs (184._) Malignant neoplasm of penis and other male genital organs (187._) Malignant neoplasm of eye (190._) Complications of transplanted organ – kidney (996.81) Complications of transplanted organ – heart (996.83) | \$678.00 | \$578.19 | 96409 |
| decitabine (Dacogen) | J0894 – injection, decitabine, 1 mg | Low-grade myelodysplastic syndrome lesions (238.72) High-grade myelodysplastic syndrome lesions (238.73) Myelodysplastic syndrome with 5q deletion (238.74) Myelodysplastic syndrome, unspecified (238.75) | Lymphoid leukemia – acute (204.0_) Myeloid leukemia – acute (205.0_) Myeloid leukemia – chronic (205.1_) | \$38.35 | \$32.55 | 96413 96415 |
| degarelix (Firmagon) | J9155 – injection, degarelix, 1 mg | Malignant neoplasm of prostate (185) | N/A | \$6.07 | \$2.76 | 96402 |

| generic (Brand) Name | HCPCS Code – Code Description | FDA-Approved Uses | Compendia-Listed Off-Label Uses | Current Code Price (AWP-Based Pricing)* | Medicare Allowable (ASP + 6%)** | CPT Admin Code(s) |
|-------------------------|---|--|--|---|---------------------------------|-------------------|
| fluorouracil (Aduvicol) | J9190 – injection, fluorouracil, 500 mg | <p>Malignant neoplasm of esophagus (150._)</p> <p>Malignant neoplasm of stomach (151._)</p> <p>Malignant neoplasm of colon (153._)</p> <p>Malignant neoplasm of rectum, rectosigmoid junction, and anus – rectosigmoid junction (154.0)</p> <p>Malignant neoplasm of rectum, rectosigmoid junction, and anus – rectum (154.1)</p> <p>Malignant neoplasm of rectum, rectosigmoid junction, and anus – other (154.8)</p> <p>Malignant neoplasm of pancreas (157._)</p> <p>Malignant neoplasm of female breast (174._)</p> <p>Malignant neoplasm of male breast (175._)</p> | <p>Viral warts – condyloma acuminatum (078.11)</p> <p>Malignant neoplasm of lip (140._)</p> <p>Malignant neoplasm of tongue (141._)</p> <p>Malignant neoplasm of major salivary glands (142._)</p> <p>Malignant neoplasm of gum (143._)</p> <p>Malignant neoplasm of floor of mouth (144._)</p> <p>Malignant neoplasm of other and unspecified parts of mouth (145._)</p> <p>Malignant neoplasm of oropharynx (146._)</p> <p>Malignant neoplasm of nasopharynx (147._)</p> <p>Malignant neoplasm of hypopharynx (148._)</p> <p>Malignant neoplasms of other and ill-defined sites within the lip, oral cavity, and pharynx (149._)</p> <p>Malignant neoplasm of small intestine, including duodenum (152._)</p> <p>Malignant neoplasm of liver and intrahepatic bile ducts (155._)</p> <p>Malignant neoplasm of gallbladder and extrahepatic bile ducts – extrahepatic bile ducts (156.1)</p> <p>Malignant neoplasm of gallbladder and extrahepatic bile ducts – ampulla of Vater (156.2)</p> <p>Malignant neoplasm of gallbladder and extrahepatic bile ducts – other specified sites of gallbladder and extrahepatic bile ducts (156.8)</p> <p>Malignant neoplasm of gallbladder and extrahepatic bile ducts – biliary tract, part unspecified (156.9)</p> <p>Malignant neoplasm of nasal cavities, middle ear, and accessory sinuses (160._)</p> <p>Malignant neoplasm of larynx (161._)</p> <p>Malignant neoplasm of trachea, bronchus, and lung (162._)</p> <p>Other malignant neoplasm of skin (173._)</p> <p>Malignant neoplasm of cervix uteri (180._)</p> <p>Malignant neoplasm of body of uterus – corpus uteri, except isthmus (182.0)</p> <p>Malignant neoplasm of ovary and other uterine adnexa (183._)</p> <p>Malignant neoplasm of other and unspecified female genital organs (184._)</p> <p>Malignant neoplasm of prostate (185)</p> <p>Malignant neoplasm of penis and other male genital organs (187._)</p> <p>Malignant neoplasm of bladder (188._)</p> <p>Malignant neoplasm of kidney and other and unspecified urinary organs – kidney, except pelvis (189.0)</p> <p>Malignant neoplasm of brain (191._)</p> <p>Malignant neoplasm of other endocrine glands and related structures – adrenal gland (194.0)</p> <p>Malignant neoplasm of other and ill-defined sites – head, face, and neck (195.0)</p> <p>Secondary and unspecified malignant neoplasm of lymph nodes – lymph nodes of head, face, and neck (196.0)</p> <p>Secondary malignant neoplasm of respiratory and digestive systems – liver, specified as secondary (197.7)</p> <p>Malignant neoplasm without specification of site – disseminated (199.0)</p> <p>Malignant neoplasm without specification of site – other (199.1)</p> <p>Neuroendocrine tumors – malignant carcinoid tumors of the small intestine (209.0._)</p> <p>Neuroendocrine tumors – malignant carcinoid tumors of the appendix, large intestine, and rectum (209.1._)</p> <p>Neuroendocrine tumors – malignant carcinoid tumors of other and unspecified sites (209.2._)</p> <p>Neuroendocrine tumors – malignant poorly differentiated neuroendocrine tumors (209.3._)</p> <p>Neoplasm of uncertain behavior of other and unspecified sites and tissues – skin (238.2)</p> <p>Other retinal disorders – other proliferative retinopathy – other nondiabetic proliferative retinopathy (362.29)</p> <p>Glaucoma – borderline glaucoma (glaucoma suspect) (365.0._)</p> <p>Glaucoma – open-angle glaucoma (365.1._)</p> <p>Glaucoma – primary angle-closure glaucoma (365.2._)</p> <p>Glaucoma – corticosteroid-induced glaucoma (365.3._)</p> <p>Glaucoma – glaucoma associated with congenital anomalies, dystrophies, and systemic syndromes (365.4._)</p> <p>Glaucoma – glaucoma associated with disorders of the lens (365.5._)</p> <p>Glaucoma – glaucoma associated with other ocular disorders (365.6._)</p> <p>Glaucoma – other specified forms of glaucoma (365.8._)</p> <p>Glaucoma – unspecified glaucoma (365.9)</p> <p>Psoriasis and similar disorders – other psoriasis (696.1)</p> | \$3.30 | \$1.40 | 96409 |

| generic (Brand) Name | HCPCS Code – Code Description | FDA-Approved Uses | Compendia-Listed Off-Label Uses | Current Code Price (AWP-Based Pricing)* | Medicare Allowable (ASP + 6%)** | CPT Admin Code(s) |
|------------------------|---------------------------------------|--|---|---|---------------------------------|-------------------|
| ixabepilone (Ixemptra) | J9207 – injection, ixabepilone, 1 mg | Malignant neoplasm of female breast (174._) Malignant neoplasm of male breast (175._) | Malignant neoplasm of prostate (185) | \$74.86 | \$64.69 | 96413 96415 |
| panitumumab (Vectibix) | J9303 – injection, panitumumab, 10 mg | Malignant neoplasm of colon (153._) Malignant neoplasm of rectum, rectosigmoid junction, and anus (154._) | Malignant neoplasm of trachea, bronchus, and lung (162._) | \$101.85 | \$87.23 | 96413 96415 |
| pemetrexed (Alimta) | J9305 – injection, pemetrexed, 10 mg | Malignant neoplasm of trachea, bronchus, and lung (162._) Malignant neoplasm of pleura (163._) | Malignant neoplasm of lip (140._) Malignant neoplasm of tongue (141._) Malignant neoplasm of major salivary glands (142._) Malignant neoplasm of gum (143._) Malignant neoplasm of floor of mouth (144._) Malignant neoplasm of other and unspecified parts of mouth (145._) Malignant neoplasm of oropharynx (146._) Malignant neoplasm of nasopharynx (147._) Malignant neoplasm of hypopharynx (148._) Malignant neoplasm of other and ill-defined sites within the lip, oral cavity, and pharynx (149._) Malignant neoplasm of stomach (151._) Malignant neoplasm of colon (153._) Malignant neoplasm of rectum, rectosigmoid junction, and anus (154._) Malignant neoplasm of pancreas (157._) Malignant neoplasm of nasal cavities, middle ear, and accessory sinuses (160._) Malignant neoplasm of larynx (161._) Malignant neoplasm of female breast (174._) Malignant neoplasm of male breast (175._) Malignant neoplasm of cervix uteri (180._) Malignant neoplasm of bladder (188._) Malignant neoplasm of kidney and other and unspecified urinary organs – kidney, except pelvis (189.0) Malignant neoplasm of other and ill-defined sites – head, face, and neck (195.0) Secondary and unspecified malignant neoplasm of lymph nodes – lymph nodes of head, face, and neck (196.0) Carcinoma in situ of digestive organs – lip, oral cavity (230.0) Carcinoma in situ of digestive organs – colon (230.3) Carcinoma in situ of digestive organs – rectum (230.4) Carcinoma in situ of respiratory system – larynx (231.0) Carcinoma in situ of breast and genitourinary system – breast (233.0) Carcinoma in situ of breast and genitourinary system – cervix uteri (233.1) Carcinoma in situ of breast and genitourinary system – bladder (233.7) | \$64.09 | \$53.77 | 96409 |

* Current code prices are effective as of 10/1/11. The code price is based on the Healthcare Common Procedure Coding System (HCPCS) code description. HCPCS codes are a component of CMS (Centers for Medicare & Medicaid Services). The code price is an AWP-based pricing methodology developed by RJ Health Systems International, LLC, Rocky Hill, Conn.

** Effective 10/1/11–12/31/11

Oncology-Related J-Code References

- HCPCS Level II Expert 2011.
- Current Procedural Terminology (CPT) 2011.
- American Medical Association. *ICD-9-CM 2011 Professional Edition, Volumes 1 and 2*. Chicago: AMA Press. 2011.
- Full prescribing information for each drug listed.
- www.ReimbursementCodes.com. Powered by RJ Health Systems International, LLC, Rocky Hill, Conn.
- CMS (Centers for Medicare & Medicaid Services) – Medicare-Allowable Fourth Quarter – Effective Dates 10/1/11-12/31/11.

CPT copyright 2011 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association.