## Reimbursement Exception Drug Pricing - Unclassified Drug Payment Policy

The following list identifies the drugs Florida Blue has approved a Reimbursement Exception price to the Unclassified Drug Payment Policy (Payment Policy #10-008).

The following drugs will be reimbursed based upon the specified pricing method listed below during the timeframe the Drug is assigned to an Unclassified Drug HCPCS. Once the Drug is assigned a listed HCPCS/CPT, the pricing identified will no longer apply, and the Drug will be priced based upon the contract arrangements, if applicable.

Reimbursement Exception pricing listed below is only applicable for providers/ suppliers that do not contract at the NDC level for all drugs.

DRUG NAME	DRUG NDC CODE(S)	UNLISTED DRUG HCPC	NDC *Assigned Unit of Measure (UoM)	NDC QUANTITY per UoM	PRICING METHOD (per NDC Quantity)	TERM DATE (Assigned Listed HCPCS Effective Date)
ULTOMIRIS	25682-0022-01	J9999	ML - MILLILITER	30ML - 1 VIAL	AWPU - 14%	n/a
LIBTAYO	61755-0008-01	J9999	ML - MILLILITER	7ML = 1 VIAL	AWPU - 17%	n/a
POTELIGEO	42747-0761-01	J9999	ML - MILLILITER	5ML = 1 VIAL	AWPU - 16%	n/a
ALIQOPA	50419-0385-01	J9999	EA - EACH (**UN)	1UN = 1 VIAL	AWPU - 16.5%	J9057 effective 01/01/2019
BESPONSA	00008-0100-01	J9999	EA - EACH (**UN)	1UN = 1 VIAL	AWPU - 16.5%	J9229 effective 01/01/2019
	68727-0745-01	J9999	EA - EACH (**UN)	1UN = 1 VIAL	AWPU - 16.5%	J9153 effective 01/01/2019
VYXEOS	68727-0745-02		EA - EACH (**UN)	1UN = 1 VIAL		
	68727-0745-05		EA - EACH (**UN)	1UN = 1 VIAL		
RITUXAN HYCELA	50242-0108-01	J9999	ML - MILLILITER	11.7ML = 1 VIAL	AWPU - 16.5%	J9311effective 01/01/2019
KIIOAANTITCLLA	50242-0109-01		ML - MILLILITER	13.4ML = 1 VIAL		
RADICAVA	70510-2171-01	J3490	ML - MILLILITER	100ML = 1 BAG	AWPU - 16.5%	J1301effective 01/01/2019
KADICAVA	70510-2171-02		ML - MILLILITER	100ML = 1 BAG		
IMFINZI	00310-4500-12	J9999	ML - MILLILITER	2.4ML = 1 VIAL	AWPU - 16.5%	J9173 effective 01/01/2019
1/4/1 11 1/4	00310-4611-50		ML - MILLILITER	10ML = 1 VIAL		
BRINEURA	68135-0811-02	J3590	EA - EACH (**UN)	1UN = 1 BOX	AWPU - 16.5%	J0567 effective 01/01/2019

PARSABIV	55513-0740-01	- J3490	ML - MILLILITER	0.5ML = 1 VIAL	- AWPU - 16.5%	J0606 effective 01/01/2018
	55513-0740-10		ML - MILLILITER	0.5ML = 1 VIAL		
	55513-0741-01		ML - MILLILITER	1ML = 1 VIAL		
	55513-0741-10		ML - MILLILITER	1ML = 1 VIAL		
	55513-0742-01		ML - MILLILITER	2ML = 1 VIAL		
	55513-0742-10		ML - MILLILITER	2ML = 1 VIAL		
OCREVUS	50242-0150-01	J3590	ML - MILLILITER	10ML = 1 vial	AWPU - 17%	J2350 effective 01/01/2018
BAVENCIO	44087-3535-01	J9999	EA - EACH (**UN)	1UN = 1 VIAL	AWPU - 16.5%	J9023 effective 01/01/2018
LADTDUNG.	00002-8926-01	J9999	ML - MILLILITER	R 50ML = 1 VIAI	AVA/DII 17.507	J9285 effective 01/01/2018
LARTRUVO	00002-7190-01	J9999 	ML - MILLILITER	19ML = 1 VIAL	AWPU - 16.5%	
MYLOTARG	00008-4510-01	J9999	EA - EACH (**UN)	1UN = 1 VIAL	AWPU - 16.5%	J9203 effective 01/01/2018
AVASTIN	50242-0060-01	- J3490	ML - MILLILITER	4ML Max Qty	\$225.00 per ML	Effective 11/01/2016 - present
(Non-Oncology Indication)	50242-0061-01					
DARZALEX	57894-0502-05	J9999	ML - MILLILITER	5ML = 1 vial	AWPU - 8%	J9145 effective 01/01/2017
D/ WE/LEA	57894-0502-20		ML - MILLILITER	20ML = 1 vial		
EMPLICITI	00003-2291-11	J9999	EA - EACH (**UN)	1UN = 1 vial	AWPU - 16.5%	J9176 effective 01/01/2017
EIVIII EI GIII	00003-4522-11		EA - EACH (**UN)	1UN = 1 vial		
YONDELIS	59676-0610-01	J9999	EA - EACH (**UN)	1UN = 1 vial	AWPU - 15%	J9352 effective 01/01/2017
PORTRAZZA	00002-7716-01	J9999	ML	50ML = 1 vial	AWPU - 16.5%	J9295 effective 01/01/2017
ONIVYDE	69171-0398-01	J9999	ML	10ML = 1 vial	AWPU - 16.65%	J9205 effective 01/01/2017
NUCALA	00173-0881-01	J3590	EA - EACH (**UN)	1UN = 1 vial	AWPU - 15%	J2182 effective 01/01/2017
ILUVIEN	68611-0190-02	J3490	EA - EACH (**UN)	1UN = 1Box	AWPU - 15%	J7313 effective 01/01/2016
BLINCYTO	55513-0160-01	J9999	EA - EACH (**UN)	1UN = 1 vial	AWPU - 15%	J9039 effective 1/1/2016
OPDIVO	00003-3772-11	J9999	ML	4ML = 1 vial	AWPU - 15.4%	J9299 effective 1/1/2016
	00003-3774-12			10ML = 1 vial		
LEMTRADA	58468-0200-01	J3590	ML	1.2ML = 1 vial	AWPU - 16%	J0202 effective 1/1/2016 Q9979 effective 10/1/2015
BELEODAQ	68152-0108-09	J9999	EA (**UN)	1UN = 1 vial	AWPU - 15.76%	J9032 effective 1/1/2016
KEYTRUDA	00006-3029-01	——I 19999	EA (**UN)	1UN = 1 vial	AWPU - 15%	J9271 effective 1/1/2016
	00006-3029-02			1UN = 1 vial		
ENTYVIO	64764-0300-20	J3590	EA (**UN)	1UN = 1 vial	AWPU - 15%	J3380 effective 1/1/2016
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CYRAMZA	00002-7669-01	J9999	ML	10ML = 1 vial	AWPU - 15%	J9308 effective 1/1/2016
	00002-7678-01	J7777		50ML = 1 vial		
SYLVANT	57894-0420-01	12500	EA (**UN)	1UN = 1 vial	AWPU - 15%	J2860 effective 1/1/2016
	57894-0421-01	J3590		1UN = 1 vial		
AVEED	67979-0511-43	J3490	ML	3ML = 1 vial	AWPU - 15%	J3145 effective 1/1/2015
VIMIZIM	68135-0100-01	J3590	ML	5ML = 1 vial	AWPU - 16.5%	J1322 effective 1/1/2015
INJECTAFER	00517-0650-01	J3490	ML	15ML = 1 vial	AWPU - 18%	J1439 effective 1/1/2015 Q9970 effective 7/1/2014
GAZYVA	50242-0070-01	J9999	ML	40ML = 1 vial	AWPU - 15%	J9301 effective 1/1/2015
XOFIGO	50419-0208-01	A9699	EA (**UN)	1UN = 1 vial	AWPU - 13%	A9606 effective 1/1/2015
SKYLA	50419-0422-01	J3490	EA (**UN)	1UN = 1Box	AWPU - 15%	J7301 effective 1/1/2014 Q0090 effective 7/1/2013
KADCVIA	50242-0088-01	10000	EA (**UN)	1UN = 1 vial	AWPU - 14%	J9354 effective 1/1/2014
KADCYLA	50242-0087-01	J9999		1UN = 1 vial		
JETREA	24856-0001-00	J3590	ML	0.20ML = 1 vial	AWPU - 15%	J7316 effective 1/1/2014
SYNRIBO	63459-0177-14	J9999	EA (**UN)	1UN = 1 vial	AWPU - 15%	J9262 effective 1/1/2014
PERJETA	50242-0145-01	J9999	ML	14ML = 1 vial	AWPU - 15%	J9306 effective 1/1/2014
ZALTRAP	00024-5840-01	J9999	ML	4ML = 1 vial	AWPU - 15%	J9400 effective 1/1/2014
LALIKAI	00024-5841-01			8ML = 1 vial		
KYPROLIS	76075-0101-01	J9999	EA (**UN)	1UN = 1 vial	AWPU - 15%	J9047 effective 1/1/2014
ELELYSO	00069-0106-01	J3490	EA (**UN)	1UN = 1 vial	AWPU - 4%	J3060 effective 1/1/2014
ADCETRIS	51144-0050-01	J9999	EA (**UN)	1UN = 1 vial	WAC unit price	J9042 effective 1/1/2013
EYLEA	61755-0005-02	J3590	ML	0.05ML = 1 vial	AWPU - 15%	J0178 effective 1/1/2013 Q2046 effective 7/1/2012
PROVENGE	30237-8900-06	J9999	ML	250ML = 1 flex cont	WAC unit price	Q2043 effective 7/1/2012
HALAVEN	62856-0389-01	J9999	ML	2ML = 1 vial	AWPU - 10%	J9179 effective 1/1/2012
XGEVA	55513-0730-01	J3590	ML	1.7ML = 1 vial	AWPU - 10%	J0897 effective 1/1/2012
PROLIA	55513-0710-01	J3590	ML	1ML = 1 Syringe	AWPU - 15%	J0897 effective 1/1/2012
	00024-5824-11	J9999	ML	1.5ML = 1 vial	AWPU - 16.5%	J9043 effective 1/1/2012
JEVTANA	00024-3624-11	37777				

<sup>\*</sup> Please refer to the Provider Manual regarding the billing guidelines related to the NDC assigned unit of measure which is aligned with National Council for Prescription Drug Programs (NCPDP) standards.

** UN is the Electronic submitted NDC unit of measure available that is aligned with NCPDP unit of measure = 'EA'