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Kaiser Foundation Health Plan of Washington

Utilization Management Policy
Self-Administered Medications

Medications administered by the patient that do not require direct supervision by a qualified provider or licensed/certified health professional are considered self-administered drugs and are not covered under the medical benefit.

Criteria

For Medicare Members

Criteria does not apply.

For Non-Medicare Members

A medication can be designated as self-administered based on the following:

- Medication is not typically administered or directly supervised by a licensed/certified health professional or provider
- Medication does not require monitoring immediately before, during, or after administration by a licensed/certified health professional or provider
- Route of administration (e.g., oral, inhaled, intranasal, topical, rectal, subcutaneous or self-injectable intramuscular injections)
- Dosage form (e.g., prefilled syringe, auto-injector, tablet, capsule, suppository, nasal spray, metered dose inhaler, nebulized solution)
- Acuity of condition (e.g., chronic disease)
- Frequency of administration
- Standards of medical practice allowing for self-administration
- Evaluation of any established medical literature or compendia, including but not limited to:
    - FDA-approved prescribing information
    - Manufacturer-provided medical literature
    - Peer-reviewed medical literature
    - Evidence-based practice guidelines
    - Compendia

Drugs / J Codes

Drugs considered to be self-administered are listed below. For exceptions, please see Non-Medicare Injectable Drugs Requiring Prior Authorization.

Generic Name	Brand Name	J-Codes
Abatacept SUBQ	Orencia	J0129
Adalimumab	Humira	J0135
Adalimumab-aacf	Idacio	Q5131
Adalimumab-adaz	Hyrimoz, Adalimumab-adaz	Unspecified J3490, J3590, C9399
Adalimumab-afzb	Abrilada	Q5132
Adalimumab-adbm	Cyltezo	Unspecified J3490, J3590, C9399
Adalimumab-aaty	Yuflyma	Unspecified J3490, J3590, C9399
Adalimumab-aqvh	Yusimry	Unspecified J3490, J3590, C9399
Adalimumab-atto	Amjevita	Unspecified J3490, J3590, C9399
Adalimumab-bwwd	Hadlima	Unspecified J3490, J3590, C9399
Adalimumab-fkjp	Hulio	Unspecified J3490, J3590, C9399
Adalimumab-rysk	Simlandi	Unspecified J3490, J3590, C9399
Alirocumab	Praluent	Unspecified J3490, J3590, C9399
Anakinra	Kineret	Unspecified J3490, J3590, C9399
Apomorphine	Apokyn	J0364
Asfotase alfa	Strensiq	Unspecified J3490, J3590, C9399

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Belimumab	Benlysta SUBQ	J0490
Benralizumab	Fasenra	J0517
Brodalumab	Siliq	Unspecified J3490, J3590, C9399
C1 esterase inhibitor	Haegarda	C9015, J0599
Dupliumab	Dupixent	Unspecified J3490, J3590, C9399
Eplontersen sodium	Wainua	Unspecified J3490, J3590, C9399
Erenumab-aooe	Aimovig	Unspecified J3490, J3590, C9399
Etanercept	Enbrel, Enbrel Mini	J1438
Evolocumab	Repatha	Unspecified J3490, J3590, C9399
Exenatide	Bydureon Bcise, Byetta	Unspecified J3490, J3590, C9399
Filgrastim-aafi	Nivestym	Q5110
Filgrastim	Neupogen	J1442
Filgrastim-sndz	Zarxio	Q5101
Tbo-filgrastim	Granix	J1447
Filgrastim-ayow	Releuko	C9096, Q5125
Fremanezumab-vfm	Ajovy	J3031
Galcanezumab-gnlm	Emgality	Unspecified J3490, J3590, C9399
Glatiramer acetate	Generic, Glatopa, Copaxone	J1595
Guselkumab	Tremfya	J1628
Icatibant	Firazyr	J1744
Immunglobulin	Hizentra	J1559
Infliximab-dyyb	Zymfentra	Unspecified J3490, J3590, C9399
Inotersen	Tegsedi	Unspecified J3490, J3590, C9399
Interferon beta-1a	Avonex, Rebif	J1826
Interferon beta-1b	Betaseron, Extavia	J1830
Lanadelumab-flyo	Takhzyro	J0593
Liraglutide	Victoza	Unspecified J3490, J3590, C9399
Mepolizumab	Nucala	J2182
Ofatumumab	Kesimpta	Unspecified J3490, J3590, C9399
Omalizumab	Xolair	J2357
Pasireotide	Signifor	Unspecified J3490, J3590, C9399
Peginterferon beta-1a	Plegridy	Unspecified J3490, J3590, C9399
Pegvisomant	Somavert	Unspecified J3490, J3590, C9399
Sarilumab	Kevzara	Unspecified J3490, J3590, C9399
Satralizumab	Enspryng	Unspecified J3490, J3590, C9399
Secukinumab SUBQ	Cosentyx	Unspecified J3490, J3590, C9399
Semaglutide	Ozempic	Unspecified J3490, J3590, C9399
Setmelanotide	Imcivree	Unspecified J3490, J3590, C9399
Sotatercept-csrk	Winrevair	Unspecified J3490, J3590, C9399
Spesolimab-sbzo SUBQ	Spevigo	J1747
Teduglutide	Gattex	Unspecified J3490, J3590, C9399
Teriparatide	Forteo	J3110
Tocilizumab SUBQ	Actemra	J3262
Tocilizumab-aazg SUBQ	Tyenne	Unspecified J3490, J3590, C9399
Tirzepatide	Mounjaro	Unspecified J3490, J3590, C9399
Ustekinumab SUBQ	Stelara	J3357

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