

Please Note: Refer to the other PA grids for applicable covered services that require PA.

PA Grids: Medical, Behavioral health, ALTCS, and Pharmacy.

Pharmacy Prior Authorization Grid (Effective Date of Service 4/1/2020)

Injectables that require Prior Authorization

All chemotherapeutic drugs must be used for FDA-approved indications and/or in accordance with NCCN guidelines

AHCCCS does not cover biosimilars

*Indicates prior authorization required if billed charges are greater than \$400

HCPCS Code	Short Description	PA Required		
		HMO 7 (UFC; AHCCCS)	HMO 13 (UCA- SNP)	HMO 18 (B-UFC; ALTCS)
90378	Respiratory Syncytial Virus Immune Globulin	Yes	Yes	Yes
C9132	Prothrombin Complex Concentrate (Human), Kcentra	Yes	Yes	Yes
C9133	Factor IX (Antihemophilic Factor, Recombinant), Rixibus	Yes	Yes	Yes
C9131	Factor VIII antihemophilic factor pegylated-auci	Yes	Yes	Yes
C9036	Patisiran	Yes	Yes	Yes
C9399	Mipomersen (Kynamro)	Yes	Yes	Yes
J0129	Abatacept	Yes	Yes	Yes
J0135	Adalimumab	Yes	Yes	Yes
J0160	Testosterone Cypionate/Estradiol Cypionate	Yes	Yes	Yes
J0178	Aflibercept	Yes	Yes	Yes
J0180	Agalsidase Beta	Yes	Yes	Yes
J0205	Alglucerase	Yes	Yes	Yes
J0215	Alefacept	Yes	Yes	Yes
J0220	Alglucosidase Alfa (Myozyme)	Yes	Yes	Yes
J0221	Alglucosidase Alfa (Lumizyme)	Yes	Yes	Yes
J0256	Alpha 1-Proteinase Inhibitor	Yes	Yes	Yes
J0257	Alpha 1-Proteinase Inhibitor (Glassia)	Yes	Yes	Yes
J0275	Alprostadil Urethral Suppository	Yes	Yes	Yes
J0490	Belimumab	Yes	Yes	Yes
J0517	Benralizumab	Yes	Yes	Yes
J0567	Cerliponase alfa	Yes	Yes	Yes
J0570	Buprenorphine implant	Yes	Yes	Yes
J0585	Onabotulinumtoxina (Botox)	Yes	Yes	Yes
J0586	Abobotulinumtoxina (Dysport)	Yes	Yes	Yes
J0587	Rimabotulinumtoxinb (Myobloc)	Yes	Yes	Yes
J0588	Incobotulinumtoxina (Xeomin)	Yes	Yes	Yes
J0597	C-1 Esterase Inhibitor (Berinert)	Yes	Yes	Yes
J0598	C-1 Esterase Inhibitor (Cinryze)	Yes	Yes	Yes
J0642	Levoleucovorin (Khapzory)	Yes	Yes	Yes
J0717	Certolizumab Pegol	Yes	Yes	Yes
J0725	Chorionic Gonadotropin	Yes	Yes	Yes
J0775	Collagenase, Clostridium Histolyticum	Yes	Yes	Yes
J0800	Corticotropin	Yes	Yes	Yes
J0881	Darbepoetin alfa	Yes	Yes	Yes
J0885	Epoetin alfa	Yes	Yes	Yes
J0888	Epoetin beta	Yes	Yes	Yes
J0897	Denosumab	Yes	Yes	Yes

J0900	Testosterone Enanthate/Estradiol Valerate	Yes	Yes	Yes
J1070	Testosterone Cypionate, up to 1 mg	Yes	Yes	Yes
J1071	Testosterone Cypionate, 1 mg	Yes	Yes	Yes
J1080	Testosterone Cypionate, 200 mg	Yes	Yes	Yes
J1290	Ecallantide	Yes	Yes	Yes
J1300	Eculizumab	Yes	Yes	Yes
J1301	Edaravone	Yes	Yes	Yes
J1303	Ravulizumab-cwvz	Yes	Yes	Yes
J1322	Elosulfase Alfa	Yes	Yes	Yes
J1324	Enfuvirtide	Yes	Yes	Yes
J1325	Epoprostenol	Yes	Yes	Yes
J1438	Etanercept	Yes	Yes	Yes
J1439	Ferric carboxymaltos	Yes	Yes	Yes
J1442	Filgrastim (Neupogen)	Yes	Yes	Yes
J1458	Galsulfase	Yes	Yes	Yes
J1459	Immune Globulin (Privigen)	Yes	Yes	Yes
J1460	Gamma globulin (GamaStan)	Yes	Yes	Yes
J1555	Immune globulin SQ (Cuvitru)	Yes	Yes	Yes
J1556	Immune Globulin (Bivigam)	Yes	Yes	Yes
J1557	Immune Globulin (Gammalex)	Yes	Yes	Yes
J1559	Immune Globulin (Hizentra)	Yes	Yes	Yes
J1560	Gamma globulin (Gammunex, Gammaked)	Yes	Yes	Yes
J1561	Immune Globulin (Gamunex/Gamunex-C/Gammaked)	Yes	Yes	Yes
J1562	Immune Globulin (Vivaglobin)	Yes	Yes	Yes
J1566	Immune Globulin NOS powder	Yes	Yes	Yes
J1568	Immune Globulin (Octagam)	Yes	Yes	Yes
J1569	Immune Globulin (Gammagard Liquid)	Yes	Yes	Yes
J1572	Immune Globulin (Flebogamma/Flebogamma Dif)	Yes	Yes	Yes
J1599	Immune Globulin NOS non-lyophilized	Yes	Yes	Yes
J1602	Golimumab	Yes	Yes	Yes
J1620	Gonadorelin	Yes	Yes	Yes
J1640	Hemin	Yes	Yes	Yes
J1725	Hydroxyprogesterone Caproate	Yes	Yes	Yes
J1740	Ibandronate	Yes	Yes	Yes
J1743	Idursulfase	Yes	Yes	Yes
J1744	Icatibant	Yes	Yes	Yes
J1745	Infliximab	Yes	Yes	Yes
J1786	Imiglucerase	Yes	Yes	Yes
J1930	Lanreotide	Yes	Yes	Yes
J1931	Laronidase	Yes	Yes	Yes
J1950	Leuprolide (3.75mg)	Yes	Yes	Yes
J2170	Mecasermin	Yes	Yes	Yes
J2182	Mepolizumab	Yes	Yes	Yes
J2212	Methylnaltrexone	Yes	Yes	Yes
J2323	Natalizumab	Yes	Yes	Yes
J2326	Trientine (Sprinraza)	Yes	Yes	Yes
J2350	Ocrelizumab	Yes	Yes	Yes
J2353	Octreotide	Yes	Yes	Yes
J2357	Omalizumab	Yes	Yes	Yes
J2502	Pasireotide Long Acting	Yes	Yes	Yes
J2724	Protein C, Human (Ceprotrin)	Yes	Yes	Yes
J2778	Ranibizumab	Yes	Yes	Yes
J2786	Reslizumab	Yes	Yes	Yes
J2796	Romiplostim	Yes	Yes	Yes

J2820	Sargramostim	Yes	Yes	Yes
J2840	Sebelipase alfa	Yes	Yes	Yes
J2940	Somatrem	Yes	Yes	Yes
J2941	Somatropin	Yes	Yes	Yes
J3060	Taliglucerase Alfa	Yes	Yes	Yes
J3110	Teriparatide	Yes	Yes	Yes
J3111	Romosozumab-aqqg	Yes	Yes	Yes
J3121	Testosterone Enanthate	Yes	Yes	Yes
J3145	Testosterone Undecanoate	Yes	Yes	Yes
J3262	Tocilizumab	Yes	Yes	Yes
J3285	Treprostinil	Yes	Yes	Yes
J3315	Triptorelin Pamoate	Yes	Yes	Yes
J3358	Ustekinumab	Yes	Yes	Yes
J3380	Vedolizumab	Yes	Yes	Yes
J3385	Velaglucerase alfa	Yes	Yes	Yes
J3397	Vestronidase alfa-vjvk	Yes	Yes	Yes
J3490 *	Drugs Unclassified Injection when billed value exceeds \$400	Yes	Yes	Yes
J3590*	Drugs Unclassified Biologic when billed value exceeds \$400	Yes	Yes	Yes
J7170	Emicizumab kxwh	Yes	Yes	Yes
J7175	Factor X (human)	Yes	Yes	Yes
J7179	Von Willebrand factor recombinant (Vonvendi)	Yes	Yes	Yes
J7180	Factor XIII Antihemophilic Factor	Yes	Yes	Yes
J7181	Factor XIII recombinant a-subunit	Yes	Yes	Yes
J7182	Factor VIII recombinant (Novoeight)	Yes	Yes	Yes
J7183	Von Willebrand Factor Complex, human (Wilate)	Yes	Yes	Yes
J7185	Factor VIII recombinant (Xyntha)	Yes	Yes	Yes
J7186	Antihemophilic VIII/Von Willebrand Factor Complex	Yes	Yes	Yes
J7187	Von Willebrand Factor Complex (Humate-P)	Yes	Yes	Yes
J7188	Factor VIII recombinant porcine (Obizur)	Yes	Yes	Yes
J7189	Factor VIIA (Antihemophilic Factor, Recombinant)	Yes	Yes	Yes
J7190	Factor VIII (Antihemophilic Factor, Human)	Yes	Yes	Yes
J7191	Factor VIII porcine (Hyate C)	Yes	Yes	Yes
J7192	Factor VIII (Antihemophilic Factor, Recombinant) NOS	Yes	Yes	Yes
J7193	Factor IX (Antihemophilic Factor, Purified, Nonrecombinant)	Yes	Yes	Yes
J7194	Factor IX Complex	Yes	Yes	Yes
J7195	Factor IX (Antihemophilic Factor, Recombinant) NOS	Yes	Yes	Yes
J7198	Antiinhibitor	Yes	Yes	Yes
J7199	Hemophilia Clotting Factor NOS	Yes	Yes	Yes
J7200	Factor IX recombinant (Rixubis)	Yes	Yes	Yes
J7201	Factor IX recombinant (Alprolix)	Yes	Yes	Yes
J7202	Factor IX (Idelvion)	Yes	Yes	Yes
J7205	Factor VIII FC Fusion protien recombinant	Yes	Yes	Yes
J7207	Factor VIII pegylated	Yes	Yes	Yes
J7208	Factor VIII pegylated aucl	Yes	Yes	Yes
J7209	Factor VIII (Nuwiq)	Yes	Yes	Yes
J7210	Factor VIII (Afstyla)	Yes	Yes	Yes
J7211	Factor VIII (Kovaltry)	Yes	Yes	Yes
J7311	Fluocinolone acetonide implt (Retisert)	Yes	Yes	Yes
J7312	Dexamethasone intravitreal implant (Ozurdex)	Yes	Yes	Yes
J7313	Fluocinolone intravitreal implant (Illuvien)	Yes	Yes	Yes
J7314	Fluocinolone intravitreal implant (Yutiq)	Yes	Yes	Yes
J7316	Ocriplasmin	Yes	Yes	Yes
J7318	Hyaluronan Or derivative (Durolane)	Yes	Yes	Yes
J7320	Hyaluronan or derivative (Genvisc)	Yes	Yes	Yes

J7321	Hyaluronan or derivative (Hyalgan or Supartz)	Yes	Yes	Yes
J7322	Hyaluronan or derivative (Hymovis)	Yes	Yes	Yes
J7323	Hyaluronan or derivative (Euflexxa)	Yes	Yes	Yes
J7324	Hyaluronan or derivative (Orthovisc)	Yes	Yes	Yes
J7325	Hyaluronan or derivative (Synvisc Or Synvisc-One)	Yes	Yes	Yes
J7326	Hyaluronan or derivative (Gel-One)	Yes	Yes	Yes
J7327	Hyaluronan or derivative (Monovisc)	Yes	Yes	Yes
J7328	Hyaluronan or derivative (Gel-Syn)	Yes	Yes	Yes
J7335	Capsaicin 8% Patch	Yes	Yes	Yes
J7336	Capsaicin 8% Patch, Per Sq Cm	Yes	Yes	Yes
J7639	Dornase Alfa, Inhalation	Yes	Yes	Yes
J7682	Tobramycin, Inhalation	Yes	Yes	Yes
J7686	Treprostinil, Inhalation	Yes	Yes	Yes
J7699*	NOC Drugs, Inhalation Solution Administered Through DME	Yes	Yes	Yes
J7799*	NOC Drugs, Besides Inhalation Drugs, Administered Through DME	Yes	Yes	Yes
J7999*	Compounded Drug, NOC	Yes	Yes	Yes
J8655	Netupitant and palonosetron	Yes	Yes	Yes
J9034	Bendamustine (Bendeka)	Yes	Yes	Yes
J9145	Daratumumab	Yes	Yes	Yes
J9176	Elotuzumab	Yes	Yes	Yes
J9205	Irinotecan liposome	Yes	Yes	Yes
J9295	Necitumumab	Yes	Yes	Yes
J9325	Talimogene	Yes	Yes	Yes
J9352	Trabectedin	Yes	Yes	Yes
J9999 *	Antineoplastic Drugs NOS, when billed value exceeds \$400	Yes	Yes	Yes
Q0138	Ferumoxytol	Yes	Yes	Yes
Q2041	Axicabtagene (Yescarta)	Yes	Yes	Yes
Q2042	Tisagenlecleucel (Kymriah)	Yes	Yes	Yes
Q4074	Iloprost, Inhalation Solution	Yes	Yes	Yes
Q4082*	Drug Or Biological, NOC	Yes	Yes	Yes
Q5101	Filgrastim-sndz (Zarxio)	Yes	Yes	Yes
Q5103	Infliximab (Inflectra)	Yes	Yes	Yes
Q5104	Infliximab (Renflexis)	Yes	Yes	Yes
Q5106	Epoetin alfa-epbx (Retacrit)	Yes	Yes	Yes
Q5107	Bevacizumab-awwb (Mvasi)	Yes	Yes	Yes
Q5108	Pegfilgrastim-jmdb (Fulphila)	Yes	Yes	Yes
Q5109	Infliximab-qbtx (Ixifi)	Yes	Yes	Yes
Q5110	Filgrastim-aafi (Nivestym)	Yes	Yes	Yes
Q5111	Pegfilgrastim-cbqv (Udenyca)	Yes	Yes	Yes
Q5112	Trastuzumab-dkst (Ontruzant)	Yes	Yes	Yes
Q5113	Trastuzumab-pkrb (Herzuma)	Yes	Yes	Yes
Q5114	Trastuzumab-dkst (Ogivri)	Yes	Yes	Yes
Q5115	Rituximab-abbs (Truxima)	Yes	Yes	Yes
Q5116	Trastuzumab-qyyp (Trazimer)	Yes	Yes	Yes
Q9991	Buprenorphine XR 100mg or less	Yes	Yes	Yes
Q9992	Buprenorphine XR over 100 mg	Yes	Yes	Yes