Dear Provider Partner:

NOTICE: ONCOHEALTH TO MANAGE BLUE KC'S PRIOR AUTHORIZATION PROGRAM FOR ONCOLOGY TREATMENTS

Blue Cross and Blue Shield of Kansas City (Blue KC) will partner with OncoHealth, a leading oncology organization, to administer prior authorization for oncology treatments for dates of service on or after **January 1, 2026**. This change is designed to streamline processes and deliver support for our members with cancer.

OncoHealth will assist Blue KC's prior authorization process for radiation therapy and oncology drugs that will require prior authorization for Commercial, ACA QHP for Individual/Family and Small Group ACA lines of business. **Note:** Blue KC will post new medical policies and updates to existing policies related to this partnership with OncoHealth. Click here for the Blue KC Medical Policies landing page, or you may visit our log-in page at Providers.BlueKC.com and click on *Go to Medical Policies*.

OncoHealth will start accepting prior authorization requests for Commercial, ACA QHP for Individual/Family and Small Group ACA on **December 8, 2025**, for dates of service on or after **January 1, 2026**. Further information can be found on the Blue KC Provider Portal at Providers.BlueKC.com.

The information below includes a list of impacted codes and the upcoming webinar training series. Please review these codes and register for a training session to ensure a smooth transition.

WHAT YOU NEED TO KNOW

- OncoHealth offers providers, patients and health plans an evidence-based approach to medical oncology management.
- OncoHealth supports providers in the United States and Puerto Rico, providing patients with the ability to achieve the best possible outcomes in their cancer care. This has been accomplished by facilitating continuous access to current, evidence-based, disease-specific analytics on all types of cancer, stages and treatment options, backed by board-certified oncologists/hematologists, radiation oncologists, pharmacists and nurses.
- OncoHealth promotes evidence-based treatments that consider all therapeutic options based upon objective assessments of efficacy, safety and cost-effectiveness.
- To submit oncology requests for review, you must provide OncoHealth with all clinical information requested, which may include, but is not limited to:
    - Pathology reports
    - Initial consultation
    - Laboratory studies
    - Clinical notes and records
- Reauthorization of previously approved requests for radiation therapy and oncology drugs.
    - Authorizations previously issued prior to January 1, 2026, by Blue KC will be effective until the authorization expiration date.
    - For services on or after January 1, 2026, new authorization requests must be submitted to OncoHealth on or after the applicable implementation date.

WEBINAR TRAINING SCHEDULE

- The OncoHealth Provider Relations Team will host a training series to provide an overview of OncoHealth, explain the Oncology Management program with Blue KC and outline what providers can expect from the program. See the schedule below.
- The links are provided below to register for the one-hour virtual session.
    - Morning Session Registration Link: https://oncohealth-us.zoom.us/webinar/register/WN_vB94VHUqSYKFWVT4ZCrVtw
    - Afternoon Session Registration Link: https://oncohealth-us.zoom.us/webinar/register/WN_Qr3rgbVyRZa6EIbA-ZOf0g

Date	Morning
Tuesday 11/11/2025	10 a.m. CT
Tuesday 11/18/2025	10 a.m. CT
Tuesday 12/2/2025	10 a.m. CT
Tuesday 12/9/2025	10 a.m. CT
Tuesday 12/16/2025	10 a.m. CT
Tuesday 12/30/2025	10 a.m. CT
Tuesday 1/6/2026	10 a.m. CT
Tuesday 1/13/2026	10 a.m. CT
Tuesday 1/20/2026	10 a.m. CT

Date	Afternoon
Thursday 11/13/2025	1 p.m. CT
Thursday 11/20/2025	1 p.m. CT
Thursday 12/4/2025	1 p.m. CT
Thursday 12/11/2025	1 p.m. CT
Thursday 12/18/2025	1 p.m. CT
Thursday 1/8/2026	1 p.m. CT
Thursday 1/15/2026	1 p.m. CT
Thursday 1/22/2026	1 p.m. CT

CODES – RADIATION ONCOLOGY

- Below is a complete list of the Radiation Oncology codes that will require prior authorization for dates of service on or after January 1, 2026.
- These codes are the same for Commercial, ACA QHP for Individual/Family and Small Group ACA. We encourage you to become familiar with this change.

OncoHealth Radiation CPT/HCPCS Code	Description	Long Description
55875	Transperi needle place pros	Transperineal placement of needles or catheters into prostate for interstitial radioelement application, with or without cystoscopy
55876	Place rt device/marker pros	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), prostate (via needle, any approach), single or multiple
76873	Echograp trans r pros study	Ultrasound, transrectal; prostate volume study for brachytherapy treatment planning (separate procedure)
76965	Echo guidance radiotherapy	Ultrasonic guidance for interstitial radioelement application
77014	Ct scan for therapy guide	Computed tomography guidance for placement of radiation therapy fields
77261	Radiation therapy planning	Therapeutic radiology treatment planning; simple
77262	Radiation therapy planning	Therapeutic radiology treatment planning; intermediate
77263	Radiation therapy planning	Therapeutic radiology treatment planning; complex
77280	Set radiation therapy field	Therapeutic radiology simulation-aided field setting; simple
77285	Set radiation therapy field	Therapeutic radiology simulation-aided field setting; intermediate
77290	Set radiation therapy field	Therapeutic radiology simulation-aided field setting; complex
77293	Respirator motion mgmt simul	Respiratory motion management simulation (List separately in addition to code for primary procedure)
77295	Set radiation therapy field	3-dimensional radiotherapy plan, including dose-volume histograms

77299	Radiation therapy planning	Unlisted procedure, therapeutic radiology clinical treatment planning
77300	Radiation therapy dose plan	Basic radiation dosimetry calculation, central axis depth dose calculation, TDF, NSD, gap calculation, off axis factor, tissue inhomogeneity factors, calculation of non-ionizing radiation surface and depth dose, as required during course of treatment, only when prescribed by the treating physician
77301	Radiotherapy dose plan imrt	Intensity modulated radiotherapy plan, including dose-volume histograms for target and critical structure partial tolerance specifications
77306	Telethx isodose plan simple	Teletherapy isodose plan; simple (1 or 2 unmodified ports directed to a single area of interest), includes basic dosimetry calculation(s)
77307	Telethx isodose plan cplx	Teletherapy isodose plan; complex (multiple treatment areas, tangential ports, the use of wedges, blocking, rotational beam, or special beam considerations), includes basic dosimetry calculation(s)
77316	Brachytx isodose plan simple	Brachytherapy isodose plan; simple (calculation[s] made from 1 to 4 sources, or remote afterloading brachytherapy, 1 channel), includes basic dosimetry calculation(s)
77317	Brachytx isodose intermed	Brachytherapy isodose plan; intermediate (calculation[s] made from 5 to 10 sources, or remote afterloading brachytherapy, 2-12 channels), includes basic dosimetry calculation(s)
77318	Brachytx isodose complex	Brachytherapy isodose plan; complex (calculation[s] made from over 10 sources, or remote afterloading brachytherapy, over 12 channels), includes basic dosimetry calculation(s)
77321	Special teletx port plan	Special teletherapy port plan, particles, hemibody, total body
77331	Special radiation dosimetry	Special dosimetry (eg, TLD, microdosimetry) (specify), only

		when prescribed by the treating physician
77332	Radiation treatment aid(s)	Treatment devices, design and construction; simple (simple block, simple bolus)
77333	Radiation treatment aid(s)	Treatment devices, design and construction; intermediate (multiple blocks, stents, bite blocks, special bolus)
77334	Radiation treatment aid(s)	Treatment devices, design and construction; complex (irregular blocks, special shields, compensators, wedges, molds or casts)
77336	Radiation physics consult	Continuing medical physics consultation, including assessment of treatment parameters, quality assurance of dose delivery, and review of patient treatment documentation in support of the radiation oncologist, reported per week of therapy
77338	Design mlc device for imrt	Multi-leaf collimator (MLC) device(s) for intensity modulated radiation therapy (IMRT), design and construction per IMRT plan
77370	Radiation physics consult	Special medical radiation physics consultation
77371	Srs multisource	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; multi-source Cobalt 60 based
77372	Srs linear based	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; linear accelerator based
77373	Sbrt delivery	Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions
77385	Ntsty modul rad tx dlvr smpl	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; simple
77386	Ntsty modul rad tx dlvr cplx	Intensity modulated radiation treatment delivery (IMRT),

		includes guidance and tracking, when performed; complex
77387	Guidance for radj tx dlvr	Guidance for localization of target volume for delivery of radiation treatment, includes intrafraction tracking, when performed
77399	External radiation dosimetry	Unlisted procedure, medical radiation physics, dosimetry and treatment devices, and special services
77401	Radiation treatment delivery	Radiation treatment delivery, superficial and/or ortho voltage, per day
77402	Radiation treatment delivery	Radiation treatment delivery, => 1 MeV; simple
77407	Radiation treatment delivery	Radiation treatment delivery, => 1 MeV; intermediate
77412	Radiation treatment delivery	Radiation treatment delivery, => 1 MeV; complex
77417	Radiology port film(s)	Therapeutic radiology port image(s)
77423	Neutron beam tx complex	High energy neutron radiation treatment delivery, 1 or more isocenter(s) with coplanar or non-coplanar geometry with blocking and/or wedge, and/or compensator(s)
77424	Io rad tx delivery by x-ray	Intraoperative radiation treatment delivery, x-ray, single treatment session
77425	Io rad tx deliver by elctrns	Intraoperative radiation treatment delivery, electrons, single treatment session
77427	Radiation tx management x5	Radiation treatment management, 5 treatments
77431	Radiation therapy management	Radiation therapy management with complete course of therapy consisting of 1 or 2 fractions only
77432	Stereotactic radiation trmt	Stereotactic radiation treatment management of cranial lesion(s) (complete course of treatment consisting of 1 session)
77435	Sbrt management	Stereotactic body radiation therapy, treatment management, per treatment course, to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions
77469	Lo radiation tx management	Intraoperative radiation treatment management

77470	Special radiation treatment	Special treatment procedure (eg, total body irradiation, hemibody radiation, per oral or endocavitary irradiation)
77499	Radiation therapy management	Unlisted procedure, therapeutic radiology treatment management
77520	Proton trmt simple w/o comp	Proton treatment delivery; simple, without compensation
77522	Proton trmt simple w/comp	Proton treatment delivery; simple, with compensation
77523	Proton trmt intermediate	Proton treatment delivery; intermediate
77525	Proton treatment complex	Proton treatment delivery; complex
77600	Hyperthermia treatment	Hyperthermia, externally generated; superficial (ie, heating to a depth of 4 cm or less)
77605	Hyperthermia treatment	Hyperthermia, externally generated; deep (ie, heating to depths greater than 4 cm)
77610	Hyperthermia treatment	Hyperthermia generated by interstitial probe(s); 5 or fewer interstitial applicators
77615	Hyperthermia treatment	Hyperthermia generated by interstitial probe(s); more than 5 interstitial applicators
77620	Hyperthermia treatment	Hyperthermia generated by intracavitary probe(s)
77750	Infuse radioactive materials	Infusion or instillation of radioelement solution (includes 3-month follow-up care)
77761	Apply intrcav radiat simple	Intracavitary radiation source application; simple
77762	Apply intrcav radiat interm	Intracavitary radiation source application; intermediate
77763	Apply intrcav radiat compl	Intracavitary radiation source application; complex
77767	Hdr rdncl skn surf brachytx	Remote afterloading high dose rate radionuclide skin surface brachytherapy, includes basic dosimetry, when performed; lesion diameter up to 2.0 cm or 1 channel
77768	Hdr rdncl skn surf brachytx	Remote afterloading high dose rate radionuclide skin surface brachytherapy, includes basic dosimetry, when performed; lesion diameter over 2.0 cm and 2 or more channels, or multiple lesions

77770	Hdr rdncl ntrstl/icav brchtx	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 1 channel
77771	Hdr rdncl ntrstl/icav brchtx	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 2-12 channels
77772	Hdr rdncl ntrstl/icav brchtx	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; over 12 channels
77778	Apply interstit radiat compl	Interstitial radiation source application, complex, includes supervision, handling, loading of radiation source, when performed
77789	Apply surface radiation	Surface application of low dose rate radionuclide source
77790	Radiation handling	Supervision, handling, loading of radiation source
77799	Radium/radioisotope therapy	Unlisted procedure, clinical brachytherapy
79101	Nuclear rx iv admin	Radiopharmaceutical therapy, by intravenous administration
0394T	Hdr elctrnc skn surf brchytx	High dose rate electronic brachytherapy, skin surface application, per fraction, includes basic dosimetry, when performed
0395T	Hdr elctr ntrst/ntrcv brchtx	High dose rate electronic brachytherapy, interstitial or intracavitary treatment, per fraction, includes basic dosimetry, when performed
C1716	Brachytx, non-str, gold-198	Brachytherapy source, nonstranded, gold-198, per source
C1717	Brachytx, non-str,hdr ir-192	Brachytherapy source, nonstranded, high dose rate iridium-192, per source
C2616	Brachytx, non-str, yttrium-90	Brachytherapy source, nonstranded, yttrium-90, per source
G0339	Robot lin-radsurg com, first	Image guided robotic linear accelerator-based stereotactic radiosurgery, complete course of therapy in one session or first session of fractionated treatment

G0340	Robt lin-radsurg fractx 2-5	Image guided robotic linear accelerator-based stereotactic radiosurgery, delivery including collimator changes and custom plugging, fractionated treatment, all lesions, per session, second through fifth sessions, maximum five sessions per course of treatment
G0458	Ldr prostate brachy comp rat	Low dose rate (LDR) prostate brachytherapy services, composite rate
G6001	Echo guidance radiotherapy	Ultrasonic guidance for placement of radiation therapy fields
G6002	Stereoscopic x-ray guidance	Stereoscopic x-ray guidance for localization of target volume for the delivery of radiation therapy
G6003	Radiation treatment delivery	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: up to 5 mev
G6004	Radiation treatment delivery	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: up to 6-10 mev
G6005	Radiation treatment delivery	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: up to 11-19 mev
G6006	Radiation treatment delivery	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: up to 20 mev or greater
G6007	Radiation treatment delivery	Radiation treatment delivery, two separate treatment areas, three or more ports on a single treatment area, use of multiple blocks: up to 5 mev
G6008	Radiation treatment delivery	Radiation treatment delivery, two separate treatment areas, three or more ports on a single treatment area, use of multiple blocks: up to 6-10 mev
G6009	Radiation treatment delivery	Radiation treatment delivery, two separate treatment areas, three or more ports on a single treatment area, use of multiple blocks: up to 11-19 mev

G6010	Radiation treatment delivery	Radiation treatment delivery, two separate treatment areas, three or more ports on a single treatment area, use of multiple blocks: up to 20 mev or greater
G6011	Radiation treatment delivery	Radiation treatment delivery, three or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; up to 5 mev
G6012	Radiation treatment delivery	Radiation treatment delivery, three or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; up to 6-10 mev
G6013	Radiation treatment delivery	Radiation treatment delivery, three or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; up to 11-19 mev
G6014	Radiation treatment delivery	Radiation treatment delivery, three or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; up to 20 mev or greater
G6015	Radiation tx delivery imrt	Intensity modulated treatment delivery, single or multiple fields/arcs, via narrow spatially and temporally modulated beams, binary, dynamic MLC, per treatment session
G6016	Delivery comp imrt	Compensator-based beam modulation treatment delivery of inverse planned treatment using three or more high resolution (milled or cast) compensator, convergent beam modulated fields, per treatment session
G6017	Intrafraction track motion	Intra-fraction localization and tracking of target or patient motion during delivery of radiation therapy (e.g., 3D positional tracking, gating, 3D surface tracking), each fraction of treatment

CODES – ONCOLOGY DRUGS

- Below is a detailed list of the HCPCS codes for medical and pharmacy oncology drugs that will require prior authorization for dates of service on or after January 1, 2026.
- OncoHealth will only review oncology indications for these drugs.
- A number of drugs have multiple indications and may be reviewed by Blue KC for non-oncology indications (example: rituximab).
- **Note:** This list is subject to change as new drugs and indications become available.

Brand Name	Generic Name	Route	HCPCS Code
Verzenio	abemaciclib	Oral	J8999
Yonsa	abiraterone	Oral	J8999
Zytiga	abiraterone	Oral	J8999
Calquence	acalabrutinib	Oral	J8999
Krazati	adagrasib	Oral	J8999
Kadcyla	ado-trastuzumab emtansine	IV	J9354
Tecelra	afamitresgene autoleucel	IV	Q2057
Gilotrif	afatinib	Oral	J8999
Abraxane	albumin bound paclitaxel	IV	J9264
Proleukin	aldesleukin	IV	J9015
Alecensa	alectinib	Oral	J8999
Piqray	alpelisib	Oral	J8999
Rybrevant	amivantamab	IV	J9061
Agrylin	anagrelide	Oral	J8999
Kineret	anakinra	Other	J3590
Arimidex	anastrozole	Oral	J8999
Erleada	apalutamide	Oral	J8999
Cinvanti	aprepitant	IV	J0185
Scemblix	asciminib	Oral	J8999
Erwinaze	asparaginase	IV	J9019
Rylaze	asparaginase	IV	J9021
Tecentriq	atezolizumab	IV	J9022
Tecentriq Hybreza	atezolizumab and hyaluronidase-tqjs	Other	J9024
Ayvakit	avapritinib	Oral	J8999
Doptelet	avatrombopag	Oral	J8499
Bavencio	avelumab	IV	J9023
Inlyta	axitinib	Oral	J8999
Onureg	azacitidine	Oral	J8999
Vidaza	azacitidine	IV	J9025
Beleodaq	belinostat	IV	J9032
Welireg	belzutifan	Oral	J8999

Treanda	bendamustine	IV	J9033
Bendeka	bendamustine	IV	J9034
Belrapzo	bendamustine	IV	J9036
Vivimusta	bendamustine	IV	J9056
Avastin	bevacizumab	IV	J9035
Vegzelma	bevacizumab-adcd	IV	Q5129
Mvasi	bevacizumab-awwb	IV	Q5107
Zirabev	bevacizumab-bvzr	IV	Q5118
Alymsys	bevacizumab-maly	IV	Q5126
Jobevne	bevacizumab-nwgd	IV	J9999
Avzivi	bevacizumab-tnjn	IV	J9999
Mektovi	binimetinib	Oral	J8999
Blincyto	blinatumomab	IV	J9039
Bosulif	bosutinib	Oral	J8999
Adcetris	brentuximab vedotin	IV	J9042
Alunbrig	brigatinib	Oral	J8999
Brigatinib Initiation Pack	Brigatinib Starter Pack	Oral	J8999
Cabometyx	cabozantinib	Oral	J8999
Cometriq	cabozantinib	Oral	J8999
Truqap	Capivasertib	Oral	J8999
Cablivi	caplacizumab	IV	J3590
Tabrecta	capmatinib	Oral	J8999
Kyprolis	carfilzomib	IV	J9047
Libtayo	cemiplimab	IV	J9119
Zykadia	ceritinib	Oral	J8999
Erbitux	cetuximab	IV	J9055
Cotellic	cobimetinib	Oral	J8999
Unloxcyt	cosibelimab	IV	J9275
Xalkori	crizotinib	Oral	J8999
Tafinlar	dabrafenib	Oral	J8999
Vyxeos	Cytarabine liposome / DAUNOrubicin Liposomal	IV	J9153
Vizimpro	dacomitinib	Oral	J8999
Darzalex	daratumumab	IV	J9145
Darzalex Faspro	daratumumab and hyaluronidase-fihj	Other	J9144
Nubeqa	darolutamide	Oral	J8999
Phyrago	dasatinib	Oral	J8999
Sprycel	dasatinib	Oral	J8999
Datroway	Datopotamab deruxtecan	IV	J9999
Inqovi	decitabine and cedazuridine	Oral	J8999
Lymphir	denileukin diftitox	IV	J9161

Hemady	Dexamethasone	Oral	J8541
Unituxin	dinutuximab	IV	J9999
Jemperli	dostarlimab	IV	J9272
Caelyx	doxorubicin hydrochloride liposome	IV	J9999
LipoDox	doxorubicin hydrochloride liposome	IV	Q2049
Doxil	doxorubicin hydrochloride liposome	IV	Q2050
Syndros	dronabinol	Oral	Q0155
Marinol	dronabinol	Oral	Q0167
Imfinzi	durvalumab	IV	J9173
Copiktra	duvelisib	Oral	J8999
Ryzneuta	Efbemalenograstim Alfa	IV	J9361
Rolvedon	eflapegrastim	Other	J1449
Iwilfin	Eflornithine	Oral	J8999
Orserdu	elacestrant	Oral	J8999
Empliciti	elotuzumab	IV	J9176
Elrexfio	elranatamab	Other	J1323
Alvaiz	eltrombopag	Oral	J8499
Promacta	eltrombopag	Oral	J8499
Idhifa	enasidenib	Oral	J8999
Braftovi	encorafenib	Oral	J8999
Padcev	enfortumab	IV	J9177
Rozlytrek	entrectinib	Oral	J8999
Xtandi	enzalutamide	Oral	J8999
Epkinly	epcoritamab	IV	J9321
Balversa	erdafitinib	Oral	J8999
Tarceva	erlotinib	Oral	J8999
Afinitor	everolimus	Oral	J8999
Torpenz	everolimus	Oral	J8999
Aromasin	exemestane	Oral	J8999
Enhertu	fam-trastuzumab deruxtecan-nxki	IV	J9358
Inrebic	fedratinib	Oral	J8999
Neupogen	filgrastim	Other	J1442
Granix	filgrastim (tbo-filgrastim)	Other	J1447
Nivestym	filgrastim-aafi	Other	Q5110
Releuko	filgrastim-ayow	Other	Q5125
Zarxio	filgrastim-sndz	Other	Q5101
Nypozi	filgrastim-txid	Other	Q5148
Efudex	fluorouracil	Other	J8999
Eulexin	flutamide	Oral	S0175
Tavalisse	fostamatinib	Oral	J8499
Fruzaqla	Fruquintinib	Oral	J8999

Lytgobi	futibatinib	Oral	J8999
Iressa	gefitinib	Oral	J8565
Infugem	gemcitabine	IV	J9198
Mylotarg	gemtuzumab ozogamicin	IV	J9203
Xospata	gilteritinib	Oral	J8999
Daurismo	glasdegib	Oral	J8999
Columvi	glofitamab	IV	J9286
Sancuso	granisetron	Patch	J3490
Hydrea	hydroxyurea	Oral	J8999
Imbruvica	ibrutinib	Oral	J8999
Zydelig	idelalisib	Oral	J8999
Gleevec	imatinib	Oral	J8999
Imkeldi	imatinib	Oral	J8999
Rytelo	imetelstat	IV	J0870
Zyclara	imiquimod	Other	J9999
Privigen	immunoglobulin G	IV	J1459
Alyglo	immunoglobulin G	IV	J1552
Asceniv	immunoglobulin G	IV	J1554
Bivigam	immunoglobulin G	IV	J1556
Gammaplex	immunoglobulin G	IV	J1557
Gammaked	immunoglobulin G	IV	J1561
Gamunex	immunoglobulin G	IV	J1561
Gammagard S/D	immunoglobulin G	IV	J1566
Octagam	immunoglobulin G	IV	J1568
Gammagard	immunoglobulin G	IV	J1569
Flebogamma	immunoglobulin G	IV	J1572
Panzyga	immunoglobulin G	IV	J1576
Yimmugo	immunoglobulin G	IV	J1599
Itovebi	inavolisib	Oral	J8999
Truseltiq	infigratinib	Oral	J8999
Besponsa	inotuzumab ozogamicin	IV	J9229
Actimmune	interferon gamma-1b	Other	J9216
Yervoy	ipilimumab	IV	J9228
Onivyde	irinotecan hydrochloride liposome	IV	J9205
Sarclisa	isatuximab	IV	J9227
Tibsovo	ivosidenib	Oral	J8999
IXEMPRA	ixabepilone	IV	J9207
Ninlaro	ixazomib	Oral	J8999
Tykerb	lapatinib	Oral	J8999
Vitrakvi	larotrectinib	Oral	J8999
Lazcluze	lazertinib	Oral	J8999

Revlimid	lenalidomide	Oral	J8999
Lenvima	lenvatinib	Oral	J8999
Femara	letrozole	Oral	J8999
Lupron	leuprolide	Other	J1950
Camcevi	leuprolide	Other	J1952
505(b)(2) - Cipla	leuprolide	Other	J1954
Eligard	leuprolide	Other	J9217
Lupron	leuprolide	Other	J9217
Amtagvi	Lifileucel	IV	J9999
Zynlonta	loncastuximab tesirine	IV	J9359
Lorbrena	lorlatinib	Oral	J8999
Zepzelca	lurbinectedin	IV	J9223
Reblozyl	luspatercept	IV	J0896
Pluvicto	lutetium Lu 177 vipivotide tetraxetan	IV	A9607
Margenza	margetuximab	IV	J9353
Valchlor	mechlorethamine	Other	J9999
Alkeran	melphalan	Oral	J8600
Purixan	mercaptopurine	Oral	J8999
Trexall	methotrexate	Oral	J8610
Jylamvo	methotrexate	Oral	J8611
Xatmep	methotrexate	Oral	J8612
Demser	metyrosine	Oral	J8499
Rydapt	midostaurin	Oral	J8999
Gomekli	mirdametinib	PO	J8999
Elahere	mirvetuximab soravtansine	IV	J9063
Poteligeo	mogamulizumab	IV	J9204
Ojjaara	Momelotinib	Oral	J8999
Lunsumio	mosunetuzumab	IV	J9350
Lumoxiti	moxetumomab pasudotox	IV	J9313
Adstiladrin	nadofaragene firadenovec	Other	J9029
Danyelza	naxitamab	IV	J9348
Portrazza	necitumumab	IV	J9295
Nerlynx	neratinib	Oral	J8999
Akynzeo	netupitant / palonosetron	IV	J1454
Akynzeo	netupitant / palonosetron	Oral	J8655
Cipla 505(b)(2)	nilotinib	Oral	J8999
Danziten	nilotinib	Oral	J8999
Tasigna	nilotinib	Oral	J8999
Nilandron	nilutamide	Oral	J8999
Zejula	niraparib	Oral	J8999
Akeega	niraparib and abiraterone acetate	Oral	J8999

Ogsiveo	Nirogacestat	Oral	J8999
Opdivo	nivolumab	IV	J9299
Opdualag	nivolumab / relatlimab	IV	J9298
Opdivo Qvantig	nivolumab and hyaluronidase	Other	J9999
Anktiva	Nogapendekin alfa inbakicept	Other	J9028
Gazyva	obinutuzumab	IV	J9301
Bynfezia	octreotide	Other	J3490
Arzerra	ofatumumab	IV	J9302
Lynparza	olaparib	Oral	J8999
Rezlidhia	olutasidenib	Oral	J8999
Synribo	omacetaxine mepesuccinate	IV	J9262
Tagrisso	osimertinib	Oral	J8999
Vonjo	pacritinib	Oral	J8999
Ibrance	palbociclib	Oral	J8999
Vectibix	panitumumab	IV	J9303
Votrient	pazopanib	Oral	J8999
Oncaspar	pegaspargase	IV	J9266
Neulasta	pegfilgrastim	Other	J2506
Nyvepria	pegfilgrastim-apgf	Other	Q5122
Ziextenzo	pegfilgrastim-bmez	Other	Q5120
Udenyca	pegfilgrastim-cbqv	Other	Q5111
Stimufend	pegfilgrastim-fpgk	Other	Q5127
Fulphila	pegfilgrastim-jmdb	Other	Q5108
Fylnetra	pegfilgrastim-pbbk	Other	Q5130
Pegasys	peginterferon alfa-2a	Other	J3590
Keytruda	pembrolizumab	IV	J9271
Pemfexy	pemetrexed	IV	J9304
Pemrydi RTU	pemetrexed	IV	J9324
Pemazyre	pemigatinib	Oral	J8999
Penpulimab-kcqx	penpulimab	IV	J9999
Perjeta	pertuzumab	IV	J9306
Phesgo	pertuzumab and trastuzumab and hyaluronidase-zzxf	IV	J9316
Turalio	pexidartinib	Oral	J8999
Dibenzyline	phenoxybenzamine	Oral	J8499
Elidel	Pimecrolimus	Other	J3490
Jaypirca	pirtobrutinib	Oral	J8999
Polivy	polatuzumab vedotin	IV	J9309
Pomalyst	pomalidomide	Oral	J8999
Iclusig	ponatinib	Oral	J8999
Folotyn	pralatrexate	IV	J9307

Gavreto	pralsetinib	Oral	J8999
Matulane	procarbazine	Oral	J8999
Jelmyto	Pyelocalyceal Mitomycin	Other	J9281
Vanflyta	quizartinib	Oral	J8999
Cyramza	ramucirumab	IV	J9308
Elitek	rasburicase	IV	J2783
Stivarga	regorafenib	Oral	J8999
Orgovyx	relugolix	Oral	J8999
Augtyro	Repotrectinib	Oral	J8999
Zynyz	retifanlimab	IV	J9345
Revuforj	revumenib	Oral	J8999
Kisqali	ribociclib	Oral	J8999
Kisqali/Femara Pack	Ribociclib/Letrozole Pack	Oral	J8999
Qinlock	ripretinib	Oral	J8999
Rituxan	rituximab	IV	J9312
Rituxan Hycela	rituximab and hyaluronidase	Other	J9311
Truxima	rituximab-abbs	IV	Q5115
Riabni	rituximab-arrx	IV	Q5123
Ruxience	rituximab-pvvr	IV	Q5119
Varubi	rolapitant	Oral	J8670
505(b)(2) - Teva	romidepsin	IV	J9318
Istodax	romidepsin	IV	J9319
Nplate	romiplostim	IV	J2802
Besremi	ropeginterferon alfa-2b	Other	J9999
Rubraca	rucaparib	Oral	J8999
Jakafi	ruxolitinib	Oral	J8999
Trodelvy	sacituzumab	IV	J9317
Leukine	sargramostim	IV	J2820
Xpovio	selinexor	Oral	J8999
Retevmo	selpercatinib	Oral	J8999
Koselugo	selumetinib	Oral	J8999
Sylvant	siltuximab	IV	J2860
Provenge	sipuleucel-T	IV	Q2043
Generic	Sirolimus	Oral	J7520
Pedmark	sodium thiosulfate	IV	J0208
Odomzo	sonidegib	Oral	J8999
Nexavar	sorafenib	Oral	J8999
Lumakras	sotorasib	Oral	J8999
Sutent	sunitinib	Oral	J8999
Monjuvi	tafasitamab	IV	J9349
Elzonris	tagraxofusp	IV	J9269

Talzenna	talazoparib	Oral	J8999
Imlygic	talimogene laherparepvec	Other	J9325
Talvey	talquetamab	Other	J3055
Soltamox	tamoxifen	Oral	J8999
Imdelltra	Tarlatamab	IV	J9026
Tazverik	tazemetostat	Oral	J8999
Kimmtrak	tebentafusp	IV	J9274
Tecvayli	teclistamab	Other	J9380
Xermelo	telotristat ethyl	Oral	J8999
Temodar	temozolomide	Oral	J8700
Temodar	temozolomide	IV	J9328
Generic	teniposide	IV	Q2017
Tepmetko	tepotinib	Oral	J8999
Thalomid	thalidomide	Oral	J8999
Tabloid	thioguanine	Oral	J8999
Tevimbra	Tislelizumab	IV	J9329
Tivdak	tisotumab	IV	J9273
Fotivda	tivozanib	Oral	J8999
Actemra	Tocilizumab	IV	J3262
Tofidence	tocilizumab-bavi	IV	Q5133
Tyenne	Tocilizumab-aazg	IV	Q5135
Loqtorzi	Toripalimab	IV	J3263
Ojemda	Tovorafenib	Oral	J8999
Yondelis	trabectedin	IV	J9352
Mekinist	trametinib	Oral	J8999
Herceptin	trastuzumab	IV	J9355
Herceptin Hylecta	trastuzumab and hyaluronidase	Other	J9356
Kanjinti	trastuzumab-anns	IV	Q5117
Ogivri	trastuzumab-dkst	IV	Q5114
Ontruzant	trastuzumab-dttb	IV	Q5112
Herzuma	trastuzumab-pkrb	IV	Q5113
Trazimera	trastuzumab-qyyp	IV	Q5116
Hercessi	trastuzumab-strf	IV	Q5146
Imjudo	tremelimumab	IV	J9347
Lonsurf	Trifluridine	Oral	J8999
Cosela	trilaciclib	IV	J1448
Tukysa	tucatinib	Oral	J8999
Valstar	valrubicin	Other	J9357
Caprelsa	vandetanib	Oral	J8999
Zelboraf	vemurafenib	Oral	J8999
Venclexta	venetoclax	Oral	J8999

Venclexta Escalation Pack	Venetoclax Starter Pack	Oral	J8999
Romvimza	vimseltinib	Oral	J8999
Erivedge	vismodegib	Oral	J8999
Voranigo	vorasidenib	Oral	J8999
Zolinza	vorinostat	Oral	J8999
Ziihera	zanidatamab	IV	J9999
Brukinsa	zanubrutinib	Oral	J8999
Bizengri	zenocutuzumab	IV	J9999
Zaltrap	ziv-aflibercept	IV	J9400
Vyloy	zolbetuximab	IV	J9999

RESOURCES AND QUESTIONS

To submit a prior authorization request for radiation therapy and oncology drugs to Blue KC, follow these steps:

- Log in at Providers.BlueKC.com and then click on "Prior Authorization" at the top of the screen or select "Prior Authorization" under "Action Center" on the home page.
- Enter the Member ID and Date of Service to submit prior authorizations.
- Select a code.
- If that code is designated to OncoHealth, you will be directed to the OncoHealth Portal to complete your entry of electronic prior authorization.
- **Note:** If you need log-in credentials for our Blue KC Provider Portal, click "Create Account" on the log-in page at Providers.BlueKC.com. For more assistance on creating an account, go to Providers.BlueKC.com/Resources/Tutorials.

For questions, contact the Blue KC Provider Hotline at (800) 456-3759 or (816) 395-3929.

Please use the following information to contact OncoHealth:

- To submit fax authorization requests to OncoHealth: **800-264-6128**
- For phone authorization requests: **888-916-2616** (Please follow the prompts)
- To submit medical records: **800-264-6128** (Include OncoHealth's reference number on the fax cover)
- To contact OncoHealth, please email the Client Support Team at clientsupport@oncohealth.us or call **888-916-2616**.
- To learn more information about OncoHealth, please visit www.oncohealth.us.

A copy of this notice can be found in the Recent News section on the Blue KC Provider Portal home page at Providers.BlueKC.com.

Should you have further questions, please contact the Blue KC Provider Hotline Monday through Friday from 8 a.m. – 6 p.m. CT at (800) 456-3759 or (816) 395-3929 for our Commercial line of business or (866)859-3822 for our Affordable Care Act Provider Hotline.

Thank you for your partnership in providing quality care to our members.