

Gene Therapy Benefit Administration Medications List
Last Updated – January 10, 2025

GCIT Product Name	Site of Administration	Frequency of Infusion	GCIT Clinical Name	HCPC Billing Code (C, J, Q Code)	NDC Code(s)	Medical Indication
BeqVez	Outpatient	Single	fidanacogene elaparvovec	J1414	00069-2004-04; 00069-2004-14; 00069-2005-05; 00069-2005-15; 00069-2006-06; 00069-2006-16; 00069-2007-07; 00069-2007-17	Hemophilia B
Elevidys	Outpatient	Single	delandistrogene moxeparvovec-roki)	J1413	60923-0501-10; 60923-0502-11; 60923-0503-12; 60923-0504-13; 60923-0505-14; 60923-0506-15; 60923-0507-16; 60923-0508-17; 60923-0509-18; 60923-0510-19; 60923-0511-20; 60923-0512-21; 60923-0513-22; 60923-0514-23; 60923-0515-24; 60923-0516-25; 60923-0517-26; 60923-0518-27; 60923-0519-28; 60923-0520-29; 60923-0521-30; 60923-0522-31; 60923-0523-32; 60923-0524-33; 60923-0525-34; 60923-0526-35; 60923-0527-36; 60923-0528-37; 60923-0529-38; 60923-0530-39; 60923-0531-40; 60923-0532-41; 60923-0533-42; 60923-0534-43; 60923-0535-44; 60923-0536-45; 60923-0537-46; 60923-0538-47; 60923-0539-48; 60923-0540-49; 60923-0541-50; 60923-0542-51; 60923-0543-52; 60923-0544-53; 60923-0545-54; 60923-0546-55; 60923-0547-56; 60923-0548-57; 60923-0549-58; 60923-0550-59; 60923-0551-60; 60923-0552-61; 60923-0553-62; 60923-0554-63; 60923-0555-64; 60923-0556-65; 60923-0557-66; 60923-0558-67; 60923-0559-68; 60923-0560-69; 60923-0561-70	Treatment of ambulatory patients with Duchenne Muscular Dystrophy (DMD)

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Hemgenix	Outpatient	Single	etranacogene dezaparvovec	J1411	00053-0100-10; 00053-0110-11; 00053-0120-12; 00053-0130-13; 00053-0140-14; 00053-0150-15; 00053-0160-16; 00053-0170-17; 00053-0180-18; 00053-0190-19; 00053-0200-20; 00053-0210-21; 00053-0220-22; 00053-0230-23; 00053-0240-24; 00053-0250-25; 00053-0260-26; 00053-0270-27; 00053-0280-28; 00053-0290-29; 00053-0300-30; 00053-0310-31; 00053-0320-32; 00053-0330-33; 00053-0340-34; 00053-0350-35; 00053-0360-36; 00053-0370-37; 00053-0380-38; 00053-0390-39; 00053-0400-40; 00053-0410-41; 00053-0420-42; 00053-0430-43; 00053-0440-44; 00053-0450-45; 00053-0460-46; 00053-0470-47; 00053-0480-48	Hemophilia B
Lenmeldy	Outpatient	Single	atidarsagene autotemcel	J3490, J3590, C9399 (temp codes)	83222-0200-01	Treatment of children with pre-symptomatic late infantile, pre-symptomatic early juvenile or early symptomatic early juvenile metachromatic leukodystrophy (MLD)

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Luxturna	Outpatient	Single	voretigene neparvovec-rzyl	J3398	71394-0415-01; 71394-0065-01	Inherited Retinal Dystrophy (RPE65)
Roctavian	Outpatient	Single	valoctogogene roxaparvovec	J1412	68135-0927-01; 68135-0927-48	Treatment of severe hemophilia A in adults
Zolgensma	Outpatient	Single	onasemnogene abeparvovec-xioi	J3399	71894-0120-02; 71894-0121-03; 71894-0122-03; 71894-0123-03; 71894-0124-04; 71894-0125-04; 71894-0126-04; 71894-0127-05; 71894-0128-05; 71894-0129-05; 71894-0130-06; 71894-0131-06; 71894-0132-06; 71894-0133-07; 71894-0134-07; 71894-0135-07; 71894-0136-08; 71894-0137-08; 71894-0138-08; 71894-0139-09; 71894-0140-09; 71894-0141-09; 71894-0142-10; 71894-0143-10; 71894-0144-10; 71894-0145-11; 71894-0146-11; 71894-0147-11; 71894-0148-12; 71894-0149-12; 71894-0150-12; 71894-0151-13; 71894-0152-13; 71894-0153-13; 71894-0154-14; 71894-0155-14; 71894-0156-14	Spinal Muscular Atrophy (SMA)
Spinraza	Outpatient	Multi	nusinersen	J2326	64406-0058-01	Spinal Muscular Atrophy (SMA)

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Kebilidi	Outpatient/Inpatient	Single	eladocogene exuparvovec-tneq	J3490, J3590, C9399 (temp codes)	52856-0601-01; 52856-0601-11	Aromatic L-amino acid decarboxylase (AADC) deficiency
Casgevy	Inpatient	Single	beta-thalassemia	J3392	51167-0290-01; 51167-0290-09	Transfusion dependent beta-thalassemia
Casgevy	Inpatient	Single	exagamlogene autotemcel	J3392	51167-0290-01; 51167-0290-09	Treatment of sickle cell disease in patients ages 12 years and older with recurrent vaso-occlusive crises
Lyfgenia	Inpatient	Single	lovotibeglogene autotemcel	J3394	73554-1111-01	Treatment of sickle cell disease in patients ages 12 years and older with recurrent vaso-occlusive events
Skysona	Inpatient	Single	elivaldogene autotemcel	J3490, J3590, C9399 (temp codes)	73554-2111-01	Slow the progression of neurologic dysfunction in boys 4-17 years of age with early, active cerebral adrenoleukodystrophy (CALD)

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Zynteglo	Inpatient	Single	betibeglogene autotemcel	J3393	73554-3111-01	Treatment of adult and pediatric patients with B-thalassemia who require regular red blood cell (RBC) transfusions.