

2010 Windsor Medicare Extra Part B Diagnosis Drugs ONLY**

Brand Name	Generic Name	CODE
Amevive	ALEFACEPT	J0215
Aranesp	DARBEPOETIN ALFA	J0882
B-12 Injection	CYANOCOBALAMIN	J3420
Bexxar	TOSITUMOMAB AND IODINE	77300, 78804, 79403, A9544, A9545
Campath	ALEMTUZUMAB	J9010
Campostar	IRINOTECAN	J9206
Cerezyme	IMIGLUCERASE	J1785
Doxil	DOXORUBICIN	J9001
Elaprased	IDURSULFASE	J1743
Ellence	EPIRUBICIN	J9178
Eloxatin	OXALIPLATIN	J9263
Epogen, Procrit	EPOETIN ALFA	J0886
Erbix	CETUXIMAB	J9055
Faslodex	FULVESTRANT	J9395
Feraheme	FERUMOXYTOL	Q0139
Gemzar	GEMCITABINE	J9201
Ixempra	IXABEPILONE	J9207
Leukine	SARGRAMOSTIM(GM-CSF)	J2820
Neumega	OPRELVEKIN	J2355
Orthoclone OKT3	MUROMONAB-CD3	J7505
Prolastin, Zemira, Aralast	ALPHA1-PROTEINASE INHIBITOR (HUMAN)	J0256
Rituxan	RITUXIMAB	96413, 96415, J9310
Sandostatin LAR Depot	OCTREOTIDE DEPOT	J2353
Soliris	ECULIZUMAB	J1300
Supprekin LA, Vantas	HISTRELIN IMPLANT	J9226, J9225
Taxol, Onxol, Abraxane, Paxene-B	PACLITAXEL	J9264
Taxotere	DOCETAXEL	J9170, J9171
Torisel	TEMSIROLIMUS	J9330
Treanda	BENDAMUSTINE	J9033
Velcade	BORTEZOMIB	J9041
Viadur	LEUPROLIDE ACETATE	J9219
Vidaza	AZACITIDINE	96401, J9025
Visudyne	VERTEPORFIN	J3395
Zevalin	IBRITUMOMAB	78804, 79403, A9542, A9543
Zoladex	GOSERELIN ACETATE	J9202

** If the correct diagnosis is not on the claim, then Prior Authorization is required. If drug is being administered in the Physician Office, the drug must be provided by the office.