Texas Prior Authorization Program
Clinical Criteria

Drug/Drug Class

Pulmonary Fibrosis Agents

Clinical Criteria Information included in this Document

Esbriet (Pirfenidone)

- Drugs requiring prior authorization: the list of drugs requiring prior authorization for this clinical criteria
- Prior authorization criteria logic: a description of how the prior authorization request will be evaluated against the clinical criteria rules
- Logic diagram: a visual depiction of the clinical criteria logic
- Supporting tables: a collection of information associated with the steps within the criteria (diagnosis codes, procedure codes, and therapy codes); provided when applicable
- References: clinical publications and sources relevant to this clinical criteria

Jascayd (Nerandomilast)

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Ofev (Nintedanib)

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  Note: Click the hyperlink to navigate directly to that section.

Revision Notes

Initial publication and presentation to the DUR Board

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Esbriet (Pirfenidone)

Drugs Requiring Prior Authorization

The listed GCNs may not be an indication of Texas Medicaid Formulary coverage. To learn the current formulary coverage, visit txvendordrug.com/searches/formulary-drug-search.

Drugs Requiring Prior Authorization	
Label Name	**GCN**
ESBRIET 267 MG CAPSULE	34553
ESBRIET 267 MG TABLET	42903
ESBRIET 801 MG TABLET	42905

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Esbriet (Pirfenidone)

Clinical Criteria Logic

1. Is the client greater than or equal to (≥) 18 years of age?

   [ ] Yes – Go to #2

   [ ] No – Deny

2. Does the client have a diagnosis of idiopathic pulmonary fibrosis (IPF) in past medical and/or pharmacy claims history?

   [ ] Yes – Go to #3

   [ ] No – Deny

3. Will the client have concurrent therapy with moderate or strong inhibitors of both CYP1A2 and one or more other CYP isoenzymes (i.e., CYP2C9, 2C19, 2D6, and 2E1) involved in the metabolism of Esbriet?

   [ ] Yes – Deny

   [ ] No – Go to #4

4. Will the client have concurrent therapy with a strong CYP1A2 inducer?

   [ ] Yes – Deny

   [ ] No – Go to #5

5. Does the client have a diagnosis of severe hepatic impairment (Child Pugh Class C) or end-stage renal disease (ESRD) requiring dialysis in past medical and/or pharmacy claims history?

   [ ] Yes – Deny

   [ ] No – Go to #6

6. Is the requested dose less than or equal to (≤) 2,403 mg daily?

   [ ] Yes – Approve (365 days)

   [ ] No – Deny

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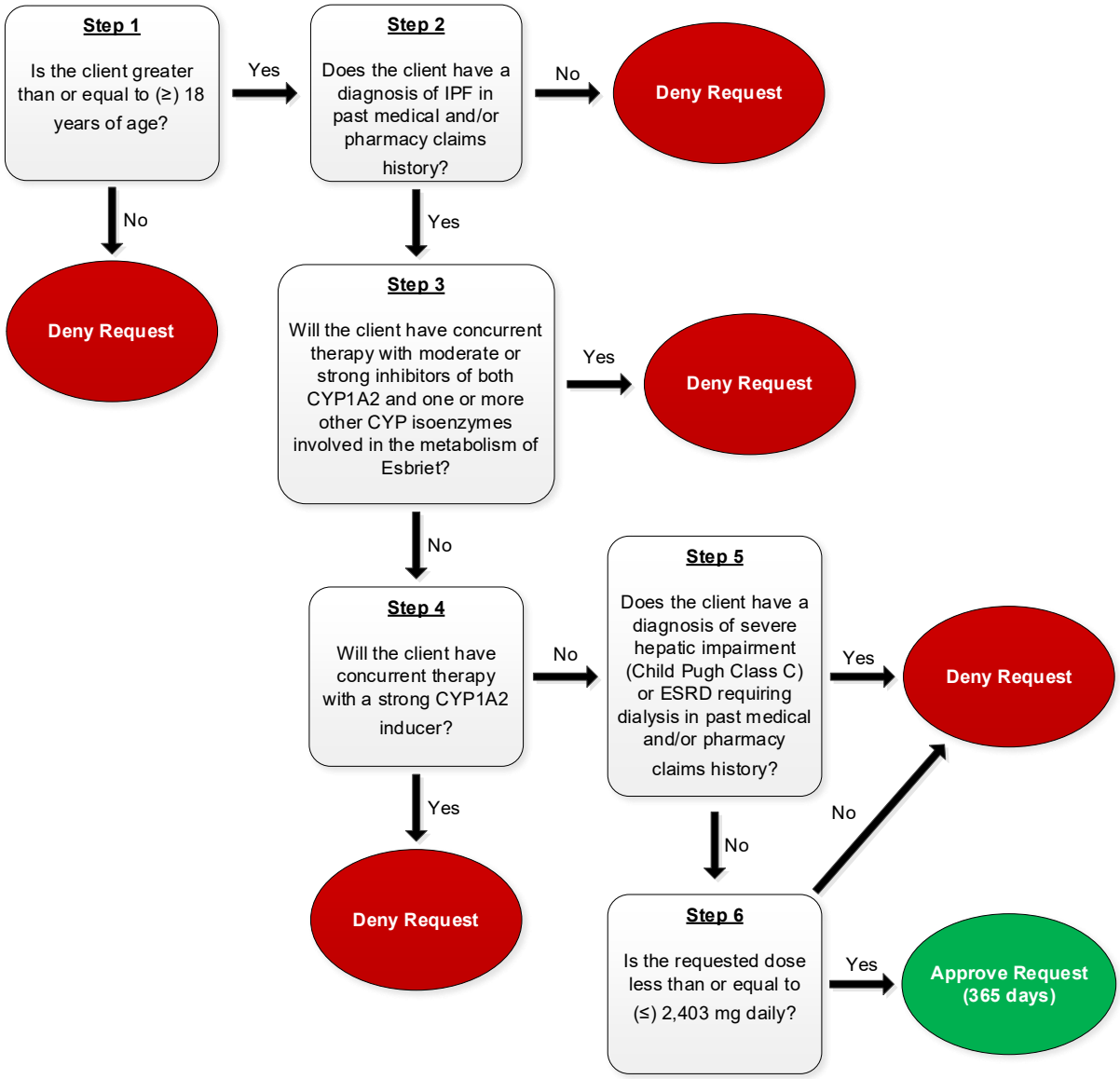
Esbriet (Pirfenidone)

Clinical Criteria Logic Diagram



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Drugs Requiring Prior Authorization

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Drugs Requiring Prior Authorization	
Label Name	**GCN**
JASCAYD 9 MG TABLET	58436
JASCAYD 18 MG TABLET	58437

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Clinical Criteria Logic

1. Is the client greater than or equal to (≥) 18 years of age?

   [ ] Yes – Go to #2

   [ ] No – Deny

2. Does the client have a diagnosis of idiopathic pulmonary fibrosis (IPF) or progressive pulmonary fibrosis in past medical and/or pharmacy claims history?

   [ ] Yes – Go to #3

   [ ] No – Deny

3. Will the client have concurrent therapy with a moderate or strong CYP3A4 inducer?

   [ ] Yes – Deny

   [ ] No – Go to #4

4. Does the client have a diagnosis of severe hepatic impairment (Child Pugh Class C) or end-stage renal disease (ESRD) in past medical and/or pharmacy claims history?

   [ ] Yes – Deny

   [ ] No – Go to #5

5. Is the requested dose less than or equal to (≤) 36 mg daily?

   [ ] Yes – Approve (365 days)

   [ ] No – Deny

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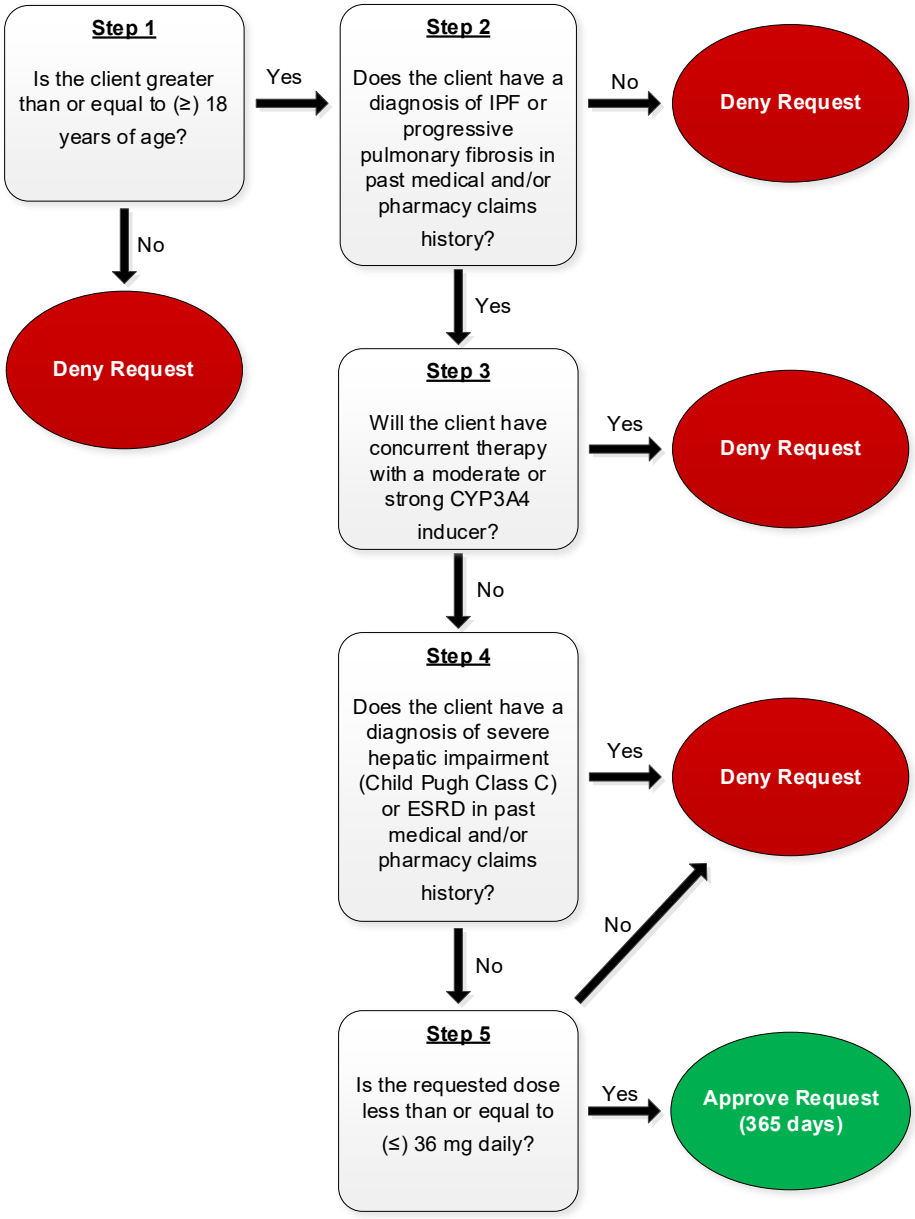
Jascayd (Nerandomilast))

Clinical Criteria Logic Diagram



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Drugs Requiring Prior Authorization

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Drugs Requiring Prior Authorization	
Label Name	**GCN**
OFEV 100 MG CAPSULE	37272
OFEV 150 MG CAPSULE	37273

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Ofev (Nintedanib)

Clinical Criteria Logic

1. Is the client greater than or equal to (≥) 18 years of age?

   [ ] Yes – Go to #2

   [ ] No – Deny

2. Does the client have a diagnosis of idiopathic pulmonary fibrosis (IPF), chronic fibrosing interstitial lung diseases (ILDs) with a progressive phenotype, or systemic sclerosis-associated interstitial lung disease (SSc-ILD) in past medical and/or pharmacy claims history?

   [ ] Yes – Go to #3

   [ ] No – Deny

3. Does the client have a diagnosis of moderate (Child Pugh Class B) or severe (Child Pugh Class C) hepatic impairment in past medical and/or pharmacy claims history?

   [ ] Yes – Deny

   [ ] No – Go to #4

4. Is the requested dose less than or equal to (≤) 300 mg daily?

   [ ] Yes – Approve (365 days)

   [ ] No – Deny

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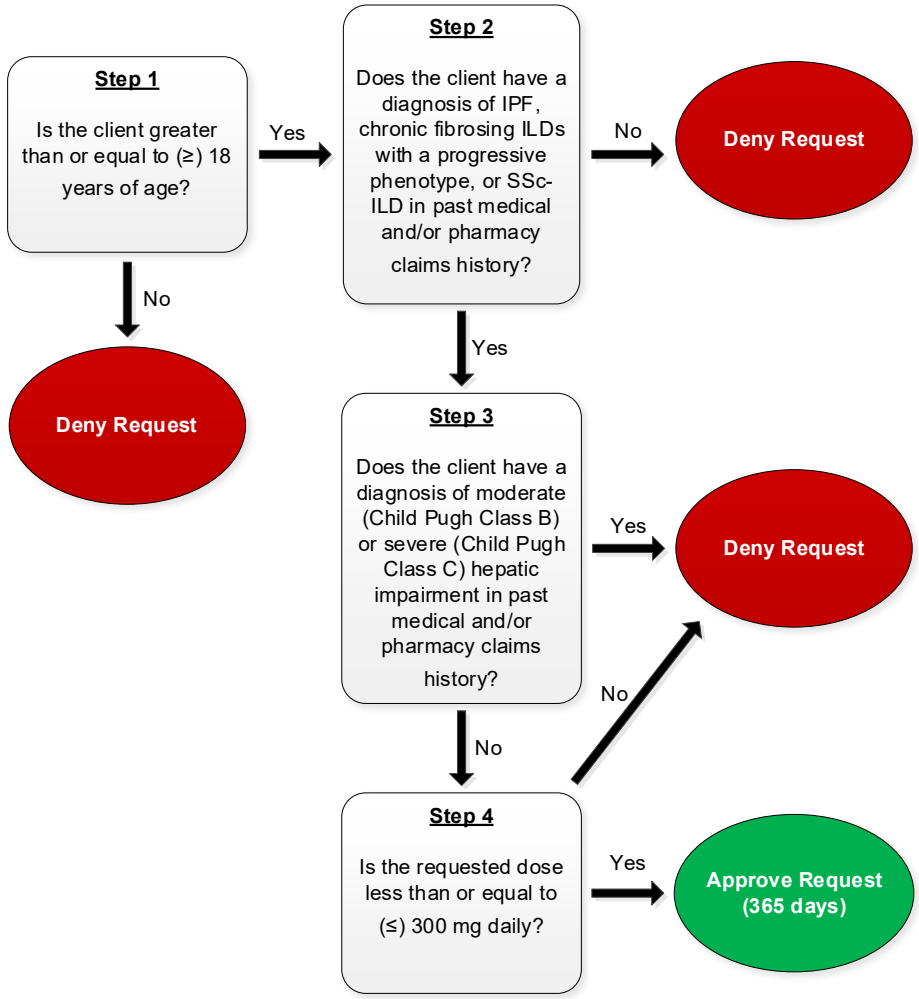
Ofev (Nintedanib)

Clinical Criteria Logic Diagram



PAXPRESS™

Pulmonary Fibrosis Agents

Clinical Criteria Supporting Tables

CYP1A2 Inhibitor	
GCN	**Label Name**
43790	ACYCLOVIR 200 MG CAPSULE
43731	ACYCLOVIR 200 MG/5 ML SUSP
13724	ACYCLOVIR 400 MG TABLET
13721	ACYCLOVIR 800 MG TABLET
07070	ALLOPURINOL 100 MG TABLET
07071	ALLOPURINOL 300 MG TABLET
46750	CIMETIDINE 200MG TABLET
46751	CIMETIDINE 300MG TABLET
46740	CIMETIDINE 300MG/5ML SOLN
46752	CIMETIDINE 400MG TABLET
46753	CIMETIDINE 800MG TABLET
47057	CIPRO 10% SUSPENSION
47056	CIPRO 5% SUSPENSION
20315	CIPROFLOXACIN ER 1000MG TAB
18898	CIPROFLOXACIN ER 500MG TAB
47050	CIPROFLOXACIN HCL 250MG TAB
47051	CIPROFLOXACIN HCL 500MG TAB
47052	CIPROFLOXACIN HCL 750MG TAB
52121	CIPROFLOXACIN-D5W 200MG/100ML
52122	CIPROFLOXACIN-D5W 400MG/200ML
99481	FLUVOXAMINE ER 100MG CAPSULE

CYP1A2 Inhibitor	
GCN	**Label Name**
99482	FLUVOXAMINE ER 150MG CAPSULE
16349	FLUVOXAMINE MALEATE 100MG TAB
16347	FLUVOXAMINE MALEATE 25MG TAB
16348	FLUVOXAMINE MALEATE 50MG TAB
13302	METHOXSALEN 10 MG SOFTGEL
12210	MEXILETINE 150 MG CAPSULE
12211	MEXILETINE 200 MG CAPSULE
12212	MEXILETINE 250 MG CAPSULE
32112	TRANDOLAPR-VERAPAM ER 1-240 MG
32111	TRANDOLAPR-VERAPAM ER 2-180 MG
32113	TRANDOLAPR-VERAPAM ER 2-240 MG
32114	TRANDOLAPR-VERAPAM ER 4-240 MG
02341	VERAPAMIL 120 MG TABLET
47110	VERAPAMIL 40 MG TABLET
02342	VERAPAMIL 80 MG TABLET
03003	VERAPAMIL ER 120 MG CAPSULE
32472	VERAPAMIL ER 120 MG TABLET
03001	VERAPAMIL ER 180 MG CAPSULE
32471	VERAPAMIL ER 180 MG TABLET
03002	VERAPAMIL ER 240 MG CAPSULE
32470	VERAPAMIL ER 240 MG TABLET
94122	VERAPAMIL ER PM 100 MG CAPSULE
94123	VERAPAMIL ER PM 200 MG CAPSULE
94124	VERAPAMIL ER PM 300 MG CAPSULE

CYP1A2 Inhibitor	
GCN	**Label Name**
03003	VERAPAMIL SR 120 MG CAPSULE
03001	VERAPAMIL SR 180 MG CAPSULE
03002	VERAPAMIL SR 240 MG CAPSULE
03004	VERAPAMIL SR 360 MG CAPSULE
03003	VERELAN 120 MG CAP PELLET
03001	VERELAN 180 MG CAP PELLET
03002	VERELAN 240 MG CAP PELLET
03004	VERELAN 360 MG CAP PELLET
94122	VERELAN PM 100 MG CAP PELLET
94123	VERELAN PM 200 MG CAP PELLET
94124	VERELAN PM 300 MG CAP PELLET
30332	ZELBORAF 240 MG TABLET
98822	ZILEUTON ER 600 MG TABLET

CYP2C9, CYP2C19, CYP2D6, and CYP2E1 Inhibitors	
GCN	**Label Name**
10921	AMIODARONE HCL 100 MG TABLET
10920	AMIODARONE HCL 200 MG TABLET
12465	AMIODARONE HCL 400 MG TABLET
25434	AMIODARONE HCL POWDER
26198	APLENZIN ER 174 MG TABLET
16996	APLENZIN ER 348 MG TABLET
17050	APLENZIN ER 522 MG TABLET

CYP2C9, CYP2C19, CYP2D6, and CYP2E1 Inhibitors	
GCN	**Label Name**
24906	APTIVUS 250 MG CAPSULE
90110	AZO-SULFAMETHOXAZOLE TABLET
16385	BUPROPION HCL 100 MG TABLET
16384	BUPROPION HCL 75 MG TABLET
22585	BUPROPION HCL POWDER
16387	BUPROPION HCL SR 100 MG TABLET
16386	BUPROPION HCL SR 150 MG TABLET
27901	BUPROPION HCL SR 150 MG TABLET
17573	BUPROPION HCL SR 200 MG TABLET
20317	BUPROPION HCL XL 150 MG TABLET
20318	BUPROPION HCL XL 300 MG TABLET
33081	BUPROPION HCL XL 450 MG TABLET
31611	CAPECITABINE 150 MG TABLET
31612	CAPECITABINE 500 MG TABLET
46750	CIMETIDINE 200 MG TABLET
46751	CIMETIDINE 300 MG TABLET
46740	CIMETIDINE 300 MG/5 ML CUP
46740	CIMETIDINE 300 MG/5 ML SOLN
46752	CIMETIDINE 400 MG TABLET
46753	CIMETIDINE 800 MG TABLET
90085	CIMETIDINE POWDER
21497	CINACALCET HCL 30 MG TABLET
21498	CINACALCET HCL 60 MG TABLET
21499	CINACALCET HCL 90 MG TABLET

CYP2C9, CYP2C19, CYP2D6, and CYP2E1 Inhibitors	
GCN	**Label Name**
12867	CVS ESOMEPRAZOLE MAG 20 MG CAP
44817	CVS OMEPRAZOLE DR 20 MG ODT
22228	CVS OMEPRAZOLE DR 20 MG TABLET
28664	CVS OMEPRAZOLE MAG DR 20 MG CP
26632	CVS OMEPRAZOLE-BICARB 20-1,100
29290	DEXTROMETHORPHAN-QUINIDN 20-10
60822	DIFLUCAN 10 MG/ML SUSPENSION
42190	DIFLUCAN 100 MG TABLET
42193	DIFLUCAN 150 MG TABLET
42191	DIFLUCAN 200 MG TABLET
60821	DIFLUCAN 40 MG/ML SUSPENSION
48192	DIFLUCAN 50 MG TABLET
02881	DISULFIRAM 250 MG TABLET
02882	DISULFIRAM 500 MG TABLET
97856	DISULFIRAM POWDER
59323	DULOXETINE HCL DR 120 MG CAP
23161	DULOXETINE HCL DR 20 MG CAP
23162	DULOXETINE HCL DR 30 MG CAP
38728	DULOXETINE HCL DR 40 MG CAP
23164	DULOXETINE HCL DR 60 MG CAP
59318	DULOXETINE HCL DR 80 MG CAP
59319	DULOXETINE HCL DR 90 MG CAP
36637	DULOXETINE HCL POWDER
44817	EQ OMEPRAZOLE DR 20 MG ODT

CYP2C9, CYP2C19, CYP2D6, and CYP2E1 Inhibitors	
GCN	**Label Name**
22228	EQ OMEPRAZOLE DR 20 MG TABLET
28664	EQ OMEPRAZOLE MAG DR 20.6 MG
12867	EQL ESOMEPRAZOLE MAG DR 20 MG
44817	EQL OMEPRAZOLE DR 20 MG ODT
22228	EQL OMEPRAZOLE DR 20 MG TABLET
99389	ESOMEPRAZOLE DR 10 MG PACKET
33128	ESOMEPRAZOLE DR 2.5 MG PACKET
98030	ESOMEPRAZOLE DR 20 MG PACKET
98031	ESOMEPRAZOLE DR 40 MG PACKET
33135	ESOMEPRAZOLE DR 5 MG PACKET
12867	ESOMEPRAZOLE MAG DR 20 MG CAP
12868	ESOMEPRAZOLE MAG DR 40 MG CAP
38021	FELBAMATE 400 MG TABLET
38022	FELBAMATE 600 MG TABLET
38020	FELBAMATE 600 MG/5 ML SUSP CUP
60822	FLUCONAZOLE 10 MG/ML SUSP
42190	FLUCONAZOLE 100 MG TABLET
42193	FLUCONAZOLE 150 MG TABLET
42191	FLUCONAZOLE 200 MG TABLET
60821	FLUCONAZOLE 40 MG/ML SUSP
42192	FLUCONAZOLE 50 MG TABLET
20732	FLUCONAZOLE POWDER
16357	FLUOXETINE 20 MG/5 ML SOLN CUP
16357	FLUOXETINE 20 MG/5 ML SOLUTION

CYP2C9, CYP2C19, CYP2D6, and CYP2E1 Inhibitors	
GCN	**Label Name**
12929	FLUOXETINE DR 90 MG CAPSULE
16353	FLUOXETINE HCL 10 MG CAPSULE
16356	FLUOXETINE HCL 10 MG TABLET
16354	FLUOXETINE HCL 20 MG CAPSULE
16359	FLUOXETINE HCL 20 MG TABLET
16355	FLUOXETINE HCL 40 MG CAPSULE
30817	FLUOXETINE HCL 60 MG TABLET
25409	FLUOXETINE HCL POWDER
89424	FLUVASTATIN ER 80 MG TABLET
00030	FLUVASTATIN SODIUM 20 MG CAP
00031	FLUVASTATIN SODIUM 40 MG CAP
99481	FLUVOXAMINE ER 100 MG CAPSULE
99482	FLUVOXAMINE ER 150 MG CAPSULE
16349	FLUVOXAMINE MALEATE 100 MG TAB
16347	FLUVOXAMINE MALEATE 25 MG TAB
16348	FLUVOXAMINE MALEATE 50 MG TAB
22228	FT OMEPRAZOLE DR 20 MG TABLET
25540	GEMFIBROZIL 600 MG TABLET
12867	GNP ESOMEPRAZOLE MAG DR 20 MG
22228	GNP OMEPRAZOLE DR 20 MG TABLET
28664	GNP OMEPRAZOLE MAG DR 20 MG CP
12867	GS ESOMEPRAZOLE MAG DR 20 MG
44817	GS OMEPRAZOLE DR 20 MG ODT
22228	GS OMEPRAZOLE DR 20 MG TABLET

CYP2C9, CYP2C19, CYP2D6, and CYP2E1 Inhibitors	
GCN	**Label Name**
26632	GS OMEPRAZOLE-BICARB 20-1,100
19908	IMATINIB MESYLATE 100 MG TAB
19907	IMATINIB MESYLATE 400 MG TAB
42590	KETOCONAZOLE 200 MG TABLET
96125	KETOCONAZOLE POWDER
43031	METRONIDAZOLE 250 MG TABLET
43032	METRONIDAZOLE 500 MG TABLET
12207	MIFEPRISTONE 200 MG TABLET
31485	MIFEPRISTONE 300 MG TABLET
32766	MIRABEGRON ER 25 MG TABLET
32767	MIRABEGRON ER 50 MG TABLET
49454	MIRABEGRON ER 8 MG/ML SUSP
28572	NAPROXEN-ESOMEPRAZ DR 375-20MG
28570	NAPROXEN-ESOMEPRAZ DR 500-20MG
02390	NICARDIPINE 20 MG CAPSULE
02391	NICARDIPINE 30 MG CAPSULE
20870	OLANZAPINE-FLUOXETINE 12-25 MG
20872	OLANZAPINE-FLUOXETINE 12-50 MG
98648	OLANZAPINE-FLUOXETINE 3-25 MG
20868	OLANZAPINE-FLUOXETINE 6-25 MG
20869	OLANZAPINE-FLUOXETINE 6-50 MG
92989	OMEPRAZOLE DR 10 MG CAPSULE
04348	OMEPRAZOLE DR 20 MG CAPSULE
44817	OMEPRAZOLE DR 20 MG ODT

CYP2C9, CYP2C19, CYP2D6, and CYP2E1 Inhibitors	
GCN	**Label Name**
22228	OMEPRAZOLE DR 20 MG TABLET
92999	OMEPRAZOLE DR 40 MG CAPSULE
28664	OMEPRAZOLE MAG DR 20 MG CAP
08454	OMEPRAZOLE MAG DR 20 MG TABLET
28664	OMEPRAZOLE MAG DR 20.6 MG CAP
19504	OMEPRAZOLE POWDER
26632	OMEPRAZOLE-BICARB 20-1,100 CAP
26634	OMEPRAZOLE-BICARB 20-1,680 PKT
26633	OMEPRAZOLE-BICARB 40-1,100 CAP
26635	OMEPRAZOLE-BICARB 40-1,680 PKT
17078	PAROXETINE ER 12.5 MG TABLET
17077	PAROXETINE ER 25 MG TABLET
17079	PAROXETINE ER 37.5 MG TABLET
16364	PAROXETINE HCL 10 MG TABLET
16366	PAROXETINE HCL 20 MG TABLET
16367	PAROXETINE HCL 30 MG TABLET
16368	PAROXETINE HCL 40 MG TABLET
34876	PAROXETINE MESYLATE 7.5 MG CAP
16364	PAXIL 10 MG TABLET
16369	PAXIL 10 MG/5 ML SUSPENSION
16366	PAXIL 20 MG TABLET
16367	PAXIL 30 MG TABLET
16368	PAXIL 40 MG TABLET
17078	PAXIL CR 12.5 MG TABLET

CYP2C9, CYP2C19, CYP2D6, and CYP2E1 Inhibitors	
GCN	**Label Name**
17077	PAXIL CR 25 MG TABLET
17079	PAXIL CR 37.5 MG TABLET
16353	PROZAC 10 MG PULVULE
16354	PROZAC 20 MG PULVULE
22228	PUB OMEPRAZOLE DR 20 MG TABLET
08454	QC OMEPRAZOLE MAG DR 20 MG TAB
01011	QUINIDINE GLUC 324 MG TAB SA
01011	QUINIDINE GLUC ER 324 MG TAB
01060	QUINIDINE SULF ER 300 MG TAB
01053	QUINIDINE SULFATE 200 MG TAB
01055	QUINIDINE SULFATE 300 MG TAB
01340	QUINIDINE SULFATE CRYSTALS
21497	SENSIPAR 30 MG TABLET
21498	SENSIPAR 60 MG TABLET
21499	SENSIPAR 90 MG TABLET
16382	SERTRALINE 150 MG CAPSULE
16376	SERTRALINE 20 MG/ML ORAL CONC
16383	SERTRALINE 200 MG CAPSULE
16375	SERTRALINE HCL 100 MG TABLET
16373	SERTRALINE HCL 25 MG TABLET
16374	SERTRALINE HCL 50 MG TABLET
15506	SERTRALINE HCL POWDER
26263	SORAFENIB 200 MG TABLET
41563	SULFAMETHOXAZOLE 500 MG TAB

CYP2C9, CYP2C19, CYP2D6, and CYP2E1 Inhibitors	
GCN	**Label Name**
41563	SULFAMETHOXAZOLE 500 MG TABS
90233	SULFAMETHOXAZOLE POWDER
90150	SULFAMETHOXAZOLE W/TMP SUSP
90163	SULFAMETHOXAZOLE/TMP DS TAB
90161	SULFAMETHOXAZOLE/TMP SS TAB
90163	SULFAMETHOXAZOLE/TMP TABLET
34942	SULFAMETHOXAZOLE-TMP 20 ML CUP
34939	SULFAMETHOXAZOLE-TMP 5 ML CUP
90163	SULFAMETHOXAZOLE-TMP DS TAB
90163	SULFAMETHOXAZOLE-TMP DS TABLET
90161	SULFAMETHOXAZOLE-TMP SS TAB
90161	SULFAMETHOXAZOLE-TMP SS TABLET
90150	SULFAMETHOXAZOLE-TMP SUSP
22228	SW OMEPRAZOLE DR 20 MG TABLET
60823	TERBINAFINE HCL 250 MG TABLET
17270	VALPROIC ACID 250 MG CAPSULE
17270	VALPROIC ACID 250 MG TABLET
30965	VALPROIC ACID 250 MG/5 ML CUP
30987	VALPROIC ACID 250 MG/5 ML ORAL
17280	VALPROIC ACID 250 MG/5 ML SOLN
17280	VALPROIC ACID 250 MG/5 ML SYR
30986	VALPROIC ACID 500 MG/10 ML CUP
30986	VALPROIC ACID 500 MG/10 ML SOL
18943	VALPROIC ACID LIQUID

CYP2C9, CYP2C19, CYP2D6, and CYP2E1 Inhibitors	
GCN	**Label Name**
17498	VORICONAZOLE 200 MG TABLET
21513	VORICONAZOLE 40 MG/ML SUSP
17497	VORICONAZOLE 50 MG TABLET
30512	VORICONAZOLE POWDER
16385	WELLBUTRIN 100 MG TABLET
16384	WELLBUTRIN 75 MG TABLET
16387	WELLBUTRIN SR 100 MG TABLET
16386	WELLBUTRIN SR 150 MG TABLET
17573	WELLBUTRIN SR 200 MG TABLET
20317	WELLBUTRIN XL 150 MG TABLET
20318	WELLBUTRIN XL 300 MG TABLET

Dialysis	
CPT Code	**Description**
90940	HEMODIALYSIS ACCESS STUDY
90941	HEMODIALYSIS, INITIAL OR ACUTE (EG, ACUTE RENAL FAILURE OR INTOXICAT; PAT OVER 40 KG
90942	HEMODIALYSIS, INITIAL OR ACUTE (EG, ACUTE RENAL FAILURE OR INTOXICAT: PAT 21-40 KG
90943	HEMODIAL, INITIAL OR ACUTE (EG, ACUTE RENAL FAILURE OR INTOXICAT; PAT OVER 40 KG
90944	HEMODIAL, INITIAL OR ACUTE (EG, ACUTE RENAL FAILURE OR INTOXICAT; PAT UNDER 10 KG
90945	DIALYSIS, ONE EVALUATION
90947	DIALYSIS, REPEATED EVAL
90951	ESRD SERV, 4 VISITS P MO, <2

Dialysis	
CPT Code	**Description**
90952	ESRD SERV, 2-3 VSTS P MO, <2
90953	ESRD SERV, 1 VISIT P MO, <2
90954	ESRD SERV, 4 VSTS P MO, 2-11
90956	ESRD SRV, 1 VISIT P MO, 2-11
90957	ESRD SRV, 4 VSTS P MO, 12-19
90958	ESRD SRV 2-3 VSTS P MO 12-19
90966	ESRD HOME PT, SERV P MO, 20+
90967	ESRD HOME PT SERV P DAY, <2
90968	ESRD HOME PT SRV P DAY, 2-11
90969	ESRD HOME PT SRV P DAY 12-19
90976	PERITONEAL DIALYSIS FOR CHRONIC RENAL FAILURE; PATIENT MORE THAN 40 KG
90977	PERITONEAL DIALYSIS FOR CHRONIC RENAL FAILURE; PATIENT 21-40 KG
90978	PERITONEAL DIALYSIS FOR CHRONIC RENAL FAILURE; PATIENT 11-20 KG
90979	PERITONEAL DIALYSIS FOR CHRONIC RENAL FAILURE; PATIENT UNDER 10 KG
90982	PERITONEAL DIALYSIS FOR (ESRD), MAINT STABI COND, HOSP/OTHER FACIL PER SET; MORE 40 KG
90983	PERITONEAL DIALYSIS FOR (ESRD),MAINT STABL COND,HOSP/OTHER FAC PER SET;PATIENT 21-40 KG
90984	PERITONEAL DIALYSIS FOR (ESRD),MAINT STABI COND, HOSP/OTHER FAC PER SET;PATIENT 11-20 KG
90985	PERITONEAL DIALYSIS FOR (ESRD),MAINT STABI COND,HOSP/OTHER FAC PER SET;PATIENT UNDER 10K
90990	HEMODIALYSIS TRAINING AND/OR COUNSELING
90991	HOME HEMODIALYSIS CARE, OUTPAT, SERV PROVID BY PHYSI RESPONS FOR TOTAL CARE
90992	PERITONEAL DIALYSIS TRAINING AND/OR COUNSELING (MEDICARE ONLY)

Dialysis	
CPT Code	**Description**
90994	SUPERVISION OF CHRONIC AMBPERITONEAL DIAL (CAPD),HOME/OUT-PATIENT,MONTHLY

ESRD	
ICD-10 Code	**Description**
I120	HYPERTENSIVE CHRONIC KIDNEY DISEASE WITH STAGE 5 CHRONIC KIDNEY DISEASE OR END STAGE RENAL DISEASE
I1311	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE WITHOUT HEART FAILURE, WITH STAGE 5 CHRONIC KIDNEY DISEASE, OR END STAGE RENAL DISEASE
I132	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE WITH HEART FAILURE AND WITH STAGE 5 CHRONIC KIDNEY DISEASE, OR END STAGE RENAL DISEASE
N185	CHRONIC KIDNEY DISEASE, STAGE 5
N186	END STAGE RENAL DISEASE

Fibrosing Interstitial Lung Diseases (ILDs) with a Progressive Phenotype	
ICD-10 Code	**Description**
J84170	INTERSTITIAL LUNG DISEASE WITH PROGRESSIVE FIBROTIC PHENOTYPE IN DISEASES CLASSIFIED ELSEWHERE

Idiopathic Pulmonary Fibrosis	
ICD-10 Code	**Description**
J84112	IDIOPATHIC PULMONARY FIBROSIS

Moderate or Strong CYP3A4 Inducer	
GCN	**Label Name**
25445	ACTOPLUS MET 15-850MG TABLET
92991	ACTOS 15MG TABLET
93001	ACTOS 30MG TABLET
93011	ACTOS 45MG TABLET
34080	ALOGLIPTIN-PIOGLIT 12.5-15 MG
34083	ALOGLIPTIN-PIOGLIT 12.5-30 MG
34084	ALOGLIPTIN-PIOGLIT 12.5-45 MG
34077	ALOGLIPTIN-PIOGLIT 25-15 MG TB
34078	ALOGLIPTIN-PIOGLIT 25-30 MG TB
34079	ALOGLIPTIN-PIOGLIT 25-45 MG TB
36098	APTIOM 200MG TABLET
36099	APTIOM 400MG TABLET
36106	APTIOM 600MG TABLET
27409	APTIOM 800MG TABLET
92373	BEXAROTENE 75MG CAPSULE
14978	BOSENTAN 125 MG TABLET
14979	BOSENTAN 62.5 MG TABLET
17460	CARBAMAZEPINE 100 MG TAB CHEW
17461	CARBAMAZEPINE 200 MG TAB CHEW
47500	CARBAMAZEPINE 100 MG/5 ML SUSP
17450	CARBAMAZEPINE 200 MG TABLET
23934	CARBAMAZEPINE ER 100 MG CAP
23932	CARBAMAZEPINE ER 200 MG CAP
27820	CARBAMAZEPINE ER 100 MG TABLET

Moderate or Strong CYP3A4 Inducer	
GCN	**Label Name**
27821	CARBAMAZEPINE ER 200 MG TABLET
23933	CARBAMAZEPINE ER 300 MG CAP
27822	CARBAMAZEPINE ER 400 MG TABLET
23934	CARBATROL ER 100 MG CAPSULE
23932	CARBATROL ER 200 MG CAPSULE
23933	CARBATROL ER 300 MG CAPSULE
17700	DILANTIN 100 MG CAPSULE
17241	DILANTIN 125 MG/5 ML SUSP
17701	DILANTIN 30 MG CAPSULE
17250	DILANTIN 50 MG INFATAB
97181	DUETACT 30-2MG TABLET
97180	DUETACT 30-4MG TABLET
15555	EFAVIRENZ 600 MG TABLET
27346	EFAVIR-EMTRI-TENOF 600-200-300
44425	EFAVIR-LAMIV-TENOF 400-300-300
44548	EFAVIR-LAMIV-TENOF 600-300-300
17450	EPITOL 200 MG TABLET
13781	EQUETRO 100 MG CAPSULE
13805	EQUETRO 200 MG CAPSULE
13818	EQUETRO 300 MG CAPSULE
53749	ERLEADA 240 MG TABLET
44446	ERLEADA 60 MG TABLET
99318	ETRAVIRINE 100 MG TABLET
29424	ETRAVIRINE 200 MG TABLET

Moderate or Strong CYP3A4 Inducer	
GCN	**Label Name**
99318	INTELENCE 100MG TABLET
29424	INTELENCE 200MG TABLET
32035	INTELENCE 25MG TABLET
45688	LORBRENA 100 MG TABLET
45687	LORBRENA 25 MG TABLET
38710	LYSODREN 500MG TABLET
26101	MODAFINIL 100MG TABLET
26102	MODAFINIL 200MG TABLET
29810	MYCOBUTIN 150 MG CAPSULE
17310	MYSOLINE 250 MG/5 ML SUSP
17321	MYSOLINE 250MG TABLET
17322	MYSOLINE 50MG TABLET
31420	NEVIRAPINE 200MG TABLET
31421	NEVIRAPINE 50MG/5ML SUSPENSION
29767	NEVIRAPINE ER 400MG TABLET
42366	ORKAMBI 100-125MG TABLET
39008	ORKAMBI 200-125MG TABLET
36937	ORKAMBI 100-125 MG GRANULE PKT
42848	ORKAMBI 150-188 MG GRANULE PKT
52865	ORKAMBI 75-94 MG GRANULE PKT
34083	OSENI 12.5-30MG TABLET
34077	OSENI 25-15MG TABLET
34078	OSENI 25-30MG TABLET
34079	OSENI 25-45MG TABLET

Moderate or Strong CYP3A4 Inducer	
GCN	**Label Name**
12975	PHENOBARBITAL 100 MG TABLET
12892	PHENOBARBITAL 130 MG/ML VIAL
12971	PHENOBARBITAL 15 MG TABLET
97706	PHENOBARBITAL 16.2 MG TABLET
12956	PHENOBARBITAL 20 MG/5 ML ELIX
12973	PHENOBARBITAL 30 MG TABLET
97965	PHENOBARBITAL 32.4 MG TABLET
12972	PHENOBARBITAL 60 MG TABLET
97966	PHENOBARBITAL 64.8 MG TABLET
12894	PHENOBARBITAL 65 MG/ML VIAL
97967	PHENOBARBITAL 97.2 MG TABLET
15038	PHENYTEK 200 MG CAPSULE
15037	PHENYTEK 300 MG CAPSULE
17241	PHENYTOIN 125 MG/5 ML SUSP
17250	PHENYTOIN 50 MG TABLET CHEW
17200	PHENYTOIN 50 MG/ML VIAL
92991	PIOGLITAZONE HCL 15 MG TABLET
93001	PIOGLITAZONE HCL 30 MG TABLET
93011	PIOGLITAZONE HCL 45 MG TABLET
97181	PIOGLITAZONE-GLIMEPIRIDE 30-2
97180	PIOGLITAZONE-GLIMEPIRIDE 30-4
25444	PIOGLITAZONE-METFORMIN 15-500
25445	PIOGLITAZONE-METFORMIN 15-850
45911	PRIFTIN 150MG TABLET

Moderate or Strong CYP3A4 Inducer	
GCN	**Label Name**
21726	PRIMIDONE 125 MG TABLET
17321	PRIMIDONE 250MG TABLET
17322	PRIMIDONE 50MG TABLET
26101	PROVIGIL 100MG TABLET
26102	PROVIGIL 200MG TABLET
29810	RIFABUTIN 150 MG CAPSULE
41470	RIFADIN IV 600 MG VIAL
41260	RIFAMPIN 150 MG CAPSULE
41261	RIFAMPIN 300 MG CAPSULE
41470	RIFAMPIN IV 600 MG VIAL
14142	RIFATER TABLET
44548	SYMFI 600-300-300 MG TABLET
53863	TAFINLAR 10 MG TABLET FOR SUSP
34723	TAFINLAR 50MG CAPSULE
34724	TAFINLAR 75MG CAPSULE
92373	TARGRETIN 75 MG SOFTGEL
92373	TARGRETIN 75MG CAPSULE
47500	TEGRETOL 100 MG/5 ML SUSP
17450	TEGRETOL 200 MG TABLET
27820	TEGRETOL XR 100 MG TABLET
27821	TEGRETOL XR 200 MG TABLET
27822	TEGRETOL XR 400 MG TABLET
45016	TIBSOVO 250 MG TABLET
14978	TRACLEER 125MG TABLET

Moderate or Strong CYP3A4 Inducer	
GCN	**Label Name**
14979	TRACLEER 62.5MG TABLET
43819	TRACLEER 32 MG TABLET FOR SUSP
31420	VIRAMUNE 200MG TABLET
31421	VIRAMUNE 50MG/5ML SUSPENSION
47395	XCOPRI 100 MG TABLET
47409	XCOPRI 12.5-25 MG TITRATION PK
47396	XCOPRI 150 MG TABLET
47414	XCOPRI 150-200 MG TITRATION PK
47397	XCOPRI 200 MG TABLET
55041	XCOPRI 25 MG TABLET
49574	XCOPRI 250 MG DAILY DOSE PACK
47416	XCOPRI 350 MG DAILY DOSE PACK
47394	XCOPRI 50 MG TABLET
47413	XCOPRI 50-100 MG TITRATION PAK
33183	XTANDI 40MG CAPSULE
46626	XTANDI 40 MG TABLET
48452	XTANDI 80 MG TABLET

Strong CYP1A2 Inducer	
GCN	**Label Name**
17460	CARBAMAZEPINE 100 MG TAB CHEW
27601	CARBAMAZEPINE 100 MG/5 ML CUP
47500	CARBAMAZEPINE 100 MG/5 ML SUSP

Strong CYP1A2 Inducer	
GCN	**Label Name**
17461	CARBAMAZEPINE 200 MG TAB CHEW
17450	CARBAMAZEPINE 200 MG TABLET
27602	CARBAMAZEPINE 200 MG/10 ML CUP
23934	CARBAMAZEPINE ER 100 MG CAP
27820	CARBAMAZEPINE ER 100 MG TABLET
23932	CARBAMAZEPINE ER 200 MG CAP
27821	CARBAMAZEPINE ER 200 MG TABLET
23933	CARBAMAZEPINE ER 300 MG CAP
27822	CARBAMAZEPINE ER 400 MG TABLET
48570	CARBAMAZEPINE POWDER
14790	PHENOBARB-HYO-ATROP-SCOP ELIX
74040	PHENOBARB-HYOSC-ATROP-SCOP TAB
12975	PHENOBARBITAL 100 MG TABLET
12971	PHENOBARBITAL 15 MG TABLET
97706	PHENOBARBITAL 16.2 MG TABLET
38716	PHENOBARBITAL 20 MG/5 ML CUP
12894	PHENOBARBITAL 20 MG/5 ML ELIX
12956	PHENOBARBITAL 20 MG/5 ML SOLN
12973	PHENOBARBITAL 30 MG TABLET
12956	PHENOBARBITAL 30 MG/7.5 ML CUP
97965	PHENOBARBITAL 32.4 MG TABLET
12972	PHENOBARBITAL 60 MG TABLET
12956	PHENOBARBITAL 60 MG/15 ML CUP
97966	PHENOBARBITAL 64.8 MG TABLET

Strong CYP1A2 Inducer	
GCN	**Label Name**
97967	PHENOBARBITAL 97.2 MG TABLET
12892	PHENOBARBITAL POWDER
12956	PHENOBARBITAL-BELLADONNA ELIXR
99557	PHENYTOIN 100 MG/4 ML SUSP CUP
17241	PHENYTOIN 125 MG/5 ML SUSP
17250	PHENYTOIN 50 MG INFATAB CHEW
17250	PHENYTOIN 50 MG TABLET CHEW
20880	PHENYTOIN POWDER
17700	PHENYTOIN SOD EXT 100 MG CAP
15038	PHENYTOIN SOD EXT 200 MG CAP
15037	PHENYTOIN SOD EXT 300 MG CAP
18770	PHENYTOIN SODIUM POWDER
41260	RIFAMPIN 150 MG CAPSULE
41261	RIFAMPIN 300 MG CAPSULE

Systemic Sclerosis-Associated Interstitial Lung Disease (SSc-ILD)	
ICD-10 Code	**Description**
M3481	SYSTEMIC SCLEROSIS WITH LUNG INVOLVEMENT
J99	RESPIRATORY DISORDERS IN DISEASES CLASSIFIED ELSEWHERE

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Pulmonary Fibrosis Agents

Clinical Criteria References

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Publication History

The Publication History records the publication iterations and revisions to this document. Notes for the *most current revision* are also provided in the Revision Notes on the first page of this document.

Publication Date	Notes
07/24/2026	• Initial publication and presentation to the DUR Board