

Motixafortide (Aphexda™)

Medical Benefit Drug Policy

Place of Service

Office Administration

Outpatient Facility Administration

Infusion Center Administration

Drug Details

USP Category: Class: Blood Products and Modifiers: Blood Products and Modifiers, Other

Mechanism of Action: Hematopoietic stem cell mobilizer

Use HCPC: J3490, J9999

NDC(s):

- 82737-073-01: 62 mg single-dose vial

1. All requests for motixafortide (Aphexda™) must receive authorization prior to drug administration for claim payment.
2. Criteria for coverage is pending P&T Committee approval.
3. In the interim, all requests for coverage will be reviewed for medical necessity.

References

1. Aphexda™ (motixafortide). [Prescribing information]. Waltham, MA: BioLineRx USA Inc.; 9/2023.
2. AHFS®. Available by subscription at <http://www.lexi.com>
3. DrugDex®. Available by subscription at <http://www.micromedexsolutions.com/home/dispatch>