

Ublituximab-xiiy (Briumvi™)

Place of Service

Home Infusion Administration

Infusion Center Administration

Office Administration

Outpatient Facility Infusion Administration

HCPCS: J3490, J3590

NDC:

- 73150-0150-06: 150 mg/6 mL (25 mg/mL) single-dose vial

1. All requests for ublituximab-xiiy (Briumvi™) 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.

[Briumvi™ prescribing information](#)