

Gemcitabine (Gemzar & generics) — HCPCS J9201

CARECOST ESTIMATE · BILLING CHEAT SHEET

Multi-generic (Hospira, Mylan, Sandoz, Fresenius Kabi, Apotex; originator Lilly Gemzar) 200 mg / 1 g / 2 g lyophilized SDV IV infusion 30 min

Reviewed: May 2, 2026 ASP: Q2 2026

HCPCS J9201 1 unit = 200 mg	TYPICAL DOSE 9 units 1,700 mg (1,000/m ² × 1.7)	MODIFIER JW BSA dosing → waste common	ADMIN CPT 96413 Chemo IV (30 min)	MEDICARE ASP+6% \$3.237 /200 mg unit · ~\$0.016/mg
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BILLER ERROR TRAP — 1 unit = 200 mg, NOT 1 mg. Most chemo HCPCS use 1 mg or 10 mg per unit. J9201 uses 200 mg. A 1,700 mg dose = 9 units, NOT 1,700. Cross-check: units = ceil(mg ÷ 200).

CODES & NDC (MULTI-GENERIC)

HCPCS	J9201 — "Inj, gemcitabine HCl, NOS, 200 mg" (NOS code applies to all generics + Gemzar)
HOSPIRA	00409-0182-01 (1 g) / 00409-0183-01 (2 g)
MYLAN	67457-0439-01 (1 g) / 67457-0440-01 (2 g)
SANDOZ	00781-3418-94 (1 g) / 00781-3419-94 (2 g)
LILLY GEMZAR	00002-7502-01 (1 g) / 00002-7503-01 (2 g)
VIALS	200 mg / 1 g / 2 g lyophilized SDV; reconstitute w/ 0.9% NaCl → 38 mg/mL

Use the actual NDC of the vial dispensed. Generic NDCs change with manufacturer/packaging revisions — verify at fill.

MULTI-INDICATION DOSING

INDICATION	DOSE	SCHEDULE
Pancreatic 1L (+ Abraxane)	1,000 mg/m ²	D1, D8, D15 q28d
Pancreatic single-agent	1,000 mg/m ²	Wkly × 7, off 1; then wkly × 3 q4w
NSCLC (+ cisplatin)	1,000–1,250 mg/m ²	D1, D8 q21d
Breast (+ paclitaxel)	1,250 mg/m ²	D1, D8 q21d
Ovarian (+ carboplatin)	1,000 mg/m ²	D1, D8 q21d
Bladder (+ cisplatin)	1,000 mg/m ²	D1, D8, D15 q28d
Biliary (+ cis ± durva/pembro)	1,000 mg/m ²	D1, D8 q21d

UNIT MATH (200 MG BASIS — CRITICAL)

BSA	DOSE @ 1,000/M ²	UNITS	VIAL / WASTE
1.5 m ²	1,500 mg	8	1×2g / 500mg JW
1.7 m ²	1,700 mg	9 (↑8.5)	1×2g / 300mg JW
1.8 m ²	1,800 mg	9	1×2g / 200mg JW
2.0 m ²	2,000 mg	10	1×2g / 0 (JZ)
2.0 @1,250	2,500 mg	13 (↑12.5)	1×2g+1×1g / 500mg JW

ICD-10 BY INDICATION

CODE	FOR
C25.x	Pancreatic (primary)
C34.x	NSCLC
C50.x	Breast (post-anthracycline)
C56.x	Ovarian (post-platinum)
C67.x	Bladder
C24.x / C22.1 / C23	Biliary tract (NCCN)
C49.x	STS off-label NCCN (Gem-Tax)

PAYER REQUIREMENTS (MAY 2026)

PAYER	PA ON J9201	NOTES
UnitedHealthcare	Generally no	PA on combo partners (Abraxane, Imfinzi, Keytruda)
Aetna	Generally no	Combo partner PA + indication docs
BCBS	Plan-specific (mostly no)	Aligned with NCCN compendia
Medicare LCDs	No	FDA-approved + NCCN off-label covered

Generic gem usually not PA-restricted. The PA burden falls on combo partners.

COMBO REGIMENS (CONCURRENT PA ON PARTNER)

REGIMEN	PARTNER HCPCS
Gem + nab-paclitaxel (panc 1L)	J9264 (Abraxane)
Gem + cisplatin (NSCLC, biliary, bladder)	J9060
Gem + carboplatin (ovarian, NSCLC)	J9045
Gem + paclitaxel (breast)	J9267
Gem + cis + durvalumab (biliary 1L, TOPAZ-1)	+ J9173 (Imfinzi)
Gem + cis + pembrolizumab (biliary 1L, KEYNOTE-966)	+ J9271 (Keytruda)

FOLFIRINOX is NOT gem-based. Don't confuse with Gem + Abraxane on pancreatic orders.

ADMINISTRATION & MODIFIERS

CODE	WHEN
96413	Chemo IV, ≤1 hr — primary (30 min std)
96417	Sequential chemo (e.g., after cisplatin)
96360/96361	IV hydration (cis combos)
96365	NOT appropriate — gem is true cytotoxic chemo

Keep infusion at 30 min. FDA label: ≥60 min infusions worsen toxicity.

JW required on most claims (BSA dosing → partial-vial waste). JZ only when dose lands on whole-vial multiple. One of JZ/JW required since 7/1/2023.

MEDICARE REIMBURSEMENT (Q2 2026)

FIELD	VALUE
ASP + 6%	\$3.237 / 200 mg unit (~\$0.016/mg)
1,700 mg dose	~\$29.13 (9 × \$3.237)
2,000 mg dose	~\$32.37 (10 × \$3.237)
Annual (panc 1L D1+D8+D15 q4w)	~\$1,140 / yr (39 doses × ~\$29)
vs Opdivo J9299	~\$33/mg = ~2,000× more per mg

SITE OF CARE

SETTING	POS	NOTES
Physician oncology office	11	Preferred
Ambulatory infusion suite	49	Preferred
Hospital outpatient	19/22	Disfavored if combo with high-cost partner

PATIENT ASSISTANCE

- **Lilly Cares Foundation** (Gemzar branded only): 1-800-545-6962
- **CancerCare Co-Pay:** 1-866-552-6729 (panc, NSCLC, breast, ovarian, bladder funds)
- **PAN Foundation:** 1-866-316-7263 (panc, NSCLC, biliary often open)
- **HealthWell Foundation:** 1-800-675-8416
- Generic gem has no manufacturer copay program (price too low) — rely on charity foundations

W&P (no Boxed): Severe myelosuppression (neutropenia, thrombocytopenia — dose modify per CBC); **pulmonary toxicity** (pneumonitis, pulmonary edema, ARDS — discontinue if severe); **hemolytic uremic syndrome (HUS)** — monitor renal/CBC, life-threatening; severe hepatotoxicity; capillary leak; PRES; radiation recall (prior RT). **Keep infusion at 30 min.**

Pending SME review. Staff-authored from primary sources (FDA, CMS, NCCN). Final review by Catherine Rose (CPC) in progress.