Health Alliance Plan®
by Henry Ford Health

Pharmacy Updates Coming Soon

Changes for Specific J-Codes

Effective October 1, 2026, please see changes below for G2082 and G2083.

- G2082 Office or other outpatient visit for the evaluation and management of an established patient that requires the supervision of a physician or other qualified health care professional and provision of up to 56 mg of esketamine nasal self-administration, includes 2 hours post-administration observation
  - It will change to **not covered** under the medical benefit for Commercial and Qualified Health plans only.
  - It will continue to require prior authorization for members in:
    - Health Alliance Plan Medicare Advantage plans

- G2083 Office or other outpatient visit for the evaluation and management of an established patient that requires the supervision of a physician or other qualified health care professional and provision of greater than 56 mg esketamine nasal self-administration, includes 2 hours post-administration observation
  - It will change to **not covered** under the medical benefit for Commercial and Qualified Health plans only.
  - It will continue to require prior authorization for members in:
    - Health Alliance Plan Medicare Advantage plans

Biosimilar Formulary Changes

We recognize the importance of biosimilar agents in providing safe and effective therapy while lowering overall cost of care. We select certain biosimilar agents as preferred products.

Effective October 1, 2026, the denosumab product below will be covered with no prior authorization for all lines of business.

- Q5167 Injection, denosumab-qbde (enoby/xtrenbo), biosimilar, 1 mg

For patients who tried Enoby or Xtrenbo and had a clinical failure, the following denosumab products will be covered with a prior authorization:

- Q5162 Injection, denosumab-nxxp (bildyos/bilprevda), biosimilar, 1 mg
- Q5157 Injection, denosumab-bmwo (stoboclo/osenvelt), biosimilar, 1 mg