

Management of medical benefit drugs moving from Accredo® to Blue Cross for URMBT Blue Cross non-Medicare members

Starting Jan. 1, 2023, Blue Cross will manage prior authorizations for additional medical benefit drugs for which Accredo previously managed prior authorizations. You'll find a list of these drugs later in this alert.

This change affects UAW Retiree Medical Benefits Trust Blue Cross non-Medicare members.

These requirements don't apply:

- When these drugs are administered in an inpatient setting
- To the UAW Retiree Health Care Trust (group number 70605) or the UAW International Union (group number 71714)

How will this change be rolled out?

This change will be rolled out as follows:

- **For members for whom Accredo approved authorization requests on or before Aug. 31, 2022:** Blue Cross will automatically issue a new authorization. These authorizations will be in effect indefinitely. We'll send letters to notify affected members.
- **For members who begin therapies from Sept. 1, 2022, through Dec. 31, 2022:** Providers don't need to submit authorization requests. Blue Cross will automatically issue authorizations for the drugs. These authorizations will be in effect indefinitely. We'll send letters to notify affected members.
- **For members who begin therapies on or after Jan. 1, 2023:** Providers must submit prior authorization requests to AIM Specialty Health® or through the NovoLogix® online tool, as specified in the table later in this alert.

How will I submit prior authorization requests starting Jan. 1?

To submit requests to	Details
AIM	<ul style="list-style-type: none"> • To submit the request through the AIM ProviderPortal: <ul style="list-style-type: none"> ○ Log in to our provider portal (availity.com*), click <i>Payer Spaces</i>, click the BCBSM and BCN logo, and then click the <i>AIM Provider Portal</i> tile on the Applications tab. ○ Log directly in to the AIM ProviderPortal at providerportal.com*. • Call the AIM Contact Center at 1-844-377-1278.
NovoLogix	Log in to our provider portal (availity.com *), click <i>Payer Spaces</i> , click the BCBSM and BCN logo, and then click the appropriate NovoLogix tile on the Applications tab.

Note: If you need to request access to Availity®, follow the instructions on the [Register for web tools](#) webpage at bcbsm.com/providers.

Which drugs will be affected by this change?

The following drugs will be affected by this change.

For information about additional requirements, such as site of care and quantity limits, see the appropriate drug lists. Access the drug list using the links in the [More about the authorization requirements](#) section later in this alert.

HCPCS code	Brand name	Generic name	Submit prior authorization request through
J1931	Aldurazyme®	laronidase	NovoLogix
J0256	Aralast®	alpha 1 proteinase inhibitor	NovoLogix
J1786	Cerezyme®	imiglucerase	NovoLogix
J1743	Elaprase®	idursulfase	NovoLogix
J3060	Elelyso®	taliglucerase alfa	NovoLogix
J0180	Fabrazyme®	agalsidase beta	NovoLogix
Q5108	Fulphila®	pegfilgrastim-jmdb	AIM
J1569	Gammagard®	immune globulin	NovoLogix
J1566	Gammagard S/D®	immune globulin	NovoLogix
J1561	Gamunex-C®/Gammaked™	immune globulin	NovoLogix
J1557	Gammaplex®	immune globulin	NovoLogix
J1447	Granix®	tbo-filgrastim	AIM
J1559	Hizentra®	immune globulin	NovoLogix
**90283	Immune globulin (igIV)	immune globulin	NovoLogix
J2840	Kanuma®	sebelipase alfa	NovoLogix
J2820	Leukine®	sargramostin	AIM
J0221	Lumizyme®	alglucosidase alfa	NovoLogix
J1458	Naglazyme®	galsulfase	NovoLogix
Q5110	Nivestym®	filgrastim-aafi	AIM

HCPDS code	Brand name	Generic name	Submit prior authorization request through
J1568	Octagam®	immune globulin	NovoLogix
J1599	Panzyga®	immune globulin	NovoLogix
J1459	Privigen®	immune globulin	NovoLogix
J1300	Soliris®	eculizumab	NovoLogix
J3357	Stelara® SubQ	ustekinumab	NovoLogix
Q5111	Udenyca®	pegfilgrastim-cbqv	AIM
J1322	Vimizim®	elosulfase alfa	NovoLogix
Q5101	Zarxio®	filgrastim-sndz	AIM
J0256	Zemaira®	alpha 1 proteinase inhibitor	NovoLogix
Q5120	Ziextenzo®	pegfilgrastim-bmez	AIM

More about the authorization requirements

Authorization isn't a guarantee of payment. As always, health care practitioners need to verify eligibility and benefits for members.

For additional information on requirements related to drugs covered under the medical benefit for URMBS members with Blue Cross non-Medicare plans, see:

- [Medical oncology prior authorization list for UAW Retiree Medical Benefits Trust PPO non-Medicare members](#)
- [Medical Drug Management with Blue Cross for UAW Retiree Medical Benefit Trust PPO non-Medicare Members](#)

We'll update the pertinent drug lists to reflect the information in this message prior to the effective date.

*Clicking this link means that you're leaving the Blue Cross Blue Shield of Michigan and Blue Care Network website. While we recommend this site, we're not responsible for its content.

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Availity is an independent company that contracts with Blue Cross Blue Shield of Michigan and Blue Care Network to offer provider portal services.