

Starting Sept. 1, 2023, we'll change prior authorization requirements for some weight loss drugs

Beginning Sept. 1, 2023, Blue Cross Blue Shield of Michigan and Blue Care Network will change prior authorization coverage criteria for the brand-name weight loss medications listed below for commercially insured members.

- Contrave®
- Qsymia®
- Saxenda®
- Wegovy®
- Xenical®

For certain members, weight loss drugs are excluded under the pharmacy benefit.

What prior authorization changes will go into effect on Sep. 1, 2023?

We'll shorten the initial prior authorization approval duration from 12 months to four months for commercial Blue Cross and BCN members who initiate one of the above therapies for the first time.

The duration of subsequent prior authorization renewals following initial prior authorization approval will remain unchanged and will remain valid for 12 months at a time for members who meet renewal requirements.

We also change the renewal criteria for these weight loss drugs. Providers will be required to attest that the member is actively engaged in appropriate lifestyle modifications in conjunction with weight loss therapy for continuation of coverage after the initial prior authorization expires, and for each renewal request thereafter.

For a list of prior authorization and renewal requirements for pharmacy benefit drugs, refer to our Prior Authorization and Step Therapy document at bcbsm.com/rxinfo.

Why are Blue Cross and BCN making these changes?

Weight loss drug therapy is highly effective when used in conjunction with appropriate lifestyle interventions, including a balanced healthy diet and exercise.

Therefore, providers should follow up with patients at regular intervals after initiating weight loss pharmacotherapy to ensure that patients continue to engage in appropriate lifestyle modifications for optimal weight loss results.

What information are providers required to submit to show that the patient is actively participating in appropriate lifestyle modifications?

Providers must attest through electronic prior authorization (ePA) that the patient has provided them with documentation to show that they are actively participating in appropriate lifestyle modifications.

Examples of patient documentation of lifestyle modifications may include recent food logs, exercise logs, or receipts to show engagement in a formal weight loss modification program.

Examples of appropriate lifestyle modifications may include member participation in a formal lifestyle modification program or participation in an appropriate lifestyle modification treatment plan (healthy diet and exercise) under the supervision of their health care provider.

How do I determine whether the patient has weight loss drug coverage under their pharmacy benefit?

Not all members have weight loss drugs covered under their pharmacy benefit. Providers are encouraged to verify member eligibility before prescribing weight loss drug therapy.

Providers can call the Provider Inquiry automated response system at **1-800-344-8525** to verify member eligibility for members with Blue Cross or BCN commercial coverage.