Nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association

Blue Cross commercial Categories: Authorizations/referrals, Pharmacy

Date posted: Dec. 5, 2023

Additional drugs to require prior authorization for Federal **Employee Program non-Medicare members starting March 1**

For dates of service on or after March 1, 2024, we're adding prior authorization requirements for Blue Cross and Blue Shield Federal Employee Program® non-Medicare members for the following drugs covered under the medical benefit:

Brand name	Generic name	HCPCS code
Amvuttra [®]	Vutrisiran	J0225
Byooviz™	Ranibizumab-nuna	Q5124
Cimerli [®]	Ranibizumab-eqrn	Q5128
Epogen®	Epoetin alfa	J0885 and Q4081
Eylea® HD	Aflibercept	C9161
Givlaari [®]	Givosiran	J0223
Ixifi™	infliximab-qbtx	Q5109
Oxlumo [®]	Lumarisan	J0224
Procrit [®]	Epoetin alfa	J0885 and Q4081
Retacrit®	Epoetin alra-epbx	Q5105
Riabni®	Rituximab-arrx	Q5123
Rituxan®	Rituximab	J9312
Ruxience®	Rituximab-pvvr	Q5119
Stelara [®] SQ	Ustekinumab	J3357
Skyrizi [®] IV	risankizumab-rzaa	J2327
Tegsedi [®]	Inotersen	J3490/C9399
Truxima [®]	Rituximab-abbs	Q5115
Vabysmo™	Faricimab-svoa	J2777
Vyvgart™	Efgartigimod alfa-fcab	J9332
Vyvgart™ Hytrulo	Efgartigimod alfa and hyaluronidase-qvfc	J9334

For members who begin therapies before March 1

The current review process for authorizations will continue through Feb. 29, 2024. Authorizations received prior to March 1, 2024, will be valid for up to 12 months.



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For members who begin therapies on or after March 1

Submit prior authorization requests through the NovoLogix® online tool. It offers real-time status checks and immediate approvals for certain medications.

To access NovoLogix, log in to our provider portal (<u>availity.com</u>*), click *Payer Spaces* in the menu bar and then click the BCBSM and BCN logo. You'll find links to the NovoLogix tools on the Applications tab.

Note: If you need to request access to our provider portal, see the <u>Register for webtools</u> webpage on **bcbsm.com**.

List of requirements

For a full list of requirements related to drugs covered under the medical benefit, see the <u>Utilization management medical drug list for Blue Cross and Blue Shield Federal Employee Program® non-Medicare members</u>. We'll update this list prior to the effective date.

You can access this list and other information about submitting prior authorization requests on the following pages of **ereferrals.bcbsm.com**:

- Blue Cross Medical Benefit Drugs
- BCN Medical Benefit Drugs

Prior authorization isn't a guarantee of payment. Health care practitioners need to verify eligibility and benefits for members.

*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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