



## **Amtagvi will have additional requirements for most commercial members, starting May 28**

Blue Cross Blue Shield of Michigan and Blue Care Network are updating the medical policy for Amtagvi™ (lifileucel). The requirements in the updated medical policy will apply for most Blue Cross and BCN commercial members for dates of service on or after May 28, 2024.

In keeping with the updated medical policy, the following additional requirements must be met for treatment with Amtagvi to be considered medically necessary.

- Members must meet these requirements:
  - Haven't received prior treatment with any tumor infiltrating lymphocyte, or TIL, therapy despite indication
  - Haven't received prior treatment with any other genetically modified TIL therapy and aren't being considered for treatment with any other genetically modified TIL therapy
- The treatment must be administered at a certified TIL treatment center

You can see the full list of requirements in the updated medical policy, which will be available no later than May 28. To view the policy, go to the [Medical Policy Router Search](#) page, enter the name of the drug in the *Policy/Topic Keyword* field and press *Enter*.

Tip: To access the Medical Policy Router Search page, go to [bcbsm.com/providers](https://bcbsm.com/providers), click *Resources* and then click *Search Medical Policies*.

### **Some Blue Cross commercial groups aren't subject to these requirements**

For Blue Cross commercial, these requirements apply only to groups that participate in the standard commercial Medical Drug Prior Authorization Program for drugs administered under the medical benefit. To determine whether a group participates in the prior authorization program, see the [Specialty Pharmacy Prior Authorization Master Opt-in/out Group list](#).

Note: Blue Cross and Blue Shield Federal Employee Program® members and UAW Retiree Medical Benefits Trust (non-Medicare) members don't participate in the standard prior authorization program.

### **Additional information**

For additional information about drugs covered under the medical benefit, see the following pages of the [ereferrals.bcbsm.com](https://ereferrals.bcbsm.com) website:

- [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.

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