

Step therapy requirement added for Saphnelo for Medicare Advantage members starting Sept. 1

For dates of service on or after Sept. 1, 2024, providers will have to show that our Medicare Advantage (Medicare Plus Blue and BCN Advantage) members tried and failed Benlysta[®] (belimumab), HCPCS code J0490, when requesting prior authorization for Saphnelo[®] (anifrolumab-fnia), HCPCS code J0491.

Note: Benlysta will continue to require prior authorization.

Submit prior authorization requests through the NovoLogix[®] online tool.

These drugs are a part of members' medical benefits, not their pharmacy benefits.

When prior authorization is required

These drugs require prior authorization, as applicable, when they are administered by a health care provider in sites of care such as outpatient facilities or physician offices and are billed in one of the following ways:

- Electronically through an 837P transaction or on a professional CMS-1500 claim form
- Electronically through an 837I transaction or using the UB04 claim form for a hospital outpatient type of bill 013x

Submit prior authorization requests through NovoLogix

To access NovoLogix, log in to our provider portal (availity.com*), 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, follow the instructions on the [Register for web tools](https://bcbsm.com/providers) webpage at bcbsm.com/providers.

List of requirements

For a list of requirements related to drugs covered under the medical benefit, see the [Medical Drug and Step Therapy Prior Authorization List for Medicare Plus Blue and BCN Advantage members](#).

We'll update this list prior to the effective date.

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Provider alert

Medicare Plus BlueSM and BCN AdvantageSM

Category: Authorizations/referrals, Pharmacy

Date posted: May 22, 2024

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