

Jubbonti and Wezlana to require prior authorization for Medicare Advantage members starting Nov. 3

For dates of service on or after Nov. 3, 2024, the following drugs will require prior authorization for Medicare Plus Blue and BCN Advantage members:

- Jubbonti[®] (denosumab-bbdz), HCPCS code Q5136
- Wezlana[™] IV (ustekinumab-auub), HCPCS code Q5138

Submit prior authorization requests through the NovoLogix[®] online tool when these drugs will be billed as a medical benefit.

When prior authorization is required

These drugs will require prior authorization when 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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