

Rituximab preferred agents to change for Medicare Advantage members starting Jan. 1

For dates of service on or after Jan. 1, 2025, Medicare Plus Blue and BCN Advantage are making changes to the preferred and nonpreferred designations for rituximab drugs.

Preferred agents

Preferred rituximab agents will be:

- Ruxience[®] (rituximab-pvvr), HCPCS code Q5119
- Riabni[®] (rituximab-arrx), HCPCS code Q5123

These preferred drugs will not require prior authorization.

Nonpreferred agents

Nonpreferred rituximab agents will be:

- Rituxan[®] (rituximab), HCPCS code J9312
- Truxima[®] (rituximab-abbs), HCPCS code Q5115

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

When prior authorization is required

The nonpreferred agents 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

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](#) webpage at bcbsm.com/providers.



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Provider alert

Medicare Plus BlueSM and BCN AdvantageSM

Categories: Authorizations/referrals, Pharmacy

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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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