

## Additional drugs to require prior authorization for Blue Cross commercial URMBS members starting Dec. 31

For dates of service on or after Dec. 31, 2025, the drugs listed below will require prior authorization for Blue Cross commercial UAW Retiree Medical Benefits Trust members.

These requirements will apply only when these drugs are administered in an outpatient setting.

Submit requests as indicated below when these drugs will be billed as a medical benefit.

Drug	Submit requests through
Bomyntra® (denosumab-bnht), NOC codes	Medical and Pharmacy Drug PA Portal
Conexence® (denosumab-bnht), NOC codes	Medical and Pharmacy Drug PA Portal
Osenvelt® (denosumab-bmwo), NOC codes	Medical and Pharmacy Drug PA Portal
Stoboclo® (denosumab-bmwo), NOC codes	Medical and Pharmacy Drug PA Portal
Datroway® (datopotamab deruxtecant), HCPCS code J9011	Carelon Medical Benefits Management provider portal
Opdivo Qvantig™ (nivolumab and hyaluronidase-nvhy), HCPCS J9289	Carelon Medical Benefits Management provider portal

Note: The requirements don't apply to the UAW Retiree Health Care Trust (group number 70605) or the UAW International Union (group number 71714).

### How to submit authorization requests

To submit requests, log in to our provider portal ([availity.com](https://availity.com)), click on *Payer Spaces* and then click on the BCBSM and BCN logo. Click the appropriate tile in the Applications tab:

- *Carelon ProviderPortal*
- *Medical and Pharmacy Benefit Drug Prior Auth*

Note: If you need to request access to our provider portal, see the [Register for Web Tools](#) webpage on **bcbsm.com**.

### More about requirements for medical benefit drugs

For additional information on requirements related to drugs covered under the medical benefit for URMBS members with Blue Cross non-Medicare plans, see:

- [Medical oncology prior authorization list for UAW Retiree Medical Benefits Trust PPO non-Medicare members](#)
- [Medical Drug Management with Blue Cross for UAW Retiree Medical Benefits Trust PPO non-Medicare Members](#)

We'll update the pertinent drug lists to reflect the information in this message prior to the effective date.

As a reminder, prior authorization isn't a guarantee of payment. Health care providers need to verify eligibility and benefits for members.

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