

Update: Qivigy and Eydenzelt to have requirements for most commercial members starting Oct. 20

We updated an earlier version of this communication to reflect that Qivigy® has a site-of-care requirement in addition to the previously communicated prior authorization requirement.

For dates of service on or after Oct. 20, 2025, we're adding requirements for most Blue Cross Blue Shield of Michigan and Blue Care Network group and individual commercial members for the following drugs covered under the medical benefit:

Drug	New requirement(s)	
	Prior authorization	Site-of-care
Qivigy 10% intravenous (immune globulin, human-kthm), HCPCS code J1599	✓	✓
Eydenzelt® (afibercept-boav), HCPCS code J3590	✓	

How to submit prior authorization requests

Submit prior authorization requests through the Medical and Pharmacy Drug PA Portal. It offers real-time status checks and immediate approvals for certain medications.

To access the Medical and Pharmacy Drug PA Portal, log in to our provider portal (availability.com*), click *Payer Spaces* in the menu bar and then click the BCBSM and BCN logo. Click the *Medical and Pharmacy Benefit Drug Prior Auth* tile in the Applications tab.

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

For drugs that have a site-of-care requirement, you'll be prompted to select a site of care when you submit prior authorization requests. If the request meets clinical criteria for the drug and is for one of the following sites of care, it will be approved automatically:

- Doctor's or other health care provider's office
- Ambulatory infusion center
- The member's home, from a home infusion therapy provider

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

For Blue Cross commercial, this prior authorization requirement applies 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.

List of requirements

For a full list of requirements related to drugs covered under the medical benefit, see the [Blue Cross and BCN utilization management medical drug list for Blue Cross commercial and BCN commercial members](#). We'll update this list prior to the effective date.

You can access this list and other information about requesting prior authorization on the [Medical Benefit Drugs page](#) on **authorizations.bcbsm.com**.

Prior authorization isn't a guarantee of payment. Health care practitioners need to verify eligibility and benefits for members.

[Subscribe](#) to Provider Alerts Weekly, a weekly email with a list of links to the previous week's provider alerts.

*Clicking this link means that you're leaving the Blue Cross Blue Shield of Michigan and Blue Care Network website. While we recommend this site, we're not responsible for its content.

Availity® is an independent company that contracts with Blue Cross Blue Shield of Michigan and Blue Care Network to offer provider portal and electronic data interchange services.