

Duopa, Onapgo and Vyalev will require prior authorization for most commercial members starting March 2

For dates of service on or after March 2, 2026, we're adding a prior authorization requirement 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:

- Duopa™ (carbidopa and levodopa), HCPCS code J7340
- Onapgo™ (apomorphine hydrochloride), HCPCS code J3490
- Vyalev™ (foscarnidopa/foslevodopa), HCPCS code J7356

Note: These drugs already require prior authorization under the pharmacy benefit.

How this change will affect members

- For members who start therapy with any of the above drugs on or before March 2, 2026, we'll automatically issue an authorization for dates of service from March 2, 2026, to March 1, 2027, to avoid interruptions in therapy.
- For members who start therapy with any of the above drugs on or after March 2, 2026, health care providers will have to submit prior authorization requests through the Medical and Pharmacy Drug PA Portal.

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.

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 from the [Medical Benefit Drugs](#) pages on **authorizations.bcbsm.com**.

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