

We're adding requirements for additional medical oncology drugs for most members starting May 13

For dates of service on or after May 13, 2026, Blue Cross Blue Shield of Michigan and Blue Care Network are adding requirements for medical oncology drugs for most members. These drugs are managed through the Oncology Value Management program, which is administered by OncoHealth, unless otherwise noted.

Note: Site of care requirements apply only to commercial members.

Brand name	Generic name	HCPCS code	Requirement		
			Prior authorization	Site of care	Step therapy
Avgemsi TM	gemcitabine	J9184	✓		✓
Boruzu [®]	bortezomib	J9054	✓		✓
Inlexzo TM	gemcitabine intravesical system	J9183*	✓		✓
Keytruda Qlex TM	pembrolizumab and berahyaluronidase alfa-pmph	J9277*	✓	✓	✓
Kyxata TM	carboplatin	J9278*	✓		✓
Lynozytic TM	linvoseltamab-gcpt	J9601*	✓		
Vivimusta [®]	bendamustine	J9056	✓		✓

*HCPCS code will be effective April 1, 2026

We're also adding a step therapy requirement for Anktiva[®] (ogapendekin alfa inbakicept-pmln), HCPCS code J9028. The requirements are:

Before May 13, 2026	On or after May 13, 2026
<p>Members must try and fail:</p> <ul style="list-style-type: none"> Adstiladrin[®] (nadofaragene firadenovec-vncg), HCPCS code J9029 	<p>Members must try and fail both of the following:</p> <ul style="list-style-type: none"> Adstiladrin (nadofaragene firadenovec-vncg), HCPCS code J9029 Keytruda[®] (pembrolizumab), HCPCS code J9271 or Keytruda QlexTM (pembrolizumab and berahyaluronidase alfa-pmph), HCPCS code J9277

*Submit prior authorization requests for Adstiladrin to Blue Cross or BCN.

These drugs are part of the members' medical benefits, not their pharmacy benefits.

When these requirements apply

These requirements apply when the drug is administered in outpatient settings for:

- Blue Cross Blue Shield of Michigan and Blue Care Network commercial —
 - All fully insured members (group and individual), with the exception of MESSA members
 - Members who have coverage through self-funded groups that participate in the Oncology Value Management program. Refer to the document titled [Oncology Value Management program opt-out list for self-funded groups](#) for groups that do not participate.
- Note: This requirement doesn't apply to Blue Cross commercial members who have coverage through the Blue Cross and Blue Shield Federal Employee Program[®] or through Blue Cross commercial UAW Retiree Medical Benefits Trust plans.
- All members with individual coverage
- Medicare Plus Blue and BCN Advantage members

How to submit prior authorization requests

Submit prior authorization requests to OncoHealth using one of the following methods:

- Within our payer space, click on the *OncoHealth Provider Portal* tile in the Applications tab. ([Learn how to access our provider portal payer space.](#))
- By calling OncoHealth at 1-888-916-2616

Submit prior authorization requests to Blue Cross or BCN by clicking on *Medical and Pharmacy Benefit Drug Prior Auth* tile in our payer space. ([Learn how to access our provider portal payer space.](#))

More about prior authorization requirements

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

For additional information on requirements related to drugs covered under the medical benefit, refer to the following drug lists:

- Blue Cross commercial and BCN commercial members: [Medical oncology prior authorization list for Blue Cross commercial fully insured and BCN commercial members](#)
- Medicare Plus Blue and BCN Advantage members: [Medical Drug and Step Therapy Prior Authorization List for Medicare Plus Blue and BCN Advantage members](#)

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



**Blue Cross
Blue Shield
Blue Care Network**
of Michigan

Nonprofit corporations and independent licensees
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Provider alert

**Blue Cross commercial, Medicare Plus BlueSM,
BCN commercial and BCN AdvantageSM**

Categories: Authorizations/referrals, Pharmacy

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