

Reminder: We added a step therapy requirement to Izervay for dates of service on or after April 1 for Medicare Advantage members

For dates of service on or after April 1, 2026, healthcare providers are required to show that our Medicare Plus Blue and BCN Advantage members have tried and failed the preferred product Syfovre[®] (pegcetacoplan), HCPCS code J2781, when requesting prior authorization for the following drug:

- Izervay[®] (avacincaptad pegol), HCPCS code J2782

We added this requirement to our document [Medical Drug and Step Therapy Prior Authorization List for Medicare Plus Blue and BCN Advantage members](#) on April 1, 2026. Be sure to check this list for the latest step therapy requirements when prescribing medical benefit drugs for Medicare Advantage members.

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

When prior authorization is required

These drugs require prior authorization, as applicable, when they are administered by a 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

How to submit prior authorization requests

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

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.

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](#).

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