Blue Cross Blue Shield Blue Care Network of Michigan

Nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association

Update: Additional medical benefit drugs to have site-of-care requirements for most commercial members starting Feb. 1

We updated this communication to correct the generic name for Hympavzi.

For dates of service on or after Feb. 1, 2027, we're adding site-of-care 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:

- Alhemo® (concizumab-mtci), HCPCS code J7173
- Hympavzi® (marstacimab-hncq), HCPCS code J7172
- Imaavy® (nipocalimab-aahu), HCPCS code J9256
- Lumvoa™ (veligrotug-vvze), HCPCS code J3242*
- Tyruko® (natalizumab-sztn), HCPCS code Q5134

We're making this change to help promote safe, effective treatment while responsibly managing healthcare costs. This change supports clinically appropriate, cost-effective care and helps ensure medical benefit drugs are used safely and effectively.

As a reminder, these drugs already require prior authorization. The new site-of-care requirement is in addition to the current prior authorization requirement.

What this means

When requesting prior authorization, you'll be prompted to select a site of care when you submit prior authorization requests for these drugs. The request will be approved automatically if the request meets the clinical criteria for the drug and is for one of the following sites of care: doctor's or other health care provider's office; ambulatory infusion center; or the member's home, from a home infusion therapy provider.

Additional information or documentation may be required for requests to administer the drugs listed above in an outpatient hospital setting.

Members who start courses of treatment with one of the drugs listed above before Feb. 1, 2027, can continue receiving the drug in the current location until their existing authorization expires. If these members continue treatment under a new prior authorization, the site-of-care requirement will apply.

We'll update the pertinent drug lists prior to the effective date.

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*The HCPCS code for Lumvoa is J3590 until Jan. 1, 2027.