

## Clinical criteria updates for specialty pharmacy

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### **ING-CC-0061**

Clinical criteria ING-CC-0061 addresses the use of gonadotropin releasing hormone analogs for the treatment of non-oncologic indications. Effective for dates of service on and after December 1, 2019, the use of Zoladex for the treatment of endometriosis will be limited to 6 months.

**The following clinical criteria documents were endorsed at the June 20, 2019 Clinical Criteria meeting.**

### **Revised clinical criteria effective July 15, 2019**

(The following clinical criteria was revised to expand medical necessity indications or criteria.)

ING-CC-0124: Keytruda (pembrolizumab)

### **Revised clinical criteria effective July 15, 2019**

(The following clinical criteria were reviewed and may have word changes or clarifications, but had no significant changes to the medical necessity indications or criteria.)

ING-CC-0008: Subcutaneous Hormonal Implants

ING-CC-0048: Spinraza (nusinersen)

ING-CC-0051: Enzyme Replacement Therapy for Gaucher Disease

ING-CC-0076: Nulojix (belatacept)

ING-CC-0077: Palynziq (pegvaliase-pqpz)

### **New and revised clinical criteria effective September 1, 2019**

(The following new clinical criteria were revised to expand medical necessity indications or criteria.)

ING-CC-0103: Faslodex (fulvestrant) [previously CG-DRUG-62]

ING-CC-0121: Gazyva (obinutuzumab) [previously DRUG.00062]

## Revised clinical criteria effective December 1, 2019

(The following clinical criteria listed below might result in services that were previously covered now being considered not medically necessary.)

ING-CC-0003: Immunoglobulins

ING-CC-0031: Intravitreal Corticosteroid Implants

ING-CC-0061: GnRH Analogs for the treatment of non-oncologic indications

To access the clinical criteria information for any of the updates above, please click [here](#). If you do not have access to the internet, you may request a hard copy of any updated policy by contacting the [Provider Call Center](#).

**URL:** <https://providernews.anthem.com/connecticut/article/clinical-criteria-updates-for-specialty-pharmacy-29>

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