

Prior authorization requirements for injectable/infusible drugs: mepolizumab (Nucala) and reslizumab (Cinqair)

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Effective September 1, 2018, prior authorization (PA) requirements will change for injectable/infusible drugs mepolizumab (Nucala®) and reslizumab (Cinqair®). Federal and state law, as well as state contract language and Centers for Medicare & Medicaid Services guidelines, including definitions and specific contract provisions/exclusions, take precedence over these PA rules and must be considered first when determining coverage.

Noncompliance with new requirements may result in denied claims.

PA requirements will be added to the following:

- Mepolizumab (Nucala) — injection, 1 mg (J2182)
- Reslizumab (Cinqair) — injection, 1 mg (J2786)

To request PA, you may use one of the following methods:

- Web: <https://www.availity.com>
- Fax: 1-800-964-3627
- Phone: 1-855-661-2028

Not all PA requirements are listed here. PA requirements are available to contracted providers through the Availity Portal (<https://www.availity.com>). Providers who are unable to access Availity may call us at **1-855-661-2028**.

URL: <https://providernews.anthem.com/kentucky/article/prior-authorization-requirements-for-injectableinfusible-drugs-mepolizumab-nucala-and-reslizumab-cinqair-2>

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