

Prior authorization updates for specialty pharmacy are available

Published: Jan 1, 2021 - **Products & Programs** / Pharmacy

Prior authorization updates

Effective for dates of service on and after **April 1, 2021**, the following specialty pharmacy codes from current or new clinical criteria documents will be included in our prior authorization review process.

Please note, inclusion of National Drug Code (NDC) code on your claim will help expedite claim processing of drugs billed with a Not Otherwise Classified (NOC) code. The Health Plan requires that claims for injection services performed in the office setting must include the applicable HCPCS J-code, Q-code, or S-code, with the corresponding National Drug Code, for the injected substance. This requirement is consistent with CMS guidelines. A covered drug will not be eligible for reimbursement when the NDC is not reported on the same claim

Access the [Clinical Criteria information](#).

For Anthem Blue Cross and Blue Shield along with our affiliate HealthKeepers, Inc., prior authorization clinical review of these specialty pharmacy drugs will be managed by Anthem. Drugs used for the treatment of Oncology will still require pre-service clinical review by AIM Specialty Health® (AIM), a separate company and *are shown in italics in the table below*.

This would apply to members with Preferred Provider Organization (PPO), HealthKeepers (HMO), POS AdvantageOne, and Act Wise (CDH plans).

Clinical Criteria	HCPCS or CPT Code(s)	Drug
* <i>ING-CC-0095</i>	<i>J9041</i>	<i>Velcade (Bortezomib)</i>
* <i>ING-CC-0095</i>	<i>J9044</i>	<i>Bortezomib</i>
* <i>ING-CC-0093</i>	<i>J9171</i>	<i>Docetaxel</i>
* <i>ING-CC-0181</i>	<i>J3490</i>	<i>Veklury</i>

* Non-oncology use is managed by Anthem's medical specialty drug review team. *Oncology use is managed by AIM.*

Step therapy updates

Update on Ocrevus step therapy notification

Ocrevus will still be non-preferred as noted below, but please note that the step therapy criteria have been updated since the last publication.

Effective for dates of service on and after **February 1, 2021**, the following specialty pharmacy codes from current or new clinical criteria documents will be included in our existing specialty pharmacy medical step therapy review process.

Access the [step therapy drug list](#).

For Anthem Blue Cross and Blue Shield and HealthKeepers, Inc., prior authorization clinical review of these specialty pharmacy drugs will be managed by Anthem. Drugs used for the treatment of Oncology will still require pre-service clinical review by AIM Specialty Health® (AIM), a separate company and are *shown in italics in the table below*.

This would apply to members with Preferred Provider Organization (PPO), HealthKeepers (HMO), POS AdvantageOne, and Act Wise (CDH plans).

Clinical Criteria	Status	Drug(s)	HCPCS Codes
ING-CC-0011	Non-preferred	Ocrevus	J2350

Correction to a prior authorization update

In the October 2020 edition of *Provider News*, we published a prior authorization update regarding clinical criteria **ING-CC-0174** on the drug Kesimpta.

- The NOC codes, J3490, J3590 and C9399 are valid codes for Kesimpta. The code J9302 is not a valid code for the drug Kesimpta.

915-0120-PN-VA

URL: <https://providernews.anthem.com/virginia/article/prior-authorization-updates-for-specialty-pharmacy-are-available-9>

Featured In:

January 2021 Anthem Provider News - Virginia

Anthem Blue Cross and Blue Shield is the trade name of: In Colorado Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. In Connecticut: Anthem Health Plans, Inc. In Georgia: Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. In Indiana: Anthem Insurance Companies, Inc. In Kentucky: Anthem Health Plans of Kentucky, Inc. In Maine: Anthem Health Plans of Maine, Inc. In Missouri (excluding 30 counties in the Kansas City area): RightCHOICE® Managed Care, Inc. (RIT), Healthy Alliance® Life Insurance Company (HALIC), and HMO Missouri, Inc. RIT and certain affiliates administer non-HMO benefits underwritten by HALIC and HMO benefits underwritten by HMO Missouri, Inc. RIT and certain affiliates only provide administrative services for self-funded plans and do not underwrite benefits. In Nevada: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. dba HMO Nevada. In New Hampshire: Anthem Health Plans of New Hampshire, Inc. HMO plans are administered by Anthem Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plan, Inc. In Ohio: Community Insurance Company. In Virginia: Anthem Health Plans of Virginia, Inc. trades as Anthem Blue Cross and Blue Shield in Virginia, and its service area is all of Virginia except for the City of Fairfax, the Town of Vienna, and the area east of State Route 123. In Wisconsin: Blue Cross Blue Shield of Wisconsin (BCBSWI), which underwrites or administers the PPO and indemnity policies and underwrites the out of network benefits in POS policies offered by CompCare or WCIC; CompCare Health Services Insurance Corporation (CompCare) underwrites or administers the HMO policies and Wisconsin Collaborative Insurance Company (WCIC) underwrites or administers Well Priority HMO or POS policies. Independent licensees of the Blue Cross and Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross and Blue Shield names and symbols are registered marks of the Blue Cross and Blue Shield Association. Use of the Anthem websites constitutes your agreement with our Terms of Use.
