

Specialty pharmacy updates effective December 2020

Published: Sep 1, 2020 - Products & Programs / Pharmacy

Prior authorization updates

Effective for dates of service on and after December 1, 2020, 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 NDC code on claims will help expedite claim processing of drugs billed with a not otherwise classified (NOC) code.

To access the clinical criteria information, please click [here](#).

Prior authorization clinical review of non-oncology specialty pharmacy drugs will be managed by Anthem’s medical specialty drug review team. *Review of specialty pharmacy drugs for oncology indications will be managed by AIM Specialty Health® (AIM), a separate company, and are shown in italics.*

Clinical Criteria	HCPCS or CPT Code	Drug
<i>ING-CC-0164</i>	<i>J3490 J9999 C9399</i>	<i>Jelmyto</i>
<i>ING-CC-0165</i>	<i>J3490 J3590 J9999 C9399</i>	<i>Trodelvy</i>
ING-CC-0061	J1950 J3490	Fensolvi

Site of care updates

Effective for dates of service on and after December 1, 2020, the following specialty pharmacy codes from current or new clinical criteria documents will be included in our existing prior authorization site of care review process.

To access the site of care drug list, please click [here](#).

Prior authorization clinical review of non-oncology specialty pharmacy drugs will be managed by Anthem’s medical specialty drug review team. *Review of specialty pharmacy drugs for oncology indications will be managed by AIM Specialty Health® (AIM), a separate company, and are in italics.*

Clinical Criteria	HCPCS or CPT Code	Drug
ING-CC-0153	J0791	Adakveo (crizanlizumab)
ING-CC-0139	J3111	Evenity (romosozumab)
ING-CC-0154	J0223	Givlaari (givosiran)
ING-CC-0156	J0896	Reblozyl (luspatercept)
ING-CC-0003	J1558	Xembify (immune globulin)
<i>*ING-CC-0002</i>	<i>Q5120</i>	<i>Ziextenzo (pegfilgrastim-bmez)</i>

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

Reminder: process for medical non-oncology specialty drug reviews

Please follow these steps to submit medical non-oncology specialty drug reviews:

Action	Contact
Submit a new prior authorization request for a medical specialty drug review Submit a reauthorization request for a medical specialty drug review previously performed by AIM	Call IngenioRx at 833-293-0659 or Fax IngenioRx at 888-223-0550
Inquire about an existing request (initially submitted to AIM or IngenioRx), peer-to-peer review, or reconsideration	Call IngenioRx at 833-293-0659

Please note:

- AIM continues to be responsible for performing **medical oncology drug** reviews for existing commercial medical benefit for our employer group business.

- Clinical criteria for **medical non-oncology specialty drugs** continue to reside on the [Clinical Criteria webpage](#).
- Post service clinical coverage reviews and grievance and appeals process and teams have not changed.

637-0920-PN-NE

URL: <https://providernews.anthem.com/connecticut/article/specialty-pharmacy-updates-effective-december-2020>

Featured In:

September 2020 Anthem Connecticut Provider News, September 2020 Anthem New Hampshire Provider News, September 2020 Anthem Maine Provider News

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.
