

PROVIDER BULLETIN

PROVIDER INFORMATION



March 29, 2016

Addition of Lazanda® to Existing Drug-Related Prior Authorization with Quantity Limit Program

Effective June 1, 2016, Blue Cross and Blue Shield of Minnesota (Blue Cross) will require prior authorization (PA) with a quantity limit (QL) requirement for Lazanda® (fentanyl) nasal spray. Lazanda® is indicated for the management of breakthrough cancer pain in cancer patients 18 years of age and older who are already receiving and who are tolerant to opioid therapy for their underlying persistent cancer pain.

As stewards of healthcare expenditures for our subscribers, we are charged with ensuring the highest quality, evidence based care for our members. One method for doing so is through the prior authorization process. The primary purpose is to ensure that evidence based care is provided to our members, driving quality, safety, and affordability.

Changes to Existing Utilization Management (UM) Programs Effective June 1, 2016

Pharmacy UM Drug Program Criteria	UM Target Drug Name	Quantity Limit (per 30 days), if applicable
Transmucosal fentanyl PA with Quantity Limit	LAZANDA	30 bottles

Prior authorization requests may be submitted for review starting May 18, 2016.

Products impacted

This PA with QL program applies to commercial lines of business **and** the following Minnesota Health Care Programs: Blue Advantage Prepaid Medical Assistance Program (PMAP), Minnesota Senior Care Plus (MSC+), and MinnesotaCare.

New PA criteria will be posted on April 18, 2016, and can be accessed using the Blue Cross provider link.

- Access providers.bluecrossmn.com
- Under Tools And Resources, select Medical policy, then acknowledge the Acceptance statement
- Select Medical and Behavioral Health Policies

CoverMyMeds prior authorization request service

As a reminder, CoverMyMeds (CMM) is a free service to providers which allows quick and easy submission of PA requests. Experience with CMM by other plans has demonstrated marked reductions in physician office call-backs regarding PA requests, after CMM is implemented. PA requests may also continue to be faxed to their review destination external to the CMM portal, as is the current practice.

You may access CMM at www.covermymeds.com. Select Help (top right of the web page) to view FAQs and Support tutorials (3-5 minutes), including live online chat support to help you get started. You will need to open a CMM account to submit requests using the portal.

Questions?

If you have questions, please contact provider services at **(651) 662-5200** or **1-800-262-0820**.