

PROVIDER BULLETIN

PROVIDER INFORMATION



May 9, 2017

New Drug-Related Prior Authorization (PA) with Quantity Limit (QL) for Entresto

Effective July 1, 2017, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will require PA with QL for Entresto (sacubitril/valsartan). Entresto is indicated to reduce the risk of cardiovascular death and hospitalization for heart failure in patients with chronic heart failure (NYHA Class II-IV) and reduced ejection fraction. The intent of this PA program is to ensure that patients prescribed therapy meet the selection requirements defined in product labeling and/or clinical guidelines and/or clinical studies.

To ensure that current therapy is not interrupted, any subscriber with an identified paid claim for Entresto will have a PA entered into the claims system, beginning July 1, 2017, and ending June 30, 2018.

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

Pharmacy Prior Authorization Program	Drug Name	Quantity Limit (per 30 days)
Nepriylsin Inhibitor (Entresto) PA with QL	Entresto (sacubitril/valsartan)	60 tablets

Products impacted

This PA 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+)
- Minnesota Care

New PA criteria will be posted by June 1, 2017, 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 Utilization Management
- Select Pharmacy Utilization Management Programs

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**.