

PROVIDER QUICK POINTS

PROVIDER INFORMATION



June 6, 2018

Pharmacy Benefit Update – New Drug-Related Prior Authorization (PA) with Quantity Limit (QL) Criteria: Lyrica CR[®] (pregabalin Extended Release (ER))

Effective July 1, 2018, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will require PA with QL for Lyrica CR[®] (pregabalin Extended Release (ER)).

The intent of the Lyrica CR[®] PA with QL is to appropriately select patients for therapy according to product labeling and/or clinical guidelines and/or clinical studies. The program also encourages the use of generic duloxetine, amitriptyline, nortriptyline, desipramine, imipramine, gabapentin, venlafaxine, or tramadol; as well as pregabalin immediate release prior to therapy with the target agent. The program will not allow approval for patients who have a Food and Drug Administration (FDA) contraindication to the target agent.

As stewards of healthcare expenditures for our subscribers, we are charged with ensuring the highest quality, evidence-based care for our subscribers. One method for doing so is through the PA process. The primary purpose 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)
Lyrica CR [®] (pregabalin ER) Prior Authorization with Quantity Limit	Lyrica CR [®] (pregabalin ER)	82.5 mg – 30 tablets
		165 mg – 30 tablets
		330 mg – 60 tablets

Products Impacted

This PA program applies to commercial lines of business.

The new PA criteria is posted and may 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 View All Active Policies
- 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.

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Distribution: Available on providers.bluecrossmn.com. <https://www.bluecrossmn.com/healthy/public/personal/home/providers/forms-and-publications>

You may access CMM at www.covermyeds.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**.