PROVIDER BULLETIN PROVIDER INFORMATION



January 2, 2023

Updated Minnesota Health Care Programs (MHCP) and Minnesota Senior Health Options (MSHO) Prior Authorization and *Medical Policy* Requirements

Effective March 1, 2023, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will be updating its government programs *Medical Policy* and pre-authorization/pre-certification/notification lists. The lists clarify *Medical Policy*, prior authorization, and notification requirements for MHCP (Families and Children, MinnesotaCare, and Minnesota Senior Care Plus) and MSHO products.

As stewards of healthcare expenditures for our subscribers, we are charged with ensuring they receive appropriate, quality care while also maintaining overall costs. The prior authorization process ensures that the health service or drug being proposed is medically necessary, and reflective of evidence-based medicine and industry standards, prior to treatment. This process helps us manage the cost and quality of care appropriately for our members.

The following **new** policies and/or prior authorization requirements **will be applicable** to subscriber claims on or after March 1, 2023.

Policy #	Policy name	New policy	Prior authorization required	
			MHCP	MSHO
MHCP	Skyrizi (risankizumab-rzaa) (Intravenous only)	No	Yes	Yes

The following policies have transitioned to new policy numbers, with changes in *Clinical Criteria*, and **will be applicable** to subscriber claims on or after March 1, 2023.

New policy #	Prior policy #	Policy name	Prior authorization required	
			MHCP	MSHO
МНСР	ING-CC-0072	Selective Vascular Endothelial Growth Factor (VEGF) Inhibitors (Beovu, Byooviz, Cimerli, Eylea, and Lucentis only)	Yes	Yes

The following policies have changes in *Clinical Criteria* and **will be applicable** to subscriber claims on or after March 1, 2023.

Policy #	Policy name	Prior authorization required	
	·	MHCP	MSHO
ING-CC-0018	Agents for Pompe Disease (Lumizyme, Nexviazyme)	Yes	Yes
ING-CC-0017	Xiaflex (collagenase clostridium histolyticum)	Yes	Yes
ING-CC-0025	Aldurazyme (laronidase)	Yes	Yes
ING-CC-0175	Proleukin (aldesleukin)	Yes	Yes
ING-CC-0182	Iron Agents (Feraheme, Injectafer, Monoferric) (Medicaid only)	Yes	Yes
ING-CC-0130	Imfinzi (durvalumab)	Yes	Yes
ING-CC-0097	Vidaza (azacitidine)	Yes	Yes
ING-CC-0002	Colony Stimulating Factor Agents	Yes	Yes
ING-CC-0107	Bevacizumab for Non-Ophthalmologic Indications (Alymsys, Avastin, Mvasi, Zirabev)	Yes	Yes

Where do I find the current government programs Precertification/Preauthorization/Notification List?

- Go to https://provider.publicprograms.bluecrossmn.com/docs/inline/MNMN_CAID_PriorAuthorizationList.pdf?
 _pdf?v=202203311948 or
- Go to **bluecrossmn.com/providers** > Tools & Resources > Minnesota Health Care Programs site > Prior Authorization > *Prior Authorization List.*

Where do I find the current government programs Medical Policy Grid?

- Go to https://provider.publicprograms.bluecrossmn.com/docs/gpp/MNMN_CAID_MedicalPolicyGrid.pdf? v=202203311949 or
- Go to bluecrossmn.com/providers > Tools & Resources > Minnesota Health Care Programs site >
 Resources > Manuals and Guidelines > Medical Policies and Clinical UM Guidelines > Medical Policy
 Grid.

Where can I access Medical Policies?

- MN DHS (MHCP) policies: http://www.dhs.state.mn.us/main/idcplg?ldcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16 157386
- Blue Cross policies: https://www.bluecrossmn.com/providers/medical-policy-and-utilization-management
- Amerigroup policies: https://provider.publicprograms.bluecrossmn.com/minnesotaprovider/medical-policies-and-clinical-guidelines and https://www.anthem.com/pharmacyinformation/clinicalcriteria

Please note that the **Precertification Look-Up Tool** is not available for prior authorization look up.

Questions?

If you have questions, please contact Blue Cross Provider Services at 1-866-518-8448.