

# PROVIDER BULLETIN

## PROVIDER INFORMATION



November 1, 2024

### Prime Therapeutics Management (UM) Program: Medical Drug Updates

*In December of 2022, Magellan Rx Management was acquired by Prime Therapeutics. Effective October 1, 2024, the new brand entity for the medical pharmacy solutions program will be “Prime Therapeutics Management.”*

Prime Therapeutics Management program for medical drugs will be making updates to the Current Procedural Terminology (CPT) Prior Authorization (PA) Code List.

The following drug(s) have been added to the medical drug program and will require prior authorization for dates of service beginning **January 1, 2025**.

Drug Name	Code(s)	Line(s) of Business that will require Prior Authorization
Tecelra	J9999	Commercial
Tecentriq Hybreza	J9999	Commercial, Medicare and Medicaid
Ocrevus Zunovo	J3590	Commercial, Medicare and Medicaid

**For Medicare and Medicaid lines of business, new drugs that currently don't have individual policies will follow PA to label policy.**

The following drug(s), which are currently on the drug list, have updates to Medical Pharmacy Policies effective **January 1, 2025**.

Drug Name	Code(s)	Line(s) of Business that will require Prior Authorization
PiaSky	J3590	Commercial and Medicaid
Actemra IV	J3262	Commercial
Tofidence	Q5133	Commercial
Tyenne IV	Q5135	Commercial
Vyvgart Hytrulo	J9334	Commercial and Medicaid

#### To view the Medical Drug Lists:

- Access the 'Provider Section' of the Blue Cross website at [bluecrossmn.com/providers](https://bluecrossmn.com/providers)
- Select “Medical and behavioral health policies” under “Medical Management”
- Scroll down and click on the “Prime Therapeutics Management Medical Drug clinical guidelines” link, located under Other evidence-based criteria and guidelines we use and how to access them
- Medical Drugs are listed in alphabetical order. To search for a specific drug, Ctrl + F and type in the drug name.
- Select the drug to view the Medical Policy for the selected drug.
- All drugs in the list apply to Medicare members. Please refer to CMS for the clinical guidelines that apply for Medicare members.

- A reference will be placed behind the drug name to indicate if the policy applies to Commercial, Medicaid, or both.

### **Products Impacted**

- Commercial
- Medicare Advantage
- Minnesota Health Care Programs

### **Prior Authorization Look Up Tool**

Providers should use the Prior Authorization Look Up Tool on [Availity.com/Essentials](https://www.availity.com/essentials) to quickly determine if an authorization is required. By entering Member Group Number, Date of Service and Procedure Code, the tool will indicate whether an Authorization is required. If an Authorization is not required, the tool will allow the user to print the results for their records. If an Authorization is required, the user will move directly into the next field in Authorization application to complete the request.

### **To access the Prior Authorization Look Up Tool:**

1. Log in at [Availity.com/Essentials](https://www.availity.com/essentials)
2. Select Patient Registration, choose Authorization & Referrals, then Authorizations
3. Select Payer BCBSMN, your Organization, Transaction Type Outpatient and you will be redirected to the Authorization Look Up Tool application.

### **To submit a Prior Authorization (PA) Request to Prime Therapeutics Management**

Providers submit Prime Therapeutics Management requests at [Availity.com/Essentials](https://www.availity.com/essentials). There is no cost to the provider.

Instructions on how to utilize this portal are found at [Availity.com/Essentials](https://www.availity.com/essentials). Providers should reference the Prime Therapeutics Management Medical Policies, submit prior authorization requests and submit all applicable clinical documentation with the PA request. Failure to submit required information may result in review delays or denial of the request due to insufficient information.

Note: An approved PA does not guarantee coverage under a subscriber's benefit plan. Subscriber benefit plans vary in coverage and some plans may not provide coverage for certain services discussed in the medical policies.

**If a provider does not obtain a required prior authorization before rendering services, Blue Cross will deny claims as provider liability for lack of prior authorization.**

### **Questions?**

If you have questions and would like to speak to a Prime Therapeutics Management representative, call 800-424-1706, 8:00 a.m. to 8:00 p.m. CST, Monday – Friday.