Healthy Blue

Medicaid Managed Care

Provider Bulletin
[Date]

Prior authorization updates for medications billed under the medical benefit

Effective [Date], the following medication codes will require prior authorization. Please note, inclusion of a National Drug Code (NDC) on your medical claim is necessary for claims processing.

Visit the [***Clinical Criteria*** **website or the Louisiana Medicaid Single PDL (LDH) here**] to search for the specific *Clinical Criteria* listed below.

Clinical Criteria	HCPCS or CPT® code(s)	Drug name
[CC-0252	C9399; J3590	Adzynma (ADAMTS13, recombinant-krhn)
CC-0253	J3490, J3590, J9999	Aphexda (motixafortide)
CC-0107	J3490, J3590	Avzivi (bevacizumab-tnjn)
LDH	C9399, J3490	Bimzelx (bimekizumab-bkzx)
CC-0255	C9399, J3490, J3590	Loqtorzi (toripalimab-tpzi)
LDH	J3590	Omvoh (mirikizumab-mrkz)
LDH	J3490	Rivfloza (nedosiran)
LDH	J3490, J3590	Ryzneuta (efbemalenograstim alfa-vuxw)
CC-0257	C9399, J3490	Wainua (eplontersen)
CC-0254	J3490	Zilbrysq (zilucoplan)
LDH	J3590	Zymfentra (infliximab-dyyb)]

What if I need assistance?

If you have questions about this communication or need assistance with any other item, contact your local provider relationship management representative or call Provider Services at [**844-521-6942**].

Note: Prior authorization requests for certain medications may require additional documentation to determine medical necessity.

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