



BlueCross BlueShield
of North Carolina

MEDICARE

Blue Cross[®] and Blue Shield[®] of North Carolina (Blue Cross NC) | Healthy Blue + MedicareSM (HMO-POS D-SNP)

Specialty Pharmacy Precertification and Step Therapy List Expansion

Effective for dates of service on or after April 1, 2025, the specialty Medicare Part B drug listed in the table below will be included in our precertification review process.

Federal and state law, as well as state contract language and CMS guidelines, including definitions and specific contract provisions/exclusions, take precedence over these precertification rules and must be considered first when determining coverage. Noncompliance with new requirements may result in denied claims.

HCPSC or CPT [®] Codes	Medicare Part B Drugs
J1952	Camcevi (leuprolide mesylate)
J0175	Kisunla (donanemab-azbt)
J3590	Piasky (crovalimab-akkz)
J3590, J9999	Tevimbra (tislelizumab-jsgr)
C9399, J3590	Tyenne (tocilizumab-aazg)

Notification of Specialty Pharmacy Medical Step Therapy Updates

Effective February 1, 2025, the following Part B medications from the current *Clinical Criteria Guidelines* will be included in our medical step therapy precertification review process. Step therapy review will apply upon precertification initiation, in addition to the current medical necessity review (as is current procedure). Step therapy will not apply for members who are actively receiving medications listed below.

Clinical UM Guidelines are publicly available on the provider website. Visit the [Clinical Criteria](#) page to search for specific criteria.

<https://bluecrossnc.com/providers/networks-programs/blue-medicare/healthy-blue-medicare>

Blue Cross and Blue Shield of North Carolina Senior Health, DBA Blue Cross and Blue Shield of North Carolina, is an HMO-POS D-SNP plan with a Medicare contract and a NC State Medicaid Agency Contract (SMAC). Enrollment in Blue Cross and Blue Shield of North Carolina Senior Health depends upon contract renewal.

[®], SM are marks of the Blue Cross Blue Shield Association, an association of independent Blue Cross and Blue Shield plans. All other marks and names are property of their respective owners. Blue Cross and Blue Shield of North Carolina is an independent licensee of the Blue Cross Blue Shield Association.

NCBCBS-CR-071022-24-CPN70592 December 2024

Blue Cross and Blue Shield of North Carolina
 Healthy Blue + Medicare
 Specialty Pharmacy Precertification and Step Therapy List Expansion

Clinical UM Guidelines	Preferred Drug(s)	Nonpreferred Drug(s)
CC-0003	Intravenous: Gamunex-C ¹ Octagam Subcutaneous: Cutaquig Hizentra Xembify	Intravenous: Alyglo Asceniv Bivigam Flebogamma DIF Gammaked ¹ Gammagard ¹ Gammagard S/D Gammaplex Panzyga Privigen Subcutaneous: Cuvitru HyQvia

1 Gamunex-C, Gammaked, and Gammagard may be administered intravenously or subcutaneously.