

Amondys 45™ and Evkeeza™ will require authorization for commercial members

Blue Cross Blue Shield of Michigan and Blue Care Network are adding prior authorization requirements for the following drugs covered under the medical benefit:

Drug	Details	Notes
Amondys 45 (casimersen), HCPCS codes J3490 and J3590	For BCN commercial members: Requires authorization for courses of therapy starting on or after March 22, 2021.	Blue Cross and BCN consider Amondys 45 investigational / experimental due to insufficient evidence of clinical benefit. We are awaiting the results of ongoing clinical trials to provide evidence of a clinical benefit.
	For Blue Cross commercial members: Requires authorization for courses of therapy starting on or after April 26, 2021.	
Evkeeza (evinacumab- dgnb), HCPCS codes J3490 and J3590	For BCN commercial members: Requires authorization for courses of therapy starting on or after April 5, 2021.	
	For Blue Cross commercial members: Requires authorization for courses of therapy starting on or after May 3, 2021.	

How to submit authorization requests

Submit authorization requests through the NovoLogix® online tool. It offers real-time status checks and immediate approvals for certain medications.

To learn how to submit requests through NovoLogix, go to ereferrals.bcbsm.com and do the following:

- **For BCN commercial members:** Click *BCN* and then click [Medical Benefit Drugs](#). In the BCN HMO (commercial) column, see the “How to submit authorization requests electronically using NovoLogix” section.
- **For Blue Cross commercial members:** Click *Blue Cross* and then click [Medical Benefit Drugs](#). In the Blue Cross PPO (commercial) column, see the “How to submit authorization requests electronically using NovoLogix” section.

More about the authorization requirements

These authorization requirements apply only to groups that currently participate in the standard commercial Medical Drug Prior Authorization Program for drugs administered under the medical benefit.

To determine whether a group participates in the prior authorization program, see the [Specialty Pharmacy Prior Authorization Master Opt-in/out Group list](#).

Note: The Blue Cross and Blue Shield Federal Employee Program® and the UAW Retiree Medical Benefits Trust (non-Medicare) don't participate in the standard prior authorization program.

Authorization isn't a guarantee of payment. Health care practitioners need to verify eligibility and benefits for members.

List of requirements

For a list of requirements related to drugs covered under the medical benefit, please see the [Blue Cross and BCN utilization management medical drug list for Blue Cross PPO \(commercial\) and BCN HMO \(commercial\) members](#) document, which is available from these pages of our ereferrals.bcbsm.com website:

- [Blue Cross Medical Benefit Drugs](#)
- [BCN Medical Benefit Drugs](#)

We'll update the requirements list with this information prior to each effective date.