

# Medicare Part B Step Therapy Program: Preferred Drug List

Effective: April 1, 2024

Blue Cross and Blue Shield of Minnesota (Blue Cross) is charged with helping you receive the highest quality, effective, and affordable health care. One way we do this with drug products that are infused or injected by a healthcare professional is through step therapy.

**Step Therapy** is a program that uses a “step” approach and requires members try less costly, but just as effective preferred drugs before the plan covers higher-cost non-preferred drugs. For example, if Drug A and Drug B both treat your medical condition, we may require your doctor to prescribe Drug A first. If drug A does not work for you, then we will cover Drug B, upon request and based on medical need.

**The following list of Preferred Drug Products are included in the Medicare Part B Step Therapy Program.**

- This program applies to Medicare Part B drugs for members new to therapy or have not used a certain drug product in the last 365 days.
- You must use the preferred drug products listed below before a non-preferred drug product can be covered. All other products in these drug classes are non-preferred.
- Coverage will be provided for Step Therapy Part B drugs when it is determined to be medically necessary, in accordance with CMS guidelines and *Blue Cross Medical Policy II-247 – Medicare Part B Step Therapy Program*. Certain drugs may require prior authorization to ensure safe and effective use, consistent with Medicare rules defined in CMS National Coverage Determination (NCDs) and relevant Local Coverage Determination (LCD) guidelines.
- The drug dose, frequency, and duration of use may not exceed the safety and efficacy data supporting the medical condition.
- This list applies to Blue Cross Medicare Advantage (PPO) Part B and SecureBlue<sup>SM</sup> Minnesota Senior Health Options (MSHO) programs.

Drug Class	Preferred Drug Product(s)	Non-Preferred Products
Intra-articular hyaluronan injections for osteoarthritis*	Synvisc, SynviscOne Euflexxa	Durolane, Gel-One, Gelsyn 3, GenVisc 850, Hyalgan, Hymovis, Monovisc, Orthovisc, Supartz, Synojoynt, Triluron, TriVisc, Visco-3
Infliximab*	Inflectra ( <i>infliximab-dyyb</i> ) Infliximab, unbranded Remicade ( <i>infliximab</i> ) Renflexis ( <i>infliximab-abda</i> )	Avsola ( <i>infliximab-axxq</i> ) Ixifi ( <i>infliximab-qbtx</i> )
C5 Inhibitors and Neonatal Fc receptor blocker (gMG only)*	Rystiggo Ultomiris Vyvgart, Vyvgart Hytrulo	Soliris

\*Prior authorization is required for new treatment starts.

## \*Notes

- The list is subject to change. You are encouraged to review this list periodically for updates. Blue Cross reserves the right to revise, update, and/or add/remove drugs to the list at any time without notice as new drugs are approved by the FDA and become available for use.
- You may request an exception from the plan's step therapy requirement to access a Part B covered drug, which is reviewed through our organization's determination process.
- The list does not guarantee a drug is covered under your benefit plan. Member benefit plans vary in coverage and some plans may not provide coverage for services discussed in medical policies. Guidelines applied are based upon and subject to a member's benefit plan and medical necessity guidelines.
- Medical drugs do not include drugs that process under the Medicare Part D pharmacy benefit, such as self-administered drugs or oral pills.
- To access Blue Cross medical policies and Medicare policies:
  - Go to [providers.bluecrossmn.com](http://providers.bluecrossmn.com)
  - Under the "Medical Management" section, select the "Medical and Behavioral health policies" option.
- To identify which medical drugs require authorization prior to administration:
  - Go to [providers.bluecrossmn.com](http://providers.bluecrossmn.com)
  - Under the "Medical Management" section, select the "Prior Authorization Lookup" option.
  - OR
  - Under the "Medical Management" section, select the "Medical and Behavioral health policies" option.
  - In the prior authorization box, select "See prior authorization information".
  - In the "Commercial and Medicare plans" section, select plan specific prior authorization lists.

## References:

- Centers for Medicare and Medicaid Services, Medicare Advantage Prior Authorization and Step Therapy for Part B Drugs. August 7, 2018. Available online at: <http://cms.gov>.
- Centers for Medicare and Medicaid Services, Internet-Only Medicare Benefit Policy Manual, CMS Pub. 100-02, Chapter 15, Sec. 50. Available online at: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs>

## Questions?

If you have questions, Medicare Advantage (PPO) programs:

- Members can contact Customer Service at **1-800-711-9865**. Calls to this number are free. Customer Service also has free language interpreter services available for non-English speakers. For TTY calls, call 711.
- Providers can contact Provider Services at **(651) 662-5200** or **1-800-262-0820**.

If you have questions, SecureBlue<sup>SM</sup> (Minnesota Senior Health Options) programs:

- Members can contact Customer Service at **1-888-740-6013**. Calls to this number are free. Customer Service also has free language interpreter services available for non-English speakers. For TTY calls, call 711.
- Providers can email [MHCPProviders@bluecrossmn.com](mailto:MHCPProviders@bluecrossmn.com) or contact Provider Services at **651-662-9962** or toll free at **1-866-518-8448**.