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Blue Cross and Blue Shield Association

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## Physician-Administered Drug Program Expanding in November

Effective November 11, 2019, Magellan Rx Management will begin performing prior authorization and voluntary pre-service reviews for new drugs added to the Physician-Administered Drug Program. These requests are now reviewed by Florida Blue.

### Here's What You Need to Know

Florida Blue is consolidating the review process for physician-administered drugs to make it more convenient for you to request a prior authorization or voluntary pre-service review for drugs administered by a physician. This includes drugs administered in the office, home, outpatient hospital, ambulatory surgical center, public health clinic and rural health clinic settings.

This is an expansion of the existing Physician-Administered Drug Program already managed by Magellan Rx Management. You can obtain a preservice review by accessing Magellan Rx Management's secure website at [ih.MagellanRx.com](http://ih.MagellanRx.com) or by calling them at 800-424-4947.

The Physician-Administered Drug Program applies to the following products:

BlueCare <sup>®</sup> HMO (Health Options, Inc.)	GoBlue
BlueMedicare <sup>SM</sup> HMO	Miami-Dade Blue
myBlue (myBlue network)	State Employees' PPO Plan
BlueChoice <sup>®</sup> (Preferred Patient Care)	Traditional
BlueMedicare PPO	BlueSelect (BlueSelect network)
BlueOptions <sup>SM</sup> (NetworkBlue)	BlueCard <sup>®</sup> Home
SimplyBlue	

**This change does not apply to Federal Employee Program<sup>®</sup>, Medicare Supplement, Medicare Part B Primary and BlueCard Host members.**

The list of new drugs added to the Physician-Administered Drug List effective November 11, 2019, is included on the following page. For a complete list of drugs included in the program, please refer to the [Manual for Physicians and Providers](#) on our website at [floridablue.com/providers](http://floridablue.com/providers) and select the *Physician-Administered Drug Program* [link](#).

**New Drugs added to the Physician-Administered Drug Program Drug List and managed by Magellan Rx Management effective November 11, 2019:**

<b>Code</b>	<b>Description</b>
A9513	Lutetium lu 177, dotatate, therapeutic, 1 millicurie (LUTATHERA)
A9600	Strontium sr-89 chloride, therapeutic, per millicurie (METASTRON)
A9604	Samarium sm-153 lexidronam, therapeutic, per treatment dose, up to 150 millicuries (QUADRAMET)
A9699 <sup>a</sup>	RADIOPHARMACEUTICAL, THERAPEUTIC, NOT OTHERWISE CLASSIFIED <sup>a</sup>
A9699, C9407 <sup>c</sup>	Iodine i-131 iobenguane, diagnostic, 1 millicurie (AZEDRA)
A9699, C9408 <sup>c</sup>	Iodine I-131 iobenguane, therapeutic, 1 millicurie (AZEDRA)
J0180	Injection, agalsidase beta, 1 mg (FABRAZYME)
J0185	Injection, aprepitant, 1 mg (CINVANTI)
J0221	Injection, alglucosidase alfa, (lumizyme), 10 mg (LUMIZYME)
J0470	Injection, dimercaprol, per 100 mg (BAL IN OIL)
J0490	Injection, belimumab, 10 mg (BENLYSTA IV)
J0517	Injection, benralizumab, 1 mg (FASENRA)
J0565	Injection, bezlotoxumab, 10 mg (ZINPLAVA)
J0567	Injection, cerliponase alfa, 1 mg (BRINEURA)
J0570	Buprenorphine implant, 74.2 mg (PROBUPHINE IMPLANT KIT)
J0584	Injection, burosumab-twza 1 mg (CRYSVITA)
J0600	Injection, edetate calcium disodium, up to 1000 mg (CALCIUM EDTA)
J0775	Injection, collagenase clostridium histolyticum, 0.001 mg (XIAFLEX)
J1301	Injection, edaravone, 1 mg (RADICAVA)
J1322	Injection, elosulfase alfa, 1 mg (VIMIZIM)
J1325	Injection, epoprostenol, 0.5 mg (EPOPROSTENOL SODIUM, FLOLAN, VELETRI)
J1428	Injection, eteplirsen, 10 mg (EXONDYS 51)
J1439	Injection, ferric carboxymaltose, 1 mg (INJECTAFER)

J1454	Injection, fosnetupitant 235 mg and palonosetron, 0.25 mg (AKYNZEO)
J1458	Injection, galsulfase, 1 mg (NAGLAZYME)
J1599	Injection, immune globulin, intravenous non-lyophilized, not otherwise specified, 500 mg (PANZYGA, ASCENIV)
J1627	Injection, granisetron, extended-release, 0.1 mg (SUSTOL)
J1729	Injection, hydroxyprogesterone caproate, not otherwise specified, 10 mg (HYDROXYPROGESTERONE CAPROATE)
J1743	Injection, idursulfase, 1 mg (ELAPRASE)
J1931	Injection, laronidase, 0.1 mg (ALDURAZYME)
J2182	Injection, mepolizumab, 1 mg (NUCALA)
J2350	Injection, ocrelizumab, 1 mg (OCREVUS)
J2502	Injection, pasireotide long acting, 1 mg (SIGNIFOR LAR)
J2724	Injection, protein c concentrate, intravenous, human, 10 iu (CEPROTIN)
J2786	Injection, reslizumab, 1 mg (CINQAIR)
J2787	Riboflavin 5'-phosphate, ophthalmic solution, up to 3 mL (PHOTREXA)
J2797	Injection, rolapitant, 0.5 mg (VARUBI)
J2840	Injection, sebelipase alfa, 1 mg (KANUMA)
J2860	Injection, siltuximab, 10 mg (SYLVANT)
J3145	Injection, testosterone undecanoate, 1 mg (AVEED)
J3245	Injection, tildrakizumab, 1 mg (ILUMYA)
J3304	Injection, triamcinolone acetonide, preservative-free, extended-release, microsphere formulation, 1 mg (ZILRETTA)
J3316	Injection, triptorelin, extended-release, 3.75 mg (TRIPTODUR)
J3397	Injection, vestronidase alfa-vjvk, 1 mg (MEPSEVII)
J3590 <sup>a</sup>	UNCLASSIFIED BIOLOGICS <sup>a</sup>
J7318	Hyaluronan or derivative, durolane, for intra-articular injection, 1 mg (DUROLANE)
J7329	Hyaluronan or derivative, trivisc, for intra-articular injection, 1 mg (TRIVISC)
Q9991	Injection, buprenorphine extended-release (sublocade), less than or equal to 100 mg (SUBLOCADE)
Q9992	Injection, buprenorphine extended-release, greater than 100 mg (SUBLOCADE)

HCPCS Assigned by CMS <sup>b</sup>	Fluocinolone acetonide 0.18 mg intravitreal implant (YUTIQ) <sup>b</sup>
C9043 HCPCS Assigned by CMS <sup>b</sup>	Levoleucovorin (KHAPZORY) <sup>b</sup>
HCPCS Assigned by CMS <sup>b</sup>	Mometasone furoate implant (SINUVA) <sup>b</sup>
HCPCS Assigned by CMS <sup>b</sup>	NON-ONCOLOGY BIOSIMILARS <sup>b</sup>
C9036 HCPCS Assigned by CMS <sup>b</sup>	Patisiran (ONPATTRO) <sup>b</sup>

<sup>a</sup>Includes existing and new-to-market physician-administered drugs that are assigned to the Unclassified Biologics HCPCS (J3590), or the radiopharmaceutical, Therapeutic, Not Otherwise Classified HCPCS (A9699). Once the drug or radiopharmaceutical is assigned a specific HCPCS by CMS, the new HCPCS will be included in the PADP Drug List.

<sup>b</sup>Once CMS assigns a specific HCPCS, the listed drug will be included in PADP and managed by MRxM. The drug will **NOT** be managed by MRxM while assigned to J3490.

PADP J3590 Drug List		
Code	Drug Name	Generic/HCPCS Descriptions
J3590 <sup>a</sup>	EVENITY <sup>d</sup>	ROMOSOZUMAB-AQQG <sup>d</sup>
J3590 <sup>a</sup> , C9050 <sup>c</sup>	GAMIFANT <sup>d</sup>	EMAPALUMAB-LZSG <sup>d</sup>
J3590 <sup>a</sup>	REVCovi <sup>d</sup>	ELAPEGADEMASE-LVIR <sup>d</sup>
J3590 <sup>a</sup> , C9052 <sup>c</sup>	ULTOMIRIS <sup>d</sup>	RAVULIZUMAB-CWVZ <sup>d</sup>

<sup>c</sup>C-codes are only billable for the specified drug services within a hospital outpatient setting. All other settings must be billed with J3590 (or A9699) until a specific HCPCS is assigned.

<sup>d</sup>Once a drug is assigned a specific HCPCS, the new HCPCS will be included in the PADP Drug List and managed through MRxM. Drugs assigned to J3590, are NOT accepted with C9399. MRxM authorizations will not be applied when billing C9399.

**Important note:** The table above lists new medications added to the program effective November 11, 2019. For a complete list of drugs included in the Physician-Administered Drug Program, please refer to the *Manual for Physicians and Providers* on our website at [floridablue.com](http://floridablue.com), and select the Physician Administered Drug Program [link](#).