



Medical drug benefit Clinical Criteria updates

Please note, this communication applies to Anthem HealthKeepers Plus, Medallion and Anthem HealthKeepers Plus, Commonwealth Coordinated Care Plus (Anthem CCC Plus) offered by HealthKeepers, Inc.

On August 20, 2021, the Pharmacy and Therapeutics (P&T) Committee approved the following *Clinical Criteria* applicable to the Anthem HealthKeepers Plus **medical drug benefit** for HealthKeepers, Inc. These policies were developed, revised, or reviewed to support clinical coding edits.

Visit *Clinical Criteria* to search for specific policies. If you have questions or would like additional information, use this **email**.

Please see the explanation/definition for each category of *Clinical Criteria* below:

- New: newly published criteria
- Revised: addition or removal of medical necessity requirements, new document number
- Updates marked with an asterisk (*) notate that the criteria may be perceived as more restrictive

Please share this notice with other members of your practice and office staff.

Note: The *Clinical Criteria* listed below applies only to the medical drug benefits contained within the member's medical policy. This does not apply to pharmacy services.

Effective date	Document number	Clinical Criteria title	New or revised
November 22, 2021	ING-CC-0202*	Saphnelo (anifrolumab-fnia)	New
November 22, 2021	ING-CC-0203*	Ryplazim (plasminogen, human-tvmh)	New
November 22, 2021	ING-CC-0010*	Proprotein Convertase Subtilisin Kexin Type 9 (PCSK9) Inhibitors	Revised
November 22, 2021	ING-CC-0034*	Hereditary Angioedema Agents	Revised
November 22, 2021	ING-CC-0027*	Denosumab Agents	Revised
November 22, 2021	ING-CC-0001*	Erythropoiesis Stimulating Agents	Revised
November 22, 2021	ING-CC-0156*	Reblozyl (luspatercept)	Revised
November 22, 2021	ING-CC-0124	Keytruda (pembrolizumab)	Revised
November 22, 2021	ING-CC-0104*	Levoleucovorin Agents	Revised
November 22, 2021	ING-CC-0009*	Lemtrada (alemtuzumab) for the Treatment of Multiple Sclerosis	Revised
November 22, 2021	ING-CC-0020	Tysabri (natalizumab)	Revised
November 22, 2021	ING-CC-0029*	Dupixent (dupilumab)	Revised
November 22, 2021	ING-CC-0038	Human Parathyroid Hormone Agents	Revised
November 22, 2021	ING-CC-0182*	Iron Agents	Revised
November 22, 2021	ING-CC-0075	Rituximab Agents for Non-Oncologic Indications	Revised
November 22, 2021	ING-CC-0096	Asparagine Specific Enzymes	Revised

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Effective date	Document number	Clinical Criteria title	New or revised
November 22, 2021	ING-CC-0169	Phesgo (pertuzumab/trastuzumab/hyaluronidase-zzxf)	Revised
November 22, 2021	ING-CC-0193	Evkeeza (evinacumab)	Revised
November 22, 2021	ING-CC-0081*	Crysvita (burosumab-twza)	Revised

If you have any questions about this communication, call Anthem HealthKeepers Plus, Medallion Provider Services at **800-901-0020** or Anthem CCC Plus Provider Services at **855-323-4687**.



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To start receiving email from us (including some sent in lieu of fax or mail), submit your information using the QR code to the right or via our online form (https://bit.ly/2XEUr24).