

New specialty pharmacy medical step therapy requirements

Effective for dates of service on and after October 1, 2022, the following specialty pharmacy codes from current or new *Clinical Criteria* documents will be included in our existing specialty pharmacy medical step therapy review process. Step therapy review will apply upon prior authorization initiation or renewal in addition to the current medical necessity review of all drugs noted below.

The list of *Clinical Criteria* is publicly available on our provider website. Visit the [Clinical Criteria](#) website to search for specific *Clinical Criteria*.

<i>Clinical Criteria</i>	Status	Drug(s)	HCPCS codes
ING-CC-0107	Preferred	Mvasi	Q5107
ING-CC-0107	Non-preferred	Avastin	J9035
ING-CC-0107	Non-preferred	Zirabev	Q5118



Email is the quickest and most direct way to receive important information from Anthem Blue Cross and Blue Shield.

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 ([anthem.ly/WImp](https://www.anthem.com/wi)).



<https://providers.anthem.com/wi>