

Prior authorization updates for medications billed under the medical benefit

Effective for dates of service on and after April 1, 2023, the following medication codes billed on medical claims from current or new *Clinical Criteria* documents will require prior authorization.

Please note, inclusion of a national drug code on your medical claim is required for claim processing.

Visit the [Clinical Criteria website](#) to search for the specific *Clinical Criteria* listed below.

<i>Clinical Criteria</i>	HCPCS or CPT® code(s)*	Drug name
ING-CC-0210	J3490, J3590, J9999, C9094	Enjaymo (sutimlimab-jome)
ING-CC-0211	J3490, J3590, J9999, C9095	Kimmtrak (tebentafusp-tebn)
ING-CC-0212	J2356	Tezspire (tezepelumab-ekko)
ING-CC-0213	J3490, C9399	Voxzogo (vosoritide)

*HCPC and CPT codes noted are eligible for payment based on Medicaid requirements and covered services by each state agency.

What if I need assistance?

If you have questions about this communication or need assistance with any other item, contact your assigned Provider Experience associate or call one of our Medi-Cal Customer Care Centers listed below:

- Call **800-407-4627** outside of L.A. County
- Call **888-285-7801** inside L.A. County

Note: Prior authorization requests for certain medications may require additional documentation to determine medical necessity.



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



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/3ILgko8>).

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