

**CHANGE NOTIFICATION TO SPECIALTY PHARMACY MEDICAL STEP THERAPY DRUG LIST**



May 1, 2019

**RE: Anthem expands specialty pharmacy medical step therapy drug list**

Dear Provider:

Anthem Blue Cross and Blue Shield and our subsidiary company, HMO Nevada (collectively Anthem) will be expanding the specialty pharmacy medical step therapy drug list.

The following clinical criteria will be effective August 1, 2019.

**Agents for Hereditary Angioedema ING-CC-0034**

Effective for dates of service on and after August 1, 2019, the following specialty pharmacy codes from new or current clinical criteria will be included in our existing specialty pharmacy medical step therapy review process. Haegarda® and Takhzyro™ will be the preferred prophylactic agents over Cinryze®.

Please note, inclusion of NDC code on your claim will shorten the claim processing time of drugs billed with a Not Otherwise Classified (NOC) code.

To access the clinical criteria information, here is the URL:  
[www11.anthem.com/pharmacyinformation/clinicalcriteria.html](http://www11.anthem.com/pharmacyinformation/clinicalcriteria.html)

Clinical Criteria	Status	Drug	HCPCS or CPT Code	NDC Code
ING-CC-0034	Preferred Agent	Haegarda®	J0599	63833-0828-02 63833-0829-02
ING-CC-0034	Preferred Agent	Takhzyro™	J3490, J3590, C9399	47783-0644-01
ING-CC-0034	Non-Preferred Agent	Cinryze®	J0598	42227-0081-05

Sincerely,

Allen Marino, M.D.  
Medical Director  
Anthem Blue Cross and Blue Shield