

PROVIDER Update



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Know What Changes are Coming for Prior Authorization

Changes effective now and starting July 1, 2023

Wellcare By Health Net (Health Net*) is making changes to the Medicare Advantage HMO/PPO prior authorization (PA) requirements as outlined in the table below. The PA changes apply to Direct Network physicians, hospitals, ancillary providers, and non-delegated fee-for-service participating physician groups.

Effective January 1, 2023

The below Part B medications require prior authorization (PA) per new HCPCS codes issued by the Centers for Medicare & Medicaid Services (CMS).

Code	Description
J0225	Injection, vutrisiran (Amvuttra®), 1 mg
J0893	Injection, decitabine (Sun Pharma) not therapeutically equivalent to J0894, 1 mg
J1456	Injection, fosaprepitant (Teva), not therapeutically equivalent to J1453, 1 mg
J1954	Injection, leuprolide acetate for depot suspension (Lutrate®), 7.5 mg
J2311	Injection, naloxone HCl (Zimhi®), 1 mg
J2327	Injection, risankizumab-rzaa, intravenous, 1 mg
J9046	Injection, bortezomib (Dr. Reddy's), not therapeutically equivalent to J9041, 0.1 mg
J9048	Injection, bortezomib (Fresenius Kabi), not therapeutically equivalent to J9041, 0.1 mg
J9049	Injection, bortezomib (Hospira®), not therapeutically equivalent to J9041, 0.1 mg
J9314	Injection, pemetrexed (Teva) not therapeutically equivalent to J9305, 10 mg
J9393	Injection, fulvestrant (Teva) not therapeutically equivalent to J9395, 25 mg

THIS UPDATE APPLIES TO:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

LINES OF BUSINESS:

- Wellcare By Health Net
 - Medicare Advantage (HMO)
 - Medicare Advantage (PPO)

PROVIDER SERVICES

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**Medicare (individual & employer group)
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PROVIDER PORTAL

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PROVIDER COMMUNICATIONS

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Effective January 1, 2023 – new CMS HCPCS codes, continued

Code	Description
J9394	Injection, fulvestrant (Fresenius Kabi) not therapeutically equivalent to J9395, 25 mg
Q5126	Injection, bevacizumab-maly, biosimilar, (Alymsys®), 10 mg

Effective April 1, 2023

The below Part B medications require PA per new HCPCS codes issued by CMS.

Code	Description
C9146	Injection, mirvetuximab soravtansine-gynx (Elahere™), 1 mg
C9147	Injection, tremelimumab-actl (Imjudo®), 1 mg
C9148	Injection, teclistamab-cqyv (Tecvayli™), 0.5 mg
C9149	Injection, teplizumab-mzwv (Tzield™), 5 mcg
J0208	Injection, sodium thiosulfate, 100 mg
J0218	Injection, olipudase alfa-rpcp (Xenpozyme®), 1 mg
J1411	Injection, etranacogene dezaparvovec-drlb (Hemgenix®), per therapeutic dose
J1449	Injection, eflapegrastim-xnst (Rolvedon™), 0.1 mg
J1747	Injection, spesolimab-sbzo (Spevigo®), 1 mg
J9196	Injection, gemcitabine hydrochloride (Accord), not therapeutically equivalent to J9201, 200 mg
J9294	Injection, pemetrexed (Hospira®), not therapeutically equivalent to J9305, 10 mg
J9296	Injection, pemetrexed (Accord), not therapeutically equivalent to J9305, 10 mg
J9297	Injection, pemetrexed (Sandoz), not therapeutically equivalent to J9305, 10 mg
Q5127	Injection, pegfilgrastim-fpgk (Stimufend®), biosimilar, 0.5 mg
Q5128	Injection, ranibizumab-eqrn (Cimerli™), biosimilar, 0.1 mg
Q5129	Injection, bevacizumab-adcd (Vegzelma®), biosimilar, 10 mg
Q5130	Injection, pegfilgrastim-pbbk (Flynetra®), biosimilar, 0.5 mg

Deletions, effective July 1, 2023

Below are Part B drugs and services that **no longer require PA** as of July 1:

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Code	Description
Revenue code 762	observation services (previously required authorization required if over 48 hours)
CPT 11980	Subcutaneous hormone pellet implantation (implantation of estradiol and/or testosterone pellets beneath the skin)
J0897	Denosumab (Prolia®) injection
J1750	Injection, iron dextran, 50 mg (INDeD®)

Deletions, effective July 1, 2023, continued

Code	Description
J1756	Injection, iron sucrose, 1 mg (Venofer®)
Q0221	Injection, tixagevimab and cilgavimab, for the pre-exposure prophylaxis only

Changes, effective July 1, 2023

The below Part B drug no longer requires Step Therapy as of July 1. PA still required.

Code	Description
J0585	Injection, onabotulinumtoxinA, 1 unit

Below are Part B drugs that require Step Therapy as of July 1. PA currently required.

Code	Description
J0587	Injection, rimabotulinumtoxinB, 100 units
J0588	Injection, incobotulinumtoxinA, 1 unit
J1437	Injection, ferric derisomaltose, 10 mg
J1439	Injection, ferric carboxymaltose, 1 mg
J1443	Injection, ferric pyrophosphate citrate solution (triferic), 0.1 mg of iron
J1560	Injection, gamma globulin, intramuscular, over 10 cc
Q0138	Injection, ferumoxytol, for treatment of iron deficiency anemia, 1 mg (non-ESRD use)
Q0139	Injection, ferumoxytol, for treatment of iron deficiency anemia, 1 mg (for ESRD on dialysis)
Q5126	Injection, bevacizumab-maly, biosimilar, (Alymsys), 10 mg

Additions, effective July 1, 2023

Below are Part B drugs that will require Step Therapy and PA as of July 1:

Code	Description
J1444	Injection, ferric pyrophosphate citrate powder, 0.1 mg of iron
J1445	Injection, ferric pyrophosphate citrate solution (triferic avnu), 0.1 mg of iron
J1460	Injection, gamma globulin, intramuscular, 1 cc

Use the new Coram contact information

Coram® is Health Net's preferred infusion provider. Please find updated contact information for Coram:

- Phone: 866-899-1661
- Fax: 866-843-3221

Additional Information

If you have questions regarding the information contained in this update, contact the Provider Services Center at 800-929-9224.