

Coverage of any drug intervention discussed in the plans prior authorization guideline is subject to the limitations and exclusions outlined in the member's benefit certificate or policy and to applicable state and/or federal laws.

- Commercial (Small & Large Group) ASO Exchange/ACA
 Medicare Advantage (MAPD)
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New-to-Market Medical Pharmacy Products Currently Under Clinical Review **MB2210**

Covered Service: Yes

Prior Authorization Required: N/A

Additional Information: None

Medicare Policy: Prior authorization is not required for Medicare Cost products (Dean Care Gold) and Medicare Supplement (Select) when this drug is provided by participating providers. Prior authorization is required if a member has Medicare primary and the plan secondary coverage. This policy is not applicable to our Medicare Replacement products.

Wisconsin Medicaid Policy Coverage of prescription drug benefits is administered by the Wisconsin Medicaid program. Coverage of medical drug benefits is administered by the Wisconsin Medicaid fee-for-service program. Medical drugs not paid on a fee-for-service basis by the Wisconsin Medicaid program are covered by the plan with no PA required.

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Updated 04/17/2024

Brand name	Generic name	J code	National Drug Codes (NDCs)	Date of FDA approval
Amtagvi	lifileucel	J9999	73776-001-11 73776-001-12	February 16, 2024
Aphexda	motixafortide	J2277	82737-073-01	August 8, 2023
Jubbonti	denosumab-bbdz	J3590	61314-0240-63	March 5, 2024
Lenmeldy	atidarsagene autotemcel	J3590	83222-0200-01	March 18, 2024
Tevimbra	tislelizumab	J9999	72579-121-01	March 13, 2024
Tyenne	tocilizumab-aazg	J3590	Multiple	March 5, 2024
Winrevair	sotatercept-csrk	J3590	Multiple	March 26, 2024
Wyost	denosumab-bbdz	J3590	61314-0228-94	March 5, 2024

Note: Drugs recently removed from this list have been addressed under new drug management policies.

This list is provided for our provider network's convenience and information. While this list is intended to be comprehensive, the U.S. Food and Drug Administration (FDA) approval process and its timing is outside of the Plan's control. The Plan reserves the right to adjust claims for any new-to-market medical pharmacy products as discussed in the '[New-to-Market Medical Pharmacy Products](#)' coverage policy.

	Committee/Source	Date(s)
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	Medical Policy Committee/Health Services Division/Pharmacy Services	February 15, 2023
	Medical Policy Committee/Health Services Division/Pharmacy Services	April 19, 2023
	Medical Policy Committee/Health Services Division/Pharmacy Services	May 17, 2023
	Medical Policy Committee/Health Services Division/Pharmacy Services	June 21, 2023
	Medical Policy Committee/Health Services Division/Pharmacy Services	July 19, 2023
	Medical Policy Committee/Health Services Division/Pharmacy Services	August 16, 2023

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Medical Policy Committee/Health Services Division/Pharmacy Services	September 20, 2023
Medical Policy Committee/Health Services Division/Pharmacy Services	October 18, 2023
Medical Policy Committee/Health Services Division/Pharmacy Services	November 15, 2023
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