

Part B Drug Step Therapy

Medicare Advantage (MA) plans may use step therapy for Part B drugs, beginning January 1, 2019, as part of a patient-centered care coordination program.

Medicare Part B covers a limited number of drugs like injections you get in a doctor's office, certain oral anti-cancer drugs, drugs used with some types of durable medical equipment (like a nebulizer or external infusion pump), immunosuppressant drugs and, under very limited circumstances, certain drugs you get in a hospital outpatient setting.

Step therapy is a type of prior authorization for drugs that begins medication for a medical condition with the most preferred drug therapy and progresses to other therapies only if necessary, promoting better clinical decisions. Step therapy may only be applied to new prescriptions or administrations of Part B drugs for enrollees that are not actively receiving the affected medication.

- Step therapy: You may need to try one or more similar, lower-cost drugs before the plan will cover the prescribed drug.
- First Line Drugs: First-line medicines are generic and lower-cost brand name medicines approved by the U.S. Food & Drug Administration (FDA). They are proven to be safe and effective. Step therapy suggests that you should try these medicines first because in most cases they provide the same health benefit as more expensive drugs, but at a lower cost.
- Step Therapy Drugs: Second-line drugs typically are brand name drugs. They are best suited for the few patients who do not respond to first-line medicines. Second-line drugs are the most expensive options.

In some cases, HealthSun requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition.

For coverage criteria please visit website: https://www.anthem.com/ms/pharmacyinformation/clinicalcriteria/home.html

If the drug prescribed to you is a "Step Therapy Drug", it may be required for you to try drug(s) from the "First Line Therapy Drugs". If the "First Line Therapy Drugs" do not work for you, the plan will then cover the "Step Therapy Drug".

Part B Step Therapy Drug Class	Preferred Drugs (First Line Therapy Drugs)	Non-Preferred Drugs (Step Therapy Drugs)
Short-acting Colony Stimulating Factor	Zarxio	Granix Neupogen Nivestym Releuko
Immune Globulin	Intravenous Gamunex-C* Octagam <u>Subcutaneous</u> Cutaquig Hizentra Xembify	Intravenous Asceniv Bivigam Carimune NF Flebogamma DIF Gammagard Gammagard S/D Gammaked Gammaplex Panzyga Privigen
	*Gamunex-C may be administered intravenously or subcutaneously	<u>Subcutaneous</u> Cuvitru HyQvia
Vascular Endothelial Growth Factor Inhibitors	Avastin Byooviz Cimerli Eylea Eylea HD Lucentis Vabysmo	Beovu Macugen
Long-acting Colony Stimulating Factor	Neulasta Udenyca	Fulphila Fylnetra Nyvepria Rolvedon Stimufend Ziextenzo
Iron Agents	Feraheme Ferrlecit Infed Venofer	Injectafer Monoferric
Tumor Necrosis Factor Antagonists	Avsola Remicade Infliximab (Unbranded)	Inflectra Renflexis
Rituximab agents	Rituxan Riabni	Ruxience Truxima

Bevacizumab for Non- ophthalmologic Indications	Avastin Mvasi	Zirabev Alymsys Vegzelma
Trastuzumab Agents	Herceptin Kanjinti	Herzuma Ogivri Ontruzant Trazimera

If you have any questions, please contact our Member Services Department at (877) 336-2069. TTY users should call (877) 206-0500. Hours of operation from October 1st through March 31st, seven days a week from 8 a.m. to 8 p.m. (we are closed on Thanksgiving and Christmas Day).

From April 1st through September 30th, we are available Monday through Friday from 8 a.m. to 8 p.m. (our office will be closed on federal holidays). Also, you may visit our website, <u>www.healthsun.com</u>

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