



## MCC of VA (HMO SNP) Administered Drugs Requiring Prior Authorization as of 10/01/2020

Medicare Part B covers a limited number of outpatient prescription drugs under limited conditions. Usually, Part B drugs are medical drugs you wouldn't give to yourself. They are administered at a doctor's office or hospital outpatient setting. Some of these drugs require prior authorization. These drugs include:

Acthar	Gammagard	Opdivo
Alimta	Gammaplex	Orencia
Avastin	Gamunex-C	Perjeta
<b>Bendeka (new)</b>	<b>Gazyva (new)</b>	Privigen
Berinert	Haegarda	Prolia/Xgeva
Bivigam	Herceptin	Regranex
Botox	Hizentra	Remicade
Carimune	<b>Imfinzi (new)</b>	Rituxan
Cerezyme	Jetrea	Rituxan Hycela
Cinryze	<b>Jevtana (new)</b>	Ruconest
<b>Darzalex (new)</b>	Kadcyla	Sandostatin
Dysport	Kalbitor	Simponi
Elelyso	Keytruda	Soliris
<b>Emend</b>	Lemtrada	Takhzyro
Entyvio	Lucentis	<b>Tecentriq (new)</b>
Erbitux	Lumizyme	Tysabri
Evenity	<b>Mozobil (new)</b>	Vectibix
Exondys 51	Myobloc	Velcade
Eylea	Neulasta	VPRIV
Firazyr	Nplate	Xeomin
Flebogamma	Octagam	Xiaflex
Gamastan S/D	Oncaspar	Xolair
Gamifant	Onpattro	Yervoy

**If your treatment includes any of the medical drugs listed, ask your provider if this change affects you. If so, your provider must submit a Prior Authorization request by fax to Magellan Complete Care of Virginia (HMO SNP) at 1-800-656-2389.**

- Your provider must give us supporting documentation with all requests.
- Your provider must provide your treatment history information.