



February 2024

Clinical Criteria Updates

Please note, this communication applies to Healthy Blue + MedicareSM (HMO-POS D-SNP) offered by *Blue Cross and Blue Shield of North Carolina (Blue Cross NC)*.

Summary

On September 21, 2023, and October 4, 2023, the Pharmacy and Therapeutic (P&T) Committee approved the following *Clinical Criteria* applicable to the medical drug benefit for *Blue Cross NC*. These policies were developed, revised, or reviewed to support clinical coding edits.

Visit [Clinical Criteria](#) to search for specific policies. For questions or additional information, use this [email](#).

Please see the explanation/definition for each category of *Clinical Criteria* below:

- New: newly published criteria
- Revised: addition or removal of medical necessity requirements, new document number
- Updates marked with an asterisk (*) notate that the criteria may be perceived as more restrictive

Please share this notice with other providers in your practice and office staff.

Please note:

- **The *Clinical Criteria* listed below applies only to the medical drug benefits contained within the member’s medical policy. This does not apply to pharmacy services.**
- **This notice is meant to inform the provider of new or revised criteria that has been adopted by *Blue Cross NC* only. It does not include details regarding any authorization requirements. Authorization rules are communicated via a separate notice.**

Effective Date	Clinical Criteria Number	Clinical Criteria Title	New or Revised
May 1, 2024	*CC-0248	Elrexfio (elranatamab-bcmm)	New
May 1, 2024	*CC-0249	Talvey (talquetamab-tgvs)	New
May 1, 2024	*CC-0250	Veopoz (pozelimab-bbfg)	New
May 1, 2024	*CC-0251	Pompe Disease	New

<https://www.bluecrossnc.com/providers/networks-programs/blue-medicare/healthy-blue-medicare>

Blue Cross and Blue Shield of North Carolina Senior Health, DBA Blue Cross and Blue Shield of North Carolina, is an HMO-POS D-SNP plan with a Medicare contract and a NC State Medicaid Agency Contract (SMAC). Enrollment in Blue Cross and Blue Shield of North Carolina Senior Health depends upon contract renewal.

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Blue Cross and Blue Shield of North Carolina
Healthy Blue + Medicare (HMO POS D-SNP)
Clinical Criteria Updates

May 1, 2024	*CC-0018	Pompe Disease	Revised
May 1, 2024	*CC-0021	Fabrazyme (agalsidase beta)	Revised
May 1, 2024	*CC-0046	Zinplava (bezlotoxumab)	Revised
May 1, 2024	CC-0182	Iron Agents	Revised
May 1, 2024	*CC-0068	Growth Hormones	Revised
May 1, 2024	CC-0156	Reblozyl (luspatercept)	Revised
May 1, 2024	*CC-0233	Rebyota (fecal microbiota, live – jslm)	Revised
May 1, 2024	*CC-0020	Natalizumab Agents (Tysabri, Tyruko)	Revised
May 1, 2024	CC-0064	Interleukin-1 Inhibitors	Revised
May 1, 2024	CC-0026	Testosterone Injectable	Revised
May 1, 2024	*CC-0247	Beyfortus (nirsevimab)	Revised