





Prior authorization requirements for Part B drugs: Rebinyn (factor IX, glycopegylated), Fibryna (human fibrinogen) and Hemlibra (emicizumab-kxwh)

On **June 1, 2018**, Amerigroup STAR+PLUS MMP (Medicare-Medicaid Plan) prior authorization (PA) requirements will change for certain Part B Injectable/Infusible drugs covered by Amerigroup STAR+PLUS MMP. The drugs are Rebinyn (factor IX, glycopegylated), Fibryna (human fibrinogen) and Hemlibra (emicizumab-kxwh). Federal and state law, as well as state contract language and CMS guidelines including definitions and specific contract provisions/exclusions, take precedence over these precertification rules and must be considered first when determining coverage. Noncompliance with new requirements may result in denied claims.

PA requirements will be added to the following Part B drugs:

- Rebinyn (factor IX, glycopegylated): a DNA-derived coagulation factor IX concentrate that temporarily increases plasma levels of factor IX and can temporarily correct the coagulation defect in patients with hemophilia B (J7195).
- Fibryna (human fibrinogen): a human fibrinogen concentrate indicated for the treatment of acute bleeding episodes in adults and adolescents with congenital fibrinogen deficiency, including afibrinogenemia and hypofibrinogenemia. Fibryna is not indicated for dysfibrinogenemia (J7178).

Please note, the drug below is currently billed under the Not Otherwise Classified (NOC) HCPCS codes C9399, J3490, J3590, J7199 and J9999; they are unlisted because no J code has been established at this time. Since these codes include all drugs that are NOC, if the authorization is denied for medical necessity, the plan's denial will be for the drug and not the HCPCS code.

• Hemlibra (emicizumab-kxwh): approved by the FDA as a prophylactic medicine used to prevent or reduce the frequency of bleeding episodes in adults and children with hemophilia A with factor VIII inhibitors. It is given once a week subcutaneously (unlisted, no J code established at this time: C9399, J3490, J3590, J7199 and J9999).

To request PA, you may use one of the following methods:

Access ICR via www.Availity.com

Fax: 1-888-235-8468Phone: 1-855-878-1785

Not all PA requirements are listed here. Detailed PA requirements are available to contracted providers by accessing the Provider Self-Service Tool on the provider website. Contracted and non-contracted providers who are unable to access Availity may call our Provider Services at 1-855-878-1785 between 8:00 a.m. and 8:00 p.m. for assistance with PA requirements.

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