

## Prior authorization requirements for Part B drugs: Varubi (rolapitant) and Fasenra (benralizumab)

On **May 1, 2018**, Amerigroup STAR+PLUS MMP (Medicare-Medicaid Plan) prior authorization requirements will change for certain covered Part B injectable/infusible drugs. The drugs are Varubi<sup>®</sup> (rolapitant) and Fasenra<sup>®</sup> (benralizumab). Federal and state law, state contract language, and CMS guidelines, including definitions and specific contract provisions/exclusions, take precedence over these prior authorization rules and must be considered first when determining coverage. Noncompliance with new requirements may result in denied claims.

Prior authorization requirements will be added to the following part B drugs:

- Varubi (rolapitant): indicated for the prevention of delayed chemotherapy induced nausea and vomiting in combination with other antiemetic agents, including highly emetogenic chemotherapy (unlisted, no J code established at this time) — J3490, J3590
- Fasenra (benralizumab): indicated for the add-on maintenance treatment of patients with severe asthma ages 12 and older and with eosinophilic phenotype (unlisted, no J code established at this time) — J3490, J3590

Please note, the above drugs are currently billed under the **Not Otherwise Classified (NOC)** HCPCS codes J3490 and J3590. 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.

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

- Interactive Care Reviewer: <https://www.availity.com>
- Phone: 1-855-878-1785
- Fax: 1-866-249-1271

Not all prior authorization requirements are listed here. Detailed prior authorization requirements are available to contracted providers by accessing the Provider Self-Service Tool at <https://providers.amerigroup.com/TX>.

Contracted and noncontracted providers unable to access Availity can call Provider Services at 1-855-878-1785 for assistance with prior authorization requirements.