

**Prior authorization requirements for new injectable/infusible drugs:
Doxil (doxorubicin) and Sustol (granisetron)**

On February 1, 2017, prior authorization requirements will change for two new, Part B injectable/infusible drugs covered by Amerigroup STAR+PLUS MMP (Medicare-Medicaid Plan) for STAR+PLUS MMP members. These drugs are Doxil (doxorubicin) and Sustol (granisetron). Federal and state law, as well as 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 code below:

- Doxil (doxorubicin): for treatment of ovarian cancer after failure of platinum-based chemotherapy; AIDS-related kapoli sarcoma after failure of prior systemic chemotherapy or intolerance to such therapy; multiple myeloma when used in combination with bortezomib and have received on prior therapy; Doxil may also be used for breast cancer, Hodgkin's lymphoma, non-Hodgkin's lymphoma, sarcomas of soft tissue and uterine neoplasms (Q2049 and Q2050)

Drugs billed with not otherwise classified (NOC) HCPCS J-code J3490 and J3590:

- Sustol (granisetron): indicated in combination with other antiemetic in adults for the prevention of acute and delayed nausea and vomiting associated with initial and repeat courses of moderately emetogenic chemotherapy or anthracycline and cyclophosphamide combination chemotherapy (unlisted, no J code established at this time)

Please note, this drug is currently billed under the NOC J-code J3490 and J3590. Since this code includes 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.

Not all prior authorization requirements are listed here. Detailed prior authorization requirements are available to contracted providers on the provider self-service website (<https://providers.amerigroup.com/TX> > Quick Tools > Precertification Lookup Tool). Providers may also call Provider Services at 1-855-878-1785 for prior authorization requirements if they are not able to access the website.