

# Virginia Provider Communications

---

## **Anthem expands specialty pharmacy medical step therapy drug list for agents for hereditary angioedema**

---

Published: May 1, 2019

**The following clinical criteria will be effective August 1, 2019.**

### **Agents for hereditary angioedema ING-CC-0034**

Effective for dates of service on and after August 1, 2019, the following specialty pharmacy codes from new or current clinical criteria will be included in our existing specialty pharmacy medical step therapy review process. Haegarda® and Takhzyro™ will be the preferred prophylactic agents over Cinryze®.

Please note, inclusion of NDC code on your claim will shorten the claim processing time of drugs billed with a Not Otherwise Classified (NOC) code. For Anthem Blue Cross and Blue Shield and our affiliate HealthKeepers, Inc., pre-service clinical review of these specialty pharmacy drugs will be managed by Anthem. Drugs used for the treatment of Oncology will still require pre-service clinical review by AIM Specialty Health® (AIM), a separate company. This applies to members with Preferred Provider Organization (PPO) plans, Anthem HealthKeepers (HMO) plans, POS AdvantageOne plans, and Act Wise (CDH) plans.

Access the [clinical criteria information](#) online.

<b>Clinical Criteria</b>	<b>Status</b>	<b>Drug</b>	<b>HCPCS or CPT Code</b>	<b>NDC Code</b>
ING-CC-0034	Preferred Agent	Haegarda®	J0599	63833-0828-02 63833-0829-02
ING-CC-0034	Preferred Agent	Takhzyro™	J3490, J3590, C9399	47783-0644-01
ING-CC-0034	Non-Preferred Agent	Cinryze®	J0598	42227-0081-05

---

<https://providernews.anthem.com/virginia/article/anthem-expands-specialty-pharmacy-medical-step-therapy-drug-list-for-agents-for-hereditary-angioedema-2>

**Featured In:**

May 2019 Anthem Provider Newsletter - Virginia