



MASSACHUSETTS

# MEDICARE ADVANTAGE PART B UTILIZATION MANAGEMENT PROGRAM

Below is a list of medications that are currently part of the Medicare Advantage Part B Utilization Management Program. This list can change from time to time.

The medications included in this list require prior authorization, meaning they must be approved before your plan covers them. This process helps us make sure that the medication you were prescribed is safe and effective for your condition according to Food and Drug Administration and Medicare guidelines.

Therapeutic Class	Drug			
Botulinum Toxin	Botox	Dysport	Myobloc	Xeomin
IGE Inhibitors	Cinqair	Fasenra	Nucala	Xolair
Bone-Modifying Agents	Xgeva			
Multiple Sclerosis	Ocrevus			
Hematopoietic	Nplate			
Immune Modulating Agents	Entyvio	Orencia	Simponi	Stelara
Prostaglandin	Tyvaso			

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Therapeutic Class	Drug			
Immune globulin	Asceniv	Bivigam	Cuvitru	Flebogama
	Gamma Globulin	Gammagard	Gammaplex	Gamunex-C/ Gammaked
	Hepagam	Hizentra	Hyqvia	Immune globulin
	Octagam	Rhophylac	Tetanus Immunoglobulin	Vivaglobin
	Xembify			

**For more information on how to get prior authorization, talk to your doctor or call Member Service at 1-800-200-4255 (TTY: 711) from April 1 through September 30, 8:00 a.m. to 8:00 p.m. ET, Monday through Friday, or October 1 through March 31, 8:00 a.m. to 8:00 p.m. ET, seven days a week.**

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ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-200-4255 (TTY: 711)**.

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para **1-800-200-4255 (TTY: 711)**.

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