



## 2023 Part B Step Therapy Program

# MEDICARE ADVANTAGE PART B DRUG STEP THERAPY PROGRAM

In some cases, our plans require you to first try certain medications to treat your medical condition before we will cover another medication for that condition. For example, if a Step 1 medication and a Step 2 medication both treat your medical condition, our plans may not cover the Step 2 medication unless you try a Step 1 medication first. If a Step 1 medication does not work for you, our plans will then cover the Step 2 medication.

Below is a list of medications that are currently part of the Medicare Advantage Part B Step Therapy program. The list can change from time to time.

STEP 1 MEDICATION (you must try this medication before a Step 2 medication)	STEP 2 MEDICATION (you must try a Step 1 medication and receive Prior Authorization before we'll cover)
Avastin	Beovu, Byooviz, Cimerli, Eylea, Lucentis, Macugen
Avsola, Inflectra	Remicade, Renflexis
Euflexxa, Synvisc	Durolane, Gel-One, Gelsyn-3, Genvisc, Hyalgan, Hymovis, Monovisc, Orthovisc, Supartz Fx, Triluron, Trivisc, Visco-3
Part D oral bisphosphonate (non-cancer diagnoses)	Prolia
Retacrit	Aranesp, Epogen, Mircera, Procrit
Riabni, Ruxience	Rituxan, Truxima (non-cancer diagnoses)
Zarxio (non-cancer diagnoses)	Neupogen, Nivestym, Releuko



## QUESTIONS?

For more information about getting 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.

Blue Cross Blue Shield of Massachusetts is an HMO and PPO plan with a Medicare contract. Enrollment in Blue Cross and Blue Shield depends on contract renewal.

Blue Cross Blue Shield of Massachusetts complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity.

ATTENTION: If you don't speak English, language assistance services, free of charge, are available to you. Call Member Service at the number on your ID card (TTY: **711**).

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**).

® Registered Marks of the Blue Cross and Blue Shield Association. ® Registered Marks are the property of their respective owners. © 2023 Blue Cross and Blue Shield of Massachusetts, Inc., or Blue Cross and Blue Shield of Massachusetts HMO Blue, Inc.