

Prior Authorization Update for Zolgensma (J3399) Effective November 1, 2022

October 5, 2022

What's new

Effective November 1, 2022, Texas Health and Human Services Commission (HHSC) approved Zolgensma (J3399) for clinical prior authorization use and implementation of the criteria for fee-for- services. Blue Cross and Blue Shield of Texas (BCBSTX) does not have to wait for the publication in the Texas Medicaid Providers Policy Manual (TMPPM) before implementation.

Clinical Prior Authorization	
Code	Description
J3399	Zolgensma – (onasemnogene abeparvovec-xioi)

Resources

For <u>updates</u> to the Zolgensma clinical policy and authorization requirements information.

Questions

For questions or additional information, please:

- Contact our BCBSTX Medicaid Provider Service Center at 1-877-560-8055 or
- Contact your BCBSTX Medicaid Provider Network Representative at 1-855-212-1615 or
- Submit via email to <u>TexasMedicaidNetworkDepartment@bcbstx.com</u>.

The above material is for informational purposes only and is not a substitute for the independent medical judgment of a physician or other health care provider. Physicians and other health care providers are encouraged to use their own medical judgment based upon all available information and the condition of the patient in determining the appropriate course of treatment. The fact that a service or treatment is described in this material is not a guarantee that the service or treatment is a covered benefit and members should refer to their certificate of coverage for more details, including benefits, limitations and exclusions. Regardless of benefits, the final decision about any service or treatment is between the member and their health care provider.

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