

Blue Cross and Blue Shield of Kansas

**Medical Pharmacy Implementation Prior Authorization Program
Provider Communication and Education**

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Title: Senior Provider Relations Manager



① Program Overview

② Review Process

③ Provider Portal

④ Resources

Program Overview

Program Overview

Effective **August 15th 2025**, **Blue Cross and Blue Shield of Kansas** will be implementing a change in how certain specialty drugs that fall under the medical benefit are managed.

This new program will be administered by the **Medical Pharmacy Solutions team at Prime Therapeutics (Prime)**. Prime will be responsible for reviewing and approving these drugs.

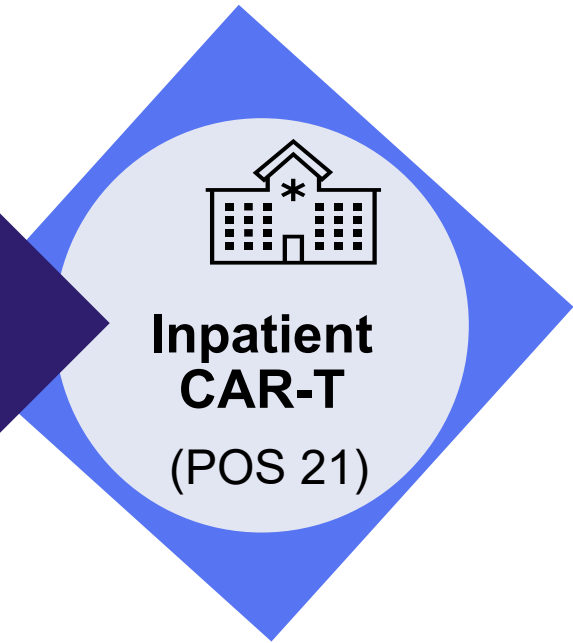
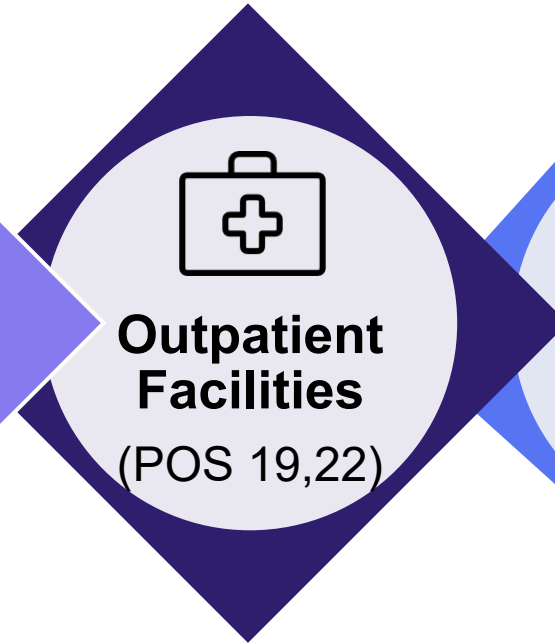
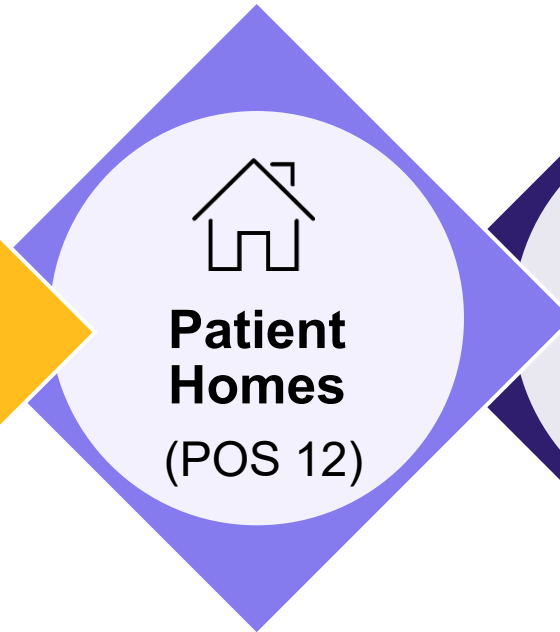
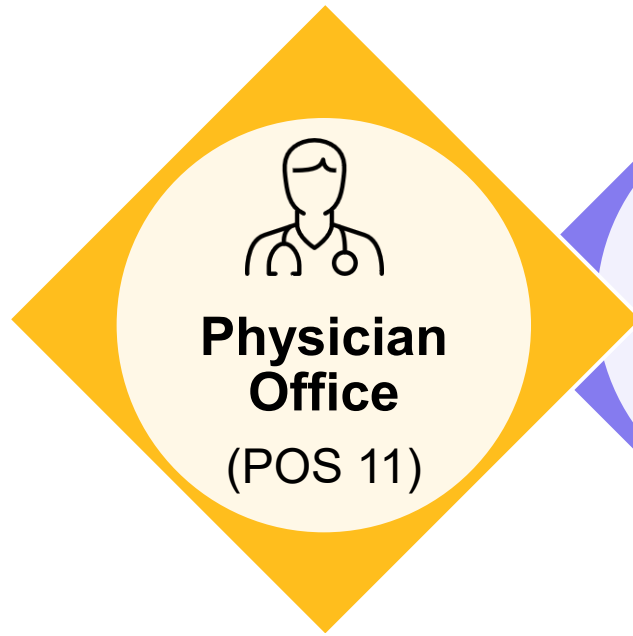
Beginning **August 7th 2025**, providers may begin contacting Prime to obtain prior authorizations for members who will receive treatment/drugs within the scope of this program on or after **August 15th 2025**.

For providers currently requesting medical benefit drug reviews with the Prime Therapeutics Pharmacy Benefit Team via CoverMyMeds and/or fax, this will represent a change in workflow. Providers will begin submitting medical benefit drug reviews for the in-scope drugs to Prime's Medical Pharmacy Solutions team by navigating to GatewayPA.com, or via phone at 800-424-1713

Places of Service



Prior authorization is required by Prime when the drugs are administered by practitioners in the following places of service (POS)


































































































































Impacted Members

The program will apply to members enrolled in the following plans:






































































































































































































- Commercial/Exchange Members





HCPCS	Brand Name	HCPCS	Brand Name	HCPCS	Brand Name	HCPCS	Brand Name
Q2055	Abecma	J9036	bendamustine (Baxter)	J1743	Elaprase  	J0223	Givlaari  
J9264	Abraxane	J9034	Bendeka	J3060	Elelyso  	J0257	Glassia  
J3262	Actemra IV 	J9034	BeneFIX  	J2508	Elfabrio  	J1447	Granix  
J0801	Acthar_HP  	J0490	Benlysta IV  	J7205	Eloctate  	J0599	Haegarda  
J0791	Adakveo  	J0179	Beovu  	J1323	Elrex fio	J9179	Halaven
J9042	Adcetris	J0597	Berinert  	J9269	Elzonris	J7170	Hemlibra  
J9029	Adstiladrin	Q5139	Bkemv 	J7799 (NOC)	Empaveli  	J7190	Hemofil M  
J7192	Advate  	J9039	Blincyto	J9358	Enhertu	J9355	Herceptin 
J7207	Adynovate  	Q2054	Breyanzi	J1302	Enjaymo  	J9356	Herceptin Hylecta 
J7171	Adzynma 	J2329	Briumvi  	J3590	Enspryng  	Q5146	Hercessi
J7210	Afstyla  	Q5124	Byooviz  	J3380	Entyvio 	Q5113	Herzuma 
J3590	Ahzantive 	J9064	cabazitaxel (Sandoz)	J3590	Enzeevu 	J7187	Humate-P  
J1454	Akynzeo IV 	Q2056	Carvykti	J9321	Epkinly	J7202	Idelvion*  
J1931	Aldurazyme  	J1786	Cerezyme  	J3590	Epysqli 	J0638	Ilaris  
J7186	Alphanate  	Q5128	Cimerli  	J9055	Erbitux	J3245	Ilumya 
J7193	Alphanine SD  	J0717	Cimzia 	J7204	Esperoct  	J9026	Imdelltra
J7201	Alprolix  	J2786	Cinqair  	J3111	Evenity  	J9173	Imfinzi
J7214	Altuviiiio  	J0598	Cinryze  	J1305	Evkeeza 	J9347	Imjudo
Q5126	Alymsys	J7175	Coagadex  	J0178	Eylea  	J3590	Imuldosa IV 
J9999	Amtagvi	J9286	Columvi	J0177	Eylea HD  	J3590	Imuldosa SQ 
J0225	Amvuttra 	J7180	Corifact 	J0180	Fabrazyme  	J1745	Infliximab unbranded  
J9028	Anktiva	J0802	Cortrophin  	J0517	Fasenra  	J9198	Infugem
J0256	Aralast NP  	J3247	Cosentyx IV 	J7198	Feiba NF/VF 	J1439	Injectafer  
J0881	Aranesp 	J0584	Crysvita 	J1744	Firazyr  	J9319	Istodax
J9035	Avastin	J9308	Cyramza	J0641	Fusilev	J7213	Ixinity  
J9999	Avzivi	J9348	Danyelza	J9331	Fyarro	J2782	Izervay  
J9023	Bavencio	J9145	Darzalex	Q5130	Fylnetra  	J9281	Jelmyto
J9036	Belrapzo	J9144	Darzalex Faspro	J9210	Gamifant 	J9272	Jemperli
J9036	bendamustine (Apotex)	J9063	Elahere	J9301	Gazyva	J9043	Jevtana

The above list consist of all drugs that are in scope for the PA Program. The drugs that were previously reviewed by the Prime MDR program and will transition to MPS Prime for prior authorization are represented with a . The drugs that are in scope for State of Kansas Employee Health Plan are represented with a .

Other drugs may require preauthorization through Blue Cross and the above list is subject to change. Please visit <https://gatewaypa.com/policydisplay/54> for current list of in scope medications.

HCPCS	Brand Name	HCPCS	Brand Name	HCPCS	Brand Name	HCPCS	Brand Name	HCPCS	Brand Name	HCPCS	Brand Name
J7208	Jivi  	J7193	Mononine  	J9264	paclitaxel albumin-bound	J3490	Rivfloza  	J0593 (only if not self-admin)	Takhzyro  	J3385	Vpriv  
Q5136	Jubbonti 	J1458	Naglazyme  	J9177	Padcev	J7200	Rixubis  	J3055	Talvey	J3032	Vyepti  
J9354	Kadcyla	J2506	Neulasta  	J3590	Pavblu  	J1449	Rolvedon  	Q2053	Tecartus	J9999	Vyloy
J1290	Kalbitor  	J1442	Neupogen  	J9306	Perjeta	J9318	romidepsin	J9999	Tecelra	J9332	Vyvgart  
J2840	Kanuma  	J0219	Nexviazyme  	J9316	Phesgo	J0596	Ruconest  	J9022	Tecentriq	J9334	Vyvgart Hytrulo  
J9271	Keytruda	J3590	Niktimvo	J1307	Piasky  	J9061	Rybrevant	J9999	Tecentriq Hybreza	Q5138	Wezlana IV 
J0642	Khapzory	J7182	Novoeight  	J9309	Polivy	J9021	Rylaze	J9380	Tecvayli	Q5137	Wezlana SQ 
J9274	Kimmtrak	J7189	Novoseven RT  	J1203	Pombiliti  	J2998	Ryplazim	J3241	Tepezza  	J7183	Wilate  
J3590	Kisunla  	J2802	Nplate  	J9204	Poteligeo	J9333	Rystiggo  	J9329	Tevimbra	Q5136	Wyost 
J7190	Koate DVI  	J2182	Nucala  	J0885	Procrit/Epogen 	J0870	Rytelo  	J2356	Tezspire  	J0218	Xenpozyme  
J7192	Kogenate FS  	J7209	Nuwiq  	J7194	Profilnine  	J9361	Ryzneuta	J9273	Tivdak	J0897	Xgeva  
J7211	Kovaltry  	J3590	Nypozi  	J0256	Prolastin-C  	J0491	Saphnelo  	Q5133	Tofidence 	J2357	Xolair  
J2507	Krystexxa 	J7188	Obizur 	J0897	Prolia  	J9227	Sarclisa	J9033	Treanda	J7185	Xyntha  
Q2042	Kymriah	J2350	Ocrevus  	Q2043	Provenge	J7352	Scenesse  	J1628	Tremfya IV 	J9228	Yervoy
J9047	Kyprolis	J3590	Ocrevus Zunovo  	Q9997	Pyzchiva IV 	Q9998	Selarsdi IV 	J7181	Tretten 	J3590	Yesafili 
J0217	Lamzede 	J3590	Omisirge	Q9996	Pyzchiva SQ 	Q9998	Selarsdi SQ 	J9317	Trodelvy	Q2041	Yescarta
J0202	Lemtrada  	J2267	OmvoH IV 	J1304	Qalsody 	J7212	Sevenfact  	Q5135	Tyenne IV 	J9352	Yondelis
J0174	Leqembi  	J9266	Oncaspar	J1301	Radicava  	J1602	Simponi_ARIA 	Q5134	Tyruko 	J9400	Zaltrap
J1306	Leqvio  	J9205	Onivyde	J7203	Rebinyn  	J2327	Skyrizi IV 	J2323	Tysabri  	J0256	Zemaira  
J9119	Libtayo	J0222	Onpattro  	J0896	Reblozyl  	J1300	Soliris  	Q5111	Udenyca  	J9223	Zepzelca
J3263	Loqtorzi	Q5112	Ontruzant 	J7192	Recombinate  	J1747	Spevigo  	J1303	Ultomiris  	Q5120	Ziextenzo  
J2778	Lucentis  	J9299	Opdivo	Q5125	Releuko  	J2326	Spinraza  	J1823	Uplizna 	J3304	Zilretta 
J0221	Lumizyme  	J9298	Opdualag	J1745	Remicade  	J3358	Stelara IV 	J2777	Vabysmo  	J9359	Zynlonta
J9350	Lunsumio	J3590	Opuviz 	Q5104	Renflexis  	J3357	Stelara SQ 	J9303	Vectibix	J9345	Zynyz
J9999	Lymphir	J0129	Orencia 	Q5106	Retacrit 	Q5127	Stimufend  	Q5129	Vegzelma		
J9353	Margenza	J3590	Otulfi IV 	J3590	Revcovi 	J1627	Sustol 	J9376	Veopoz 		
J3397	Mepsevii*  	J3590	Otulfi SQ 	Q5123	Riabni  	J2779	Susvimo  	J1322	Vimizim  		
J9349	Monjuvi	J0224	Oxlumo  	J9312	Rituxan  	J2781	Syfovre  	J9056	Vivimusta		
J1437	Monoferri  	J9264	paclitaxel albumin-bound	J9311	Rituxan Hycela  	90378	Synagis  	J7179	Vonvendi  		

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Review Process

Provider Responsibilities



Ordering
Provider

Responsible for obtaining the prior authorization before services are provided.



Rendering
Provider

Responsible for ensuring that the authorization was obtained prior to services being rendered.

Information Needed



Provider

- Ordering Provider Name
- Tax ID
- Practice Address
- Office Telephone and Fax

*(Same information is needed for
Rendering Provider if different
from Ordering Provider)*



Member

- Member Name
- Date of Birth
- Member ID Number
- Height
- Weight
- Diagnosis Code



Medication

- Place of Service Code
- Requested Drug Name
or HCPCS Code
- Dosage
- Frequency
- Anticipated Start Date
of Treatment

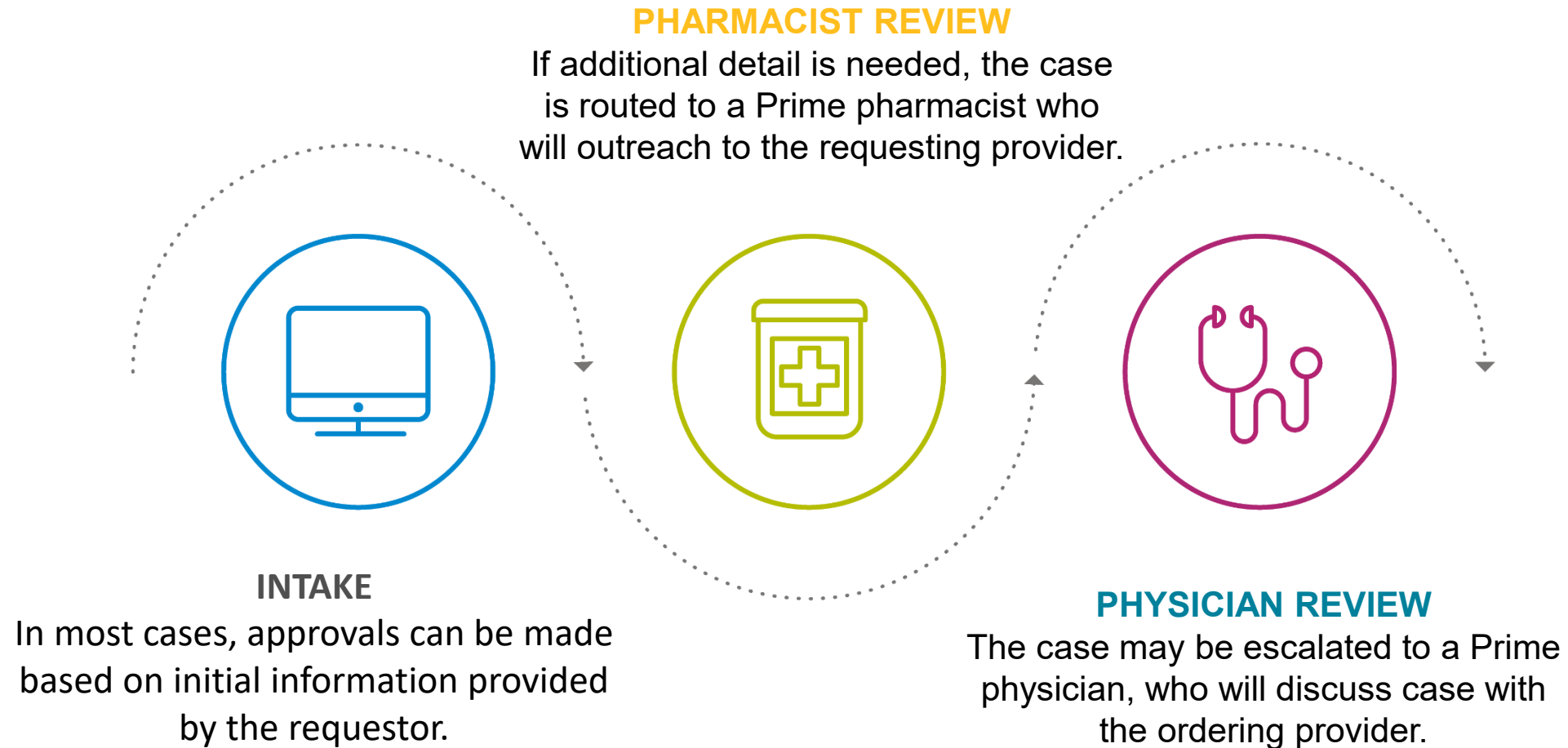


Clinical

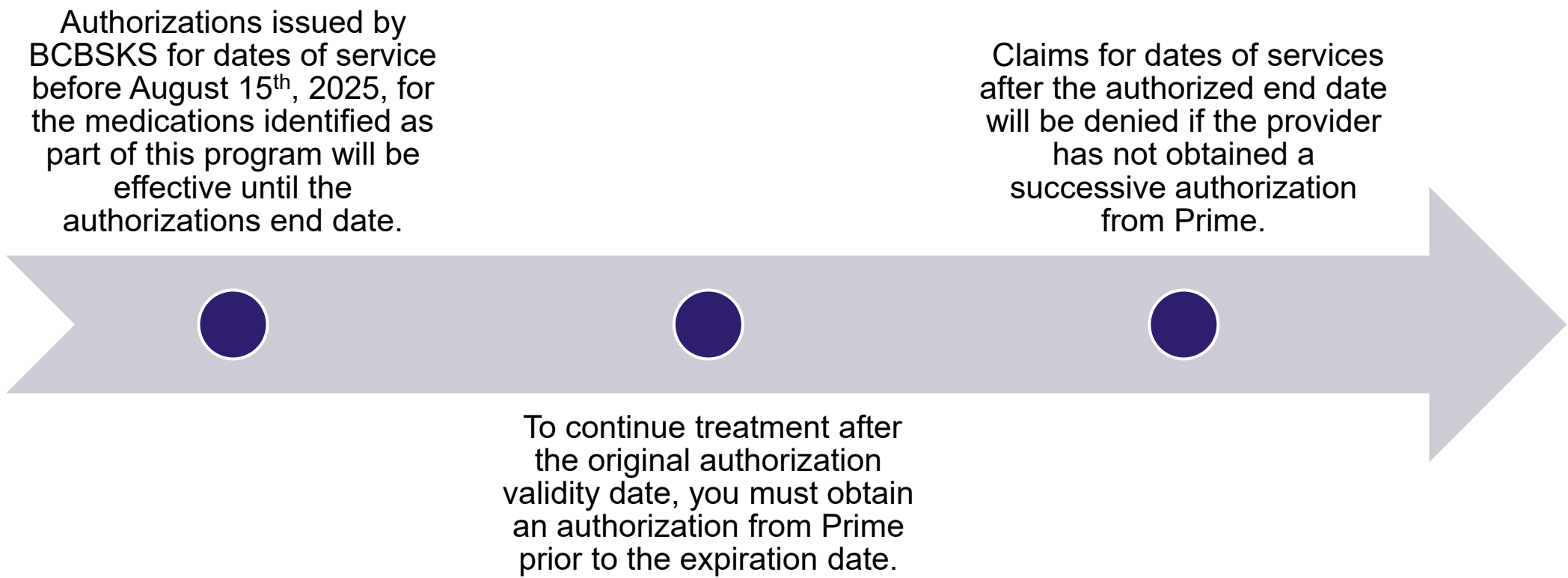
- Clinical notes
- Pathology Reports
- Relevant Test Results

If additional information is requested by Prime, the practitioner should be prepared to upload documents on the provider portal or to fax documents to Prime HIPAA compliant fax.

Determination Process Flow



Transition of Care Process



Provider Portal

Obtaining an Online Account

GatewayPA.com - Prescribers directly contracted with BCBSKS may create an online account for Authorizations in 3 easy steps:

1. Visit our self-service online portal at www.GatewayPA.com
2. Click on New Provider Access Request under the Sign In box
3. Complete the form to request access

Please note:

- Authorizations for all Prime Medical Pharmacy Prior Authorizations plans may be managed under one user account. For providers who already have an established account for another Healthplan, they may email providerinquiry@primetherapeutics.com to request that BCBSKS be added to their account. (if applicable)
- The portal is for routine requests only.
- Urgent requests and retroactive requests must be phoned in to the Prime Operations Team at: 800-424-1713

The screenshot displays the GatewayPA.com portal interface. At the top, the header includes the 'Medical Pharmacy Solutions Prior Authorization' logo on the left and the 'Prime THERAPEUTICS' logo on the right. Below the header is a dark blue navigation bar with the word 'Home'. The main content area is divided into a left sidebar and a right main panel. The sidebar contains several sections: 'Provider Resources' with links to 'Provider Portal Quick Start Guide' and 'Provider Tutorial'; 'Health Plan Resources' with a link to 'Health Plan Portal Quick Start Guide'; 'Clinical Guidelines' with a list of links including 'Arkansas Blue Cross and Blue Shield Federal Employee Program (FEP)', 'BCBSNE Med Policy Blue', 'Blue Cross Blue Shield of North Dakota', 'Common Ground Healthcare Cooperative', 'Fallon', 'Independent Health', 'Medica', 'Nevada Medicaid Services Manual - Chapter 1200', and 'Security Health Plan'; 'Forms' with links to 'Arizona Prior Authorization Form', 'State of Massachusetts Forms', and 'Step Therapy Exemption Form'; and 'Applications' with a checked checkbox for 'Track An Authorization'. The main panel features a 'Welcome' message, a 'Sign In' section with input fields for 'Email Address' and 'Password', a 'Remember me' checkbox, a 'Sign In' button, and a link for 'Need help signing in?'. At the bottom of the main panel, there is a link for 'New Provider Access Request'.

Resources

Authorization Resources



For routine requests and clinical policy information, visit GatewayPA.com



For urgent or expedited requests call Prime at 800-424-1713

Prime has staff available 24 hours per day for urgent requests by phone (including after hours, weekends and holidays).

If you have claim, benefits, and/or eligibility questions, please call BCBSKS at 800-432-3990 Monday-Friday from 8:00AM – 4:30PM CST

THANK YOU

Contact email: ProviderInquiry@PrimeTherapeutics.com