

Site of Care Guidelines Expansion: Select Oncology and Non-Oncology Provider-Administered Medications Effective July 1, 2026

Florida Blue is expanding Site of Care Guidelines for members whose benefit plan includes comparative effectiveness within the definition of medical necessity as part of the prior authorization review process. This applies to select provider-administered oncology immunotherapies (when used as monotherapy) and select non-oncology provider-administered medications.

Effective July 1, 2026, if a Florida Blue member does not meet the established criteria for administration of these medications at an outpatient hospital facility, an alternative site of care will be required. The Site of Care Guidelines ensure Florida Blue patients receive appropriate and safe administration of medications at the most cost-effective location.

Florida Blue patients receiving medications at home, an independent ambulatory infusion center, or professional office setting, are **not impacted**. In addition, pediatric patients under 18 years of age and patients receiving oncology immunotherapy in combination with chemotherapy are **excluded**.

The available alternative sites of care are all well-accepted locations for provider-administered medications and may, but not always, offer your patients the following benefits:

- Lower out-of-pocket costs
- Enhanced convenience through reduced wait times in infusion centers or the privacy of home-based administration
- Ability to have infusions on the weekend or later in the day to help prevent having to miss work or school
- Shorter driving distance

What You Need to Know

Providers will continue submitting prior authorization requests for medications added to the updated **Site of Care Drug List** as they do today. Your patients can continue to receive treatment at an outpatient hospital facility until the existing prior authorization expires. Once the prior authorization expires, however, additional requirements must be met for the medication to be covered by Florida Blue if the requested site of care is an outpatient hospital facility.

Prime Medical Pharmacy Solutions (MPS) (formerly Magellan Rx Management) will continue to perform prior authorization reviews on behalf of Florida Blue as they do today and will allow one-time temporary authorizations (most often 60 days) at outpatient hospital facilities. The temporary authorization will prevent potential delays in treatment and permit adequate time for Prime MPS nurses to transition your member to a new site of care.

After the prior authorization review is performed, both you and your patient will be contacted by Prime MPS in writing and by phone if the requested site of care is not approved. Prime MPS will share more information at that time and help with the transition to an alternative site of care. Providers are encouraged to initiate conversations with their patients before current prior authorizations expire.

More information is included in the questions and answers listed below. If you have additional questions, please call Prime MPS at 1-800-424-4947 between 7 a.m. and 4 p.m. ET, Monday through Friday.

Questions and Answers

Site of Care Guidelines Expansion for Select Oncology and Non-Oncology Provider-Administered Medications

What is a Site of Care Review?

The Site of Care Review is a process that has been in place since 2019 and is completed by Prime MPS to manage Florida Blue's Physician-Administered Drug Program and medication prior authorization reviews. As part of this process, Prime MPS helps members and their physicians select a more cost-effective and clinically appropriate site of care for administration of their medication by incorporating Florida Blue's Site of Care guidelines when the requested outpatient hospital does not meet medical necessity.

What additional medications are included?

The expanded list of provider-administered drugs will be included in **09-J3000-46: Site of Care Guideline for Select Oncology Medications** and **09-J5000-59: Site of Care Guideline for Select Non-Oncology Medications Medical Coverage Guidelines**. The newly added medications are listed in the Appendix at the end of this document.

To access the Medical Coverage Guidelines (MCG), visit [FloridaBlue.com](https://www.floridablue.com). Select *For Providers* and navigate to *Medical and Pharmacy Policies*, then *Medical Policies (Medical Coverage Guidelines)*, where you can enter a specific Site of Care guideline name in the search field.

When is this expansion effective?

This change is effective July 1, 2026, for new prior authorization requests. Patients with an existing drug authorization can continue to receive treatment at their current outpatient hospital facility until the authorization expires. Providers are encouraged to initiate conversations with their patients before the current prior authorizations expire.

Where can patients receive their infusions?

There are several alternative sites of care that are well-accepted for provider-administered medications. For non-oncology medications, in many cases, patients may be able to receive their infusion at home. Other sites of care include independent ambulatory infusion centers and professional office settings. At the start of this expansion, the primary alternative site of care for oncology immunotherapies will be ambulatory infusion centers.

When would a hospital outpatient facility be potentially appropriate?

Administration of an in-scope medication will not be covered at a hospital outpatient facility after the member's current prior authorization expires (except for the one-time temporary authorization), unless one of the following criteria is met:

Non-Oncology Medications

1. The patient is under 18 years of age.
2. The patient does not have access to the medication from all of the following entities: home infusion agency, professional office setting, and non-hospital-affiliated outpatient facility (e.g., ambulatory infusion center, ambulatory infusion suite).
3. The closest available professional office or non-hospital affiliated outpatient facility is greater than 45 miles from the patient's home (and further away than the requested

hospital-affiliated outpatient facility) **and** the patient is unable to receive the medication by a home infusion agency.

- The patient has a documented clinical condition that requires enhanced supervision and monitoring that is not available at the alternative sites of care. Refer to the Site of Care Guidelines for more details.

Oncology Immunotherapies

- The patient is under 18 years of age.
- The patient is receiving a multi-drug oncology regimen throughout the duration of therapy (excluding pre-medication and oral agents)
- The patient does not have access to the medication from both a home infusion agency* and an ambulatory infusion center.
- The closest available ambulatory infusion center is greater than 45 miles from the patient’s home (and further away than the requested hospital-affiliated outpatient facility) **and** the patient is unable to receive the medication by a home infusion agency*.
- The patient has a documented clinical condition that requires enhanced supervision and monitoring that is not available at the alternative sites of care. Refer to the Site of Care Guidelines for more details.

Please refer to either 09-J3000-46: Site of Care Guideline for Select Oncology Medications or 09-J5000-59: Site of Care Guideline for Select Non-Oncology Medications for more details.

**Access to home infusion agencies may be limited or unavailable for oncology immunotherapies at the start of this expansion.*

What Florida Blue health plans and networks are included?

The following segments and products are included in the Site of Care Review. These include comparative effectiveness within the definition of medical necessity and already require prior authorization for provider-administered medications.

Segments	Products
Small Group Affordable Care Act (ACA)	BlueOptions (PPO)
	BlueCare (HMO)
	Blue Select (PPO)
	Simply Blue (HMO)
Individual Under 65 ACA	BlueOptions (PPO)
	BlueCare (HMO)
	BlueSelect (PPO)
	myBlue (HMO)
Large Group Fully Insured Non-Grandfathered	BlueChoice (PPO)
	BlueOptions (PPO)
	BlueCare (HMO)

How will my patients know about the Site of Care Review change?

Prime MPS nurses will proactively contact affected Florida Blue members and their health care providers once a new prior authorization is requested to ensure a smooth and efficient transition to an alternative location during the temporary authorization period.

APPENDIX

The provider-administered drugs added to the Site of Care Guidelines are listed below. This list is subject to change. **09-J3000-46: Site of Care Guideline for Select Oncology Medications** and **09-J5000-59: Site of Care Guideline for Select Non-Oncology Medications Medical Coverage Guidelines**, and their associated medications are available on the [Florida Blue MCG webpage](#) beginning July 1, 2026.

Non-Oncology Medications

J0219	Injection, avalglucosidase alfa-ngpt, 4 mg	Nexviazyme
J0222	Injection, patisiran, 0.1 mg	Onpattro
J0224	Injection, lumasiran, 0.5 mg	Oxlumo
J0256	Injection, alpha 1 proteinase inhibitor (human), not otherwise specified, 10 mg	Aralast NP, Prolastin-C, Zemaira
J0257	Injection, alpha 1 proteinase inhibitor (human), (Glassia), 10 mg	Glassia
J0491	Injection, anifrolumab-fnia, 1 mg	Saphnelo
J0584	Injection, burosumab-twza 1 mg	Crysvita
J0638	Injection, canakinumab, 1 mg	Ilaris
J0791	Injection, crizanlizumab-tmca, 5 mg	Adakevo
J0896	Injection, luspatercept-aamt, 0.25 mg	Reblozyl
J1305	Injection, evinacumab-dgnb, 5 mg	Evkeeza
J1322	Injection, elosulfase alfa, 1 mg	Vimizim
J1552	Injection, immune globulin (Alyglo), 500 mg	Alyglo
J1553	Injection, immune globulin (Yimmugo), 100 mg	Yimmugo
J1823	Injection, inebilizumab-cdon, 1 mg	Uplizna
J2361	Injection, depemokimab-ulaa, 1 mg	Exdensur
J2502	Injection, pasireotide long acting, 1 mg	Signifor LAR
J2507	Injection, pegloticase, 1 mg	Krystexxa
J2840	Injection, sebelipase alfa, 1 mg	Kanuma
J3032	Injection, eptinezumab-jjmr, 1 mg	Vyepti
J3245	Injection, tildrakizumab, 1 mg	Ilumya
J3247	Injection, secukinumab, intravenous, 1 mg	Cosentyx IV
J3397	Injection, vestronidase alfa-vjbc, 1 mg	Mepsevii
Q5134	Injection, natalizumab-sztn (Tyruko), biosimilar, 1 mg	Tyruko
Q5151	Injection, eculizumab-aagh (Epysqli), biosimilar, 2 mg	Epysqli
Q5152	Injection, eculizumab-aeab (Bkemv), biosimilar, 2 mg	Bkemv
Q5156	Injection, tocilizumab-anoh (Avtozma), biosimilar, 1 mg	Avtozma

Oncology Immunotherapies

J3263	Injection, toripalimab-tpzi, 1 mg	Loqtorzi
J9022	Injection, atezolizumab, 10 mg	Tecentriq
J9023	Injection, avelumab, 10 mg	Bavencio
J9024	Injection, atezolizumab, 5 mg and hyaluronidase-tqjs	Tecentriq Hybreza
J9119	Injection, cemiplimab-rwlc, 1 mg	Libtayo
J9144	Injection, daratumumab, 10 mg and hyaluronidase-fihj	Darzalex Faspro
J9145	Injection, daratumumab, 10 mg	Darzalex
J9173	Injection, durvalumab, 10 mg	Imfinzi
J9227	Injection, isatuximab-irfc, 10 mg	Sarclisa
J9228	Injection, ipilimumab, 1 mg	Yervoy
J9271	Injection, pembrolizumab, 1 mg	Keytruda
J9272	Injection, dostarlimab-gxly, 10 mg	Jemperli
J9275	Injection, cosibelimab-ipdl, 2 mg	Unloxcyt
J9277	Injection, pembrolizumab, 1 mg and berahyaluronidase alfa-pmph	Keytruda Qlex
J9289	Injection, nivolumab, 2 mg and hyaluronidase-nvhy	Opdivo Qvantig
J9298	Injection, nivolumab and relatlimab-rmbw, 3 mg/1 mg	Opdualag
J9299	Injection, nivolumab, 1 mg	Opdivo
J9329	Injection, tislelizumab-jsgr, 1 mg	Tevimbra
J9345	Injection, retifanlimab-dlwr, 1 mg	Zynyz