



New-to-Market Program for Provider-Administered Medications

On July 1, 2022, Florida Blue and Truli for Health will introduce the New-to-Market Program for Provider-administered Medications (those billed under the medical benefit). This program identifies a subset of newly marketed provider-administered medications that are not yet covered but are being reviewed by our clinical committees. Future coverage will depend on the outcome of the review.

A New-to-Market drug list will include all non-covered provider-administered medications subject to this program. The medication will appear in this list only while being considered for coverage. This list will be available on the Florida Blue Medical Coverage Guidelines (MCG) website (http://mcgs.bcbsfl.com/). We suggest using a key word or the medication's name in the search function to determine if the medication is on the list.

Considerations for a Medication's Non-Coverage Period

During a medication's non-coverage period, we ask providers to:

- Avoid preservice review requests or submitting claims for drugs on the New-to-Market Program drug list. A benefit denial will result for these requests.
 - o If MagellanRx receives a request, a MagellanRx agent or the MagellanRx portal will alert the provider the drug is not covered per the New-to-Market Program.
- Use available treatment alternatives covered in the member's plan.

How will you know when a newly marketed medication is covered?

Once medical necessity criteria are developed for a newly marketed medication, it will be removed from the New-to-Market Program drug list. A medical coverage guideline defining the criteria for coverage will be posted on the Florida Blue MCG website. Determination of coverage and medical necessity criteria may take up to six months. Please check the Florida Blue MCG website for updates.

What plans are affected?

This program applies to all Truli for Health and Florida Blue commercial plans, except State of Florida Employee plans. This program **does not apply** to any Florida Blue Medicare Advantage or Federal Employee Program® plans. BlueCard members' BlueCross BlueShield home plan benefits and medical necessity criteria apply.