

February 24, 2025

**PRIOR AUTHORIZATION CATALOG UPDATES - EFFECTIVE MAY 1, 2025**

**SUMMARY OF NOTIFICATION**

On May 1, 2025, the updates below will be reflected on the prior authorization catalogs.

The following psychotherapy codes will require authorization when exceeding the benefit limit of 30 visits per calendar year. **This is applicable for STAR and STAR+PLUS.**

90832
90833
90834
90836
90837
90838
90846
90847
90853

Neulasta (pegfilgrastim) J2506 will be added to the prior authorization catalog for **CHIP, STAR, and STAR+PLUS.**

Actemra (tocilizumab) J3262 will be added to the prior authorization catalog for **Marketplace.**

Tofidence (tocilizumab-bavi) Q5133 and Tyenne (tocilizumab-aazg) Q5135 will be added to the prior authorization catalog for **Marketplace and D-SNP.**

The Tocilizumab Medical Review Guideline (MRG) will be implemented for **Marketplace and D-SNP.**

**KEY DETAILS**

Please refer to our [Community provider website](#) for the complete prior authorization catalog, for each line of business.

For the Tocilizumab Medical Review Guideline (MRG), you can view the updates on our [Community provider website](#) under the “Prior Authorization Requests: Essential Information & Supporting Clinical Documentation” section. The guideline will require use of the preferred tocilizumab product, Tyenne (tocilizumab- aazg).