

Update to Medical Benefit Drug Coverage for Medical Mutual Medicare Advantage Plans

Effective Oct. 1, 2024, prior authorization will be required for Somatuline Depot (lanreotide) [HCPCS codes J1930] for Medicare Advantage Plans. All other lanreotide products [HCPCS codes J3490, C9399, and J1932] will not require prior authorization and will be managed by claims edit.

For more information, please visit <u>Medmutual.com/For-Providers, Policies and Standards,</u> Corporate Medical Policies.