## DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop C4-21-26 Baltimore, Maryland 21244-1850



**DATE:** November 25, 2024

**TO:** Medicare Advantage Organizations

Section 1876 Cost Plans

Programs of All-Inclusive Care for the Elderly (PACE)

**SUBJECT:** Supply Concern Impacting Repackaged Bevacizumab (Avastin)

CMS has been made aware of a supply concern potentially impacting access to repackaged bevacizumab (Avastin), which is an important treatment option for ophthalmology patients facing sight-threatening diseases, including age-related macular degeneration, macular edema, neovascular glaucoma and others.

Due to this potential supply issue, we encourage all Medicare Advantage (MA) organizations to consider halting or suspending step therapy and prior authorization requirements for alternative ophthalmic anti-vascular endothelial growth factor (VEGF) therapies to avoid access issues or treatment delays. Any suspension of such requirements must be uniformly provided to similarly situated enrollees. CMS will not find an MA organization out of compliance with the 30-day notice requirement in § 422.111(d) for changes to plan step therapy or prior authorization requirements that benefit enrollees and are to respond to this supply concern potentially impacting access to repackaged bevacizumab (Avastin).

We remind MA organizations that when an enrollee or a physician requests an expedited determination for a Part B drug, the MA organization must make its determination and notify the enrollee (and the physician or prescriber involved, as appropriate) of its decision as expeditiously as the enrollee's health condition requires, but no later than 24 hours after receiving the request.