



Health Services Department Provider Notification: [June 1, 2025]

***Memorial Hermann Health will implement the following medical policies effective August 1, 2025:***

MHHP MEDM-MA BIO-007 Biosimilar First Policy

MHHP MEDM-MA OFF-008 Off-Label Drug Policy

MHHP MEDM-MA ONC-009 Preferred Oncology Drugs Policy

MHHP MEDM-MA AST-005 Asthma Medications Step Therapy Policy

MHHP MEDM-MA IGG-006 Immune Globulins Step Therapy Policy

MHHP MEDM-MA IMM-002 Immunologic Drugs (non-oncology) Step Therapy Policy

MHHP MEDM-MA VEG-001 VEGF inhibitors – Intravitreal Indications (non-oncology) Step Therapy Policy

MHHP MEDM-MA VIS-004 Viscosupplements Step Therapy Criteria Step Therapy Policy

MHHP MEDM-MA IRO-003 Intravenous Iron Step Therapy Criteria

MHHP MEDM-MA 303 Medical Necessity Determinations Step Therapy Policy

MHHP MEDM-CO 304 Medical Necessity Determinations\_Commercial

**Note: Affected lines of business are outlined on each available policy.**

***Coming soon: Policies will be located on the plan website. You will be notified via our provider services department when the policies are published.***

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