

Prior Authorization

January 1, 2021

Most benefit plans include the Prior Authorization program. Check your plan materials to see if this information applies to you.

What Is Prior Authorization?

It's a quality and safety program that promotes the proper use of certain medications. If your doctor prescribes a medication that is included in our Prior Authorization program, you must get prior approval before your plan will cover your medication.

We base the Prior Authorization program on U.S. Food and Drug Administration and manufacturer guidelines, medical literature, safety, accepted medical practice, appropriate use and benefit design.

Which Medications Are Included?

This list includes both specialty and non-specialty drugs that require prior authorization under your **pharmacy benefit**. You will also find information on where your doctor should send requests for prior authorization.

Note that before your plan will cover some drugs, you must try one or more covered alternatives first.

If your health plan requires prior authorization for specialty drugs under the **medical benefit**, you can find more information on the Medical Drug List online at your health plan's website.

What Are the Possible Outcomes of a Prior Authorization Request?

- If you meet the requirements, your drug will be approved, and we will cover it. Your drug may be approved for up to one year or more. You will be sent a letter letting you know that your drug has been approved.
- If you do not meet the requirements, your prior authorization will be denied. Also, if your doctor does not send in the requested information within a

certain period of time, your prior authorization will be denied. If your request is denied, both you and your doctor will be sent a letter explaining the denial. The letter will include information about how you can appeal the decision.

What Happens at the Pharmacy?

The pharmacist enters your prescription information into the computer system. If your medication needs prior authorization and you already have it, the pharmacist will fill your prescription. If you do not have prior authorization, you have three choices:

- You or your pharmacist can call your doctor and get a prescription for a different medication that does not need prior authorization.
- You can pay full price for your medication.
- You or your pharmacist can ask your doctor to get prior authorization for you.

If you do not meet the requirements for prior authorization, you can still choose another option. You and your doctor make the final decision about the medication that is right for you.

If you submit your prescription to your plan's home delivery (mail-order) pharmacy and do not get the required prior authorization, the pharmacy will not fill your prescription. You will receive notification by mail.

What Happens at a Specialty Pharmacy?

Usually, your doctor will call or fax a prescription directly to the specialty pharmacy. If your prescription requires prior authorization, the specialty pharmacy will tell your doctor how to request this.

The information in this document does not apply to the Affordable Care Act (ACA) Business Advantage product.

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Your benefit document defines actual benefits available and may exclude coverage for certain drugs listed here. Check your benefit information to verify coverage or view your personal benefit information on our website. This list may contain trademarks or registered trademarks of pharmaceutical manufacturers that are not affiliated with your health plan. This list may change or expand from time to time without prior notice. When we list brand-name drugs, programs may also apply to any available generic equivalents.

Prior Authorization List – Specialty Drugs

This list applies to specialty drug coverage under the *pharmacy benefit*. Please call **855-811-2218** to request prior authorization for these drugs. Preferred drugs under the pharmacy benefit are listed with a (#).

Note that some drugs listed may require use of one or more alternative drugs before authorization will be granted. Please see **Table A** for more information.

A	Besponsa	Docetaxel (#)	Gammagard	Inlyta
Abiraterone (#)	Betaseron (#)	Dupixent	Gammagard S/D	Intron-A
Abraxane	Bethkis	Dysport	Gammaked	Iressa
Actemra	Bexarotene	E	Gammaplex	Istodax
Acthar	Bivigam	Egrifta	Gamunex C	Ixemptra
Actimmune	Blincyto	Elaprase	Gattex	Ixinity
Adcetris	Bosentan (#)	Elelyso	Gazyva	J
Adcirca (<i>brand & generic</i>)	Bosulif (#)	Eligard	Gel-One	Jadenu
Adempas (#)	Botox	Eloctate	Gemcitabine	Jakafi
Advate	Braftovi	Empliciti	Gemzar	Jetrea
Adynovate	Buphenyl	Endari	Genotropin	Jevtana
Afinitor	C	Enbrel	Genvisc 850	Juxtapid
Aldurazyme	Cabometyx	Enhertu	Gilenya (#)	Jynarque
Alecensa	Calquence	Entyvio	Gilotrif	K
Aliqopa	Caprelsa	Epclusa (#)	Givlaari	Kadcyla
Alphanate	Carbaglu	Epidiolex	Glassia	Kalbitor
Alphanine SD	Carimune NF	Epogen	Glatiramer	Kalydeco
Alprolix	Cayston	Epoprostenol sodium (#)	Glatopa (#)	Kanuma
Alunbrig	Cerdelga	Erbix	Gleevec	Kevzara
Alyq	Cerezyme	Erivedge	Granix	Keytruda
Ambrisentan (#)	Cholbam	Erleada (#)	H	Kineret
Ampyra (<i>generic available-brand is non-preferred</i>)	Cimzia (#)	Erlotinib	Haegarda	Kisqali/Femara (#)
Apokyn	Cinacalcet (#)	Erwinaze	Halaven	Kitabis Pak
Aralast NP	Cinryze	Esbriet	Harvoni (#)	Koate-DVI
Aranesp	Coagadex	Esperoct	Helixate FS	Kogenate FS (#)
Arcalyst	Cometriq	Euflexxa	Hemofil-M	Korlym (^)
Arzerra	Copaxone (#)	Exjade	Herceptin	Krystexxa
Aubagio (#)	Copiktra	Extavia	Herceptin Hylecta	Kuvan
Avastin	Cosentyx	Eylea	Hetlioz	Kynmobi
Aveed	Cotellic	F	Hizentra	Kyprolis
Avonex	Cyramza	Fabrazyme	Humate-P	L
Aykakit	Cystadane	Farydak	Humatrope (#)	Lartruvo
Azacitidine (#)	Cystadrops	Feiba NF	Humira (#)	Ledip-Sofosb
B	Cystagon	Fensolvi	Hyalgan	Lemtrada
Balversa	Cystaran	Ferriprox	Hycamtin	Lenvima
Bavencio	Cytogam	Fintepla	HyQvia	Letairis
Bebulin VH	D	Firazyr	I	Leukine
Beleodaq	Dacogen	Firmagon	Ibrance (#)	Leuprolide (#)
Belrapzo	Dalfampridine (#)	Flebogamma	Icatibant	Levoleucovor
Bendamustine	Darzalex	Flolan	Iclusig	Lonsurf
Bendeka	Daurismo	Folotyng	Ilaris	Lorbrena
Benefix	Decitabine (#)	Forteo (#)	Imatinib (#)	Lucentis
Benlysta	Deferiprone (#)	Fusilev	Imbruvica	Lumizyme
Berinert	Deferasirox	G	Imfinzi	Lupaneta
	Diacomit	Galafold	Increlex	Lupron Depot/PED
	Dimethyl Fumarate (#)	Gamastan S/D	Inflectra	Lynparza

M

Macugen
Mavyret (#)
Mekinist
Mektovi
Miglustat
Mitoxantrone HCL
Monoclalte-P
Mononine
Monovisc
Mozobil
Myalept
Myobloc

N

Naglazyme
Natpara
Nerlynx
Neulasta
Neupogen
Nexavar
Ninlaro
Nitisinone
Nivestym (#)
Norditropin (#)
Northera
Novoeight
Novoseven
Nplate
Nubeqa
Nutropin/AQ

O

Obizur
Ocrevus
Octagam
Octreotide Acetate
Odomzo
Ofev
Omnitrope
Oncaspar
Onivyde
Opdivo
Opsumit (#)
Orencia IV/SC
Orenitram
Orfadin

Orkambi
Orthovisc
Otezla (#)
Otrexup
Ozurdex

P

Padcev
Pegasy (#)
PEG-Intron
Perjeta
Phenylbutyra Sodium
Phesgo
Plegridy
Pomalyst
Poteligeo
Prialt
Privigen
Procrit (#)
Procysbi
Profilnine SD
Prolastin-C
Proleukin
Prolia
Promacta
Provenge
Pulmozyme
Purixan

Q

Qutenza

R

Radicava
Rasuvo
Ravicti
Rebif/Rebidose (#)
Reblozyl
Reclast
Recombinate
Remicade
Remodulin
Renflexis
Revatio (*brand & generic*)
Revlimid
Riastap
Rinvoq (#)

Rituxan
Rixubis
Romidepsin
Rubraca
Ruconest
Rydapt

S

Sabril
Saizen
Samsca
Sandostatin/LAR
Sapropterin
Sarclisa
Sensipar (*generic available; brand is non-preferred*)
Serostim
Signifor/LAR
Sildenafil (#)
Siliq
Simponi/Aria (#)
Skyrizi (#)
Sodium Hyaluronate
Sodium Phenylbutyrate
Sofos/Velpat
Soliris
Somatuline Depot
Somavert
Spinraza
Sprycel (#)
Stelara (#)
Stimate
Stivarga
Strensiq
Supartz FX
Supprelin LA
Sutent
Sylatron
Sylvant
Synagis
Synribo
Synvisc/One

T

Tadalafil (#)
Tafinlar

Tagrisso
Taltz
Talzenna
Tarceva
Targretin
Tasigna
Taxotere
Tazverik
Tecentriq
Tecfidera (#)
Temodar
Temozolomide (#)
Temsirrolimus (#)
Teriparatide
Tetrabenazine (#)
Thalomid
TOBI Podhaler
Tobramycin (#)
Tolvaptan (#)
Topotecan
Torisel
Tracleer
Treanda
Trelstar
Tremfya (#)
Trepstinil (#)

Trikafta
Triluron
Trivisc
Tykerb
Tysabri
Tyvaso

U

Uptravi (#)

V

Valchlor
Valrubicin
Valstar
Vantas
Vectibix
Velcade
Veletri
Venclexta
Verzenio
Vidaza

Vigabatrin (#)
Vigadrone
Vitakvi
Vimizim
Visco-3
Visudyne
Vosevi (#)
Votrient
Vpriv

W

Wilate

X

Xalkori
Xeljanz/XR (#)
Xeloda
Xeomin
Xermelo
Xgeva
Xiaflex
Xolair (#)
Xospata
Xtandi (#)
Xyntha
Xyrem (^)

Y

Yervoy
Yondelis

Z

Zaltrap
Zarxio (#)
Zavesca
Zejula
Zelboraf
Zemaira
Zepzelca
Zoladex
Zoledronic acid (#)
Zolinza
Zomacton
Zometa
Zorbtive
Zydelig
Zykadia
Zytiga (#)

Table A: Specialty Drugs That May Require Use Of An Alternative First

Condition/Drug Class	Before you have coverage for one of these drugs...	...you must have tried one (or more) of these alternative drugs first.
Brain Cancer	Temodar	temozolomide
Colon Cancer	Xeloda	capecitabine
Cystic Fibrosis	TOBI Podhaler	Tobramycin inhalation
Decrease in White Blood Cells	Neupogen	Zarxio
Growth Deficiency	Genotropin, Nutropin/AQ, Omnitrope, Saizen, Zomacton	Humatrope, Norditropin
Hemophilia	Helixate FS	Kogenate
High Cholesterol	Juxtapid, Kynamro	Repatha
Inflammatory Conditions (Crohn's Disease, Psoriasis, Rheumatoid Arthritis)	Actemra, Cosentyx, Enbrel, Entyvio, Inflectra, Kevzara, Kineret, Orencia, Remicade, Rituxan, Silliq, Taltz,	Cimzia, Humira, Otezla, Rinvoq, Simponi/Aria, Skyrizi, Stelara, Tremfya, Xeljanz/XR
Leukemia/Multiple Cancers	Gleevec	imatinib
Multiple Sclerosis	Extavia, Ocrevus, Plegridy, Tysabri	Aubagio, Avonex, Betaseron, Copaxone, dimethyl fumarate, Gilenya, glatiramer, Glatopa, Rebif, Tecfidera
Osteoarthritis of the Knee	Gel-One, Genvisc, Hyalgan, Hymovis, Monovisc, Orthovisc, Sodium Hyaluronate, Supartz, Synvisc, Triluron, Trivisc, Visco-3	Euflexxa, Gelsyn 3, Durolane
Pulmonary Arterial Hypertension	Adcirca, Revatio	tadalafil, sildenafil

Prior Authorization – Non-specialty Drugs

To request prior authorization for these drugs, please have your doctor call **855-811-2218**.

Note that some drugs listed may require use of one or more alternative drugs before authorization will be granted. Please see **Table B** for more information.

A	Cresemba Crestor	I	Nesina Nexletol Nexlizet Noxafil	Sporanox capsules & solution Sustol
Acitretin Aimovig Alogliptin Alogliptin/Metformin Alogliptin/Pioglitazone Alosetron Ambien/CR Amitiza Anadrol-50 Apidra armodafinil (<i>generic Nuvigil</i>) Avalide Avapro	D Detrol/LA Dexcom G6 Diabetic Test Strips (<i>other than OneTouch</i>) Diclofenac epolamine patch Diovan/HCT Ditropan XL Dulera Dymista	Incruse Ellipta Insulin lispro Intermezzo Invokamet/XR Invokana Itraconazole	O Olux-E Omega 3 Ethyl Esters Omnaris Omnipod Onglyza Oralair Orilissa Oseni Oxytrol	T Tekturna/HCT Tobacco Cessation Tovet Toviaz Tradjenta Tresiba Triкло Tudorza Pressair
B	E Edarbi Edarbyclor Edluar Emgality Everolimus	J Jentaduo/XR	P Posaconazole Pradaxa Pravachol	U N/A
Basaglar Beconase AQ Belsomra Buprenorphine Bydureon/BCISE Byetta	F Flector patch Flonase Freestyle Libre (<i>sensor & reader</i>)	K Kazano Kombiglyze XR	Q Qnasl	V Vesicare Viberzi
C	G N/A	L Lazanda Lescol/XL Levemir lidocaine (<i>generic</i>) Lipitor Livalo Lotronex Lovaza Lumigan	R Regranex Repatha Riomet	W N/A
Capecitabine clindamycin phosphate-tretinoin (<i>generic Ziana</i>) Clobetasol Compound Drugs (<i>costing \$300 or more</i>) Cozaar	H Humalog Humulin (<i>except U-500</i>) Hyzaar	M Metformin Micardis/HCT modafinil (<i>generic Provigil</i>) Motegrity Myrbetriq	S Savaysa Seebri Neohaler Sonata Soriatane	X Xifaxan 550 mg
				Y N/A
				Z Zetonna Zocor

Table B: Non-specialty Drugs That May Require Use Of An Alternative First

Condition/Drug Class	Before you have coverage for one of these drugs...	...you must have tried one (or more) of these alternative drugs first.
Arthritis/Pain	Flector (<i>diclofenac epolamine</i>) patch, Naprelan	Generic oral immediate release NSAIDs
Asthma/COPD (A)	Dulera	Advair Diskus, Advair HFA, Symbicort
Asthma/COPD (B)	Incruse Ellipta, Seebri Neohaler, Tudorza Pressair	Spiriva, Spiriva Respimat
Blood Clots	Savaysa, Pradaxa	Xarelto, Eliquis
Cholesterol Lowering (<i>high potency</i>)	Crestor	atorvastatin, ezetimibe/simvastatin (<i>generic for Vytorin</i>), rosuvastatin
Cholesterol Lowering	Lescol/XL, Lipitor, Livalo, Mevacor, Pravachol, Zocor	atorvastatin, fluvastatin, fluvastatin ext-rel, lovastatin, pravastatin, rosuvastatin, simvastatin
Depression	Oleptro	trazodone
Dermatologic	Olux-E	Clobetasol propionate foam 0.05%
Diabetes (<i>Insulin</i>)	All Apidra, Humalog (insulin lispro), Humulin (<i>except U-500</i>), Novolin Relion	Novolog, Novo Novolin
Diabetes (<i>long-acting insulin</i>)	Basaglar, Levemir, Tresiba	Lantus, Toujeo
Diabetes (<i>Biguanides</i>)	Riomet	metformin/XR (<i>generics for Glucophage/XR</i>)
Diabetes (<i>DPP-4</i>)	Jentaduetto/XR, Kazano, Kombiglyze XR, Nesina, Onglyza, Oseni, Tradjenta	Januvia, Janumet/XR
Diabetes (<i>SGLT2</i>)	Invokana, Invokamet/XR	Farxiga, Jardiance, Synjardy/XR, Xigduo XR
Diabetes (<i>GLP-1</i>)	Bydureon/BCISE, Byetta	Ozempic, Rybelsus, Trulicity, Victoza <i>These drugs require prior use of metformin, metformin ER (generic Glucophage XR) or Prior Authorization.</i>
Diabetes Supplies	All test strips other than OneTouch <i>Members on insulin pumps that require specific test strips other than OneTouch may be granted a lifetime approval to continue to fill their current test strips.</i>	OneTouch
Glaucoma	Lumigan	latanoprost, Travatan Z, Zioptan
Hypertension	Avapro, Avalide, Cozaar, Hyzaar, Diovan/HCT, Edarbi, Edarbyclor, Micardis/HCT, Tekturna/HCT, Teveten/HCT	generic ARBs
Irritable Bowel Syndrome (<i>constipation predominant</i>)	Amitiza	Linzess
Irritable Bowel Syndrome (<i>diarrhea predominant</i>)	Viberzi, Xifaxan 550 mg	loperamide, diphenoxylate/atropine
Nasal Steroids	Beconase AQ, Dymista, Flonase, Nasacort AQ, Omnaris, Qnasl, Rhinocort AQ, Zetonna	budesonide nasal spray, flunisolide, fluticasone nasal, mometasone furoate nasal spray, triamcinolone
Overactive Bladder	Detrol/LA, Ditropan XL, Myrbetriq, Oxytrol, Toviaz, Vesicare	oxybutynin ext-rel, solifenacin, tolterodine, tolterodine ext-rel, trospium, trospium ext-rel, Gelnique
Sleep Medications	Ambien/CR, Belsomra, Edluar, Intermezzo, Sonata	eszopiclone, ramelteon, zolpidem, zolpidem ext-rel, zaleplon

