

DRUG PRIOR AUTHORIZATION LIST

In an effort to promote the appropriate use of certain drugs and to help better manage the cost of expensive drugs, the ConnectiCare Pharmacy & Therapeutics Committee has developed a list of prescription drugs that require prior authorization. Prior authorization requests must be faxed to ConnectiCare's Pharmacy Services department at 860-674-2851 or toll-free at 800-249-1367 by the prescribing physician's office. POS members receiving out-of-network care are responsible for initiating this process. When submitting a request for Prior Authorization, please use a Prior Authorization form which can be obtained from ConnectiCare.com or by calling ConnectiCare at 800-251-7722. If the prescribed drug is approved, the prescription will be filled as usual at a participating pharmacy or administered by a provider (where appropriate).

Note: Self-administered medications (i.e. interferons), even those not on this list, may not be dispensed for self administration and billed through the medical benefit by a provider. They must be dispensed through a participating pharmacy.

(*) prior authorization is not required within the first 90 days of membership with ConnectiCare.

(^M) physician-administered drug, usually billed under the medical benefit.

(@) Prior Authorization required for members of ConnectiCare Exchange Plans and ConnectiCare SOLO Plans only

To find a drug, click on a letter and browse the table alphabetically.

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Or, click this [button](#) and enter the name of the drug in the pop-up task pane. [✦](#)

| MEDICATION | COMMENTS | POLICY NAME |
|--------------------------|-----------------------|------------------------|
| Absorica | | Absorica |
| Abstral | | Fentanyl |
| Accu-Chek Test Strips | Use Freestyle | Diabetic Test Strips |
| Aciphex | (Use OTC PPI first) | Proton Pump Inhibitors |
| Actemra | | Actemra |
| Acthar Gel | | Acthar |
| *Acticlate | | Acne Meds Oral |
| Actimmune | | PA To Indication |
| Actiq (fentanyl lozenge) | | Fentanyl |
| *ActoplusMet XR | (Use metformin first) | Diabetic Oral Step |
| ^M Adcetris | | Adcetris |
| Adcirca | | PAH Meds |
| *Adempas | | PAH Meds |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|----------------------------|--|-------------------------------------|
| Adlyxin | | GLP-1/ Freedom GLP1s |
| *Adoxa | (Use generics first) | Acne Meds Oral |
| @Advair | | Freedom Inhalers |
| Aerospan | | Airduo-Fluticasone/Freedom Inhalers |
| Afinitor | | Oncology |
| Afrezza | | Afrezza |
| Afstyla | | Factor Products |
| Airduo Respiclick | | Airduo-Fluticasone/Freedom Inhalers |
| Alcortin A | | Alcortin-Alaquin |
| ^M Aldurazyme | | Enzymes |
| Alecensa | | Oncology |
| ^M Alimta | | Alimta |
| Aliqopa | | Oncology |
| AloQuin | | Alcortin-Alaquin |
| Alsuma | | Sumatriptans |
| *Altoprev | (Use simva-, prava-, lovastatin first) | Statin Step |
| Alunbrig | | Oncology |
| @Alvesco | | Freedom Inhalers |
| Ampyra | | Ampyra |
| Amrix (cyclobenzaprine ER) | (Use older generics first) | Amrix-Fexmid |
| Anastia Lotion | | Lidocaines |
| Androderm | | Testosterone |
| Androgel | *preferred product for commercial and exchange | Testosterone |
| Android | | Testosterone |
| Anzemet | (Use ondansetron first) | 5HT3 Receptor Antagonists |
| Apidra | | Insulins |
| Aplenzin | (Use generic bupropion hcl) | Aplenzin-Forfivo |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|-----------------------|--------------------------------------|-------------------------------------|
| Apokyn | | Apokyn |
| ^M Aralast | | Alpha-1 Proteinase Inhibitors |
| ^M Arcalyst | | PA To Indication |
| Aricept 23 | (PA < 50 years old only) | Cholinesterase Inhibitors |
| Aricept ODT | (PA < 50 years old only) | Cholinesterase Inhibitors |
| Armonair Respiclick | | Airduo-Fluticasone/Freedom Inhalers |
| @Arnuity Ellipta | | Freedom Inhalers |
| Arthrotec | | NSAIDs |
| Asacol/HD | | Mesalamines |
| Arymo ER | | Freedom LA Narcotics/Morphines |
| ^M Arzerra | | Arzerra |
| Ascensia Test Strips | (Use Freestyle) | Diabetic Test Strips |
| Aubagio | | MS |
| Austedo | | VMAT2 Inhibitors |
| Auvi Q | | Auvi Q |
| Avar/Avar Plus | | Acne Meds Topical |
| ^M Avastin | (PA not required for use in the eye) | Avastin |
| Aveed injection | | Testosterone |
| Avidoxy DK | (Use generic first) | Acne Meds Oral |
| Avonex | | MS |
| Axiron | | Testosterone |
| Bavencio | | Bavencio |
| Baxdela | | Baxdela |
| *Beconase AQ | | Freedom Nasal Sprays/Nasal Steroids |
| Belbuca | | Belbuca |
| Belsomra | | Belsomra |
| ^M Bendeka | | Bendeka |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|--|-----------------------|----------------------------------|
| ^M Benlysta | | Benlysta |
| Berinert | | HAE Meds |
| Besponsa | | Oncology |
| Betaseron | | MS |
| @Bevespi Aerosphere | | Freedom Inhalers |
| Blincyto | | Blincyto |
| ^M Blood Clotting Factors (All) | | Factor Products |
| Boniva Injection | | Boniva Injection |
| Bosulif | | Oncology |
| Botox | | Botox Meds |
| @Breo Ellipta | | Freedom Inhalers |
| @Bunavail | | Freedom Zubsolv-Bunavail |
| Buphenyl | | Buphenyl |
| Buprenorphine/Naloxone tabs | (Use Suboxone Film) | Buprenorphine/Naloxone |
| *Bydureon | | GLP-1/ Freedom GLP1s |
| *Byetta | (Use metformin first) | GLP-1/ Freedom GLP1s |
| @Byvalson | | Freedom Beta Blockers |
| Cabometyx | | Oncology |
| Calquence | | Oncology |
| Cambia | | Cambia-Treximet |
| Caprelsa | | Oncology |
| @Cardizem LA | | Freedom Calcium Channel Blockers |
| Cayston | | Cayston |
| ^M Cerdelga | | Gaucher's Disease |
| ^M Cerezyme | | Gaucher's Disease |
| Cesamet | | Cesamet |
| Cetrotide | | |
| Chenodal | | Chenodal |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|-------------------------------------|---|------------------------|
| Chloroquine | | Antimalarials |
| Cimzia | | Cimzia |
| Cinqair | | Nucala/Cinqair |
| Cinryze | | HAE Meds |
| Clarinet/Clarinet D (desloratadine) | (Use Allegra, Zyrtec, and Claritin OTC first—covered) | Antihistamines |
| Clobetasol | | Clobetasol |
| Clobex Lotion | (Use generic clobetasol first) | Clobetasol |
| Cloderm | | Topical Cortisones |
| Clolar | | Oncology |
| CNL Nail Kit | | Antifungal Agents |
| Coartem | | Antimalarials |
| Cometriq | | Oncology |
| Compounded Medications | | |
| @Contraceptives | | Freedom Contraceptives |
| Copaxone | | MS |
| Cordran | | Topical Cortisones |
| Corlanor | | Corlanor |
| Cosentyx | | Cosentyx |
| Cotellic | | Oncology |
| Cotempla XR-ODT | | ADHD meds |
| Cuvitru | | IVIG SQ |
| Cuvposa | | Cuvposa |
| Cyramza | | Cyramza |
| ^M Dacogen | | Oncology |
| Daklinza | | Hepatitis C |
| Daraprim | | PA To Indication |
| Darzalex | | Darzalex |
| Daxbia | | Daxbia |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|-------------------------|--------------------------------|-------------------------------|
| Delzicol | | Mesalamines |
| *Desvenlafaxne Fumarate | | Antidepressants |
| Dexilant | (Use OTC's 1st) | Proton Pump Inhibitors |
| Differin | Use OTC | Acne Topicals |
| Dificid | | Dificid |
| Dipentum | | Mesalamines |
| *Doryx/MPC | (Use generics first) | Acne Meds Oral |
| Dovonex | | Psoriasis Topicals |
| Doxepin Cream | | Doxepin Cream |
| *Duetact | (Use metformin first) | Diabetic Oral Step |
| Duexis | | NSAID Combinations |
| Dupixent | | Eucrisa-Dupixent |
| Durlaza | | Aspirins |
| Duzallo | | Zurampic--Duzallo |
| Dymista | | Dymista |
| Dysport | | Botox Meds |
| Ecoza | | Ecoza-Luzu |
| *Edarbi/Edarbyclor | | ACE/ARB Step |
| *Edluar | (Use zolpidem generic tablets) | Zolpidem |
| Egriffta | | Egriffta |
| ^M Elaprase | | PA To Indication |
| Elelyso | | Gaucher's Disease |
| Eletriptan | | Relpax |
| ^M Eloxatin | | Eloxatin |
| @Embeda | | Freedom Long Acting Narcotics |
| Emflaza | | Emflaza-Exondys |
| Empliciti | | Empliciti |
| Enbrel | | Enbrel |
| Endometrin | | Endometrin |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|----------------------------------|-----------------------------|-----------------------------|
| Enstilar | | Psoriasis Topicals |
| Entresto | | Entresto |
| Entyvio | | Entyvio |
| Epaned | | Qbrelis-Epaned |
| Epclusa | | Hepatitis C |
| Epiduo Forte | | Acne Topicals |
| ^M Erbix | | Erbix |
| Erivedge | | Oncology |
| Esbriet | | Esbriet |
| Eucrisa | | Eucrisa-Dupixent |
| ^M Euflexxa | | Hyaluronic Acid Derivatives |
| Exelon capsules (rivastigmine) | (PA for <50 years old only) | Cholinesterase Inhibitors |
| Exjade | | PA To Indication |
| Exondys 51 | | Emflaza-Exondys |
| Extavia | | MS |
| ^M Fabrazyme | | Enzymes |
| Factor Products | | Factor Products |
| *Fanapt | | Atypicals |
| *Farxiga | | Diabetic Oral Step |
| Farydak | | Oncology |
| Fenoglide | | Fenofibrate step |
| Fentora | | Fentanyl |
| *Fetzima | | Antidepressants |
| Fexmid | | Amrix-Fexmid |
| Fibricor | | Fenofibrate step |
| Firazyr | | HAE Meds |
| @Flector Patch | | Freedom Topical NSAID's |
| ^M Flolan/epoprostenol | | PAH Meds |
| Flolipid | | Statin Step |

DRUG PRIOR AUTHORIZATION LIST

| MEDICATION | COMMENTS | POLICY NAME |
|--------------------------------|-------------------------------|---|
| @Flovent | | Freedom Inhalers |
| Flowtuss | | Cough Meds |
| Fluoxetine 60mg | | Antidepressants |
| Fluticasone-Salmeterol inhaler | | Airduo-Fluticasone/Freedom Inhalers |
| Follistim AQ | | Gonadotropins |
| Folotyn | | Folotyn |
| Forfivo XL | | Aplenzin-Forfivo |
| Fortamet | (Use generic metformin first) | Diabetic Oral Step |
| Fortesta | | Testosterone |
| Frotek | | Topical NSAID's/Freedom Topical NSAID's |
| Fuzeon | | Fuzeon |
| Ganirelix | | |
| Gattex | | PA To Indication |
| Gazyva | | Gazyva |
| *Gelnique | | Overactive Bladder Meds |
| ^M Gel-One | | Hyaluronic Acid Derivatives |
| Gelsyn-3 | | Hyaluronic Acid Derivatives |
| Genotropin | | Growth Hormone |
| Genvisc 850 | | Hyaluronic Acid Derivatives |
| Gilenya | | MS |
| Gilotrif | | Oncology |
| Glassia | | Alpha-1 Proteinase Inhibitors |
| Glatopa | | MS |
| Gleevec (imatinib) | | Oncology |
| Gleostine | | Oncology |
| Glumetza | | Diabetic Oral Step |
| Glyxambi | | Diabetic Oral Step |
| Gonal-F | | Gonadotropins |

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| MEDICATION | COMMENTS | POLICY NAME |
|--------------------------------------|----------|-----------------------------|
| Gralise | | Gralise |
| Granix | | Granix |
| Grastek | | Grastek |
| Haegarda | | HAE Meds |
| ^M Halaven | | Halaven |
| Harvoni | | Hepatitis C |
| ^M Herceptin | | Herceptin |
| Hetlioz | | PA To Indication |
| ^M Hizentra | | IVIG SQ |
| Horizant | | Horizant |
| Humatrope | | Growth Hormone |
| Humira | | Humira |
| ^M Hyalgan | | Hyaluronic Acid Derivatives |
| Hycamtin Capsules | | Oncology |
| Hycufenix | | Cough Meds |
| Hyqvia | | IVIG SQ |
| Hysingla ER | | Long Acting Hydrocodones |
| Ibrance | | Oncology |
| Iclusig | | Oncology |
| Idhifa | | Oncology |
| Ilaris | | Ilaris |
| Imbruvica | | Oncology |
| Imfinzi | | Imfinzi |
| Imlygic | | Imlygic |
| Impavido | | PA to Indication |
| Increlex | | Increlex |
| @Incruse Ellipta | | Freedom Inhalers |
| Infertility Medications (All) | | Gonadotropins |
| Inflectra | | Infliximab |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|--|----------|--------------------|
| Ingrezza | | VMAT2 Inhibitors |
| <i>Injectable Drugs – All (excluding insulin)</i> | | |
| Inlyta | | Oncology |
| Intron-A | | Intron-A |
| Iressa | | Oncology |
| ^M Istodax | | Istodax |
| ^M IV Immune Globulin (IVIG) | | IVIG |
| ^M Ixempra | | Ixempra |
| Jadenu | | PA To Indication |
| Jakafi | | Jakafi |
| Jetrea | | Jetrea |
| ^M Jevtana | | Jevtana |
| Jublia | | Antifungal Agents |
| Juxtapid | | Juxtapid-Kynamro |
| ^M Kadcyla | | Kadcyla |
| ^M Kalbitor | | HAE Meds |
| Kalydeco | | Kalydeco |
| Kanuma | | Enzymes |
| *Kazano | | Diabetic Oral Step |
| Kerydin | | Antifungal Agents |
| Keveyis | | PA To Indication |
| Kevzara | | Kevzara |
| ^M Keytruda | | Keytruda |
| *Khedezla | | Antidepressants |
| Kineret | | Kineret |
| Kisqali | | Kisqali |
| *Kombiglyze XR | | Diabetic Oral Step |
| Korlym | | PA To Indication |
| Kovaltry | | Factor Products |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|------------------------------------|----------------------------|----------------------------------|
| ^M Krystexxa | | Krystexxa |
| Kuvan | | Kuvan |
| Kymriah | | Oncology |
| Kynamro | | Juxtapid-Kynamro |
| ^M Kyprolis | | Kyprolis |
| Kytril (granisetron) | (Use generic Zofran first) | 5HT3 Receptor Antagonists |
| @Lac-Hydrin | | Freedom Lac-Hydrin |
| Lartruvo | | Lartruvo |
| *Latuda | | Atypicals |
| Lazanda | | Fentanyl's |
| Lemtrada | | PA To Indication |
| Lenvima | | Oncology |
| Letairis | | PAH Meds |
| Lidtopic Max | | Lidocaines |
| *Livalo | | Statin Step |
| Livixil | | Lidocaines |
| Lofibra | | Fenofibrate step |
| Lonsurf | | Oncology |
| Lovaza (Omega 3 acid ethyl esters) | | Omega 3's |
| Lumizyme | | Enzymes |
| Luveris | | |
| Luzu | | Ecoza-Luzu |
| Lynparza | | Oncology |
| *Lyrica/Lyrica CR | | Lyrica |
| ^M Macugen | | Macugen |
| Marqibo | | Oncology |
| @Matzim LA | | Freedom Calcium Channel Blockers |
| Mavyret | | Hepatitis C |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|------------------------|--|-----------------------------------|
| Mekinist | | Oncology |
| Mefloquine | | Antimalarials |
| Menopur | | Gonadotropins |
| Mepron (atovaquone) | | Mepron |
| Mesalamine 800mg DR | | Mesalamines |
| Metformin ER | | Diabetic Oral Step |
| Metoprolol ER-HCTZ | | Metoprolol HCTZ |
| Monovisc | | Hyaluronic Acid Derivatives |
| Morphabond ER | | Freedom LA Narcotics/Morphines |
| ^M Mozobil | | Mozobil |
| Mylotarg | | Oncology |
| ^M Myobloc | | Botox Meds |
| ^M Myozyme | | Enzymes |
| *Myrbetriq | | Overactive Bladder Meds |
| ^M Naglazyme | | Enzymes |
| Namenda/Namzaric | (PA < 50 years old only) | Cholinesterase Inhibitors |
| Nasacort | | Freedom Nasal Inhalers |
| Natesto | | Testosterone |
| Natpara | | Natpara |
| Nerlynx | | Oncology |
| *Nesina | (Use metformin and Sitagliptin or Linagliptin first) | Diabetic Oral Step |
| Neulasta | | Neulasta |
| Neupogen | | Neupogen |
| Nexavar | | Oncology |
| Nimodipine | | PA To Indication |
| Ninlaro | | Oncology |
| Nityr | | PA To Indication |
| Norditropin | | Growth Hormone |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|------------------------|--------------------------------|-------------------------------------|
| Northera | | Northera |
| Novacort Gel | | Novacort |
| Novolin/Novolog | | Insulins |
| ^M Novoseven | | Novoseven |
| ^M Nplate | | Nplate |
| Nucala | | Nucala/Cinqair |
| Nuedexta | | Nuedexta |
| ^M Nulojix | | PA To Indication |
| Numbonex | | Lidocaines |
| Nuplazid | | Nuplazid |
| Nutropin/AQ | | Growth Hormone |
| Nuvigil (armodafanil) | | Nuvigil |
| Nymalize | | PA To Indication |
| Ocaliva | | PA To Indication |
| Ocrevus | | MS Drugs |
| Odomzo | | Oncology |
| Ofev | | Ofev |
| Ogivri | | Herceptin or Ogivri |
| Olepto | | Olepto |
| Olux/Olux-E | (Use generic clobetasol first) | Clobetasol |
| Olysio | | Hepatitis C |
| *Omnaris | (Use fluticasone or Nasonex) | Freedom Nasal Sprays/Nasal Steroids |
| Omnitrope | | Growth Hormone |
| One Touch Test Strips | (Use Freestyle) | Diabetic Test Strips |
| Onexton | | Acne Meds Topical |
| *Onglyza | | Diabetic Oral Step |
| Onmel | | Onmel |
| Onzetra Xsail | | Sumatriptans |
| @Opana ER (crush | (Generic Opana ER | Freedom Long Acting |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|---|--------------------------------------|---|
| resistant formulation) | does not require PA) | Narcotics |
| Opdivo | | Opdivo |
| *Opsumit | | PAH Meds |
| *Oracea (Doxycycline Rosacea) | | Oracea |
| Oralair | | Oralair |
| Oravig | | Oravig |
| ^M Orencia/Orencia SQ | | Orencia |
| Orenitram | | PAH Meds |
| Orfadin | | PA To Indication |
| Orkambi | | PA To Indication |
| ^M Orthovisc | | Hyaluronic Acid Derivatives |
| *Oseni | | Diabetic Oral Step |
| Otezla | | Otezla |
| Otrexup | | Methotrexates |
| Ovace Plus Foam | | Ovace |
| Oxaydo | | Oxycodones |
| *Oxtellar XR | | Oxtellar XR |
| Oxycodone AG (Oxycontin A uthorized G eneric) | | Oxycodones |
| @Oxycontin (brand name) | | Freedom Long Acting Narcotics |
| *Oxytrol | (Use generic oxybutynin IR/XL first) | Overactive Bladder Meds |
| Ozurdex | | Ozurdex |
| Patanase (olopatadine) | (Use Astelin first) | Freedom Nasal Sprays/Patanase |
| Pegasys | | Pegasys-PegIntron |
| Peg-Intron | | Pegasys-PegIntron |
| Pennsaid 2% | | Topical NSAID's/Freedom Topical NSAID's |
| ^M Perjeta | | Perjeta |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|------------------------|----------------------|-------------------------------------|
| *Pexeva | (Use generics first) | Antidepressants |
| Plegridy | | MS |
| Pomalyst | | Oncology |
| ^M Portrazza | | Oncology |
| Praluent | | PCSK9's |
| Prestalia | | Prestalia |
| Prevacid Rx | | Proton Pump Inhibitors |
| Prevymis | | Prevymi |
| ^M Prialt | | Prialt |
| Prilosec Rx | (Use Prilosec OTC) | Proton Pump Inhibitors |
| Probuphine | | Buprenorphine/Naloxone |
| Procysbi | | Procysbi |
| Prolastin | | Alpha-1 Proteinase Inhibitors |
| ^M Proleukin | | Proleukin |
| Prolia | | Prolia-Tymlos |
| Promacta | | Promacta |
| Protonix | | Proton Pump Inhibitors |
| ^M Provenge | | Provenge |
| Proventil HFA | | Short Acting Bronchodilators |
| Provigil (modafinil) | | Provigil |
| *Prozac Weekly | (Use generics first) | Antidepressants |
| Prudoxin Cream | | Doxepin Cream |
| Psorcon | | Topical Cortisones |
| @Pulmicort | | Freedom Inhalers |
| Qbrexis | | Qbrexis-Epaned |
| *Qnasl | | Freedom Nasal Sprays/Nasal Steroids |
| Qtern | | Diabetic Oral Step |
| Qualaquin | | Qualaquin |
| Qudexy XR | | Qudexy--Trokendi |

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| MEDICATION | COMMENTS | POLICY NAME |
|-------------------------------------|-----------------------------|---------------------------|
| Qutenza | | Qutenza |
| Radicava | | Radicava |
| Ragwitek | | Ragwitek |
| *Rapaflo | (Use Flomax first) | Rapaflo |
| Rasuvo | | Methotrexates |
| Ravicti | | Ravicti |
| Rayaldee | | Rayaldee |
| Razadyne | | Cholinesterase Inhibitors |
| Rebif | | MS |
| Regranex | | Regranex |
| Relistor | | Relistor |
| *Relpax | (Use generic triptan first) | Relpax |
| ^M Remicade | | Infliximab |
| ^M Remodulin | | PAH Meds |
| Renflexis | | Infliximab |
| Repatha | | PCSK9's |
| ^M Retisert | | Retisert |
| Revatio (sildenafil) | | PAH Meds |
| Revlimid | | Oncology |
| *Rexulti | | Rexulti |
| Rhofade | | Rhofade |
| ^M RiaSTAP | | PA To Indication |
| ^M Rituxan/Rituxan Hycela | | Rituxan |
| Rixubis | | Factor Products |
| Rosula | | Acne Meds Topical |
| Rubraca | | Oncology |
| Ruconest | | HAE Meds |
| Rydapt | | Oncology |
| Ryvent | | Antihistamines |

DRUG PRIOR AUTHORIZATION LIST

| MEDICATION | COMMENTS | POLICY NAME |
|-------------------------|-------------------------|---------------------------|
| Saizen | | Growth Hormone |
| *Sanctura (trospium) | | Overactive Bladder Meds |
| Sancuso | (Use ondansetron first) | 5HT3 Receptor Antagonists |
| *Saphris | | Atypicals |
| @Savella | | Savella |
| @Seebri Neohaler | | Freedom Inhalers |
| Sernivo | | Topical Cortisones |
| Signifor | | PA To Indication |
| Silenor | | Silenor |
| Siliq | | Siliq |
| Simponi/Simponi ARIA | | Simponi-Simponi ARIA |
| Sitavig | | Sitavig |
| Soliqua | | GLP-1/Freedom GLP-1 |
| ^M Soliris | | Soliris |
| Solodyn | | Acne Meds Oral |
| Solosec | | Solosec |
| Somavert | | Somavert |
| Sorilux Foam | | Psoriasis Topicals |
| Sovaldi | | Hepatitis C |
| Spinraza | | Spinraza |
| Sporanox (itraconazole) | | Sporanox |
| Sprix Nasal spray | | Sprix |
| Sprycel | | Oncology |
| Stelara syringes/vials | | Stelara |
| Stivarga | | Oncology |
| Strensiq | | PA To Indication |
| Striant | | Testosterone |
| Subsys | | Fentanyl |
| Sucraid | | Enzymes |
| Sumavel Dosepro | | Sumatriptans |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|---------------------------------------|--------------------------------|-----------------------------|
| ^M Supartz/FX | | Hyaluronic Acid Derivatives |
| Supprelin LA | | Supprelin LA |
| Sustol | | 5HT3 Receptor Antagonists |
| Sutent | | Oncology |
| Sylatron | | Oncology |
| Sylvant | | PA To Indication |
| *Symlin | | Symlin |
| ^M Synagis | | Synagis |
| Synarel | | Synarel |
| Syndros | | Syndros |
| *Synjardy/XR | | Diabetic Oral Step |
| Synribo | | Oncology |
| ^M Synvisc | | Hyaluronic Acid Derivatives |
| Tafinlar | | Oncology |
| Tagrisso | | Oncology |
| Taltz | | Taltz |
| Tanzeum | | GLP-1/ Freedom GLP1s |
| Tarceva | | Oncology |
| Targadox | | Acne Meds Oral |
| Tasigna | | Oncology |
| Tecentriq | | Tecentriq |
| Tecfidera | | MS |
| Technivie | | Hepatitis C |
| *Tekturna | (Use generic ACE or ARB first) | ACE/ARB Step |
| Temodar (temozolomide) | | Oncology |
| Tepadina | | Oncology |
| Testim (testosterone transdermal gel) | | Testosterone |
| Testosterone (All) | | Testosterone |
| TevTropin | | Growth Hormone |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|----------------------|---------------------------------|-------------------------|
| Thalomid | | Oncology |
| Thyrogen | | Thyrogen |
| Tivorbex | | NSAIDs |
| ^M Torisel | | Oncology |
| *Toviaz | (Use oxybutynin IR/XL first) | Overactive Bladder Meds |
| Tracleer | | PAH Meds |
| Tramadol Biphasic | | Tramadol Biphasic |
| Tranzarel | | Lidocaines |
| Travatan/Travatan Z | | Ophthalmic Preparations |
| ^M Treanda | | Treanda |
| Trelegy Ellipta | | Trelegy Ellipta |
| Trelstar | | PA To Indication |
| Tremfya | | Tremfya |
| Tretin-X Cream | (Use tretinoin first) | Tretin-X |
| Tretten | | Factor Products |
| Treximet | (Use sumatriptan with naproxen) | Cambia-Treximet |
| Triglide | | Fenofibrate step |
| *Trintellix | Formerly Brintellix | Trintellix |
| Trokendi XR | | Qudexy--Trokendi |
| Troxyc ER | | Oxycodones |
| Trulance | | Trulance |
| Trulicity | | GLP-1/ Freedom GLP1s |
| Tuzistra XR | | Cough Meds |
| Tykerb | | Oncology |
| Tymlos | | Prolia-Tymlos |
| Tysabri | | MS/Tysabri |
| Tyvaso | | PAH Meds |
| Unituxin | | Oncology |
| Upravi | | PAH Meds |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|-----------------------|------------------------------|------------------------------|
| @Utibron Neohaler | | Freedom Inhalers |
| Valchlor | | Oncology |
| Vanos | | Vanos |
| Vantas | | Oncology |
| Vascepa | | Omega 3's |
| ^M Vectibix | | Vectibix |
| ^M Velcade | | Velcade |
| Velphoro | | PA To Indication |
| Veltassa | | Veltassa |
| Venclexta | | Oncology |
| ^M Ventavis | | PAH Meds |
| Ventolin HFA | | Short Acting Bronchodilators |
| Verdeso | (Use generic desonide first) | Verdeso |
| Verzenio | | Oncology |
| *Vesicare | (Use oxybutynin IR/XL first) | Overactive Bladder Meds |
| *Victoza | (Use metformin first) | GLP-1/ Freedom GLP1s |
| ^M Vidaza | | Oncology |
| Viekira Pak | | Hepatitis C |
| *Viibryd | | Antidepressants |
| Vimizim | | PA To Indication |
| Vimovo | | NSAID Combinations |
| Vistogard | | PA to Indication |
| Vituz | | Cough Meds |
| Vivlodex | | NSAIDs |
| Vogelxo | | Testosterone |
| Vonvendi | | Factor Products |
| Vosevi | | Hepatitis C |
| Votrient | | Oncology |
| ^M Vpriv | | Gaucher's Disease |

DRUG PRIOR AUTHORIZATION LIST



| MEDICATION | COMMENTS | POLICY NAME |
|-----------------------|----------|-----------------------------------|
| Vraylar | | Atypicals |
| Vusion | | Vusion |
| Vyxeos | | Oncology |
| Vyzulta | | Ophthalmics |
| Xadagp | | Xadago |
| Xalkori | | Oncology |
| Xartemis XR | | Oxycodones |
| Xatmep | | Methotrexates |
| Xeljanz/XR | | Xeljanz |
| Xeloda (capecitabine) | | Oncology |
| Xenazine | | VMAT2 Inhibitors |
| ^M Xeomin | | Botox Meds |
| Xermelo | | Xermelo |
| Xhance | | Nasal Sprays/Freedom Nasal Sprays |
| ^M Xiaflex | | Xiaflex |
| *Xigduo XR | | Diabetic Oral Step |
| Xofigo | | Xofigo |
| Xolair | | Xolair |
| Xopenex HFA | | Short Acting Bronchodilators |
| Xtampza ER | | Oxycodones |
| Xtandi | | Oncology |
| Xuriden | | PA To Indication |
| Xyntha | | Factor Products |
| Xyrem | | Xyrem |
| ^M Yervoy | | Vervoy |
| Yondelis | | Oncology |
| Yosprala | | Aspirins |
| ^M Zaltrap | | Zaltrap |
| Zarxio | | Zarxio |

DRUG PRIOR AUTHORIZATION LIST

| MEDICATION | COMMENTS | POLICY NAME |
|----------------------|--|-------------------------------------|
| Zavesca | | Gaucher's Disease |
| Zegerid Rx | (PA for > 15 y/o) (Use OTC or OTC Prevacid/Prilosec) | Proton Pump Inhibitors |
| Zejula | | Oncology |
| Zelboraf | | Oncology |
| ^M Zemaira | | Alpha-1 Proteinase Inhibitors |
| Zembrace SymTouch | | Sumatriptans |
| Zenzedi | | ADHD meds |
| Zepatier | | Hepatitis C |
| *Zetonna | | Freedom Nasal Sprays/Nasal Steroids |
| Zevalin | | Zevalin |
| Zinbryta | | MS |
| Zinplava | | Zinplava |
| Zioptan | | Ophthalmic Preparations |
| Zipsor | (Use diclofenac tablets) | NSAIDs |
| Zohydro ER | | Long Acting Hydrocodones |
| Zolinza | | Oncology |
| Zolpimist | (Use generic zolpidem tablets) | Zolpidem |
| Zonalon Cream | | Doxepin Cream |
| Zontivity | | Zontivity |
| Zortress | | Zortress |
| Zorvolex | | NSAIDs |
| Zuplenz | | 5HT3 Receptor Antagonists |
| Zurampic | | Zurampic--Duzallo |
| Zydelig | | Oncology |
| Zyflo CR | (Use Singulair first) | Zyflor CR |
| Zykadia | | Oncology |
| Zytiga | | Oncology |