

Commercial 3-Tier Prior Authorization List

The following prescription drugs require Prior Authorization

Certain medications require prior authorization, which means approval is needed before the prescription can be filled. If approval is not received, the drug may not be covered. This list may not apply to all plans or benefits. List subject to change.

ABILIFY MYCITE 10 MG MAINT KIT
ABILIFY MYCITE 10 MG START KIT
ABILIFY MYCITE 15 MG MAINT KIT
ABILIFY MYCITE 15 MG START KIT
ABILIFY MYCITE 2 MG MAINT KIT
ABILIFY MYCITE 2 MG START KIT
ABILIFY MYCITE 20 MG MAINT KIT
ABILIFY MYCITE 20 MG START KIT
ABILIFY MYCITE 30 MG MAINT KIT
ABILIFY MYCITE 30 MG START KIT
ABILIFY MYCITE 5 MG MAINT KIT
ABILIFY MYCITE 5 MG START KIT
ABIRATERONE ACETATE 500 MG TAB
ABRILADA(CF) 20 MG/0.4 ML SYRN
ABRILADA(CF) 40 MG/0.8 ML SYRN
ABRILADA(CF) PEN 40 MG/0.8 ML
ABSORICA LD 16 MG CAPSULE
ABSORICA LD 24 MG CAPSULE
ABSORICA LD 32 MG CAPSULE
ABSORICA LD 8 MG CAPSULE
ACCRUFER 30 MG CAPSULE
ACTEMRA 162 MG/0.9 ML SYRINGE
ACTEMRA ACTPEN 162 MG/0.9 ML
ACTHAR 40 UNIT/0.5 ML SELFJECT
ACTHAR 80 UNIT/ML SELFJECT
ACTHAR GEL 400 UNIT/5 ML VIAL
ACTICLATE 150 MG TABLET
ACTICLATE 75 MG TABLET
ACTIMMUNE 100 MCG/0.5 ML VIAL
ADALIMUMAB-AACF(CF) CROHN 40MG
ADALIMUMAB-AACF(CF) PEN 40 MG
ADALIMUMAB-AACF(CF) PS-UV 40MG
ADALIMUMAB-AACF(CF) SYR 40 MG
ADALIMUMAB-AATY(CF) 20MG/0.2ML
ADALIMUMAB-AATY(CF) 40MG/0.4ML
ADALIMUMAB-AATY(CF) 80MG/0.8ML
ADALIMUMAB-ADAZ(CF) 40 MG SYRG
ADALIMUMAB-ADAZ(CF) PEN 40 MG
ADALIMUMAB-ADBAM(CF) 10 MG SYRG
ADALIMUMAB-ADBAM(CF) 20 MG SYRG
ADALIMUMAB-ADBAM(CF) 40 MG SYRG
ADALIMUMAB-ADBAM(CF) CRHN 40MG
ADALIMUMAB-ADBAM(CF) PEN 40 MG
ADALIMUMAB-ADBAM(CF) PS-UV 40MG
ADALIMUMAB-FKJP(CF) 20 MG SYRG
ADALIMUMAB-FKJP(CF) 40 MG SYRG
ADALIMUMAB-FKJP(CF) PEN 40 MG
ADBRY 150 MG/ML SYRINGE
ADBRY 300 MG/2 ML AUTOINJECTOR
ADCIRCA 20 MG TABLET
ADDYI 100 MG TABLET
ADEMPAS 0.5 MG TABLET
ADEMPAS 1 MG TABLET
ADEMPAS 1.5 MG TABLET
ADEMPAS 2 MG TABLET
ADEMPAS 2.5 MG TABLET
ADZENYS XR-ODT 12.5 MG TABLET
ADZENYS XR-ODT 15.7 MG TABLET
ADZENYS XR-ODT 18.8 MG TABLET
ADZENYS XR-ODT 3.1 MG TABLET
ADZENYS XR-ODT 6.3 MG TABLET
ADZENYS XR-ODT 9.4 MG TABLET
AFINITOR 10 MG TABLET
AFINITOR 2.5 MG TABLET
AFINITOR 5 MG TABLET
AFINITOR 7.5 MG TABLET
AFINITOR DISPERZ 2 MG TABLET
AFINITOR DISPERZ 3 MG TABLET
AFINITOR DISPERZ 5 MG TABLET
AGAMREE 40 MG/ML SUSPENSION
AIMOVIG 140 MG/ML AUTOINJECTOR
AIMOVIG 70 MG/ML AUTOINJECTOR
AIRSUPRA 90-80 MCG INHALER
AJOVY 225 MG/1.5 ML AUTOINJECT
AJOVY 225 MG/1.5 ML SYRINGE
AKEEGA 100-500 MG TABLET
AKEEGA 50-500 MG TABLET
AKLIEF 0.005% CREAM
ALECENSA 150 MG CAPSULE
ALKINDI SPRINKLE 0.5 MG CAP

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ALKINDI SPRINKLE 1 MG CAPSULE	AUSTEDO 12 MG TABLET
ALKINDI SPRINKLE 2 MG CAPSULE	AUSTEDO 6 MG TABLET
ALKINDI SPRINKLE 5 MG CAPSULE	AUSTEDO 9 MG TABLET
ALLOPURINOL 200 MG TABLET	AUSTEDO XR 12 MG TABLET
ALUNBRIG 180 MG TABLET	AUSTEDO XR 18 MG TABLET
ALUNBRIG 30 MG TABLET	AUSTEDO XR 24 MG TABLET
ALUNBRIG 90 MG TABLET	AUSTEDO XR 30 MG TABLET
ALUNBRIG 90 MG-180 MG TAB PACK	AUSTEDO XR 36 MG TABLET
ALVAIZ 18 MG TABLET	AUSTEDO XR 42 MG TABLET
ALVAIZ 36 MG TABLET	AUSTEDO XR 48 MG TABLET
ALVAIZ 54 MG TABLET	AUSTEDO XR 6 MG TABLET
ALVAIZ 9 MG TABLET	AUSTEDO XR TITR(12-18-24-30MG)
ALYQ 20 MG TABLET	AUVELITY ER 45-105 MG TABLET
AMBRISENTAN 10 MG TABLET	AYVAKIT 100 MG TABLET
AMBRISENTAN 5 MG TABLET	AYVAKIT 200 MG TABLET
AMCINONIDE 0.1% OINTMENT	AYVAKIT 25 MG TABLET
AMJEVITA(CF) 10MG/0.2ML SYRING	AYVAKIT 300 MG TABLET
AMJEVITA(CF) 20MG/0.2ML SYRING	AYVAKIT 50 MG TABLET
AMJEVITA(CF) 20MG/0.4ML SYRING	AZASAN 100 MG TABLET
AMJEVITA(CF) 40MG/0.4ML AUTOIN	AZASAN 75 MG TABLET
AMJEVITA(CF) 40MG/0.4ML SYRING	AZATHIOPRINE 100 MG TABLET
AMJEVITA(CF) 40MG/0.8ML AUTOIN	AZATHIOPRINE 75 MG TABLET
AMJEVITA(CF) 40MG/0.8ML SYRING	AZELASTIN-FLUTIC 137-50MCG SPR
AMJEVITA(CF) 80MG/0.8ML AUTOIN	BACLOFEN 10 MG/5 ML SOLUTION
AMRIX ER 15 MG CAPSULE	BACLOFEN 15 MG TABLET
AMRIX ER 30 MG CAPSULE	BACLOFEN 25 MG/5 ML SUSPENSION
APLENZIN ER 174 MG TABLET	BACLOFEN 5 MG/5 ML SOLUTION
APLENZIN ER 348 MG TABLET	BALVERSA 3 MG TABLET
APLENZIN ER 522 MG TABLET	BALVERSA 4 MG TABLET
APOKYN 30 MG/3 ML CARTRIDGE	BALVERSA 5 MG TABLET
APOMORPHINE 30 MG/3 ML CARTRDG	BELBUCA 150 MCG FILM
ARAZLO 0.045% LOTION	BELBUCA 300 MCG FILM
ARCALYST 220 MG VIAL	BELBUCA 450 MCG FILM
ARIKAYCE 590 MG/8.4 ML VIAL	BELBUCA 600 MCG FILM
ASPIRIN-OMEPRAZOLE DR 81-40 MG	BELBUCA 75 MCG FILM
ASPRUZYO SPRINKLE ER 1000MG PK	BELBUCA 750 MCG FILM
ASPRUZYO SPRINKLE ER 500MG PKT	BELBUCA 900 MCG FILM
ASTAGRAF XL 0.5 MG CAPSULE	BERINERT 500 UNIT KIT
ASTAGRAF XL 1 MG CAPSULE	BESREMI 500 MCG/ML SYRINGE
ASTAGRAF XL 5 MG CAPSULE	BEXAROTENE 1% GEL
AUGTYRO 40 MG CAPSULE	BEXAROTENE 75 MG CAPSULE

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BIMZELX 160 MG/ML AUTOINJECTOR	CAMZYOS 15 MG CAPSULE
BIMZELX 160 MG/ML SYRINGE	CAMZYOS 2.5 MG CAPSULE
BONJESTA ER 20-20 MG TABLET	CAMZYOS 5 MG CAPSULE
BOSENTAN 125 MG TABLET	CAPRELSA 100 MG TABLET
BOSENTAN 62.5 MG TABLET	CAPRELSA 300 MG TABLET
BOSULIF 100 MG CAPSULE	CARAC 0.5% CREAM
BOSULIF 100 MG TABLET	CARBAGLU 200 MG TAB FOR SUSP
BOSULIF 400 MG TABLET	CARBINOXAMINE MALEATE 6 MG TAB
BOSULIF 50 MG CAPSULE	CARDIZEM CD 360 MG CAPSULE
BOSULIF 500 MG TABLET	CARGLUMIC ACID 200 MG TAB SUSP
BRAFTOVI 75 MG CAPSULE	CARISOPRODOL 250 MG TABLET
BREXAFEMME 150 MG TABLET	CERDELGA 84 MG CAPSULE
BRIMONIDINE 0.33% GEL PUMP	CETRORELIX ACETATE 0.25 MG VL
BRUKINSA 80 MG CAPSULE	CETROTIDE 0.25 MG VIAL
BUDESONIDE 2 MG RECTAL FOAM	CHLORZOXAZONE 250 MG TABLET
BUPRENORPHINE 10 MCG/HR PATCH	CHLORZOXAZONE 375 MG TABLET
BUPRENORPHINE 15 MCG/HR PATCH	CHLORZOXAZONE 750 MG TABLET
BUPRENORPHINE 20 MCG/HR PATCH	CHOLBAM 250 MG CAPSULE
BUPRENORPHINE 5 MCG/HR PATCH	CHOLBAM 50 MG CAPSULE
BUPRENORPHINE 7.5 MCG/HR PATCH	CHORIONIC GONAD 10,000 UNIT VL
BUTRANS 10 MCG/HR PATCH	CIBINQO 100 MG TABLET
BUTRANS 15 MCG/HR PATCH	CIBINQO 200 MG TABLET
BUTRANS 20 MCG/HR PATCH	CIBINQO 50 MG TABLET
BUTRANS 5 MCG/HR PATCH	CIMZIA 2X200 MG/ML SYRINGE KIT
BUTRANS 7.5 MCG/HR PATCH	CIMZIA 2X200 MG/ML(X3)START KT
BYDUREON BCISE 2 MG AUTOINJECT	CINRYZE 500 UNIT VIAL
BYETTA 10 MCG DOSE PEN INJ	CINRYZE 500 UNIT VIAL-DILUENT
BYETTA 5 MCG DOSE PEN INJ	CITALOPRAM HBR 30 MG CAPSULE
BYLVAY 1,200 MCG CAPSULE	CLEMASTINE 0.5 MG/5 ML SYRUP
BYLVAY 200 MCG PELLET	CLINDAMYC-BNZ PEROX 1.2-3.75%
BYLVAY 400 MCG CAPSULE	CLOMIPRAMINE 25 MG CAPSULE
BYLVAY 600 MCG PELLET	CLOMIPRAMINE 50 MG CAPSULE
CABLIVI 11 MG KIT	CLOMIPRAMINE 75 MG CAPSULE
CABOMETYX 20 MG TABLET	CLONIDINE HCL ER 0.17 MG TAB
CABOMETYX 40 MG TABLET	COMETRIQ 100 MG DAILY-DOSE PK
CABOMETYX 60 MG TABLET	COMETRIQ 140 MG DAILY-DOSE PK
CABTREO 1.2%-0.15%-3.15% GEL	COMETRIQ 60 MG DAILY-DOSE PACK
CALCIPOTRIENE 0.005% FOAM	CONDYLOX 0.5% GEL
CALCITONIN-SALMON 400 UNIT/2ML	CONJUPRI 2.5 MG TABLET
CALQUENCE 100 MG TABLET	CONJUPRI 5 MG TABLET
CAMZYOS 10 MG CAPSULE	CONSENSI 10-200 MG TABLET

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CONSENSI 2.5-200 MG TABLET	CYSTARAN 0.44% EYE DROPS
CONSENSI 5-200 MG TABLET	DAPAGLIFLOZIN 10 MG TABLET
CONTRACE ER 8-90 MG TABLET	DAPAGLIFLOZIN 5 MG TABLET
CONZIP 100 MG CAPSULE	DAPAGLIFLOZIN-METFO ER 10-1000
CONZIP 200 MG CAPSULE	DAPAGLIFLOZIN-METFOR ER 5-1000
CONZIP 300 MG CAPSULE	DARAPRIM 25 MG TABLET
COPIKTRA 15 MG CAPSULE	DARTISLA ODT 1.7 MG TABLET
COPIKTRA 25 MG CAPSULE	DASATINIB 100 MG TABLET
CORTROPHIN GEL 400 UNIT/5 ML	DASATINIB 140 MG TABLET
CORTROPHIN GEL 80 UNIT/ML VIAL	DASATINIB 20 MG TABLET
COSENTYX 150 MG/ML SYRINGE	DASATINIB 50 MG TABLET
COSENTYX 300 MG DOSE-2 SYRINGE	DASATINIB 70 MG TABLET
COSENTYX 75 MG/0.5 ML SYRINGE	DASATINIB 80 MG TABLET
COSENTYX SENSOREADY 150 MG PEN	DAURISMO 100 MG TABLET
COSENTYX SNRDY 300MG DOSE-2PEN	DAURISMO 25 MG TABLET
COSENTYX UNOREADY 300 MG PEN	DAYBUE 200 MG/ML SOLUTION
COTELLIC 20 MG TABLET	DEFLAZACORT 18 MG TABLET
COTEMPLA XR-ODT 17.3 MG TABLET	DEFLAZACORT 22.75 MG/ML SUSP
COTEMPLA XR-ODT 25.9 MG TABLET	DEFLAZACORT 30 MG TABLET
COTEMPLA XR-ODT 8.6 MG TABLET	DEFLAZACORT 36 MG TABLET
COXANTO 300 MG CAPSULE	DEFLAZACORT 6 MG TABLET
CREXONT ER 35 MG-140 MG CAP	DESOXYN 5 MG TABLET
CREXONT ER 52.5 MG-210 MG CAP	DESVENLAFAXINE ER 100 MG TAB
CREXONT ER 70 MG-280 MG CAP	DESVENLAFAXINE ER 50 MG TAB
CREXONT ER 87.5 MG-350 MG CAP	DEXCOM G6 RECEIVER
CUPRIMINE 250 MG CAPSULE	DEXCOM G6 SENSOR
CUVPOSA 1 MG/5 ML SOLUTION	DEXCOM G6 TRANSMITTER
CUVRIOR 300 MG TABLET	DEXCOM G7 RECEIVER
CYANOCOBALAMIN 500 MCG SPRAY	DEXCOM G7 SENSOR
CYCLOBENZAPRINE 7.5 MG TABLET	DIACOMIT 250 MG CAPSULE
CYCLOBENZAPRINE ER 15 MG CAP	DIACOMIT 250 MG POWDER PACKET
CYCLOBENZAPRINE ER 30 MG CAP	DIACOMIT 500 MG CAPSULE
CYLTEZO(CF) 10 MG/0.2 ML SYRNG	DIACOMIT 500 MG POWDER PACKET
CYLTEZO(CF) 20 MG/0.4 ML SYRNG	DICHLORPHENAMIDE 50 MG TABLET
CYLTEZO(CF) 40 MG/0.4 ML SYRNG	DICLEGIS DR 10-10 MG TABLET
CYLTEZO(CF) 40 MG/0.8 ML SYRNG	DICLOFENAC 2% SOLUTION PUMP
CYLTEZO(CF) PEN 40 MG/0.4 ML	DICLOFENAC 35 MG CAPSULE
CYLTEZO(CF) PEN 40 MG/0.8 ML	DICLOFENAC EPOLAMINE 1.3% PTCH
CYLTEZO(CF) PEN CRH-UC-HS 40MG	DICLOFENAC POT 25 MG TABLET
CYLTEZO(CF) PEN PSORIA-UV 40MG	DICLOFENAC POTASSIUM 25 MG CAP
CYSTADROPS 0.37% EYE DROPS	DICLOFENAC SODIUM 3% GEL

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DIHYDROERGOTAMINE 1 MG/ML AMP	ENBREL 25 MG/0.5 ML SYRINGE
DIHYDROERGOTAMINE 4 MG/ML SPRY	ENBREL 25 MG/0.5 ML VIAL
DILTIAZEM 24H ER(CD) 360 MG CP	ENBREL 50 MG/ML MINI CARTRIDGE
DISKETS 40 MG TABLET DISPR	ENBREL 50 MG/ML SURECLICK
DOLOBID 250 MG TABLET	ENBREL 50 MG/ML SYRINGE
DOPTELET (10 TAB PK) 20 MG TAB	ENDARI 5 GRAM POWDER PACKET
DOPTELET (15 TAB PK) 20 MG TAB	ENDOMETRIN 100 MG VAG INSERT
DOPTELET (30 TAB PK) 20 MG TAB	ENSPRYNG 120 MG/ML SYRINGE
DOXEPIN 5% CREAM	ENSTILAR 0.005%-0.064% FOAM
DOXYCYCLINE HYCLATE 150 MG TAB	ENTERAL FORMULA
DOXYCYCLINE HYCLATE 75 MG TAB	ENTYVIO 108 MG/0.68 ML PEN
DOXYCYCLINE IR-DR 40 MG CAP	ENVARUSUS XR 0.75 MG TABLET
DOXYLAMINE-PYRIDOXINE 10-10 MG	ENVARUSUS XR 1 MG TABLET
DROXIDOPA 100 MG CAPSULE	ENVARUSUS XR 4 MG TABLET
DROXIDOPA 200 MG CAPSULE	EOHILIA 2 MG/10 ML STICK PACK
DROXIDOPA 300 MG CAPSULE	EPANED 1 MG/ML ORAL SOLUTION
DUEXIS 800-26.6 MG TABLET	EPCLUSA 150-37.5 MG PELLETT PKT
DULOXETINE HCL DR 40 MG CAP	EPCLUSA 200 MG-50 MG TABLET
DUOBRII 0.01%-0.045% LOTION	EPCLUSA 200-50 MG PELLETT PACK
DUPIXENT 200 MG/1.14 ML PEN	EPCLUSA 400 MG-100 MG TABLET
DUPIXENT 200 MG/1.14 ML SYRINGE	EPIDIOLEX 100 MG/ML SOLN PACK
DUPIXENT 300 MG/2 ML PEN	EPIDIOLEX 100 MG/ML SOLUTION
DUPIXENT 300 MG/2 ML SYRINGE	EPSOLAY 5% CREAM PUMP
DUVYZAT 8.86 MG/ML ORAL SUSP	ERGOMAR 2 MG TABLET SL
DYANAVEL XR 2.5 MG/ML SUSP	ERIVEDGE 150 MG CAPSULE
DYMISTA NASAL SPRAY	ERLEADA 240 MG TABLET
EBGLYSS 250 MG/2 ML PEN	ERLEADA 60 MG TABLET
EGRIFTA SV 2 MG VIAL	ERLOTINIB HCL 100 MG TABLET
ELYXYB 120 MG/4.8 ML SOLUTION	ERLOTINIB HCL 150 MG TABLET
EMFLAZA 18 MG TABLET	ERLOTINIB HCL 25 MG TABLET
EMFLAZA 22.75 MG/ML ORAL SUSP	ESBRIET 267 MG CAPSULE
EMFLAZA 30 MG TABLET	ESBRIET 267 MG TABLET
EMFLAZA 36 MG TABLET	ESBRIET 801 MG TABLET
EMFLAZA 6 MG TABLET	EVEROLIMUS 10 MG TABLET
EMGALITY 100 MG/ML SYR(1 OF 3)	EVEROLIMUS 2 MG TAB FOR SUSP
EMGALITY 120 MG/ML PEN	EVEROLIMUS 2.5 MG TABLET
EMGALITY 120 MG/ML SYRINGE	EVEROLIMUS 3 MG TAB FOR SUSP
EMGALITY 300 MG (100 MG X3SYR)	EVEROLIMUS 5 MG TAB FOR SUSP
EMPAVELI 1,080 MG/20 ML VIAL	EVEROLIMUS 5 MG TABLET
EMVERM 100 MG TABLET CHEW	EVEROLIMUS 7.5 MG TABLET
ENALAPRIL 1 MG/ML ORAL SOLN	EVRYSDI 60 MG/80 ML(0.75MG/ML)

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FABHALTA 200 MG CAPSULE	FIRDAPSE 10 MG TABLET
FABIOR 0.1% FOAM	FLECTOR 1.3% PATCH
FABRAZYME 35 MG VIAL	FLEQSUVY 25 MG/5 ML SUSPENSION
FABRAZYME 5 MG VIAL	FLUOROURACIL 0.5% CREAM
FASENRA PEN 30 MG/ML	FLUTICASONE-VILANTEROL 100-25
FENOFIBRATE 120 MG TABLET	FLUTICASONE-VILANTEROL 200-25
FENOFIBRATE 130 MG CAPSULE	FOLLISTIM AQ 300 UNIT CARTRIDG
FENOFIBRATE 150 MG CAPSULE	FOLLISTIM AQ 600 UNIT CARTRIDG
FENOFIBRATE 40 MG TABLET	FOLLISTIM AQ 900 UNIT CARTRIDG
FENOFIBRATE 50 MG CAPSULE	FORTEO 600 MCG/2.4 ML PEN INJ
FENOFIBRATE 90 MG CAPSULE	FOTIVDA 0.89 MG CAPSULE
FENOFIBRIC ACID 105 MG TABLET	FOTIVDA 1.34 MG CAPSULE
FENOFIBRIC ACID 35 MG TABLET	FREESTYLE LIBRE 14 DAY READER
FENOGLIDE 120 MG TABLET	FREESTYLE LIBRE 14 DAY SENSOR
FENOGLIDE 40 MG TABLET	FREESTYLE LIBRE 2 READER
FENOPROFEN 200 MG CAPSULE	FREESTYLE LIBRE 2 SENSOR
FENOPROFEN 400 MG CAPSULE	FREESTYLE LIBRE 3 PLUS SENSOR
FENOPROFEN 600 MG TABLET	FREESTYLE LIBRE 3 READER
FENTANYL 100 MCG/HR PATCH	FREESTYLE LIBRE 3 SENSOR
FENTANYL 12 MCG/HR PATCH	FRUZAQLA 1 MG CAPSULE
FENTANYL 25 MCG/HR PATCH	FRUZAQLA 5 MG CAPSULE
FENTANYL 37.5 MCG/HR PATCH	FULPHILA 6 MG/0.6 ML SYRINGE
FENTANYL 50 MCG/HR PATCH	FUROSCIX 80 MG/10ML ON-BODY KT
FENTANYL 62.5 MCG/HR PATCH	FYLNETRA 6 MG/0.6 ML SYRINGE
FENTANYL 75 MCG/HR PATCH	FYREMADEL 250 MCG/0.5 ML SYR
FENTANYL 87.5 MCG/HR PATCH	GABAPENTIN ER 300 MG TABLET
FENTANYL CIT 200 MCG BUCCAL TB	GABAPENTIN ER 600 MG TABLET
FENTANYL CIT 400 MCG BUCCAL TB	GALAFOLD 123 MG CAPSULE
FENTANYL CIT 600 MCG BUCCAL TB	GAMMAGARD LIQUID 10% VIAL
FENTANYL CIT 800 MCG BUCCAL TB	GAMMAGARD S-D 10 G (IGA<1) SOL
FENTANYL CIT OTFC 1,600 MCG	GAMMAGARD S-D 5 G (IGA<1) SOLN
FENTANYL CITRATE OTFC 200 MCG	GAMUNEX-C 1 GRAM/10 ML VIAL
FENTANYL CITRATE OTFC 600 MCG	GAMUNEX-C 10 GRAM/100 ML VIAL
FEXMID 7.5 MG TABLET	GAMUNEX-C 2.5 GRAM/25 ML VIAL
FIBRICOR 105 MG TABLET	GAMUNEX-C 20 GRAM/200 ML VIAL
FIBRICOR 35 MG TABLET	GAMUNEX-C 40 GRAM/400 ML VIAL
FILSPARI 200 MG TABLET	GAMUNEX-C 5 GRAM/50 ML VIAL
FILSPARI 400 MG TABLET	GANIRELIX ACET 250 MCG/0.5 ML
FILSUVEZ 10% GEL	GATTEX 5 MG 30-VIAL KIT
FINTEPLA 2.2 MG/ML SOLUTION	GATTEX 5 MG ONE-VIAL KIT
FIRAZYR 30 MG/3 ML SYRINGE	GATTEX 5 MG VIAL

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GAVRETO 100 MG CAPSULE	GRANIX 480 MCG/0.8 ML SYRINGE
GEFITINIB 250 MG TABLET	GRANIX 480 MCG/1.6 ML VIAL
GENOTROPIN 12 MG CARTRIDGE	HADLIMA 40 MG/0.8 ML SYRINGE
GENOTROPIN 5 MG CARTRIDGE	HADLIMA PUSH TOUCH 40 MG/0.8 ML
GENOTROPIN MINIQUICK 0.2 MG	HADLIMA(CF) 40 MG/0.4 ML SYRNG
GENOTROPIN MINIQUICK 0.4 MG	HADLIMA(CF) PUSH TOUCH 40MG/0.4
GENOTROPIN MINIQUICK 0.6 MG	HAEGARDA 2,000 UNIT VIAL
GENOTROPIN MINIQUICK 0.8 MG	HAEGARDA 3,000 UNIT VIAL
GENOTROPIN MINIQUICK 1 MG	HARVONI 33.75-150 MG PELLET PK
GENOTROPIN MINIQUICK 1.2 MG	HARVONI 45-200 MG PELLET PACKET
GENOTROPIN MINIQUICK 1.4 MG	HARVONI 45-200 MG TABLET
GENOTROPIN MINIQUICK 1.6 MG	HARVONI 90-400 MG TABLET
GENOTROPIN MINIQUICK 1.8 MG	HEMADY 20 MG TABLET
GENOTROPIN MINIQUICK 2 MG	HEMLIBRA 105 MG/0.7 ML VIAL
GILOTRIF 20 MG TABLET	HEMLIBRA 12 MG/0.4 ML VIAL
GILOTRIF 30 MG TABLET	HEMLIBRA 150 MG/ML VIAL
GILOTRIF 40 MG TABLET	HEMLIBRA 30 MG/ML VIAL
GIMOTI 15 MG NASAL SPRAY	HEMLIBRA 300 MG/2 ML VIAL
G-LEVOCARNITINE 1 G/10 ML SOLN	HEMLIBRA 60 MG/0.4 ML VIAL
GLIMEPIRIDE 3 MG TABLET	HETLIOZ 20 MG CAPSULE
GLYCAT 1.5 MG TABLET	HETLIOZ LQ 4 MG/ML SUSPENSION
GLYCOPYRROLATE 1 MG/5 ML SOLN	HIZENTRA 1 GRAM/5 ML SYRINGE
GLYCOPYRROLATE 1.5 MG TABLET	HIZENTRA 1 GRAM/5 ML VIAL
GOCOVRI ER 137 MG CAPSULE	HIZENTRA 10 GRAM/50 ML SYRINGE
GOCOVRI ER 68.5 MG CAPSULE	HIZENTRA 10 GRAM/50 ML VIAL
GONAL-F 1,050 UNITS VIAL	HIZENTRA 2 GRAM/10 ML SYRINGE
GONAL-F 450 UNITS VIAL	HIZENTRA 2 GRAM/10 ML VIAL
GONAL-F RFF 75 UNIT VIAL	HIZENTRA 4 GRAM/20 ML SYRINGE
GONAL-F RFF REDI-JECT 300 UNIT	HIZENTRA 4 GRAM/20 ML VIAL
GONAL-F RFF REDI-JECT 450 UNIT	HORIZANT ER 300 MG TABLET
GONAL-F RFF REDI-JECT 900 UNIT	HORIZANT ER 600 MG TABLET
GONITRO 0.4 MG SUBLINGUAL PWD	HULIO(CF) 20 MG/0.4 ML SYRINGE
GRALISE ER 300 MG TABLET	HULIO(CF) 40 MG/0.8 ML SYRINGE
GRALISE ER 450 MG TABLET	HULIO(CF) PEN 40 MG/0.8 ML
GRALISE ER 600 MG TABLET	HUMATROPE 12 MG CARTRIDGE
GRALISE ER 750 MG TABLET	HUMATROPE 24 MG CARTRIDGE
GRALISE ER 900 MG TABLET	HUMATROPE 6 MG CARTRIDGE
GRANIX 300 MCG/0.5 ML SAFE SYR	HUMIRA 40 MG/0.8 ML SYRINGE
GRANIX 300 MCG/0.5 ML SYRINGE	HUMIRA PEN 40 MG/0.8 ML
GRANIX 300 MCG/ML VIAL	HUMIRA(CF) 10 MG/0.1 ML SYRING
GRANIX 480 MCG/0.8 ML SAFE SYR	HUMIRA(CF) 20 MG/0.2 ML SYRING

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HUMIRA(CF) 40 MG/0.4 ML SYRING	IBRANCE 100 MG TABLET
HUMIRA(CF) PEN 40 MG/0.4 ML	IBRANCE 125 MG CAPSULE
HUMIRA(CF) PEN 80 MG/0.8 ML	IBRANCE 125 MG TABLET
HUMIRA(CF) PEN CRHN-UC-HS 80MG	IBRANCE 75 MG CAPSULE
HUMIRA(CF) PEN PEDI UC 80 MG	IBRANCE 75 MG TABLET
HUMIRA(CF) PEN PS-UV-AHS 80-40	IBUPROFEN-FAMOTIDIN 800-26.6MG
HYDROCODONE ER 10 MG CAPSULE	ICATIBANT 30 MG/3 ML SYRINGE
HYDROCODONE ER 100 MG TABLET	ICLUSIG 10 MG TABLET
HYDROCODONE ER 120 MG TABLET	ICLUSIG 15 MG TABLET
HYDROCODONE ER 15 MG CAPSULE	ICLUSIG 30 MG TABLET
HYDROCODONE ER 20 MG CAPSULE	ICLUSIG 45 MG TABLET
HYDROCODONE ER 20 MG TABLET	IDACIO(CF) 40 MG/0.8 ML SYRING
HYDROCODONE ER 30 MG CAPSULE	IDACIO(CF) PEN 40 MG/0.8 ML
HYDROCODONE ER 30 MG TABLET	IDACIO(CF) PEN CROHNS-UC 40 MG
HYDROCODONE ER 40 MG CAPSULE	IDACIO(CF) PEN PSORIASIS 40 MG
HYDROCODONE ER 40 MG TABLET	IDHIFA 100 MG TABLET
HYDROCODONE ER 50 MG CAPSULE	IDHIFA 50 MG TABLET
HYDROCODONE ER 60 MG TABLET	IMBRUVICA 140 MG CAPSULE
HYDROCODONE ER 80 MG TABLET	IMBRUVICA 140 MG TABLET
HYDROMORPHONE HCL ER 12 MG TAB	IMBRUVICA 280 MG TABLET
HYDROMORPHONE HCL ER 16 MG TAB	IMBRUVICA 420 MG TABLET
HYDROMORPHONE HCL ER 32 MG TAB	IMBRUVICA 70 MG CAPSULE
HYDROMORPHONE HCL ER 8 MG TAB	IMBRUVICA 70 MG/ML SUSPENSION
HYFTOR 0.2% GEL	IMCIVREE 10 MG/ML VIAL
HYRIMOZ(CF) 10 MG/0.1 ML SYRNG	IMPAVIDO 50 MG CAPSULE
HYRIMOZ(CF) 20 MG/0.2 ML SYRNG	INBRIJA 42 MG INHALATION CAP
HYRIMOZ(CF) 40 MG/0.4 ML SYRNG	INCRELEX 40 MG/4 ML VIAL
HYRIMOZ(CF) PEDI CROHN 80 MG	INDERAL XL 120 MG CAPSULE
HYRIMOZ(CF) PEDI CROHN 80-40MG	INDERAL XL 80 MG CAPSULE
HYRIMOZ(CF) PEN 40 MG/0.4 ML	INDOCIN 25 MG/5 ML SUSPENSION
HYRIMOZ(CF) PEN 80 MG/0.8 ML	INDOCIN 50 MG SUPPOSITORY
HYRIMOZ(CF) PEN CROHN-UC 80 MG	INDOCIN 50 MG SUPPOSITORY
HYRIMOZ(CF) PEN PSORIA 80-40MG	INDOMETHACIN 50 MG SUPPOSITORY
HYSINGLA ER 100 MG TABLET	INGREZZA 40 MG CAPSULE
HYSINGLA ER 120 MG TABLET	INGREZZA 40 MG SPRINKLE CAP
HYSINGLA ER 20 MG TABLET	INGREZZA 60 MG CAPSULE
HYSINGLA ER 30 MG TABLET	INGREZZA 60 MG SPRINKLE CAP
HYSINGLA ER 40 MG TABLET	INGREZZA 80 MG CAPSULE
HYSINGLA ER 60 MG TABLET	INGREZZA 80 MG SPRINKLE CAP
HYSINGLA ER 80 MG TABLET	INGREZZA INITIATION PK(TARDIV)
IBRANCE 100 MG CAPSULE	INLYTA 1 MG TABLET

Commercial 3-Tier Prior Authorization List

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INLYTA 5 MG TABLET	JYNARQUE 45 MG-15 MG TABLET
INNOPRAN XL 120 MG CAPSULE	JYNARQUE 60 MG-30 MG TABLET
INNOPRAN XL 80 MG CAPSULE	JYNARQUE 90 MG-30 MG TABLET
INPEFA 200 MG TABLET	KALYDECO 13.4 MG GRANULES PKT
INPEFA 400 MG TABLET	KALYDECO 150 MG TABLET
INQOVI 35 MG-100 MG TABLET	KALYDECO 25 MG GRANULES PACKET
INREBIC 100 MG CAPSULE	KALYDECO 5.8 MG GRANULES PKT
IQIRVO 80 MG TABLET	KALYDECO 50 MG GRANULES PACKET
IRESSA 250 MG TABLET	KALYDECO 75 MG GRANULES PACKET
ISOTRETINOIN 25 MG CAPSULE	KATERZIA 1 MG/ML SUSPENSION
ISOTRETINOIN 35 MG CAPSULE	KERENDIA 10 MG TABLET
ISTURISA 1 MG TABLET	KERENDIA 20 MG TABLET
ISTURISA 5 MG TABLET	KETOPROFEN 25 MG CAPSULE
IVERMECTIN 3 MG TABLET	KEVEYIS 50 MG TABLET
IWILFIN 192 MG TABLET	KEVZARA 150 MG/1.14 ML PEN INJ
JAKAFI 10 MG TABLET	KEVZARA 150 MG/1.14 ML SYRINGE
JAKAFI 15 MG TABLET	KEVZARA 200 MG/1.14 ML PEN INJ
JAKAFI 20 MG TABLET	KEVZARA 200 MG/1.14 ML SYRINGE
JAKAFI 25 MG TABLET	KINERET 100 MG/0.67 ML SYRINGE
JAKAFI 5 MG TABLET	KIPROFEN 25 MG CAPSULE
JAVYGTOR 100 MG POWDER PACKET	KISQALI 200 MG DAILY DOSE
JAVYGTOR 100 MG TABLET	KISQALI 400 MG DAILY DOSE
JAVYGTOR 500 MG POWDER PACKET	KISQALI 600 MG DAILY DOSE
JAYPIRCA 100 MG TABLET	KLISYRI 1% (250 MG) OINT PKT
JAYPIRCA 50 MG TABLET	KLISYRI 1% (350 MG) OINT PKT
JOENJA 70 MG TABLET	KORLYM 300 MG TABLET
JORNAY PM 100 MG CAPSULE	KOSELUGO 10 MG CAPSULE
JORNAY PM 20 MG CAPSULE	KOSELUGO 25 MG CAPSULE
JORNAY PM 40 MG CAPSULE	KRAZATI 200 MG TABLET
JORNAY PM 60 MG CAPSULE	KRISTALOSE 10 GM PACKET
JORNAY PM 80 MG CAPSULE	KRISTALOSE 20 GM PACKET
JUBLIA 10% TOPICAL SOLUTION	KUVAN 100 MG POWDER PACKET
JUXTAPID 10 MG CAPSULE	KUVAN 100 MG TABLET
JUXTAPID 20 MG CAPSULE	KUVAN 500 MG POWDER PACKET
JUXTAPID 30 MG CAPSULE	LACTULOSE 10 GM PACKET
JUXTAPID 5 MG CAPSULE	LANREOTIDE 120 MG/0.5 ML SYRNG
JYLAMVO 2 MG/ML ORAL SOLUTION	LAPATINIB 250 MG TABLET
JYNARQUE 15 MG TABLET	LAZCLUZE 240 MG TABLET
JYNARQUE 15 MG-15 MG TABLET	LAZCLUZE 80 MG TABLET
JYNARQUE 30 MG TABLET	LEDIPASVIR-SOFOSBUVIR 90-400MG
JYNARQUE 30 MG-15 MG TABLET	LENVIMA 10 MG DAILY DOSE

Commercial 3-Tier Prior Authorization List

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LENVIMA 12 MG DAILY DOSE	LORZONE 375 MG TABLET
LENVIMA 14 MG DAILY DOSE	LORZONE 750 MG TABLET
LENVIMA 18 MG DAILY DOSE	LUMAKRAS 120 MG TABLET
LENVIMA 20 MG DAILY DOSE	LUMAKRAS 320 MG TABLET
LENVIMA 24 MG DAILY DOSE	LUMRYZ ER 4.5 GM PACKET
LENVIMA 4 MG CAPSULE	LUMRYZ ER 6 GM PACKET
LENVIMA 8 MG DAILY DOSE	LUMRYZ ER 7.5 GM PACKET
LETAIRIS 10 MG TABLET	LUMRYZ ER 9 GM PACKET
LETAIRIS 5 MG TABLET	LUPKYNIS 7.9 MG CAPSULE
LEUPROLIDE 2WK 14 MG/2.8 ML KT	LYBALVI 10-10 MG TABLET
LEVAMLODIPINE 2.5 MG TABLET	LYBALVI 15-10 MG TABLET
LEVAMLODIPINE MALEATE 5 MG TAB	LYBALVI 20-10 MG TABLET
LEVOCARNITINE 1 G/10 ML SOLN	LYBALVI 5-10 MG TABLET
LEVOCARNITINE 1,000 MG/10 ML	LYNPARZA 100 MG TABLET
LEVORPHANOL 2 MG TABLET	LYNPARZA 150 MG TABLET
LEVORPHANOL 3 MG TABLET	LYTGOBI 12 MG DOSE (3X 4MG TB)
L-GLUTAMINE 5 GRAM POWDER PKT	LYTGOBI 16 MG DOSE (4X 4MG TB)
LICART 1.3% PATCH	LYTGOBI 20 MG DOSE (5X 4MG TB)
LIDOCAN III 5% PATCH	LYVISPAH 10 MG GRANULE PACKET
LIDOCAN IV 5% PATCH	LYVISPAH 20 MG GRANULE PACKET
LIDOCAN V 5% PATCH	LYVISPAH 5 MG GRANULE PACKET
LIPOFEN 150 MG CAPSULE	MAVENCLAD 10 MG X 10 TABLET PK
LIPOFEN 50 MG CAPSULE	MAVENCLAD 10 MG X 4 TABLET PK
LIQREV 10 MG/ML ORAL SUSP	MAVENCLAD 10 MG X 5 TABLET PK
LIQSORB 500 MG/5 ML LIQUID	MAVENCLAD 10 MG X 6 TABLET PK
LIQSORB LIQUID	MAVENCLAD 10 MG X 7 TABLET PK
LIRAGLUTIDE 18 MG/3 ML PEN	MAVENCLAD 10 MG X 8 TABLET PK
LITFULO 50 MG CAPSULE	MAVENCLAD 10 MG X 9 TABLET PK
LIVDELZI 10 MG CAPSULE	MAVYRET 100-40 MG TABLET
LIVMARLI 19 MG/ML ORAL SOLN	MAVYRET 50-20 MG PELLET PACKET
LIVMARLI 9.5 MG/ML ORAL SOLN	MECLOFENAMATE 100 MG CAPSULE
LODOCO 0.5 MG TABLET	MECLOFENAMATE 50 MG CAPSULE
LOFENA 25 MG TABLET	MEKINIST 0.05 MG/ML SOLUTION
LONSURF 15 MG-6.14 MG TABLET	MEKINIST 0.5 MG TABLET
LONSURF 20 MG-8.19 MG TABLET	MEKINIST 2 MG TABLET
LORBRENA 100 MG TABLET	MEKTOVI 15 MG TABLET
LORBRENA 25 MG TABLET	MELOXICAM 10 MG CAPSULE
LOREEV XR 1 MG CAPSULE	MELOXICAM 5 MG CAPSULE
LOREEV XR 1.5 MG CAPSULE	MELOXICAM 7.5 MG/5 ML SUSP
LOREEV XR 2 MG CAPSULE	MENOPUR 75 UNIT VIAL
LOREEV XR 3 MG CAPSULE	METAXALONE 400 MG TABLET

Commercial 3-Tier Prior Authorization List

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METHADONE 10 MG/5 ML SOLUTION	MOUNJARO 5 MG/0.5 ML PEN
METHADONE 10 MG/5 ML SOLUTION	MOUNJARO 7.5 MG/0.5 ML PEN
METHADONE 10 MG/ML ORAL CONC	MOXATAG ER 775 MG TABLET
METHADONE 40 MG TABLET DISPR	MS CONTIN ER 100 MG TABLET
METHADONE HCL 10 MG TABLET	MS CONTIN ER 15 MG TABLET
METHADONE HCL 5 MG TABLET	MS CONTIN ER 200 MG TABLET
METHADOSE 10 MG/ML ORAL CONC	MS CONTIN ER 30 MG TABLET
METHADOSE 40 MG TABLET DISPR	MS CONTIN ER 60 MG TABLET
METHAMPHETAMINE 5 MG TABLET	MULPLETA 3 MG TABLET
METHOCARBAMOL 1,000 MG TABLET	MYALEPT 11.3 MG (5 MG/ML) VIAL
MIACALCIN 400 UNIT/2 ML VIAL	MYCAPSSA DR 20 MG CAPSULE
MIEBO 100% EYE DROP	MYFEMBREE 40 MG-1 MG-0.5 MG TB
MIFEPRISTONE 300 MG TABLET	MYTESI 125 MG DR TABLET
MIGLUSTAT 100 MG CAPSULE	NALFON 400 MG CAPSULE
MIGRANAL NASAL SPRAY	NALFON 600 MG TABLET
MINOCYCLINE ER 135 MG CAPSULE	NALOCET 2.5-300 MG TABLET
MINOCYCLINE ER 45 MG CAPSULE	NAMZARIC 14 MG-10 MG CAPSULE
MINOCYCLINE ER 90 MG CAPSULE	NAMZARIC 21 MG-10 MG CAPSULE
MORPHINE SULF ER 100 MG TABLET	NAMZARIC 28 MG-10 MG CAPSULE
MORPHINE SULF ER 15 MG TABLET	NAMZARIC 7 MG-10 MG CAPSULE
MORPHINE SULF ER 200 MG TABLET	NAMZARIC TITRATION PACK
MORPHINE SULF ER 30 MG TABLET	NAPRELAN CR 375 MG TABLET
MORPHINE SULF ER 60 MG TABLET	NAPRELAN CR 500 MG TABLET
MORPHINE SULFATE ER 10 MG CAP	NAPRELAN CR 750 MG TABLET
MORPHINE SULFATE ER 100 MG CAP	NAPROSYN 125 MG/5 ML SUSPEN
MORPHINE SULFATE ER 120 MG CAP	NAPROXEN 125 MG/5 ML SUSPEN
MORPHINE SULFATE ER 20 MG CAP	NAPROXEN SOD CR 375 MG TABLET
MORPHINE SULFATE ER 30 MG CAP	NAPROXEN SOD CR 500 MG TABLET
MORPHINE SULFATE ER 45 MG CAP	NAPROXEN SOD CR 750 MG TABLET
MORPHINE SULFATE ER 50 MG CAP	NAPROXEN SOD ER 375 MG TABLET
MORPHINE SULFATE ER 60 MG CAP	NAPROXEN SOD ER 500 MG TABLET
MORPHINE SULFATE ER 75 MG CAP	NAPROXEN SOD ER 750 MG TABLET
MORPHINE SULFATE ER 80 MG CAP	NAPROXEN-ESOMEPRAZ DR 375-20MG
MORPHINE SULFATE ER 90 MG CAP	NAPROXEN-ESOMEPRAZ DR 500-20MG
MOTPOLY XR 100 MG CAPSULE	NASCOBAL 500 MCG NASAL SPRAY
MOTPOLY XR 150 MG CAPSULE	NEMLUVIO 30 MG PEN
MOTPOLY XR 200 MG CAPSULE	NERLYNX 40 MG TABLET
MOUNJARO 10 MG/0.5 ML PEN	NEUPOGEN 300 MCG/0.5 ML SYR
MOUNJARO 12.5 MG/0.5 ML PEN	NEUPOGEN 300 MCG/ML VIAL
MOUNJARO 15 MG/0.5 ML PEN	NEUPOGEN 480 MCG/0.8 ML SYR
MOUNJARO 2.5 MG/0.5 ML PEN	NEUPOGEN 480 MCG/1.6 ML VIAL

Commercial 3-Tier Prior Authorization List

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NEUPRO 1 MG/24 HR PATCH	NUCALA 40 MG/0.4 ML SYRINGE
NEUPRO 2 MG/24 HR PATCH	NUCYNTA ER 100 MG TABLET
NEUPRO 3 MG/24 HR PATCH	NUCYNTA ER 150 MG TABLET
NEUPRO 4 MG/24 HR PATCH	NUCYNTA ER 200 MG TABLET
NEUPRO 6 MG/24 HR PATCH	NUCYNTA ER 250 MG TABLET
NEUPRO 8 MG/24 HR PATCH	NUCYNTA ER 50 MG TABLET
NEXAVAR 200 MG TABLET	NUEDEXTA 20-10 MG CAPSULE
NEXICLON XR 0.17 MG TABLET	NUPLAZID 10 MG TABLET
NEXLETOL 180 MG TABLET	NUPLAZID 34 MG CAPSULE
NEXLIZET 180-10 MG TABLET	NURTEC ODT 75 MG TABLET
NGENLA PEN 24 MG/1.2 ML	NUTROPIN AQ NUSPIN 10 INJECTOR
NGENLA PEN 60 MG/1.2 ML	NUTROPIN AQ NUSPIN 20 INJECTOR
NIACIN 500 MG TABLET	NUTROPIN AQ NUSPIN 5 INJECTOR
NINLARO 2.3 MG CAPSULE	NUZYRA 150 MG TABLET
NINLARO 3 MG CAPSULE	NYVEPRIA 6 MG/0.6 ML SYRINGE
NINLARO 4 MG CAPSULE	OICALIVA 10 MG TABLET
NITISINONE 10 MG CAPSULE	OICALIVA 5 MG TABLET
NITISINONE 2 MG CAPSULE	OCTREOTIDE ACET ER 20 MG IM VL
NITISINONE 20 MG CAPSULE	OCTREOTIDE ACET ER 30 MG IM VL
NITISINONE 5 MG CAPSULE	ODOMZO 200 MG CAPSULE
NITYR 10 MG TABLET	OFEV 100 MG CAPSULE
NITYR 2 MG TABLET	OFEV 150 MG CAPSULE
NITYR 5 MG TABLET	OGSIVEO 100 MG TABLET
NIVESTYM 300 MCG/0.5 ML SYRING	OGSIVEO 150 MG TABLET
NIVESTYM 300 MCG/ML VIAL	OGSIVEO 50 MG TABLET
NIVESTYM 480 MCG/0.8 ML SYRING	OHTUVAYRE 3 MG/2.5ML INHAL SUS
NIVESTYM 480 MCG/1.6 ML VIAL	OJEMDA 100 MG TAB (400MG DOSE)
NORDITROPIN FLEXPRO 10 MG/1.5	OJEMDA 100 MG TAB (500MG DOSE)
NORDITROPIN FLEXPRO 15 MG/1.5	OJEMDA 100 MG TAB (600MG DOSE)
NORDITROPIN FLEXPRO 30 MG/3 ML	OJEMDA 25 MG/ML ORAL SUSP
NORDITROPIN FLEXPRO 5 MG/1.5	OJJAARA 100 MG TABLET
NORLIQVA 1 MG/ML SOLUTION	OJJAARA 150 MG TABLET
NORTHERA 100 MG CAPSULE	OJJAARA 200 MG TABLET
NORTHERA 200 MG CAPSULE	OLPRUVA 2 GRAM DOSE ENVELOPE
NORTHERA 300 MG CAPSULE	OLPRUVA 2 GRAM DOSE KIT
NOURIANZ 20 MG TABLET	OLPRUVA 3 GRAM DOSE ENVELOPE
NOURIANZ 40 MG TABLET	OLPRUVA 3 GRAM DOSE KIT
NOVAREL 5,000 UNIT VIAL	OLPRUVA 4 GRAM DOSE ENVELOPE
NUBEQA 300 MG TABLET	OLPRUVA 4 GRAM DOSE KIT
NUCALA 100 MG/ML AUTO-INJECTOR	OLPRUVA 5 GRAM DOSE ENVELOPE
NUCALA 100 MG/ML SYRINGE	OLPRUVA 5 GRAM DOSE KIT

Commercial 3-Tier Prior Authorization List

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OLPRUVA 6 GRAM DOSE ENVELOPE	ORENITRAM MONTH 1 TITRATION KT
OLPRUVA 6 GRAM DOSE KIT	ORENITRAM MONTH 2 TITRATION KT
OLPRUVA 6.67 GM DOSE ENVELOPE	ORENITRAM MONTH 3 TITRATION KT
OLPRUVA 6.67 GRAM DOSE KIT	ORFADIN 10 MG CAPSULE
OLUMIANT 1 MG TABLET	ORFADIN 2 MG CAPSULE
OLUMIANT 2 MG TABLET	ORFADIN 20 MG CAPSULE
OLUMIANT 4 MG TABLET	ORFADIN 4 MG/ML SUSPENSION
OMNIPOD 5 (G6/LIBRE 2 PLUS)	ORFADIN 5 MG CAPSULE
OMNIPOD 5 DEXG7G6 INTRO(GEN 5)	ORGOVYX 120 MG TABLET
OMNIPOD 5 DEXG7G6 PODS (GEN 5)	ORIAHNN 300-1-0.5MG/300MG CAPS
OMNIPOD 5 G6-G7 INTRO KT(GEN5)	ORILISSA 150 MG TABLET
OMNIPOD 5 G6-G7 PODS (GEN 5)	ORILISSA 200 MG TABLET
OMNIPOD 5 INTRO(G6/LIBRE2PLUS)	ORKAMBI 100 MG-125 MG TABLET
OMNIPOD CLASSIC PODS(GEN3) 5PK	ORKAMBI 100-125 MG GRANULE PKT
OMNIPOD DASH INTRO KIT (GEN 4)	ORKAMBI 150-188 MG GRANULE PKT
OMNIPOD DASH PODS (GEN 4) 5PK	ORKAMBI 200 MG-125 MG TABLET
OMNITROPE 10 MG/1.5 ML CRTG	ORKAMBI 75-94 MG GRANULE PKT
OMNITROPE 5 MG/1.5 ML CRTG	ORLADEYO 110 MG CAPSULE
OMNITROPE 5.8 MG VIAL	ORLADEYO 150 MG CAPSULE
OMVOH 100 MG/ML PEN	ORLISTAT 120 MG CAPSULE
OMVOH 100 MG/ML SYRINGE	ORMALVI 50 MG TABLET
ONDANSETRON ODT 16 MG TABLET	ORSERDU 345 MG TABLET
ONEXTON GEL PUMP	ORSERDU 86 MG TABLET
ONUREG 200 MG TABLET	OSMOLEX ER 129 MG TABLET
ONUREG 300 MG TABLET	OTEZLA 10-20 MG STARTER 28 DAY
ONYDA XR 0.1 MG/ML SUSPENSION	OTEZLA 10-20-30MG START 28 DAY
OPSUMIT 10 MG TABLET	OTEZLA 20 MG TABLET
OPSYNVI 10-20 MG TABLET	OTEZLA 30 MG TABLET
OPSYNVI 10-40 MG TABLET	OTREXUP 10 MG/0.4 ML AUTO-INJ
OPZELURA 1.5% CREAM	OTREXUP 12.5 MG/0.4 ML AUTOINJ
ORACEA 40 MG CAPSULE	OTREXUP 15 MG/0.4 ML AUTO-INJ
ORAVIG 50 MG BUCCAL TABLET	OTREXUP 17.5 MG/0.4 ML AUTOINJ
ORENCIA 125 MG/ML SYRINGE	OTREXUP 20 MG/0.4 ML AUTO-INJ
ORENCIA 50 MG/0.4 ML SYRINGE	OTREXUP 22.5 MG/0.4 ML AUTOINJ
ORENCIA 87.5 MG/0.7 ML SYRINGE	OTREXUP 25 MG/0.4 ML AUTO-INJ
ORENCIA CLICKJECT 125 MG/ML	OVIDREL 250 MCG/0.5 ML SYRG
ORENITRAM ER 0.125 MG TABLET	OXAPROZIN 300 MG CAPSULE
ORENITRAM ER 0.25 MG TABLET	OXERVATE 0.002% EYE DROP
ORENITRAM ER 1 MG TABLET	OXYCODON-ACETAMINOPHEN 7.5-300
ORENITRAM ER 2.5 MG TABLET	OXYCODONE HCL 15 MG TABLET
ORENITRAM ER 5 MG TABLET	OXYCODONE HCL 30 MG TABLET

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OXYCODONE HCL 5 MG TABLET	PALYNZIQ 10 MG/0.5 ML SYRINGE
OXYCODONE HCL ER 10 MG TABLET	PALYNZIQ 2.5 MG/0.5 ML SYRINGE
OXYCODONE HCL ER 20 MG TABLET	PALYNZIQ 20 MG/ML SYRINGE
OXYCODONE HCL ER 40 MG TABLET	PAZOPANIB HCL 200 MG TABLET
OXYCODONE HCL ER 80 MG TABLET	PEGASYS 180 MCG/0.5 ML SYRINGE
OXYCODONE-ACETAMINOPH 10-300/5	PEGASYS 180 MCG/ML VIAL
OXYCODONE-ACETAMINOPHEN 10-300	PEMAZYRE 13.5 MG TABLET
OXYCODONE-ACETAMINOPHEN 5-300	PEMAZYRE 4.5 MG TABLET
OXYCODONE-ACETAMINOPHN 2.5-300	PEMAZYRE 9 MG TABLET
OXYCONTIN ER 10 MG TABLET	PENICILLAMINE 250 MG CAPSULE
OXYCONTIN ER 15 MG TABLET	PENNSAID 2% PUMP
OXYCONTIN ER 20 MG TABLET	PHOSPHOLINE IODIDE 0.125% DROP
OXYCONTIN ER 30 MG TABLET	PIQRAY 200 MG DAILY DOSE PACK
OXYCONTIN ER 40 MG TABLET	PIQRAY 250 MG DAILY DOSE PACK
OXYCONTIN ER 60 MG TABLET	PIQRAY 300 MG DAILY DOSE PACK
OXYCONTIN ER 80 MG TABLET	PIRFENIDONE 267 MG CAPSULE
OXYMORPHONE HCL ER 10 MG TAB	PIRFENIDONE 267 MG TABLET
OXYMORPHONE HCL ER 15 MG TAB	PIRFENIDONE 534 MG TABLET
OXYMORPHONE HCL ER 20 MG TAB	PIRFENIDONE 801 MG TABLET
OXYMORPHONE HCL ER 30 MG TAB	PODOFILOX 0.5% GEL
OXYMORPHONE HCL ER 40 MG TAB	POKONZA 10 MEQ PACKET
OXYMORPHONE HCL ER 5 MG TABLET	POMALYST 1 MG CAPSULE
OXYMORPHONE HCL ER 7.5 MG TAB	POMALYST 2 MG CAPSULE
OZEMPIC 0.25-0.5 MG/DOSE PEN	POMALYST 3 MG CAPSULE
OZEMPIC 1 MG/DOSE (4 MG/3 ML)	POMALYST 4 MG CAPSULE
OZEMPIC 2 MG/DOSE (8 MG/3 ML)	PRADAXA 110 MG PELLETT PACK
OZOBAX 5 MG/5 ML SOLUTION	PRADAXA 150 MG PELLETT PACK
OZOBAX DS 10 MG/5 ML SOLUTION	PRADAXA 20 MG PELLETT PACK
PALFORZIA 12 MG (LEVEL 3)	PRADAXA 30 MG PELLETT PACK
PALFORZIA 120 MG (LEVEL 7)	PRADAXA 40 MG PELLETT PACK
PALFORZIA 160 MG (LEVEL 8)	PRADAXA 50 MG PELLETT PACK
PALFORZIA 20 MG (LEVEL 4)	PRAMIPEXOLE ER 0.375 MG TABLET
PALFORZIA 200 MG (LEVEL 9)	PRAMIPEXOLE ER 0.75 MG TABLET
PALFORZIA 240 MG (LEVEL 10)	PRAMIPEXOLE ER 1.5 MG TABLET
PALFORZIA 3 MG (LEVEL 1)	PRAMIPEXOLE ER 2.25 MG TABLET
PALFORZIA 300 MG (LEVEL 11)	PRAMIPEXOLE ER 3 MG TABLET
PALFORZIA 300 MG (MAINTENANCE)	PRAMIPEXOLE ER 3.75 MG TABLET
PALFORZIA 40 MG (LEVEL 5)	PRAMIPEXOLE ER 4.5 MG TABLET
PALFORZIA 6 MG (LEVEL 2)	PREGNYL 10,000 UNIT VIAL
PALFORZIA 80 MG (LEVEL 6)	PRIMLEV 10-300 MG TABLET
PALFORZIA INITIAL DOSE PACK	PRIMLEV 5-300 MG TABLET

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PRIMLEV 7.5-300 MG TABLET	QULIPTA 30 MG TABLET
PRIVIGEN 10% VIAL	QULIPTA 60 MG TABLET
PROCYSBI DR 25 MG CAPSULE	RADICAVA ORS 105 MG/5 ML SUSP
PROCYSBI DR 300 MG GRANULE PKT	RADICAVA ORS STARTER KIT SUSP
PROCYSBI DR 75 MG CAPSULE	RASUVO 10 MG/0.2 ML AUTOINJ
PROCYSBI DR 75 MG GRANULE PKT	RASUVO 12.5 MG/0.25 ML AUTOINJ
PROLATE 10 MG-300 MG/5 ML SOLN	RASUVO 15 MG/0.3 ML AUTOINJ
PROLATE 10-300 MG TABLET	RASUVO 17.5 MG/0.35 ML AUTOINJ
PROLATE 5-300 MG TABLET	RASUVO 20 MG/0.4 ML AUTOINJ
PROLATE 7.5-300 MG TABLET	RASUVO 22.5 MG/0.45 ML AUTOINJ
PROLIA 60 MG/ML SYRINGE	RASUVO 25 MG/0.5 ML AUTOINJ
PROMACTA 12.5 MG SUSPEN PACKET	RASUVO 30 MG/0.6 ML AUTOINJ
PROMACTA 12.5 MG TABLET	RASUVO 7.5 MG/0.15 ML AUTOINJ
PROMACTA 25 MG SUSPENSION PCKT	RAVICTI 1.1 GRAM/ML LIQUID
PROMACTA 25 MG TABLET	RAYALDEE ER 30 MCG CAP (HARD)
PROMACTA 50 MG TABLET	RAYALDEE ER 30 MCG CAP (SOFT)
PROMACTA 75 MG TABLET	RAYOS DR 1 MG TABLET
PURIXAN 20 MG/ML ORAL SUSP	RAYOS DR 2 MG TABLET
PYRIMETHAMINE 25 MG TABLET	RAYOS DR 5 MG TABLET
PYRUKYND 20 MG TABLET	RECORLEV 150 MG TABLET
PYRUKYND 20-5 MG TAPER PACK	RELAFEN DS 1,000 MG TABLET
PYRUKYND 5 MG TABLET	RELEUKO 300 MCG/0.5 ML SYRINGE
PYRUKYND 5 MG TAPER PACK	RELEUKO 480 MCG/0.8 ML SYRINGE
PYRUKYND 50 MG TABLET	RELTONE 200 MG CAPSULE
PYRUKYND 50-20 MG TAPER PACK	RELTONE 400 MG CAPSULE
QBRELIS 1MG/ML SOLUTION	RETEVMO 120 MG TABLET
QELBREE ER 100 MG CAPSULE	RETEVMO 160 MG TABLET
QELBREE ER 150 MG CAPSULE	RETEVMO 40 MG CAPSULE
QELBREE ER 200 MG CAPSULE	RETEVMO 40 MG TABLET
QINLOCK 50 MG TABLET	RETEVMO 80 MG CAPSULE
QSYMIA 11.25 MG-69 MG CAPSULE	RETEVMO 80 MG TABLET
QSYMIA 15 MG-92 MG CAPSULE	REVATIO 20 MG TABLET
QSYMIA 3.75 MG-23 MG CAPSULE	REVCOVI 2.4 MG/1.5 ML VIAL
QSYMIA 7.5 MG-46 MG CAPSULE	REYVOW 100 MG TABLET
QUALAQUIN 324 MG CAPSULE	REYVOW 50 MG TABLET
QUILLICHEW ER 20 MG CHEW TAB	REZDIFFRA 100 MG TABLET
QUILLICHEW ER 30 MG CHEW TAB	REZDIFFRA 60 MG TABLET
QUILLICHEW ER 40 MG CHEW TAB	REZDIFFRA 80 MG TABLET
QUILLIVANT XR 25 MG/5 ML SUSP	REZLIDHIA 150 MG CAPSULE
QUININE SULFATE 324 MG CAPSULE	REZUROCK 200 MG TABLET
QULIPTA 10 MG TABLET	REZVOGLAR 100 UNIT/ML KWIKPEN

Commercial 3-Tier Prior Authorization List

The following prescription drugs require Prior Authorization

Certain medications require prior authorization, which means approval is needed before the prescription can be filled. If approval is not received, the drug may not be covered. This list may not apply to all plans or benefits. List subject to change.

RIBAVIRIN 200 MG CAPSULE	SAXENDA 18 MG/3 ML PEN
RIBAVIRIN 200 MG TABLET	SCEMBLIX 100 MG TABLET
RINVOQ ER 15 MG TABLET	SCEMBLIX 20 MG TABLET
RINVOQ ER 30 MG TABLET	SCEMBLIX 40 MG TABLET
RINVOQ ER 45 MG TABLET	SEGLENTIS 56 MG-44 MG TABLET
RINVOQ LQ 1 MG/ML SOLUTION	SEMGLEE (YFGN) 100 UNIT/ML PEN
RIVFLOZA 128 MG/0.8 ML SYRINGE	SEMGLEE (YFGN) 100 UNIT/ML VL
RIVFLOZA 160 MG/ML SYRINGE	SEROSTIM 4 MG VIAL
RIVFLOZA 80 MG/0.5 ML VIAL	SEROSTIM 5 MG VIAL
ROXYBOND 15 MG TABLET	SEROSTIM 6 MG VIAL
ROXYBOND 30 MG TABLET	SERTRALINE 150 MG CAPSULE
ROXYBOND 5 MG TABLET	SERTRALINE 200 MG CAPSULE
ROZLYTREK 100 MG CAPSULE	SEYSARA 100 MG TABLET
ROZLYTREK 200 MG CAPSULE	SEYSARA 150 MG TABLET
ROZLYTREK 50 MG PELLETT PACKET	SEYSARA 60 MG TABLET
RUBRACA 250 MG TABLET	SIGNIFOR 0.3 MG/ML AMPULE
RUBRACA 300 MG TABLET	SIGNIFOR 0.6 MG/ML AMPULE
RUCONEST 2,100 UNIT VIAL	SIGNIFOR 0.9 MG/ML AMPULE
RYALTRIS 665-25 MCG SPRAY	SIKLOS 1,000 MG TABLET
RYBELSUS 14 MG TABLET	SIKLOS 100 MG TABLET
RYBELSUS 3 MG TABLET	SILDENAFIL 10 MG/ML ORAL SUSP
RYBELSUS 7 MG TABLET	SILDENAFIL 20 MG TABLET
RYDAPT 25 MG CAPSULE	SILIQ 210 MG/1.5 ML SYRINGE
RYPLAZIM 68.8 MG VIAL	SIMLANDI(CF) AI 40 MG/0.4 ML
RYTARY ER 23.75 MG-95 MG CAP	SIMPONI 100 MG/ML PEN INJECTOR
RYTARY ER 36.25 MG-145 MG CAP	SIMPONI 100 MG/ML SYRINGE
RYTARY ER 48.75 MG-195 MG CAP	SIMPONI 50 MG/0.5 ML PEN INJEC
RYTARY ER 61.25 MG-245 MG CAP	SIMPONI 50 MG/0.5 ML SYRINGE
RYVENT 6 MG TABLET	SITAGLIPTIN 100 MG TABLET
SABRIL 500 MG POWDER PACKET	SITAGLIPTIN 25 MG TABLET
SABRIL 500 MG TABLET	SITAGLIPTIN 50 MG TABLET
SAJAZIR 30 MG/3 ML SYRINGE	SITAGLIPTIN-METFORMIN 50-1000
SANDOSTATIN LAR DEPOT 10 MG KT	SITAGLIPTIN-METFORMIN 50-500
SANDOSTATIN LAR DEPOT 10 MG VL	SIVEXTRO 200 MG TABLET
SANDOSTATIN LAR DEPOT 20 MG KT	SKYCLARYS 50 MG CAPSULE
SANDOSTATIN LAR DEPOT 20 MG VL	SKYRIZI 150 MG/ML PEN
SANDOSTATIN LAR DEPOT 30 MG KT	SKYRIZI 150 MG/ML SYRINGE
SANDOSTATIN LAR DEPOT 30 MG VL	SKYRIZI 180 MG/1.2 ML ON-BODY
SAPROPTERIN 100 MG POWDER PKT	SKYRIZI 360 MG/2.4 ML ON-BODY
SAPROPTERIN 100 MG TABLET	SKYTROFA 11 MG CARTRIDGE
SAPROPTERIN 500 MG POWDER PKT	SKYTROFA 13.3 MG CARTRIDGE

Commercial 3-Tier Prior Authorization List

The following prescription drugs require Prior Authorization

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SKYTROFA 3 MG CARTRIDGE	SPRYCEL 140 MG TABLET
SKYTROFA 3.6 MG CARTRIDGE	SPRYCEL 20 MG TABLET
SKYTROFA 4.3 MG CARTRIDGE	SPRYCEL 50 MG TABLET
SKYTROFA 5.2 MG CARTRIDGE	SPRYCEL 70 MG TABLET
SKYTROFA 6.3 MG CARTRIDGE	SPRYCEL 80 MG TABLET
SKYTROFA 7.6 MG CARTRIDGE	STELARA 45 MG/0.5 ML SYRINGE
SKYTROFA 9.1 MG CARTRIDGE	STELARA 45 MG/0.5 ML VIAL
SOAANZ 20 MG TABLET	STELARA 90 MG/ML SYRINGE
SOAANZ 40 MG TABLET	STIMUFEND 6 MG/0.6 ML SYRINGE
SOAANZ 60 MG TABLET	STIVARGA 40 MG TABLET
SODIUM OXYBATE 0.5 G/ML SOLN	STRENSIQ 18 MG/0.45 ML VIAL
SOFDRA 12.45% GEL	STRENSIQ 28 MG/0.7 ML VIAL
SOFOSBUVIR-VELPATASVIR 400-100	STRENSIQ 40 MG/ML VIAL
SOGROYA 10 MG/1.5 ML PEN	STRENSIQ 80 MG/0.8 ML VIAL
SOGROYA 15 MG/1.5 ML PEN	STROMECTOL 3 MG TABLET
SOGROYA 5 MG/1.5 ML PEN	SUCRAID 17,000 UNIT/2 ML SOLN
SOHONOS 1 MG CAPSULE	SUCRAID 8,500 UNIT/ML SOLN
SOHONOS 1.5 MG CAPSULE	SUNITINIB MALATE 12.5 MG CAP
SOHONOS 10 MG CAPSULE	SUNITINIB MALATE 25 MG CAPSULE
SOHONOS 2.5 MG CAPSULE	SUNITINIB MALATE 37.5 MG CAP
SOHONOS 5 MG CAPSULE	SUNITINIB MALATE 50 MG CAPSULE
SOLTAMOX 20 MG/10 ML SOLN	SUNOSI 150 MG TABLET
SOMA 250 MG TABLET	SUNOSI 75 MG TABLET
SOMAVERT 10 MG VIAL	SUTENT 12.5 MG CAPSULE
SOMAVERT 15 MG VIAL	SUTENT 25 MG CAPSULE
SOMAVERT 20 MG VIAL	SUTENT 37.5 MG CAPSULE
SOMAVERT 25 MG VIAL	SUTENT 50 MG CAPSULE
SOMAVERT 30 MG VIAL	SYMDEKO 100/150 MG-150 MG TABS
SORAFENIB 200 MG TABLET	SYMDEKO 50/75 MG-75 MG TABLETS
SORILUX 0.005% FOAM	SYNAREL 2 MG/ML NASAL SPRAY
SOTYKTU 6 MG TABLET	SYNDROS 5 MG/ML SOLUTION
SOTYLIZE 5 MG/ML ORAL SOLUTION	SYPRINE 250 MG CAPSULE
SOVALDI 150 MG PELLET PACKET	TABRECTA 150 MG TABLET
SOVALDI 200 MG PELLET PACKET	TABRECTA 200 MG TABLET
SOVALDI 200 MG TABLET	TADALAFIL 20 MG TABLET (PULM HYPERTENSION)
SOVALDI 400 MG TABLET	TADLIQ 20 MG/5 ML SUSPENSION
SOVUNA 200 MG TABLET	TAFINLAR 10 MG TABLET FOR SUSP
SOVUNA 300 MG TABLET	TAFINLAR 50 MG CAPSULE
SPEVIGO 150 MG/ML SYRINGE	TAFINLAR 75 MG CAPSULE
SPRIX 15.75 MG NASAL SPRAY	TAGRISSO 40 MG TABLET
SPRYCEL 100 MG TABLET	TAGRISSO 80 MG TABLET

Commercial 3-Tier Prior Authorization List

The following prescription drugs require Prior Authorization

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TAKHZYRO 150 MG/ML SYRINGE	TERIPARATIDE 620 MCG/2.48 ML
TAKHZYRO 300 MG/2 ML SYRINGE	TETRABENAZINE 12.5 MG TABLET
TAKHZYRO 300 MG/2 ML VIAL	TETRABENAZINE 25 MG TABLET
TALTZ 20 MG/0.25 ML SYRINGE	TETRACYCLINE 250 MG TABLET
TALTZ 40 MG/0.5 ML SYRINGE	TETRACYCLINE 500 MG TABLET
TALTZ 80 MG/ML AUTOINJ (2-PK)	TEZSPIRE 210 MG/1.91 ML PEN
TALTZ 80 MG/ML AUTOINJ (3-PK)	THIOLA 100 MG TABLET
TALTZ 80 MG/ML AUTOINJECTOR	THIOLA EC 100 MG TABLET
TALTZ 80 MG/ML SYRINGE	THIOLA EC 300 MG TABLET
TALZENNA 0.1 MG CAPSULE	TIBSOVO 250 MG TABLET
TALZENNA 0.1 MG SOFTGEL	TIGLUTIK 50 MG/10 ML SUSP
TALZENNA 0.25 MG CAPSULE	TIOPRONIN 100 MG TABLET
TALZENNA 0.25 MG SOFTGEL	TIOPRONIN DR 100 MG TABLET
TALZENNA 0.35 MG CAPSULE	TIOPRONIN DR 300 MG TABLET
TALZENNA 0.35 MG SOFTGEL	TOLECTIN 600 MG TABLET
TALZENNA 0.5 MG CAPSULE	TOLMETIN SODIUM 400 MG CAP
TALZENNA 0.5 MG SOFTGEL	TOLSURA 65 MG CAPSULE
TALZENNA 0.75 MG CAPSULE	TORPENZ 10 MG TABLET
TALZENNA 0.75 MG SOFTGEL	TORPENZ 2.5 MG TABLET
TALZENNA 1 MG CAPSULE	TORPENZ 5 MG TABLET
TALZENNA 1 MG SOFTGEL	TORPENZ 7.5 MG TABLET
TANLOR 1,000 MG TABLET	TRACLEER 125 MG TABLET
TARCEVA 100 MG TABLET	TRACLEER 32 MG TABLET FOR SUSP
TARGRETIN 1% GEL	TRACLEER 62.5 MG TABLET
TARGRETIN 75 MG CAPSULE	TRAMADOL ER 100 MG TABLET
TARPEYO DR 4 MG CAPSULE	TRAMADOL ER 200 MG TABLET
TASCENSO ODT 0.25 MG TABLET	TRAMADOL ER 300 MG TABLET
TASCENSO ODT 0.5 MG TABLET	TRAMADOL HCL ER 100 MG CAPSULE
TASIGNA 150 MG CAPSULE	TRAMADOL HCL ER 100 MG TABLET
TASIGNA 200 MG CAPSULE	TRAMADOL HCL ER 200 MG CAPSULE
TASIGNA 50 MG CAPSULE	TRAMADOL HCL ER 200 MG TABLET
TASIMELTEON 20 MG CAPSULE	TRAMADOL HCL ER 300 MG CAPSULE
TAVABOROLE 5% TOPICAL SOLUTION	TRAMADOL HCL ER 300 MG TABLET
TAVALISSE 100 MG TABLET	TREMFYA 100 MG/ML INJECTOR
TAVALISSE 150 MG TABLET	TREMFYA 100 MG/ML SYRINGE
TAVNEOS 10 MG CAPSULE	TREMFYA 200 MG/2 ML PEN
TAZAROTENE 0.1% FOAM	TREMFYA 200 MG/2 ML SYRINGE
TAZVERIK 200 MG TABLET	TRETINOIN 0.05% EMOLLIENT CRM
TEGLUTIK 5 MG/ML SUSPENSION	TRIAMCINOLONE 0.05% OINTMENT
TEPMETKO 225 MG TABLET	TRIENTINE HCL 250 MG CAPSULE
TERIPARATIDE 600 MCG/2.4ML PEN	TRIENTINE HCL 500 MG CAPSULE

Commercial 3-Tier Prior Authorization List

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TRIKAFTA 100-50-75 MG/150 MG	UPTRAVI 200 MCG TABLET
TRIKAFTA 100-50-75 MG/75MG PKT	UPTRAVI 200-800 TITRATION PACK
TRIKAFTA 50-25-37.5 MG/75 MG	UPTRAVI 400 MCG TABLET
TRIKAFTA 80-40-60MG/59.5MG PKT	UPTRAVI 600 MCG TABLET
TRI-LUMA CREAM	UPTRAVI 800 MCG TABLET
TRUDHESA NASAL SPRAY	URSODIOL 200 MG CAPSULE
TRULICITY 0.75 MG/0.5 ML PEN	URSODIOL 400 MG CAPSULE
TRULICITY 1.5 MG/0.5 ML PEN	VALCHLOR 0.016% GEL
TRULICITY 3 MG/0.5 ML PEN	VALSARTAN 20 MG/5 ML SOLUTION
TRULICITY 4.5 MG/0.5 ML PEN	VALSARTAN 4 MG/ML SOLUTION
TRUQAP 160 MG TABLET	VANFLYTA 17.7 MG TABLET
TRUQAP 200 MG TABLET	VANFLYTA 26.5 MG TABLET
TRYVIO 12.5 MG TABLET	VELSIPITY 2 MG TABLET
TUKYSA 150 MG TABLET	VENCLEXTA 10 MG TAB (10MG X 2)
TUKYSA 50 MG TABLET	VENCLEXTA 10 MG TABLET
TURALIO 125 MG CAPSULE	VENCLEXTA 100 MG TABLET
TWIIST REFILL KT(CSST-NDL-SYR)	VENCLEXTA 50 MG TABLET
TWIIST RFL(INFUS-CSST-NDL-SYR)	VENCLEXTA STARTING PACK
TWIIST STARTER KIT	VEOZAH 45 MG TABLET
TWYNEO 0.1%-3% CREAM	VERKAZIA 0.1% EYE EMULSION
TYENNE 162 MG/0.9 ML AUTOINJCT	VERQUOVO 10 MG TABLET
TYKERB 250 MG TABLET	VERQUOVO 2.5 MG TABLET
TYMLOS 80 MCG DOSE PEN INJECTR	VERQUOVO 5 MG TABLET
TYSABRI 300 MG/15 ML VIAL	VERZENIO 100 MG TABLET
TYVASO 1.74 MG/2.9 ML SOLUTION	VERZENIO 150 MG TABLET
TYVASO DPI 16 MCG CARTRIDGE	VERZENIO 200 MG TABLET
TYVASO DPI 16-32 MCG TITR KIT	VERZENIO 50 MG TABLET
TYVASO DPI 16-32-48 MCG TITRAT	VESICARE LS 5 MG/5 ML SUSP
TYVASO DPI 32 MCG CARTRIDGE	VEVYE 0.1% EYE DROP
TYVASO DPI 48 MCG CARTRIDGE	VICTOZA 2-PAK 18 MG/3 ML PEN
TYVASO DPI 64 MCG CARTRIDGE	VICTOZA 3-PAK 18 MG/3 ML PEN
TYVASO INHALATION REFILL KIT	VIGABATRIN 500 MG POWDER PACKT
TYVASO INHALATION STARTER KIT	VIGABATRIN 500 MG TABLET
TYVASO INSTITUTIONAL START KIT	VIGADRONE 500 MG POWDER PACKET
UBRELVY 100 MG TABLET	VIGADRONE 500 MG TABLET
UBRELVY 50 MG TABLET	VIGAFYDE 100 MG/ML ORAL SOLN
UCERIS 2 MG RECTAL FOAM	VIGPODER 500 MG POWDER PACKET
UPTRAVI 1,000 MCG TABLET	VIJOICE 125 MG TABLET
UPTRAVI 1,200 MCG TABLET	VIJOICE 250 MG DAILY DOSE PACK
UPTRAVI 1,400 MCG TABLET	VIJOICE 50 MG GRANULE PACKET
UPTRAVI 1,600 MCG TABLET	VIJOICE 50 MG TABLET

Commercial 3-Tier Prior Authorization List

The following prescription drugs require Prior Authorization

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VIMOVO DR 375-20 MG TABLET	WINREVAIR 60 MG TWO-VIAL KIT
VIMOVO DR 500-20 MG TABLET	WYNZORA 0.005%-0.064% CREAM
VITRAKVI 100 MG CAPSULE	XALKORI 150 MG PELLET
VITRAKVI 20 MG/ML SOLUTION	XALKORI 20 MG PELLET
VITRAKVI 25 MG CAPSULE	XALKORI 200 MG CAPSULE
VIVJOA 150 MG CAPSULE	XALKORI 250 MG CAPSULE
VIVLODEX 10 MG CAPSULE	XALKORI 50 MG PELLET
VIVLODEX 5 MG CAPSULE	XATMEP 2.5 MG/ML ORAL SOLUTION
VIZIMPRO 15 MG TABLET	XDEMVEY 0.25% DROP
VIZIMPRO 30 MG TABLET	XELJANZ 1 MG/ML SOLUTION
VIZIMPRO 45 MG TABLET	XELJANZ 10 MG TABLET
VONJO 100 MG CAPSULE	XELJANZ 5 MG TABLET
VOQUEZNA 10 MG TABLET	XELJANZ XR 11 MG TABLET
VOQUEZNA 20 MG TABLET	XELJANZ XR 22 MG TABLET
VORANIGO 10 MG TABLET	XENAZINE 12.5 MG TABLET
VORANIGO 40 MG TABLET	XENAZINE 25 MG TABLET
VOSEVI 400-100-100 MG TABLET	XENICAL 120 MG CAPSULE
VOTRIENT 200 MG TABLET	XENLETA 600 MG TABLET
VOWST CAPSULE	XERMELO 250 MG TABLET
VOXZOGO 0.4 MG VIAL	XIMINO ER 135 MG CAPSULE
VOXZOGO 0.56 MG VIAL	XIMINO ER 45 MG CAPSULE
VOXZOGO 1.2 MG VIAL	XIMINO ER 90 MG CAPSULE
VOYDEYA 100 MG TABLET	XOLAIR 150 MG/1.2 ML POWDER VL
VOYDEYA 150 MG DOSE TABLET	XOLAIR 150 MG/ML AUTOINJECTOR
VTAMA 1% CREAM	XOLAIR 150 MG/ML SYRINGE
VYLEESI 1.75 MG/0.3 ML AUTOINJ	XOLAIR 300 MG/2 ML AUTOINJECT
VYNDAMAX 61 MG CAPSULE	XOLAIR 300 MG/2 ML SYRINGE
VYNDAQEL 20 MG CAPSULE	XOLAIR 75 MG/0.5 ML AUTOINJECT
WAINUA 45 MG/0.8 ML AUTOINJECT	XOLAIR 75 MG/0.5 ML SYRINGE
WAKIX 17.8 MG TABLET	XOLREMDI 100 MG CAPSULE
WAKIX 4.45 MG TABLET	XOSPATA 40 MG TABLET
WEGOVY 0.25 MG/0.5 ML PEN	XPHOZAH 20 MG TABLET
WEGOVY 0.5 MG/0.5 ML PEN	XPHOZAH 30 MG TABLET
WEGOVY 1 MG/0.5 ML PEN	XPOVIO 100 MG ONCE WEEKLY DOSE
WEGOVY 1.7 MG/0.75 ML PEN	XPOVIO 40 MG ONCE WEEKLY DOSE
WEGOVY 2.4 MG/0.75 ML PEN	XPOVIO 40 MG TWICE WEEKLY DOSE
WELIREG 40 MG TABLET	XPOVIO 60 MG ONCE WEEKLY DOSE
WINLEVI 1% CREAM	XPOVIO 60 MG TWICE WEEKLY DOSE
WINREVAIR 45 MG ONE-VIAL KIT	XPOVIO 80 MG ONCE WEEKLY DOSE
WINREVAIR 45 MG TWO-VIAL KIT	XPOVIO 80 MG TWICE WEEKLY DOSE
WINREVAIR 60 MG ONE-VIAL KIT	XTAMPZA ER 13.5 MG CAPSULE

Commercial 3-Tier Prior Authorization List

The following prescription drugs require Prior Authorization

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XTAMPZA ER 18 MG CAPSULE	ZILBRYSQ 16.6 MG/0.416 ML SYRN
XTAMPZA ER 27 MG CAPSULE	ZILBRYSQ 23 MG/0.574 ML SYRING
XTAMPZA ER 36 MG CAPSULE	ZILBRYSQ 32.4 MG/0.81 ML SYRNG
XTAMPZA ER 9 MG CAPSULE	ZIPSOR 25 MG CAPSULE
XTANDI 40 MG CAPSULE	ZITUVIMET 50-1,000 MG TABLET
XTANDI 40 MG TABLET	ZITUVIMET 50-500 MG TABLET
XTANDI 80 MG TABLET	ZITUVIMET XR 100-1,000 MG TAB
XURIDEN 2 GM GRANULE PACKET	ZITUVIMET XR 50-1000 MG TABLET
XYREM 500 MG/ML ORAL SOLUTION	ZITUVIMET XR 50-500 MG TABLET
XYWAV 0.5 GM/ML ORAL SOLUTION	ZITUVIO 100 MG TABLET
YARGESA 100 MG CAPSULE	ZITUVIO 25 MG TABLET
YONSA 125 MG TABLET	ZITUVIO 50 MG TABLET
YORVIPATH 168 MCG/0.56 ML PEN	ZOKINVY 50 MG CAPSULE
YORVIPATH 294 MCG/0.98 ML PEN	ZOKINVY 75 MG CAPSULE
YORVIPATH 420 MCG/1.4 ML PEN	ZOLINZA 100 MG CAPSULE
YOSPRALA DR 325-40 MG TABLET	ZOLPIDEM TARTRATE 7.5 MG CAP
YOSPRALA DR 81-40 MG TABLET	ZOMACTON 10 MG VIAL
YUFLYMA(CF) 20 MG/0.2 ML SYRNG	ZOMACTON 5 MG VIAL
YUFLYMA(CF) 40 MG/0.4 ML SYRNG	ZONALON 5% CREAM
YUFLYMA(CF) 40MG/0.4ML AUTOINJ	ZONISADE 100 MG/5 ML ORAL SUSP
YUFLYMA(CF) 80MG/0.8ML AUTOINJ	ZONTIVITY 2.08 MG TABLET
YUFLYMA(CF) AI CROHNS-UC-HS 80	ZORVOLEX 18 MG CAPSULE
YUSIMRY(CF) 40 MG/0.8 ML PEN	ZORVOLEX 35 MG CAPSULE
ZAVESCA 100 MG CAPSULE	ZORYVE 0.15% CREAM
ZAVZPRET 10 MG NASAL SPRAY	ZORYVE 0.3% CREAM
ZEJULA 100 MG TABLET	ZORYVE 0.3% FOAM
ZEJULA 200 MG TABLET	ZTALMY 50 MG/ML SUSPENSION
ZEJULA 300 MG TABLET	ZURZUVAE 20 MG CAPSULE
ZELAPAR 1.25 MG ODT TABLET	ZURZUVAE 25 MG CAPSULE
ZELBORAF 240 MG TABLET	ZURZUVAE 30 MG CAPSULE
ZEPATIER 50-100 MG TABLET	ZYDELIG 100 MG TABLET
ZEPBOUND 10 MG/0.5 ML PEN	ZYDELIG 150 MG TABLET
ZEPBOUND 12.5 MG/0.5 ML PEN	ZYKADIA 150 MG TABLET
ZEPBOUND 15 MG/0.5 ML PEN	ZYMFENTRA 120 MG/ML PEN KIT
ZEPBOUND 2.5 MG/0.5 ML PEN	ZYMFENTRA 120 MG/ML SYRINGE KT
ZEPBOUND 5 MG/0.5 ML PEN	ZYTIGA 250 MG TABLET
ZEPBOUND 7.5 MG/0.5 ML PEN	ZYTIGA 500 MG TABLET
ZEPOSIA 0.92 MG CAPSULE	
ZEPOSIA STARTER KIT (28-DAY)	
ZEPOSIA STARTER PACK (7-DAY)	
ZIEXTENZO 6 MG/0.6 ML SYRINGE	

Commercial 3-Tier Step Therapy List

The following prescription drugs require Step Therapy

Step Therapy requires that members try certain First Line options before other medications will be considered medically necessary for treatment of a specific condition. Step therapy requirements may apply to both brand and generics. Typically, First Line medications are classified as generics, but there are instances where brand name medications may be preferred. This list may not apply to all plans or benefits. List subject to change.

ACYCLOVIR 5% CREAM	CAPLYTA 21 MG CAPSULE
ACZONE 7.5% GEL PUMP	CAPLYTA 42 MG CAPSULE
ADAPALENE 0.1% LOTION	CLINDAGEL 1% GEL
ADAPALENE 0.1% SOLUTION	CLINDAMYCIN PHOSPHATE 1% GEL
ADAPALENE 0.1% SWAB	CLOCORTOLONE PIVALATE 0.1% CRM
ADLARITY 10MG/DAY WEEKLY PATCH	CORDRAN 0.025% CREAM
ADLARITY 5 MG/DAY WEEKLY PATCH	CORDRAN 0.05% CREAM
ADMELOG 100 UNIT/ML VIAL	CORDRAN 0.05% LOTION
ADMELOG SOLOSTAR 100 UNIT/ML	CORDRAN 0.05% OINTMENT
AIRDUO RESPICLICK 113-14 MCG	DAPSONE 7.5% GEL PUMP
AIRDUO RESPICLICK 232-14 MCG	DAYVIGO 10 MG TABLET
AIRDUO RESPICLICK 55-14 MCG	DAYVIGO 5 MG TABLET
ALOGLIPTIN 12.5 MG TABLET	DENAVIR 1% CREAM
ALOGLIPTIN 25 MG TABLET	DESONIDE 0.05% GEL
ALOGLIPTIN 6.25 MG TABLET	DEXTROAMPH-AMPHET ER 12.5MG CP
ALOGLIPTIN-METFORMIN 12.5-1000	DEXTROAMPH-AMPHET ER 25 MG CAP
ALOGLIPTIN-METFORMIN 12.5-500	DEXTROAMPH-AMPHET ER 37.5MG CP
ALOGLIPTIN-PIOGLIT 12.5-30 MG	DEXTROAMPH-AMPHET ER 50 MG CAP
ALOGLIPTIN-PIOGLIT 25-15 MG TB	DIFFERIN 0.1% LOTION
ALOGLIPTIN-PIOGLIT 25-30 MG TB	DORYX DR 200 MG TABLET
ALOGLIPTIN-PIOGLIT 25-45 MG TB	DORYX DR 80 MG TABLET
ALVESCO 160 MCG INHALER	DORYX MPC DR 60 MG TABLET
ALVESCO 80 MCG INHALER	DOXYCYCLINE HYC DR 200 MG TAB
AMITIZA 24 MCG CAPSULE	DOXYCYCLINE HYC DR 50 MG TAB
AMITIZA 8 MCG CAPSULE	DOXYCYCLINE HYC DR 80 MG TAB
AMZEEQ 4% FOAM	DRIZALMA SPRINKLE DR 20 MG CAP
ANZEMET 50 MG TABLET	DRIZALMA SPRINKLE DR 30 MG CAP
APIDRA 100 UNIT/ML VIAL	DRIZALMA SPRINKLE DR 40 MG CAP
APIDRA SOLOSTAR 100 UNIT/ML	DRIZALMA SPRINKLE DR 60 MG CAP
ATROPINE 1% EYE DROPS	DUAKLIR PRESSAIR 400-12MCG INH
AZSTARYS 26.1 MG-5.2 MG CAP	DYANAVEL XR 10 MG TABLET
AZSTARYS 39.2 MG-7.8 MG CAP	DYANAVEL XR 15 MG TABLET
AZSTARYS 52.3 MG-10.4 MG CAP	DYANAVEL XR 20 MG TABLET
BAFIERTAM DR 95 MG CAPSULE	DYANAVEL XR 5 MG TABLET
BELSOMRA 10 MG TABLET	ECOZA 1% FOAM
BELSOMRA 15 MG TABLET	EDARBI 40 MG TABLET
BELSOMRA 20 MG TABLET	EDARBI 80 MG TABLET
BELSOMRA 5 MG TABLET	EDARBYCLOR 40-12.5 MG TABLET
BRYHALI 0.01% LOTION	EDARBYCLOR 40-25 MG TABLET
CAPLYTA 10.5 MG CAPSULE	EDLUAR 10 MG SL TABLET

Commercial 3-Tier Step Therapy List

The following prescription drugs require Step Therapy

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EDLUAR 5 MG SL TABLET	INVOKAMET 150-1,000 MG TABLET
EMSAM 12 MG/24 HOURS PATCH	INVOKAMET 150-500 MG TABLET
EMSAM 6 MG/24 HOURS PATCH	INVOKAMET 50-1,000 MG TABLET
EMSAM 9 MG/24 HOURS PATCH	INVOKAMET 50-500 MG TABLET
ERTACZO 2% CREAM	INVOKAMET XR 150-1,000 MG TAB
ESTRING 2 MG VAGINAL RING	INVOKAMET XR 150-500 MG TABLET
ESTRING 7.5 MCG/DAY (2MG) RING	INVOKAMET XR 50-1,000 MG TAB
EUCRISA 2% OINTMENT	INVOKAMET XR 50-500 MG TABLET
FANAPT 1 MG TABLET	INVOKANA 100 MG TABLET
FANAPT 10 MG TABLET	INVOKANA 300 MG TABLET
FANAPT 12 MG TABLET	IYUZEH 0.005% EYE DROP
FANAPT 2 MG TABLET	JANUMET 50-1,000 MG TABLET
FANAPT 4 MG TABLET	JANUMET 50-500 MG TABLET
FANAPT 6 MG TABLET	JANUMET XR 100-1,000 MG TABLET
FANAPT 8 MG TABLET	JANUMET XR 50-1,000 MG TABLET
FANAPT TITRATION PACK	JANUMET XR 50-500 MG TABLET
FIASP 100 UNIT/ML FLEXTOUCH	JANUVIA 100 MG TABLET
FIASP 100 UNIT/ML VIAL	JANUVIA 50 MG TABLET
FIASP PENFILL 100 UNIT/ML CART	KAZANO 12.5-1,000 MG TABLET
FIASP PUMPCART 100 UNIT/ML	KAZANO 12.5-500 MG TABLET
FLUTICASONE-SALMETEROL 115-21	LIVALO 1 MG TABLET
FLUTICASONE-SALMETEROL 230-21	LIVALO 2 MG TABLET
FLUTICASONE-SALMETEROL 45-21	LIVALO 4 MG TABLET
FORFIVO XL 450 MG TABLET	LULICONAZOLE 1% CREAM
GLUCOSE METER (OTHER THAN ABBOTT, ONE TOUCH)	LUZU 1% CREAM
GLUMETZA ER 1,000 MG TABLET	METFORMIN ER 1,000 MG GASTR-TB
GLUMETZA ER 500 MG TABLET	METFORMIN ER 1,000 MG OSM-TAB
HALCINONIDE 0.1% CREAM	METFORMIN ER 500 MG GASTRC-TB
HALOBETASOL PROP 0.05% FOAM	METFORMIN ER 500 MG OSMOTIC TB
HALOG 0.1% CREAM	METFORMIN HCL 625 MG TABLET
HALOG 0.1% OINTMENT	MOTTEGRITY 1 MG TABLET
IBSRELA 50 MG TABLET	MOTTEGRITY 2 MG TABLET
IMIQUIMOD 3.75% CREAM	MYDAYIS ER 12.5 MG CAPSULE
IMIQUIMOD 3.75% CREAM PUMP	MYDAYIS ER 25 MG CAPSULE
IMPOYZ 0.025% CREAM	MYDAYIS ER 37.5 MG CAPSULE
INSULIN ASPART 100 UNIT/ML CRT	MYDAYIS ER 50 MG CAPSULE
INSULIN ASPART 100 UNIT/ML PEN	NAFTIFINE HCL 2% GEL
INSULIN ASPART 100 UNIT/ML VL	NAFTIN 2% GEL
INSULIN ASPART PRO MIX70-30 PN	NESINA 12.5 MG TABLET
INSULIN ASPART PRO MIX70-30 VL	NESINA 25 MG TABLET

Commercial 3-Tier Step Therapy List

The following prescription drugs require Step Therapy

Step Therapy requires that members try certain First Line options before other medications will be considered medically necessary for treatment of a specific condition. Step therapy requirements may apply to both brand and generics. Typically, First Line medications are classified as generics, but there are instances where brand name medications may be preferred. This list may not apply to all plans or benefits. List subject to change.

NESINA 6.25 MG TABLET	PHEBURANE PELLETT
NORGESIC FORTE TABLET	PITAVASTATIN 1 MG TABLET
NORITATE 1% CREAM	PITAVASTATIN 2 MG TABLET
NOVOLIN 70-30 100 UNIT/ML VIAL	PITAVASTATIN 4 MG TABLET
NOVOLIN 70-30 FLEXPEN	PONVORY 14-DAY STARTER PACK
NOVOLIN N 100 UNIT/ML FLEXPEN	PONVORY 20 MG TABLET
NOVOLIN N 100 UNIT/ML VIAL	PRALUENT 150 MG/ML PEN
NOVOLIN N 100 UNITS/ML VIAL	PRALUENT 75 MG/ML PEN
NOVOLIN R 100 UNIT/ML FLEXPEN	PROGRAF 0.2 MG GRANULE PACKET
NOVOLIN R 100 UNIT/ML VIAL	PROGRAF 1 MG GRANULE PACKET
NOVOLIN R 100 UNITS/ML VIAL	PULMICORT 180 MCG FLEXHALER
NOVOLOG 100 UNIT/ML FLEXPEN	PULMICORT 90 MCG FLEXHALER
NOVOLOG 100 UNIT/ML VIAL	QTERN 10 MG-5 MG TABLET
NOVOLOG MIX 70-30 FLEXPEN	QTERN 5 MG-5 MG TABLET
NOVOLOG MIX 70-30 VIAL	QUVIVIQ 25 MG TABLET
NOVOLOG PENFILL 100 UNIT/ML	QUVIVIQ 50 MG TABLET
OMEPRAZOLE-BICARB 20-1,680 PKT	RELION NOVOLIN 70-30 FLEXPEN
OMEPRAZOLE-BICARB 40-1,680 PKT	RELION NOVOLIN 70-30 VIAL
ONZETRA XSAIL 11 MG/NOSEPIECE	RELION NOVOLIN N 100 UNIT/ML
ORPHENADRIN-ASA-CAF 25-385-30MG	RELION NOVOLIN N 100 UNITS/ML
ORPHENGESIC FORTE 50-770-60 MG	RELION NOVOLIN N U-100 FLEXPEN
OSENI 12.5-30 MG TABLET	RELION NOVOLIN R 100 UNIT/ML
OSENI 25-15 MG TABLET	RELION NOVOLIN R 100 UNITS/ML
OSENI 25-30 MG TABLET	RELION NOVOLIN R U-100 FLEXPEN
OSENI 25-45 MG TABLET	RELION NOVOLOG 100 UNIT/ML VL
OSPHENA 60 MG TABLET	RELION NOVOLOG MIX 70-30 FLXPN
OXISTAT 1% LOTION	RELION NOVOLOG MIX 70-30 VIAL
OXYTROL 3.9 MG/24HR PATCH	RELION NOVOLOG U-100 FLEXPEN
PANCREAZE DR 10,500 UNIT CAP	RELISTOR 150 MG TABLET
PANCREAZE DR 16,800 UNIT CAP	RESTASIS 0.05% EYE EMULSION
PANCREAZE DR 2,600 UNIT CAP	RESTASIS MULTIDOSE 0.05% EYE
PANCREAZE DR 21,000 UNIT CAP	REXULTI 0.25 MG TABLET
PANCREAZE DR 37,000 UNIT CAP	REXULTI 0.5 MG TABLET
PANCREAZE DR 4,200 UNIT CAP	REXULTI 1 MG TABLET
PANDEL 0.1% CREAM	REXULTI 2 MG TABLET
PENCICLOVIR 1% CREAM	REXULTI 3 MG TABLET
PERTZYE DR 16,000 UNIT CAPSULE	REXULTI 4 MG TABLET
PERTZYE DR 24,000 UNIT CAPSULE	RHOPRESSA 0.02% OPHTH SOLUTION
PERTZYE DR 4,000 UNIT CAPSULE	ROCKLATAN 0.02%-0.005% EYE DRP
PERTZYE DR 8,000 UNIT CAPSULE	SANCUSO 3.1 MG/24 HR PATCH

Commercial 3-Tier Step Therapy List

The following prescription drugs require Step Therapy

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SAVAYSA 15 MG TABLET	VYZULTA 0.024% OPHTH SOLUTION
SAVAYSA 30 MG TABLET	XADAGO 100 MG TABLET
SAVAYSA 60 MG TABLET	XADAGO 50 MG TABLET
SAVELLA 100 MG TABLET	XELPROS 0.005% EYE DROP
SAVELLA 12.5 MG TABLET	XELSTRYM 13.5 MG/9 HR PATCH
SAVELLA 25 MG TABLET	XELSTRYM 18 MG/9 HR PATCH
SAVELLA 50 MG TABLET	XELSTRYM 4.5 MG/9 HR PATCH
SAVELLA TITRATION PACK	XELSTRYM 9 MG/9 HR PATCH
SECUADO 3.8 MG/24 HR PATCH	XERESE 5%-1% CREAM
SECUADO 5.7 MG/24 HR PATCH	XOLEGEL 2% GEL
SECUADO 7.6 MG/24 HR PATCH	YUPELRI 175 MCG/3 ML SOLUTION
SEGLUROMET 2.5-1,000 MG TABLET	ZEGERID 20 MG PACKET
SEGLUROMET 2.5-500 MG TABLET	ZEGERID 40 MG PACKET
SEGLUROMET 7.5-1,000 MG TABLET	ZEMBRACE SYMTOUCH 3 MG/0.5 ML
SEGLUROMET 7.5-500 MG TABLET	ZERVIATE 0.24% EYE DROP
SERNIVO 0.05% SPRAY	ZILXI 1.5% FOAM
STEGLATRO 15 MG TABLET	ZIOPTAN 0.0015% EYE DROP
STEGLATRO 5 MG TABLET	ZIOPTAN 0.0015% EYE DROPS
STEGLUJAN 15-100 MG TABLET	ZOLMITRIPTAN 2.5MG NASAL SPRAY
STEGLUJAN 5-100 MG TABLET	ZOLMITRIPTAN 5 MG NASAL SPRAY
SYMPROIC 0.2 MG TABLET	ZOMIG 2.5 MG NASAL SPRAY
TAFLUPROST 0.0015% EYE DROP	ZOMIG 5 MG NASAL SPRAY
TEMPO WELCOME KIT	ZOVIRAX 5% CREAM
TEST STRIPS (OTHER THAN ABBOTT, ONE TOUCH)	ZYCLARA 2.5% CREAM PUMP
THALITONE 15 MG TABLET	ZYCLARA 3.75% CREAM
TOSYMRA 10 MG NASAL SPRAY	ZYCLARA 3.75% CREAM PUMP
TUDORZA PRESSAIR 400 MCG INH	ZYPITAMAG 2 MG TABLET
TUDORZA PRESSAIR 400 MCG INHAL	ZYPITAMAG 4 MG TABLET
ULTRAVATE 0.05% LOTION	
VENLAFAXINE BES ER 112.5 MG TB	
VENLAFAXINE HCL ER 150 MG TAB	
VENLAFAXINE HCL ER 225 MG TAB	
VENLAFAXINE HCL ER 37.5 MG TAB	
VENLAFAXINE HCL ER 75 MG TAB	
VERDESO 0.05% FOAM	
VRAYLAR 1.5 MG CAPSULE	
VRAYLAR 3 MG CAPSULE	
VRAYLAR 4.5 MG CAPSULE	
VRAYLAR 6 MG CAPSULE	
VUMERITY DR 231 MG CAPSULE	

Please submit completed PA and Step Therapy forms to:

Pharmacy Help Desk

Mail to: 165 Court Street, Rochester, NY 14647

Fax: 1 (800) 956-2397

Phone: 1 (800) 499-1275