

# Prior Authorization Program Information

Current 10/1/18

Newly marketed prescription medications may not be covered until the Pharmacy & Therapeutics Committee has had an opportunity to review the medication to determine if the medication will be covered and if so, which tier will apply based on safety, efficacy, and the availability of other products within that class of medications. The current list of newly marketed drugs can be found on our [New to Market Drug list](#).

For drugs covered at the pharmacy, Florida Blue prefers electronic prior authorization requests through [CoverMyMeds](#) – a free ePA service that allows prescribers to submit and check the status of a PA request electronically. [CoverMyMeds](#) can also be used for PA reviews for self-administered specialty drugs if AllianceRx Walgreens Prime is the dispensing pharmacy.

Specialty medications intended to be filled by Caremark Specialty pharmacy should not be requested through CoverMyMeds. Use the Caremark Specialty enrollment form to begin the PA process for those cases.

## Important:

- Prior Authorization requirements may vary. Certain drugs may not be covered by certain member plans.
- Refer to the member's individual policy for inclusion in the PA program and medication guide for determination of coverage.
- Member cost share may be higher for [self-administered specialty drugs](#) not obtained at an in-network specialty pharmacy.
- If you are enrolled in our Provider Administered Drug Program (PADP) and wish to buy and bill a drug on this list, please refer to the [PADP section](#) of our online provider manual for a current list of drugs included.
- [CoverMyMeds](#) can be utilized instead of standard fax forms for any of the drugs below associated with a [CoverMyMeds ePA](#) link. Visit <https://www.covermymeds.com/main/> to register or complete a PA request.
- If you have questions or need further assistance after consulting this table, call our Provider Contact Center or the number on the back of your insurance card.

Therapeutic Category	Drugs Included in Program*	Links
Alternate Prior Auth program	All drugs rejecting with "alternate PA program" message	
Antifungals	Cresamba, Ertaczo, Exelderm, Jublia, Kerydin, Lamisil granules, Noxafil, Onmel, Oxistat, Sporanox (itraconazole), Terbinex, Vfend (voriconazole)	<a href="#">Authorization Form</a> <a href="#">CoverMyMeds ePA</a>
Allergy	Grastek, Oralair, Odactra, Ragwitek	
Chelating Agents (medical)	BAL in oil, Calcium EDTA, Edetate Calcium Disodium	1-800-955-5692
Chelating Agents (pharmacy)	Chemet, Cuprimine, Depen, Syprine	
Cholesterol Lowering	Praluent, Repatha	<a href="#">AllianceRx Walgreens Prime authorization form</a>
Colony Stimulating Factors	Aranesp, Epogen, Fulphila, Granix, Leukine, Mircera, Mozobil, Neulasta, Neulasta OnPro, Neumega, Neupogen, Nplate, Procrit, Promacta, Retacrit, Zarxio  Procrit is preferred over Aranesp and Epogen	<a href="#">Caremark Specialty enrollment form</a>  If obtaining drug from other source, call 1-800-955-5692
Compounded Medications	All compounded medications	<a href="#">Authorization Form</a>
Enzyme Therapies & Metabolic Agents	Brineura, Buphenyl, Cerdelga, Cerezyme, Crysvita, Cystadane <sup>2</sup> , Cystaran, Elaprase, Elelyso <sup>1</sup> , Fabrazyme <sup>1</sup> , Kanuma <sup>1</sup> , Kuvan, Lumizyme <sup>1</sup> , Mepsevii <sup>1</sup> , Myozyme, Naglazyme, Nityr, Orfadin <sup>2</sup> , Palynziq, Procysbi <sup>2</sup> , Ravicti, Ryplazim, Sucraid <sup>2</sup> , Vimizim, Vistogard <sup>2</sup> , Vpriv, Xiaflex, Xuriden <sup>2</sup> , Zavesca <sup>2</sup>  1. Authorized by Florida Blue 800-955-5692 2. Authorized by AllianceRx Walgreens Prime	<a href="#">AllianceRx Walgreens Prime authorization form</a>  <a href="#">Caremark Specialty enrollment form</a>  If obtaining drug from other source, call 1-800-955-5692

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Therapeutic Category	Drugs Included in Program*	Links
Fertility Agents	Bravelle, Ceprotin, Cetrotide, Ganirelix, Gonal-F, Follistim, Luveris, Menopur, Novarel, Ovidrel, Pregnyl, Repronex  Requires fertility benefit for coverage (Requiere beneficio de fertilidad para obtener cobertura)	1-800-955-5692
Gastrointestinal/ Genitourinary	Duexis, Vimovo, Yosprala Amitiza, Linzess, Lotronex ( <b>alose tron</b> ), Movantik, Trulance, Xifaxan, Viberzi Cialis 2.5 mg and 5 mg tablets, Elmiron	<a href="#">Authorization Form</a>  <a href="#">CoverMyMeds ePA</a>
Glucose Test Strips	All strips except Bayer Contour products	
Growth Hormones and related	Egrifta, Gattex, Genotropin, Humatrope, Increlex, Macrilen, Myalept <sup>1</sup> , Norditropin, Nutropin, Nutropin AQ, Omnitrope, Saizen, Serostim, Tev-Tropin, Zomacton, Zorbtive  Norditropin is our preferred agent in this class  1. Authorized by AllianceRx Walgreens Prime	<a href="#">AllianceRx Walgreens Prime authorization form</a>  <a href="#">Caremark Specialty enrollment form</a>  If obtaining drug from other source, call 1-800-955-5692
Hemophilia Factors	Advate, Adynovate, Afstyla, Alphanate, Alphanine SD, Alprolix, Bebulin VH, Benefix, Coagdex, Corifact, Elocate, Feiba NF, Feiba VH Immuno, Helixate FS, Hemlibra, Hemofil M, Humate-P, Idelvion, Ixinity, Koate-DVI, Kogenate FS, Kovaltry, Monoclate-P, Mononine, NovoSeven, NovoSeven RT, Nuwiq, Obizur, Octanate, Profilnine SD, Rebinyn, Recombinate, ReFacto, Rixubis, Tretten, Vonvendi, Wilate, Xyntha  Caremark Specialty is our preferred Specialty Pharmacy for Hemophilia factors	<a href="#">Caremark Specialty enrollment form</a>  If obtaining drug from other source, call 1-800-955-5692
Hepatitis C	Copegus, Daklinza, Epclusa, Harvoni, Mavyret, Olysio, Pegasys, Pegasys ProClick, Peg-Intron, Rebetol, RibaPak Ribasphere, RibaTab, ribavirin oral tabs and caps, Sovaldi, Vosevi, Zepatier	<a href="#">AllianceRx Walgreens Prime authorization form</a>
Hereditary Angioedema	Berinert, Cinryze, Firazyr, Haegarda, Kalbitor, Ruconest	<a href="#">Caremark Specialty enrollment form</a>
Hormones and anabolic agents (medical benefit)	Aveed, Delatestryl ( <b>testosterone enanthate</b> ), Depo-Provera, Depo-SubQ Provera, Kyleena, Makena, progesterone in oil, Testopel	If obtaining drug from other source, call 1-800-955-5692
Hormones and anabolic agents (pharmacy benefit)	Anadrol, Androderm, Androgel 1% ( <b>testosterone gel</b> ), Androgel 1.62%, Android ( <b>methyltestosterone</b> ), Androxy ( <b>fluoxymesterone</b> ), Axiron ( <b>testosterone topical solution</b> ), Bio-T-Gel, danazol, Fortesta, Methitest, Natesto, Oxandrin ( <b>oxandrolone</b> ), Striant, Testim, Testred ( <b>methyltestosterone</b> ), Vogelxo  Androgel 1.62% is the preferred brand topical androgen	<a href="#">Authorization Form</a> - select Androgens Anabolic Steroids  <a href="#">CoverMyMeds ePA</a>
Immunomodulators	Actemra, Actemra SC, Amjevita, Cimzia, Cimzia prefilled syringe, Cosentyx, Dupixent, Enbrel, Enbrel Mini, Entyvio, Erelzi, Humira, Ilumya, Inflectra, Kevzara, Kineret <sup>1</sup> , Olumiant, Orenicia, Orenicia autoinjector, Orenicia subcutaneous, Otezla, Remicade, Rituxan, SilliQ, Simponi, Simponi Aria, Stelara, Taltz, Tremfya, Xeljanz, Xeljanz XR  1. Authorized by AllianceRx Walgreens Prime	<a href="#">AllianceRx Walgreens Prime authorization form</a>  <a href="#">Caremark Specialty enrollment form</a>
Immune Globulins	Bivigam, Carimune NF, Cuvitru, Flebogamma, GamaSTAN S/D, Gammagard, Gammagard S/D, Gammagard S/D Less IgA, Gammaked, Gammaplex, Gamunex, Gamunex-C, Hizentra, Hyqvia, Octagam, Panglobulin, Plygam, Privigen, Vivaglobin	If obtaining drug from other source, call 1-800-955-5692

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Therapeutic Category	Drugs Included in Program*	Links
Insulin	Afrezza, Apidra, Humalog, Humalog Mix50/50, Humalog Mix75/25, Humulin R U-100, Humulin 70/30, Humulin N	
Migraine	Aimovig	<a href="#">Authorization Form</a>
Miscellaneous (pharmacy)	Aldara, Baxdela, Bunavail, Carac ( <b>fluorouracil cream</b> ), Duzallo, Efudex, estradiol 10mg vaginal tablet (generic Vagifem), Fluoroplex ( <b>fluorouracil cream</b> ), Hettioz, Lovaza ( <b>omega-3-acid ethyl esters</b> ), Lucemyra, Mephyton, Nascobal, Northera, Picato ( <b>ingenol gel</b> ), Relistor, Sensipar, Sivextro (oral, only), Solaraze ( <b>diclofenac gel</b> ), Tolak ( <b>fluorouracil cream</b> ), Vascepa, Zubsolv, Zurampic, Zyclarla ( <b>imiquimod cream</b> )	<a href="#">CoverMyMeds ePA</a>
Miscellaneous (medical and specialty pharmacy)	Actimmune, Arcalyst, Benlysta, Benlysta SC, Botox, Cholbam <sup>1</sup> , Daraprim <sup>1</sup> , Defitelio, Doptelet, Dysport, Emlaza <sup>1</sup> , Endari, Epidiolex, Ergomar <sup>1</sup> , Evzio <sup>1</sup> , Exondys 51 <sup>2</sup> , Hettioz, HP Acthar gel, Ilaris, Impavido, Injectafer, Juxtapid <sup>2</sup> , Jynarque, Keveyis <sup>1</sup> , Korlym <sup>1</sup> , Krystexxa, Kynamro, Myobloc, Natpara, Ocaliva, Photrexa, Photrexa Viscous, Probuquine, Radicava, Sandostatin LAR depot, Signifor <sup>1</sup> , Signifor LAR <sup>2</sup> , Sinuva, Soliris, Somatuline Depot, Spinraza <sup>2</sup> , Strensiq <sup>1</sup> , Sublocade, Tavalisse, Thiola <sup>1</sup> , Vistogard, Xeomin, Xermelo, Xyrem <sup>1</sup> , Zilretta  1. Authorized by Alliance Rx Walgreens Prime 2. Authorized by Florida Blue 800-955-5692	<a href="#">AllianceRx Walgreens Prime authorization form</a>  <a href="#">Caremark Specialty enrollment form</a>  If obtaining drug from other source, call 1-800-955-5692
Multiple Sclerosis	Ampyra, Avonex, Aubagio, Betaseron, Copaxone ( <b>glatiramer</b> ), Copaxone 40, Extavia, Gilenya, Glatopa, Lemtrada, Ocrevus, Plegridy, Rebif, Rebif Rebidose, Tecfidera, Tysabri, Zinbryta	
Nausea and Vomiting	Aloxi, Cinvanti, Emend for injection, Sustol, Varubi for injection	<a href="#">AllianceRx Walgreens Prime authorization form</a>  <a href="#">Caremark Specialty enrollment form</a>  If obtaining drug from other source, call 1-800-955-5692
	Akynzeo, Bonjesta, Diclegis, Sancuso	<a href="#">Authorization Form</a>
Neurology	Nuedexta	<a href="#">CoverMyMeds ePA</a>
	Apokyn, Austedo <sup>1</sup> , Ingrezza, Nuplazid, Xenazine ( <b>tetrabenazine</b> )  1. Authorized by AllianceRx Walgreens Prime	
Oncology (specialty pharmacy)	Afinitor, Afinitor Disperz, Alecensa, Alunbrig, Bosulif, Braftovi, Cabometyx, Caprelsa <sup>1</sup> , Cometriq <sup>1</sup> , Cotelllic, Erleada, Gilotrif <sup>1</sup> , Gleevec ( <b>imatinib</b> ), Erivedge, Farydak, Hycamtin oral, Ibrance, Iclusig <sup>1</sup> , Idhifa, Imbruvica <sup>1</sup> , Inlyta, Iressa <sup>1</sup> , Jakafi, Kisqali, Kisqali-Femara, Lenvima <sup>1</sup> , Lonsurf, Lynparza <sup>1</sup> , Mekinist, Mektovi, Nerlynx, Nexavar, Ninlaro, Odomzo, Intron A, Pomalyst, Revlimid, Rubraca, Rydapt, Sprycel, Stivarga, Sutent, Tafinlar, Tagrisso, Tarceva, Targretin, Tassigna, Temodar, Thalomid, Tretinoin (oral), Tykerb, Venclexta <sup>1</sup> , Verzenio, Votrient, Xalkori, Xeloda, Xtandi, Yonsa, Zejula <sup>1</sup> , Zelboraf, Zolanza, Zydelig <sup>1</sup> , Zykadia, Zytiga  1. Authorized by AllianceRx Walgreens Prime	<a href="#">AllianceRx Walgreens Prime authorization form</a>  <a href="#">Caremark Specialty enrollment form</a>  If obtaining drug from other source, call 1-800-955-5692
Oncology	Abraxane <sup>1</sup> , Adcetris, Alimta, Aliqopa, Arzerra, Avastin, Bavencio, Beleodaq, Bendamustine	<a href="#">AllianceRx Walgreens Prime</a>

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Therapeutic Category	Drugs Included in Program*	Links
(medical)	<p>RTD, Bendeka, Besponsa, Blincyto, Cyramza<sup>2</sup>, Darzalex, Docefrez, Doxil, doxorubicin liposomal, Eligard, Elitek, Eloxatin, Empliciti, Erbitux, Erwinaze, Evomela, Folutyn, Fusilev (<b>levoleucovorin</b>), Ganirelix<sup>1</sup>, Gazyva, Halaven, Herceptin, Imlygic, Intron A, Jevtana<sup>1</sup>, Kadcylla, Keytruda, Kymriah, Kyprolis, Lartruvo, Lipodox, Lupaneta Pack, Lupron (<b>leuprolide</b>), Lupron Depot, Mylotarg, Onivyde, Opdivo, Perjeta, Poteligeo, Portrazza, Rituxan, Rituxan Hycela, Supprelin LA, Sylvant, Synribo<sup>1</sup>, Taxotere (<b>docetaxel</b>), Tecentriq, Torisel, Treanda, Trelstar Depot, Trelstar LA, Triptodur, Unituxin, Vantas<sup>1</sup>, Vectibix, Velcade, Viadur<sup>1</sup>, Vidaza<sup>1</sup>, Vyxeos, Xgeva, Xofigo, Yervoy, Yescarta, Yondelis, Zaltrap, Zevalin, Zinplava, Zoladex</p> <p>1. Available through Diplomat if drug replacement 2. Available through Biologics if drug replacement</p>	<p><a href="#">authorization form</a></p> <p><a href="#">Caremark Specialty enrollment form</a></p> <p>If obtaining drug from other source, call 1-800-955-5692</p>
Ophthalmic	<p>Provenge</p> <p>Restasis, Xiidra</p>	<p>1-800-955-5692</p> <p><a href="#">Authorization Form</a></p> <p><a href="#">CoverMyMeds ePA</a></p>
Osteoporosis	<p>Eylea, Iluvien, Lucentis, Luxturna, Macugen, Ozurdex, Retisert, Visudyne</p> <p>Boniva injection, Forteo, Prolia, Reclast, Tymlos, Zometa</p>	<p><a href="#">AllianceRx Walgreens Prime authorization form</a></p> <p><a href="#">Caremark Specialty enrollment form</a></p> <p>If obtaining drug from other source, call 1-800-955-5692</p>
Pain	<p>Abstral, Actiq, Fentora, <b>fentanyl citrate transmucosal/lollipop</b>, Lazanda, Onsolis, Subsys</p> <p><b>lidocaine ointment 5%, lidocaine patch</b>, Lidoderm, Synera</p> <p><u>Extended Release (Long-Acting) Opioids:</u> Arymo ER, Avinza, Belbuca, Butrans, Conzip, Duragesic, Embeda, Exalgo, <b>fentanyl transdermal patch</b>, <b>hydromorphone ER</b>, Hysingla ER, Kadian, <b>morphine sulfate ER</b>, Morphabond ER, MS Contin, Nucynta ER, Opana ER, Opana ER Crush Resistant, Oramorph SR, OxyContin, <b>oxymorphone SR</b>, Roxybond, Ryzolt, <b>tramadol ER</b>, Ultram ER, Xartemis XR, Xtampza ER, Zohydro ER, Zohydro ER abuse deterrent</p> <p><u>Immediate Release (Short-Acting) Opioids:</u> <b>acetaminophen/caffeine/dihydrocodeine</b>, <b>acetaminophen/codeine</b>, Allzital, Analgesic LQ, Bupap, <b>butalbital/acetaminophen</b>, <b>butalbital/acetaminophen/caffeine</b>, <b>butalbital/acetaminophen/caffeine/codeine</b>, <b>butalbital/aspirin/codeine</b>, <b>butorphanol</b>, <b>codeine sulfate</b>, Capital and Codeine, Demerol, Dilaudid, Dolophine, Endocet, Esjic, Fioricet w/Codeine, Fiorinal w/Codeine, Hycet, <b>hydrocodone/acetaminophen</b>, <b>hydrocodone/ibuprofen</b>, <b>hydromorphone</b>, Ibudone, LevoDromoran, <b>levorphanol</b>, Lortab, <b>meperidine</b>, <b>meperidine/promethazine</b>, <b>methadone</b>, Methadose, <b>morphine</b>, Nalocet Norco, Nucynta, Opana, Orbivan, Oxaydo, <b>oxycodone</b>, <b>oxycodone/acetaminophen</b>, <b>oxycodone/aspirin</b>, <b>oxycodone/ibuprofen</b>, <b>oxymorphone</b>, Panlor DC, <b>pentazocine/naloxone</b>, Percocet, Percodan, Primlev, Reprexain, Roxicodone, Roxicet, <b>tramadol</b>, <b>tramadol/acetaminophen</b>, Trezix, Tylenol w/codeine, Ultram, Ultracet, Vicoprofen, Xodol, Zamicet</p>	<p><a href="#">Authorization Form</a></p> <p><a href="#">CoverMyMeds ePA</a></p>

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Therapeutic Category	Drugs Included in Program*	Links
Pulmonary	Adcirca, Adempas, Aralast, Cinqair, Esbriet, Fasenra, Flolan ( <b>epoprostenol</b> ), Glassia, Letairis, Nucala, Ofev, Opsumit, Orenitram, Prolastin, Prolastin-C, Prloastin-C Liquid, Remodulin, Revatio oral ( <b>sildenafil</b> ), Revatio intravenous, Synagis, Tracleer, Tyvaso, Upravi, Veletri, Ventavis, Xolair, Zemaira  Sildenafil use required prior to Adcirca or Revatio	<a href="#">AllianceRx Walgreens Prime authorization form</a>  <a href="#">Caremark Specialty enrollment form</a>
	Kalydeco <sup>1</sup> , Orkambi <sup>1</sup> , Symdeko  1. Authorized by AllianceRx Walgreens Prime	If obtaining drug from other source, call 1-800-955-5692
Stimulants	Adderall, Adderall XR, Adzenys ER, Adzenys XR ODT, Aptensio XR, Concerta, Cotempla XR-ODT, Daytrana, Desoxyn, Dexedrine, Dyanavel XR, Evekeo, Focalin, Focalin XR, Intuniv, Kapvay, Metadate CD, Metadate ER, Methylin, Mydayis, Procentra, Quillichew ER, Quillivant XR, Ritalin, Ritalin LA, Ritalin SR, Strattera, Vyvanse, Zenzedi  Program only applies to members $\geq 18$ years of age; requires use of generic product prior to brand	<a href="#">Authorization Form</a>  <a href="#">CoverMyMeds ePA</a>

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