

Prior Authorization Program Information

Current 7/1/20

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.

Drugs included in our Prior Authorization Program are reviewed based on medical necessity criteria for coverage. Drugs with step therapy requirements may be covered if a prior health plan paid for the drug – documentation of a paid claim may be required.

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 [Alternate PA Program Summary]	
Antifungals	Albenza, Cresemba, Emverm, Ertaczo, Exelder, Jublia, Kerydin, Noxafil, Onmel, Oxistat, Sporanox (itraconazole), Terbinex, Vfend (voriconazole)	Authorization Form CoverMyMeds ePA
Allergy (pharmacy)	Grastek, Oralair, Odactra, Ragwitek	
Allergy (specialty pharmacy, medical)	Palforzia	AllianceRx Walgreens Prime authorization form Caremark Specialty enrollment form If obtaining drug from other source, call 1-800-955-5692
Cardiovascular Agents (pharmacy)	Altprev, Crestor, Ezallor, Flolipid, Lescol, Lescol XL, Livalo, Lipitor, Lovaza (omega-3-acid ethyl esters), Mevacor, Praluent, Pravachol, Repatha, Vascepa, Vytorin, Zocor, Zypitamag	Authorization Form CoverMyMeds ePA
Cardiovascular Agents (specialty pharmacy)	Juxtapid ¹ , Kynamro, Vyndaqel, Vyndamax, 1. Authorized by Florida Blue 800-955-5692	AllianceRx Walgreens Prime authorization form Caremark Specialty enrollment form If obtaining drug from other source, call 1-800-955-5692
Chelating Agents (medical)	BAL in oil, Calcium EDTA, Edetate Calcium Disodium	1-800-955-5692
Chelating Agents (pharmacy)	Chemet, Cuprimine, Depen, Syprine	

* Important information on page 1

<p>Colony Stimulating Factors</p>	<p>Aranesp, Cablivi, Doptelet, Epogen, Fulphila, Granix, Leukine, Mircera, Mozobil, Mulpleta, Neulasta, Neulasta OnPro, Neumega, Neupogen, Nivestym, Nplate, Procrit, Promacta, Retacrit, Udenyca, Zarxio, Ziextenzo</p> <p>Procrit and Retacrit are preferred over Aranesp and Epogen. Nivestym and Zarxio are preferred over Neupogen and Granix.</p>	<p>AllianceRx Walgreens Prime authorization form</p> <p>Caremark Specialty enrollment form</p> <p>If obtaining drug from other source, call 1-800-955-5692</p>
<p>Compounded Medications</p>	<p>All compounded medications</p>	<p>Authorization Form</p>
<p>Enzyme Therapies & Metabolic Agents</p>	<p>Brineura, Buphenyl, Cerdelga, Cerezyme, Crystvita, Cystadane², Cystaran, Elaprase, Elelyso¹, Fabrazyme¹, Firdapse, Galafold, Kanuma¹, Kuvan, Lumizyme¹, Mepsevii¹, Myozyme, Naglazyme, Nityr, Orfadin², Palynziq, Procysbi², Ravicti, Revcovi, Ruzurgi, Ryplazim, Sucraid², Vimizim, Vistogard², Vpriv, Xiaflex, Xuriden², Zavesca² (miglustat)</p> <p>1. Authorized by Florida Blue 800-955-5692 2. Authorized by AllianceRx Walgreens Prime</p>	<p>AllianceRx Walgreens Prime authorization form</p> <p>Caremark Specialty enrollment form</p> <p>If obtaining drug from other source, call 1-800-955-5692</p>
<p>Fertility Agents</p>	<p>Bravelle, Ceprotin, Cetrotide, Ganirelix, Gonal-F, Follistim, Luveris, Menopur, Novarel, Ovidrel, Pregnyl, Repronex</p> <p>Requires fertility benefit for coverage</p>	<p>1-800-955-5692</p>
<p>Gastrointestinal/ Genitourinary</p>	<p>Duexis, Vimovo, Yosprala</p> <p>Amitiza, Linzess, Lotronex (alosetron), Motegrity, Movantik, Trulance, Xifaxan, Viberzi, Zelnorm</p> <p>Elmiron</p>	<p>Authorization Form</p> <p>CoverMyMeds ePA</p>
<p>Glucose Test Strips</p>	<p>All strips except Bayer Contour products</p>	
<p>Growth Hormones and related</p>	<p>Egrifta, Gattex, Genotropin, Humatrope, Increlex, Macrilen, Myalept¹, Norditropin, Nutropin, Nutropin AQ, Omnitrope, Saizen, Serostim, Tev-Tropin, Zomacton, Zorbtive</p> <p>Norditropin is our preferred agent in this class</p> <p>1. Authorized by AllianceRx Walgreens Prime</p>	<p>AllianceRx Walgreens Prime authorization form</p> <p>Caremark Specialty enrollment form</p> <p>If obtaining drug from other source, call 1-800-955-5692</p>
<p>Hemophilia Factors/Blood Clotting Products</p>	<p>Advate, Adynovate, Afstyla, Alphanate, Alphanine SD, Alprolix, Bebulin VH, Benefix, Coagdex, Corifact, Elocate, Esperoct, Feiba NF, Feiba VH Immuno, Fibryga, Helixate FS, Hemlibra, Hemofil M, Humate-P, Idelvion, Ixinity, Jivi, Koate-DVI, Kogenate FS, Kovaltry, Monoclate-P, Mononine, NovoSeven, NovoSeven RT, Nuwiq, Obizur, Octanate, Profilnine SD, Rebinyn, Recombinate, ReFacto, Riastap, Rixubis, Tretten, Vonvendi, Wilate, Xyntha</p> <p>Caremark Specialty is our preferred Specialty Pharmacy for Hemophilia factors</p>	<p>Caremark Specialty enrollment form</p> <p>If obtaining drug from other source, call 1-800-955-5692</p>
<p>Hepatitis C</p>	<p>Copegus, Daklinza, Eplclusa (sofosbuvir-velpatasvir), Harvoni (ledipasvir-sofosbuvir), Mavyret, Olysio, Pegasys, Pegasys ProClick, Peg-Intron, Sovaldi, Vosevi, Zepatier</p>	<p>AllianceRx Walgreens Prime authorization form</p>
<p>Hereditary Angioedema</p>	<p>Berinert, Cinryze, Firazyr (icatibant), Haegarda, Kalbitor, Ruconest, Takhzyro</p>	<p>Caremark Specialty enrollment form</p>
<p>Hormones and Anabolic Agents (medical and specialty pharmacy)</p>	<p>Aveed, Delatestryl, Depo-Provera, Depo-SubQ Provera, Kyleena, Makena, progesterone in oil, Testopel</p>	<p>If obtaining drug from other source, call 1-800-955-5692</p>
<p>Hormones and Anabolic Agents (pharmacy)</p>	<p>Anadrol, Androderm, Androgel 1% (testosterone gel), Androgel 1.62%, Android (methyltestosterone), Androxy (fluoxymesterone), Axiron (testosterone topical solution), Bio-T-Gel, danazol, Fortesta, Jatenzo, Methitest, Natesto, Oxandrin (oxandrolone), Striant, Testim, Testred (methyltestosterone), Vogelxo</p>	<p>Authorization Form - select Androgens Anabolic Steroids</p> <p>CoverMyMeds ePA</p>

* Important information on page 1

<p>Immunomodulators</p>	<p>Abrilada, Actemra, Actemra SC, Amjevita, Avsola, Cimzia, Cimzia prefilled syringe, Cosentyx, Cyltezo, Dupixent, Enbrel, Enbrel Mini, Entyvio, Erelzi, Eticovo, Hadlima, Humira, Hyrimoz, Ilumya, Inflectra, Ixifi, Kevzara, Kineret¹, Olumiant, Orencia, Orencia autoinjector, Orencia subcutaneous, Otezla, Remicade, Renflexis, Rinvoq, Rituxan, Skyrizi, Siliq, Simponi, Simponi Aria, Stelara, Taltz, Tremfya, Truxima, Xeljanz, Xeljanz XR 1. Authorized by AllianceRx Walgreens Prime</p>	<p>AllianceRx Walgreens Prime authorization form Caremark Specialty enrollment form If obtaining drug from other source, call 1-800-955-5692</p>
<p>Immune Globulins</p>	<p>Asceniv, Bivigam, Carimune NF, Cutaquig, Cuvitru, Flebogamma, GamaSTAN S/D, Gammagard, Gammagard S/D, Gammagard S/D Less IgA, Gammaked, Gammplex, Gamunex, Gamunex-C, Hizentra, Hyqvia, Octagam, Panglobulin, Panzyga, Plygam, Privigen, Vivaglobin, Xembify</p>	<p>AllianceRx Walgreens Prime authorization form Caremark Specialty enrollment form If obtaining drug from other source, call 1-800-955-5692</p>
<p>Insulin</p>	<p>Admelog, Afrezza, Apidra, Humalog, Humalog Junior Kwikpen, Humalog Kwikpen U200, Humalog Mix 50/50, Humalog Mix 75/25, Humulin R U-100, Humulin 70/30, Humulin N, Insulin Lispro, Insulin Lispro Kwikpen Fiasp, Novolin R, NovoLog, Novolin N, Novolin 70/30, NovoLog 70/30 are preferred insulin products and do not require prior authorization.</p>	<p>Authorization Form CoverMyMeds ePA</p>
<p>Migraine (pharmacy)</p>	<p>Aimovig, Ajovy, Ammerge, Axert (almotriptan), Emgality, Frova (frovatriptan), Imitrex, Imitrex STATdose, Nurtec, Maxalt, Onzetra Xsail, Quedexy XR (topiramate ER), Relpax, sumatriptan, Sumavel, Tosymra, Treximet, Trokendi XR, Ubrelvy, Zembrace, Zomig, Zomig ZMT</p>	<p>AllianceRx Walgreens Prime authorization form Caremark Specialty enrollment form</p>
<p>Migraine (medical)</p>	<p>Vyepti</p>	<p>AllianceRx Walgreens Prime authorization form Caremark Specialty enrollment form If obtaining drug from other source, call 1-800-955-5692</p>
<p>Miscellaneous (pharmacy)</p>	<p>Aldara, Ampyra, Baxdela, Bunavail, Carac (fluorouracil cream), Consensi, Efudex, estradiol 10 mg vaginal tablet (generic Vagifem), etonogestrel/ethinyl estradiol (generic Nuvaring), Fluoroplex (fluorouracil cream), ivermectin cream (generic Soolantra), Lucemyra, Mephyton, Nascobal, Northera, Orilissa, Picato (ingenol gel), Prudoxin (doxepin cream 5%), Qbrexza, Relistor, Sensipar, Sivextro (oral tablet only), Solaraze (diclofenac gel), Sunosi, Tolak (fluorouracil cream), Zonalon (doxepin cream 5%), Zubsolv, Zyclara (imiquimod cream)</p>	<p>Authorization Form CoverMyMeds ePA</p>
<p>Miscellaneous (medical and specialty pharmacy)</p>	<p>Actimmune, Adakveo, Arcalyst, Benlysta, Benlysta SC, Botox, Cholbam¹, Daraprim¹, Defitelio, Dysport, Egaten, Emflaza¹, Endari, Epidiolex, Ergomar¹, Evzio¹, Exondys 51², Gamifant, Givlaari, Hettioz, HP Acthar gel, Ilaris, Impavido, Inbriji, Injectafer, Jynarque, Keveyis¹, Korlym¹, Krystexxa, Monoferric, Myobloc, Natpara, Ocaliva, Oxbryta, Photrexa, Photrexa Viscous, Probuphine, Radicava, Reblozyl, Sandostatin LAR depot, Scenesse, Signifor¹, Signifor LAR², Sinuva, Soliris, Somatuline Depot, Spinraza², Spravato², Strensiq¹, Sublocade, Tavalisse, Thiola¹, Thiola EC¹, Tiglutik, Triferic AVNU, Ultomiris, Vistogard, Vyondys 53², Wakix, Xeomin, Xermelo, Xyrem¹, Zilretta, Zolgensma², Zulresso² 1. Authorized by Alliance Rx Walgreens Prime 2. Authorized by Florida Blue 800-955-5692</p>	<p>AllianceRx Walgreens Prime authorization form Caremark Specialty enrollment form If obtaining drug from other source, call 1-800-955-5692</p>
<p>Multiple Sclerosis</p>	<p>Avonex, Aubagio, Betaseron, Copaxone (glatiramer), Copaxone 40, Extavia, Gilenya, Glatopa, Lemtrada, Mavenclad, Mayzent, Ocrevus, Plegridy, Rebif, Rebif Rebidose, Tecfidera, Tysabri, Vumerity, Zeposia, Zinbryta</p>	<p></p>

* Important information on page 1

Nausea and Vomiting	Aloxi, Cinvanti, Emend for injection, Sustol, Varubi for injection	AllianceRx Walgreens Prime authorization form Caremark Specialty enrollment form If obtaining drug from other source, call 1-800-955-5692
	Akynzeo, Bonjesta, Diclegis, Sancuso	Authorization Form
Neurology	Nuedexta, Quedexy XR (topiramate ER), Trokendi XR,	CoverMyMeds ePA
	Apokyn, Austedo ¹ , Epidiolex, Ingrezza, Nourianz, Nuplazid, Onpattro, Tegsedi, Xenazine (tetrabenazine) 1. Authorized by AllianceRx Walgreens Prime	
Oncology (specialty pharmacy)	Afinitor, Afinitor Disperz, Alecensa, Alunbrig, Ayvakit, Balversa, Bosulif, Braftovi, Brukinsa, Cabometyx, Caprelsa ¹ , Cometriq ¹ , Copiktra, Cotellic, Daurismo, Erleada, Gilotrif ¹ , Gleevec (imatinib), Erivedge, Farydak, Hycamtin oral, Ibrance, Iclusig ¹ , Idhifa, Imbruvica ¹ , Inlyta, Inrebic, Iressa ¹ , Jakafi, Kisqali, Kisqali-Femara, Lenvima ¹ , Lonsurf, Lorbrena, Lynparza ¹ , Mekinist, Mektovi, Nerlynx, Nexavar, Nubeqa, Ninlaro, Odomzo, Intron A, Piqray, Pomalyst, Revlimid, Rozlytrek, Rubraca, Rydapt, Sprycel, Stivarga, Sutent, Tafinlar, Tagrisso, Talzena, Tarceva (erlotinib), Targretin, Tasigna, Tazverik, Temodar, Thalomid, Tibsovo, Tretinoin (oral), Turalio, Tykerb, Venclexta ¹ , Verzenio, Vitrakvi, Vizimpro, Votrient, Xalkori, Xeloda, Xospata, Xpovio, Xtandi, Yonsa, Zejula ¹ , Zelboraf, Zolanza, Zydelig ¹ , Zykadia, Zytiga (abiraterone) 1. Authorized by AllianceRx Walgreens Prime	AllianceRx Walgreens Prime authorization form Caremark Specialty enrollment form If obtaining drug from other source, call 1-800-955-5692
Oncology (medical)	Abraxane ¹ , Adcetris, Alimta, Aliqopa, Arzerra, Asparlas, Avastin, Bavencio, Beleodaq, Bendamustine RTD, Bendeka, Besponsa, Blincyto, Cyramza ² , Darzalex, Docefrez, Doxil, doxorubicin liposomal, Eligard, Elitek, Eloxatin, Elzonris, Empliciti, Enhertu, Erbitux, Erwinaze, Evomela, Folutyn, Fusilev (levoleucovorin), Ganirelix ¹ , Gazyva, Halaven, Herceptin, Herceptin Hylecta, Herzuma, Imlygic, Infugem, Intron A, Jevtana ¹ , Kadcyca, Kanjinti, Keytruda, Khapzory, Kymriah, Kyprolis, Lartruvo, Libtayo, Lipodox, Lumoxiti, Lupaneta Pack, Lupron (leuprolide), Lupron Depot, Mylotarg, Mvasi, Ogivri, Onivyde, Ontruzant, Opdivo, Padcev, pemetrexed , Pemfexy, Perjeta, Polivy, Poteligeo, Portrazza, Rituxan, Rituxan Hycela, romidepsin , Ruxience, Sarclisa, Supprelin LA, Sylvant, Synribo ¹ , Taxotere (docetaxel), Tecentriq, Torisel, Trazimera, Treanda, Trelstar Depot, Trelstar LA, Triptodur, Truxima, Unituxin, Vantas ¹ , Vectibix, Velcade, Viadur ¹ , Vidaza ¹ , Vyxeos, Xgeva, Yervoy, Yescarta, Yondelis, Zaltrap, Zevalin, Zirabev, Zinplava, Zoladex 1. Available through Diplomat if drug replacement 2. Available through Biologics if drug replacement	AllianceRx Walgreens Prime authorization form Caremark Specialty enrollment form If obtaining drug from other source, call 1-800-955-5692
	Provenge	1-800-955-5692
Ophthalmic	Cequa, Restasis, Xiidra	Authorization Form CoverMyMeds ePA
	Beovu, Eylea, Iluvien, Lucentis, Luxturna, Macugen, Oxervate, Ozurdex, Retisert, Tepezza, Visudyne, Yutiq	AllianceRx Walgreens Prime authorization form
Osteoporosis	Boniva injection, Bonsity, Evenity, Forteo, Prolia, Reclast, teriparatide , Tymlos, Zometa	Caremark Specialty enrollment form If obtaining drug from other source, call 1-800-955-5692
Pain	Abstral, Actiq, Fentora, fentanyl citrate transmucosal/lollipop , Lazanda, Onsolis, Subsys	Authorization Form
	lidocaine ointment 5% , lidocaine patch , Lidoderm, Pliaglis, Synera, ZTlido	CoverMyMeds ePA

* Important information on page 1

	<p><u>Extended Release (Long-Acting) Opioids:</u> Arymo ER, Avinza, Belbuca, Butrans, Conzip, Duragesic, Embeda, Exalgo, fentanyl transdermal patch, hydromorphone ER, Hysingla ER, Kadian, morphine sulfate ER, Morphabond ER, MS Contin, Nucynta ER, Opana ER, Opana ER Crush Resistant, OxyContin, oxymorphone SR, Ryzolt, tramadol ER, Ultram ER, Xartemis XR, Xtampza ER, Zohydro ER, Zohydro ER abuse deterrent</p>	
	<p><u>Immediate Release (Short-Acting) Opioids:</u> acetaminophen/caffeine/dihydrocodeine, acetaminophen/codeine, Allzital, Analgesic LQ, Apadaz, Bupap, butalbital/acetaminophen, butalbital/acetaminophen/caffeine, butalbital/acetaminophen/caffeine/codeine, butalbital/aspirin/codeine, butorphanol, codeine sulfate, Demerol, Dilaudid, Dolophine, Endocet, Esgic, Fioricet w/Codeine, Fiorinal w/Codeine, Hycet, hydrocodone/acetaminophen, hydrocodone/ibuprofen, hydromorphone, Ibudone, LevoDromoran, levorphanol, Lortab, meperidine, meperidine/promethazine, methadone, Methadose, morphine, Nalocet, Norco, Nucynta, Opana, Orbivan, Oxaydo, oxycodone, oxycodone/acetaminophen, oxycodone/aspirin, oxycodone/ibuprofen, oxymorphone, Panlor DC, pentazocine/naloxone, Percocet, Percodan, Primlev, Reprexain, Roxicodone, Roxicet, tramadol, tramadol/acetaminophen, Trezix, Tylenol w/codeine, Ultram, Ultracet, Vicoprofen, Xodol, Zamicet</p>	
Pulmonary (pharmacy)	Zyflo CR	<p>Authorization Form</p> <p>CoverMyMeds ePA</p>
Pulmonary (medical and specialty pharmacy)	<p>Adcirca (tadalafil 20 mg), Adempas, Alyq, Aralast, Cinqair, Esbriet, Fasenna, Fasenna Pen, Flolan (epoprostenol), Glassia, Letairis, Nucala IV and SQ, Ofev, Opsumit, Orenitram, Prolastin, Prolastin-C, Prloastin-C Liquid, Remodulin, Revatio oral (sildenafil), Revatio intravenous, Synagis, Tracleer, Tyvaso, Upravi, Veletri, Ventavis, Xolair, Zemaira</p> <p>Sildenafil use required prior to Adcirca or Revatio</p>	<p>AllianceRx Walgreens Prime authorization form</p> <p>Caremark Specialty enrollment form</p>
	<p>Kalydeco¹, Orkambi¹, Symdeko, Trikafta</p> <p>1. Authorized by AllianceRx Walgreens Prime</p>	<p>If obtaining drug from other source, call 1-800-955-5692</p>
Radiopharmaceuticals	Azedra, Lutathera, Metastron, Quadramet, Xofigo	<p>AllianceRx Walgreens Prime authorization form</p> <p>Caremark Specialty enrollment form</p> <p>If obtaining drug from other source, call 1-800-955-5692</p>
Stimulants	<p>Adderall, Adderall XR, Adhansia XR, Adzenys ER, Adzenys XR ODT, Aptensio XR, Concerta, Cotempla XR-ODT, Daytrana, Desoxyn, Dexedrine, Dexedrine Spansule, Dyanavel XR, Evekeo, Evekeo ODT, Focalin, Focalin XR, Intuniv, Jornay PM, Kapvay, Metadate CD, Metadate ER, Methylin, Mydayis, Procentra, Quillichew ER, Quillivant XR, Ritalin, Ritalin LA, Ritalin SR, Strattera, Zenedi</p> <p>Program only applies to members ≥18 years of age; requires use of generic product prior to brand</p>	<p>Authorization Form</p> <p>CoverMyMeds ePA</p>

* Important information on page 1