

Prior authorization – Premium Value

Utilization management updates
Jan. 1, 2023



Prior authorization (PA) requires your doctor to tell us why you are taking a medication to determine if it will be covered under your pharmacy benefit. Some medications must be reviewed because they may:

- Only be approved or effective for safely treating specific conditions.
- Cost more than other medications used to treat the same or similar conditions.

The following medications require a PA for coverage.

This means we need more information from your doctor to see if you can get coverage for your medication.

Getting a short-term supply

If you must take a medication that requires prior authorization right away, there are two options that may work for you. First, ask your doctor if a sample is available. Or, check with your pharmacy to request a short-term supply of 5 days or less. Keep in mind, you will be responsible for the full cost at that time. If the prior authorization request is approved, then your pharmacist can fill the rest of your prescription.

If you see your medication listed, we encourage you to talk with your doctor about your treatment and medication options. If you have questions about the PA process, call the phone number on your member ID card.

Premium Value non-specialty prior authorization list

Therapy class	Medication name	Quantity limit
Anti-infectives		
Anthelmintics	albendazole	None
Antifungals	CRESEMBA (isavuconazonium)	None
	itraconazole	None
	voriconazole	None
Antimalarial	quinine sulfate	None
Antiretrovirals, HIV	SELZENTRY (maraviroc)	None
	TROGARZO (ibalizumab-uiyk)	None
Cardiology		
Antilipemic	REPATHA (evolocumab)	3 syringes/28 days
	REPATHA PUSH (evolocumab)	1 cartridge/28 days
Heart failure	VERQUVO (vericiguat)	1 tab/day
Miscellaneous	phenoxybenzamine	None
Central nervous system		
Analgesics (opioid)	buprenorphine patch	4 patches/28 days
	fentanyl citrate lozange	4 lozenges/day
	fentanyl transdermal patch	15 patches/30 days
	fentanyl transdermal patch 75 mcg/hr, 100 mcg/hr	30 patches/30 days
	hydrocodone cap ER	2 caps/day
	hydrocodone cap ER 50 mg	4 caps/day
	hydromorphone tab ER	2 tabs/day
	methadone	None
	morphine sulfate ER beads	1 cap/day
	morphine sulfate ER beads 120 mg	2 caps/day
	morphine sulfate ER cap	2 caps/day
	morphine sulfate ER tab	3 tabs/day
	oxycodone ER	4 tabs/day
	oxymorphone ER	4 tabs/day
	tramadol tab ER	1 tab/day
Anticonvulsants	clobazam	None
	rufinamide	None
	SYMPAZAN (clobazam)	None
Antitussives (PA age <18)	hydrocodone/chlorpheniramine ER susp	240 mL/fill, 2 fills/60 days
	promethazine/phenylephrine/codeine	240 mL/fill, 2 fills/60 days
	promethazine/codeine	240 mL/fill, 2 fills/60 days
Migraine	AIMOVIG (erenumab-aooe) 140 mg/ml	1 syringe/30 days
	AIMOVIG (erenumab-aooe)	2 syringes/30 days
	AJOVY (fremanezumab-vfrm)	3 syringe/90 days
	dihydroergotamine	24 ampules/28 days
	dihydroergotamine nasal spray	8 vials/30 days
	EMGALITY (galcanezumab-gnlm) 100 mg	3 syringes/auto-injectors/30 days
	ergotamine w/caffeine	24 tabs/28 days
	NURTEC (rimegepant)	8 tabs/30 days
Miscellaneous	riluzole	2 tabs/day
	TIGLUTIK (riluzole)	20 mL/day
Neurotoxins	BOTOX (onabotulinumtoxinA)	None

Therapy class	Medication name	Quantity limit
	DYSPORT (abobotulinumtoxinA)	None
	MYOBLOC (rimabotulinumtoxinB)	None
	XEOMIN (incobotulinumtoxinA)	None
Stimulants	armodafinil	1 tab/day
	armodafinil 50 mg	2 tabs/day
	modafinil	1 tab/day
Weight loss	benzphetamine	None
	diethylpropion	None
	phendimetrazine	None
	phentermine	None
	WEGOVY (semaglutide)	4 pens/28 days
Dermatology		
Acne (oral)	ACCUTANE (isotretinoin)	None
	AMNESTEEM (isotretinoin)	None
	CLARAVIS (isotretinoin)	None
	isotretinoin	None
	MYORISAN (isotretinoin)	None
	ZENATANE (isotretinoin)	None
Acne (topical)	adapalene	None
	ALTRENO (tretinoin)	None
	tazarotene	None
	tretinoin	None
	tretinoin microsphere gel	None
Endocrinology & metabolism		
Androgens, testosterone (oral)	oxandrolone 2.5 mg	8 tabs/day
	oxandrolone 10 mg	2 tabs/day
Androgens, testosterone (injectable)	testosterone cypionate	None
	testosterone enanthate	None
Androgens, testosterone (topical)	ANDRODERM (testosterone)	None
	testosterone gel	None
	testosterone soln	None
Antidiabetic agents	SYMLINPEN (pramlintide)	None
Diabetic supplies	CONTINUOUS BLOOD GLUCOSE SYSTEM RECEIVER	None
	CONTINUOUS BLOOD GLUCOSE SYSTEM SENSOR	None
	CONTINUOUS BLOOD GLUCOSE SYSTEM TRANSMITTER	None
GLP-1 agonist	BYDUREON (exenatide)	4 injectors/28 days
	BYDUREON BCISE (exenatide)	4 injectors/28 days
	OZEMPIC INJ 2 mg/1.5ML (semaglutide)	1 pen (1.5 mL)/28 days
	OZEMPIC INJ 2 mg/1.5ML (semaglutide)	2 pens (3 mL)/28 days
	OZEMPIC INJ 4 mg/3ML (semaglutide)	1 pen (3ml)/28 days
	OZEMPIC INJ 8 mg/3ML (semaglutide)	1 pen (3ml)/28 days
	RYBELSUS (semaglutide)	2 boxes (60 tablets)/365 days
	RYBELSUS (semaglutide)	1 tab/day
	TRULICITY (dulaglutide)	4 pen-injectors/28 days
VICTOZA (liraglutide)	3 pen-injectors/30 days	
Gastroenterology		
Antiemetics	dronabinol	2 caps/day
Irritable bowel syndrome	alosetron	None

Therapy class	Medication name	Quantity limit
Miscellaneous		
Calcium modifier	cinacalcet	None
Toxicology	deferasirox	None
Viscosupplements	DUROLANE (sodium hyaluronate)	None
	EUFLEXXA (sodium hyaluronate)	None
	GELSYN-3 (sodium hyaluronate)	None
Respiratory		
Asthma/COPD	DALIRESP (roflumilast)	None

Premium Value specialty prior authorization list

Therapy class	Medication name	Quantity limit
Anti-infectives		
Antibiotic	ARIKAYCE (amikacin sulfate liposone)	None
Antiprotozoals	pyrimethamine	None
Antivirals	PREVYMIS (letermovir)	None
Cardiology		
Antilipemic	JUXTAPID (lomitapide)	1 tab/day
	JUXTAPID (lomitapide) 20 mg, 30mg	2 tabs/day
Hemostatic	BERINERT (c1 esterase)	10 vials/30 days
	CINRYZE (c1 esterase)	None
	HAEGARDA (c1 esterase)	None
	icatibant	6 syringes/30 days
	KALBITOR (ecallantide)	6 vials/30 days
	RUCONEST (c1 esterase)	8 vials/30 days
Pulmonary arterial hypertension	ADEMPAS (riociguat)	3 tabs/day
	ALYQ (tadalafil)	2 tabs/day
	ambrisentan	1 tab/day
	bosentan	2 tabs/day
	epoprostenol	None
	OPSUMIT (macitentan)	1 tab/day
	ORENITRAM (treprostinil diolamine)	None
	sildenafil soln	None
	sildenafil susp	2 bottles/30 days
	sildenafil tab	3 tabs/day
	TRACLEER (bosentan) tabs for susp	4 tabs/day
	treprostinil	None
	TYVASO (treprostinil)	1 ampule/day
	UPTRAVI (selexipag)	2 tabs/day
	UPTRAVI (selexipag) pack	2 packs/365 days
VENTAVIS (iloprost)	9 ampules/day	
von Willebrand factor-directed antibody	CABLIVI (caplacizumab-yhdp)	1 kit/day
Central nervous system		
Anticonvulsants	DIACOMIT (stiripentol)	None
	EPIDIOLEX (cannabidiol)	None
	vigabatrin	None
Depressant	XYREM (sodium oxybate)	3 bottles (540 mL)/30 days
Miscellaneous	RADICAVA (edaravone) Soln	None
Musculoskeletal agents	FIRDAPSE (amifampridine phosphate)	None
Neurological agents	TEGSEDI (inotersen)	None
Parkinson's	INBRIJA (levodopa)	None
	KYNMOBI (apomorphine)	5 films/day
	KYNMOBI (apomorphine) titration kit	2 kits/365 days
Dermatology		
Alkylating agents	VALCHLOR (mechlorethamine) Gel	None
Alpha-melanocyte stimulating hormone analog	SCENESSE (afamelanotide acetate)	None

Therapy class	Medication name	Quantity limit
Electrolyte & renal agents		
Diuretics	KEVEYIS (dichlorphenamide)	4 tabs/day
Endocrinology & metabolism		
Cyclic pyranopterin monophosphate (cPMP) substrate replacement therapy	NULIBRY (fosdenopterin)	None
Farnesyltransferase inhibitor	ZOKINVY (lonafarnib)	4 caps/day
Gonadotropins	ELIGARD (leuprolide) 22.5 mg (3-month)	1 injection/84 days
	ELIGARD (leuprolide) 30 mg (4-month)	1 injection/112 days
	ELIGARD (leuprolide) 45 mg (6-month)	1 injection/168 days
	ELIGARD (leuprolide) 7.5 mg (1-month)	1 injection/28 days
	FENSOLVI (leuprolide)	1 injection/168 days
	FIRMAGON (degarelix) 120 mg	2 vials/365 days
	FIRMAGON (degarelix) 80 mg	1 vial/28 days
	leuprolide 1 mg/0.2 mL	None
	LUPANETA KIT (leuprolide) 11.25 mg (3-month)	1 pack/84 days
	LUPANETA KIT (leuprolide) 3.75 mg (1-month)	1 pack/28 days
	LUPRON DEPOT (leuprolide)	None
	LUPRON DEPOT-PED (leuprolide)	None
	SUPPRELIN LA (histrelin acetate)	1 kit/365 days
	TRELSTAR (triptorelin) 22.5 mg (6-month)	1 injection/168 days
	TRELSTAR (triptorelin) 3.75 mg (1-month)	1 injection/28 days
	TRELSTAR (triptorelin) 11.25 mg (3-month)	1 injection/84 days
TRIPTODUR (triptorelin)	1 injection/168 days	
VANTAS (histrelin)	1 implant/365 days	
Growth hormones and related therapy	EGRIFTA SV (tesamorelin)	1 vial (2 mg each)/day
	GENOTROPIN (somatropin)	None
	NORDITROPIN (somatropin)	None
Growth hormones and related therapy (acromegaly)	INCRELEX (mecasermin)	None
	SOMAVERT (pegvisomant)	None
Hormone modifiers	MYALEPT (metreleptin)	None
	NATPARA (parathyroid hormone)	2 cartridges/28 days
Hyperammonemia agents	carglumic acid	None
Miscellaneous	ACTHAR/CORTROPHIN (corticotropin)	None
Osteoporosis	PROLIA (denosumab)	2 syringes/365 days
	TERIPARATIDE (teriparatide)	None
	TYMLOS (abaloparatide)	None
Somatostatins	octreotide	None
	SIGNIFOR (pasireotide)	2 ampules/day
	SOMATULINE DEPOT (lanreotide)	None
Vasopressin antagonist	tolvaptan	2 tabs/day
Enzyme-related		
Alpha-1 proteinase inhibitor	ARALAST (alpha-1 proteinase inhibitor)	None
	GLASSIA (alpha-1 proteinase inhibitor)	None
	PROLASTIN-C (alpha-1 proteinase inhibitor)	None
	ZEMAIRA (alpha-1 proteinase inhibitor)	None
Cystine-depleting agents	CYSTADROPS (cysteamine)	4 bottles/28 days
	CYSTARAN (cysteamine)	4 bottles/28 days
Enzyme replacement	BUPHENYL (sodium phenylbutyrate)	None

Therapy class	Medication name	Quantity limit
	CERDELGA (eliglustat)	None
	CEREZYME (imiglucerase)	None
	ELAPRASE (idursulfase)	None
	ELELYSO (taliglucerase)	None
	FABRAZYME (agalsidase beta)	None
	KANUMA (sebelipase alfa)	None
	LUMIZYME (alglucosidase alfa)	None
	MEPSEVII (vestronidase alfa)	None
	NAGLAZYME (galsulfase)	None
	miglustat	None
	REVCOVI (elapegedemase-lvlr)	None
	STRENSIQ (asfotase alfa)	None
	VIMIZIM (elosulfase)	None
	VPRIV (velaglucerase)	None
	XURIDEN (uridine triacetate)	4 packets/day
	Metabolic agents	NITYR (nitisinone)
ORFADIN (nitisinone)		None
Phenylketonuria treatment agents	sapropterin	None
	PALYNZIQ (pegvaliase-pqpz) 10 mg/0.5 mL	1 syringe/day
	PALYNZIQ (pegvaliase-pqpz) 2.5 mg/0.5 mL	8 syringes/28 days
	PALYNZIQ (pegvaliase-pqpz) 20 mg/mL	2 syringes/day
Gastroenterology		
Bile acid agents	CHOLBAM (cholic acid)	None
Diarrhea	XERMELO (telotristat ethyl)	3 tabs/day
Hepatic agents	OCALIVA (obeticholic acid)	1 tab/day
Short bowel syndrome	GATTEX (teduglutide)	None
Hematology		
Hemolytic anemia	PYRUKYND (mitapivat)	2 tabs/day
	PYRUKYND (mitapivat) pack	1 tab/day
Sickle cell disease	ADAKVEO (crizanlizumab)	None
Immunology		
Complement inhibitor	ENJAYMO (sutimlimab-jome)	None
Hematopoietic agents	ARANESP (darbepoetin alfa)	None
	DOPTELET (avatrombopag)	None
	LEUKINE (sargramostim)	None
	MOZOBIL (plerixafor)	8 vials (9.6 mL)/transplant
	NEULASTA (pegfilgrastim)	None
	NPLATE (romiplostim)	None
	PROCRIPT (epoetin alfa)	None
	PROMACTA (eltrombopag)	None
	REBLOZYL (luspatercept)	None
	RETACRIT (epoetin alfa-epbx)	None
	SOLIRIS (eculizumab)	None
	TAVALISSE (fostamatinib)	None
ZARXIO (filgrastim)	None	
Hepatitis C agents	EPCLUSA (sofosbuvir-velpatasvir)	1 tab or pack/day
	EPCLUSA (sofosbuvir-velpatasvir) pellet pack 200-50 mg	2 packs/day
	HARVONI (ledipasvir-sofosbuvir) tab and pellet pack 90-400 mg, 33.75-150mg	1 tab or pack/day

Therapy class	Medication name	Quantity limit
	HARVONI (ledipasvir-sofosbuvir) tab and pellet pack 45-200 mg	2 tab or pack/day
	MAVYRET (glecaprevir-pibrentasvir)	3 tabs/day
	MAVYRET (glecaprevir-pibrentasvir) pellet pack	5 pack/day
	PEGASYS (peginterferon alfa-2a)	None
	PEG-INTRON (peginterferon alfa-2b)	None
	VOSEVI (sofosbuvir-velpatasvir)	1 tab/day
	ZEPATIER (elbasvir-grazoprevir)	1 tab/day
Immune globulins	BIVIGAM (immune globulin)	None
	CARIMUNE NF (immune globulin)	
	CUVITRU (immune globulin)	None
	CYTOGAM (cytomegalovirus immune globulin)	None
	FLEBOGAMMA DIF (immune globulin)	None
	GAMASTAN (immune globulin)	None
	GAMMAGARD (immune globulin)	None
	GAMMAKED (immune globulin)	None
	GAMMAPLEX (immune globulin)	None
	GAMUNEX-C (immune globulin)	None
	HIZENTRA (immune globulin)	None
	HYQVIA (hyaluron immune globulin)	None
	OCTAGAM (immune globulin)	None
	PRIVIGEN (immune globulin)	None
Immunomodulators	ACTEMRA (tocilizumab)	None
	AVSOLA (infliximab-axxq)	None
	CIBINQO (abrocitinib)	None
	CIMZIA (certolizumab)	None
	ENBREL (etanercept)	None
	ENTYVIO (vedolizumab)	None
	HUMIRA (adalimumab)	None
	INFLECTRA (infliximab)	None
	KINERET (anakinra)	None
	ORENCIA (abatacept)	None
	OTEZLA (apremilast)	None
	RINVOQ (upadacitinib)	None
	SIMPONI (golimumab)	None
	SKYRIZI (risankizumab-rzaa)	None
	STELARA (ustekinumab)	None
	STELARA (ustekinumab) inj	1 unit/56 days
	TALTZ (ixekizumab)	None
	TREMFYA (guselkumab)	None
	XELJANZ (tofacitinib)	None
	XELJANZ XR (tofacitinib)	None
Interleukins	ARCALYST (rilonacept)	None
	ILARIS (canakinumab)	2 vials/28 days
Miscellaneous	ACTIMMUNE (interferon gamma-1b)	None
	BENLYSTA (belimumab)	None
	CRYSVITA (burosumab-twza)	None
Monoclonal antibody	CINQAIR (reslizumab)	None
	DUPIXENT (dupilumab)	4 syringes/28 days

Therapy class	Medication name	Quantity limit
	DUPIXENT (dupilumab) 100 mg/0.67ml	2 syringes/28 days
	FASENRA (benralizumab)	None
	GAMIFANT (emapalumab-lzsg)	None
	NUCALA (mepolizumab)	3 vials/28 days
	NUCALA (mepolizumab)	1 syringe/28 days
	XOLAIR (omalizumab)	None
Multiple sclerosis	AUBAGIO (teriflunomide)	1 tab/day
	AVONEX (interferon beta-1a)	1 kit (4 syringes)/28 days
	BETASERON (interferon beta-1b)	1 package/28 days
	dalfampridine	2 tabs/day
	dimethyl fumarate	2 caps/day
	dimethyl fumarate starter pack	2 starter packs/365 days
	GILENYA (fingolimod)	1 cap/day
	GLATOPA (glatiramer) 20 mg/ml	1 syringe/day
	GLATOPA (glatiramer) 40 mg/ml	12 syringes/28 days
	LEMTRADA (alemtuzumab)	None
	mitoxantrone	None
	OCREVUS (ocrelizumab)	40 mL/365 days
	TYSABRI (natalizumab)	1 injection /28 days
	ZEPOSIA (ozanimod)	1 cap/day
ZEPOSIA 7DAY CAP STR PACK (ozanimod)	2 starter packs/365 days	
ZEPOSIA STARTER KIT (ozanimod)	2 starter packs/365 days	
Miscellaneous		
Collagenase	XIAFLEX (collagenase clostridium histolyticum)	None
Movement disorder agents	AUSTEDO (deutetrabenazine)	4 tabs/day
	tetrabenazine	None
Toxicology	CLOVIQUE (trientine)	None
Obstetrics & gynecology		
Fertility agents	CETROTIDE (cetrotrelix)	None
	CHORIONIC GONADOTROPIN (chorionic gonadotropin)	None
	FOLLISTIM AQ (follitropin beta)	None
	MENOPUR (menotropins)	None
	NOVAREL (chorionic gonadotropin)	None
	OVIDREL (chorionic gonadotropin)	None
	PREGNYL (chorionic gonadotropin)	None
Hormone replacement	hydroxyprogesterone caproate	None
Oncology (injectable)		
Alkylating agents	BELRAPZO (bendamustine)	None
	BENDEKA (bendamustine)	None
	ZEPZELCA (lurbinectedin)	None
Antifolate	FOLOTYN (pralatrexate) Soln	None
	TECENTRIQ (atezolizumab)	None
Antimicrotubular	HALAVEN (eribulin)	None
	JEVTANA (cabazitaxel)	None
Interferons	INTRON A (interferon alfa-2b)	None
Kinase and molecular target inhibitors	ALIQOPA (copanlisib)	None
	bortezomib	None
	KYPROLIS (carfilzomib)	None

Therapy class	Medication name	Quantity limit
	PORTRAZZA (necitumumab)	None
	VYXEOS (daunorubicin-cytarabine)	None
	ZALTRAP (ziv-aflibercept)	None
Miscellaneous	BELEODAQ (belinostat)	None
	decitabine	None
	SYNRIBO (omacetaxine)	None
Monoclonal antibody	ADCETRIS (brentuximab)	None
	ARZERRA (ofatumumab)	None
	BLINCYTO (blinatumomab)	None
	CYRAMZA (ramucirumab)	None
	DARZALEX (daratumumab)	None
	EMPLICITI (elotuzumab)	None
	ENHERTU (fam-trastuzumab deruxtecan)	None
	ERBITUX (cetuximab)	None
	GAZYVA (obinutuzumab)	None
	HERCEPTIN (trastuzumab)	None
	IMFINZI (durvalumab)	None
	KADCYLA (ado-trastuzumab emtansine)	None
	KEYTRUDA (pembrolizumab)	None
	OPDIVO (nivolumab)	None
	PADCEV (enfortumab vedotin-ejfv)	None
	PERJETA (pertuzumab)	None
	POLIVY (polatuzumab vedotin-piiq)	None
	POTELIGEO (mogamulizumab-kpkc)	None
	RITUXAN (rituximab)	None
	RITUXAN HYCELA (rituximab-hyaluronidase)	None
	RUXIENCE (rituximab)	None
	SYLVANT (siltuximab)	None
	TRAZIMERA (trastuzumab-qyyp)	None
	UNITUXIN (dinutuximab)	None
XGEVA (denosumab)	None	
YERVOY (ipilimumab)	None	
T-cell receptor	KIMMTRAK (tebentafusp-tebn)	None
Vascular endothelial growth factor (VEGF) inhibitor	AVASTIN (bevacizumab)	None
	ZIRABEV (bevacizumab-bvzr)	None
Oncology (oral)		
Alkylating agents	temozolomide	None
Antiandrogen	ERLEADA (apalutamide)	None
	XTANDI (enzalutamide)	None
	YONSA (abiraterone)	None
Kinase and molecular target inhibitors	ALECENSA (alectinib)	None
	ALUNBRIG (brigatinib) 30 mg	4 tabs/day
	ALUNBRIG (brigatinib)	1 tab/day
	ALUNBRIG (brigatinib) Pack	1 pack/365 days
	BALVERSA (erdafitinib)	None
	BOSULIF (bosutinib)	None
	BRAFTOVI (encorafenib)	None
	CABOMETYX (cabozantinib s-malate)	None

Therapy class	Medication name	Quantity limit
	CALQUENCE (acalabrutinib)	None
	CAPRELSA (vandetanib)	None
	CAPRELSA (vandetanib) 100 mg	2 tabs/day
	COMETRIQ (carbozantinib)	None
	COPIKTRA (duvelisib)	None
	COTELLIC (cobimetnib)	None
	DAURISMO (glasdegib)	None
	ERIVEDGE (vismodegib)	None
	erlotinib	None
	erlotinib 25 mg	3 tabs/day
	everolimus	1 tab/day
	everolimus tab for susp	None
	FARYDAK (panobinostat)	None
	GAVRETO (pralsetnib)	None
	GILOTRIF (afatinib)	1 tab/day
	IBRANCE (palbociclib)	None
	ICLUSIG (ponatinib) 10 mg, 15 mg	1 tab/day
	ICLUSIG (ponatinib) 30 mg, 45 mg	None
	IDHIFA (enasidenib)	1 tab/day
	imatinib	None
	IMBRUVICA (ibrutinib)	1 tab or cap/day
	IMBRUVICA (ibrutinib) 140 mg	3 caps/day
	INLYTA (axitinib)	None
	IRESSA (gefitinib)	None
	JAKAFI (ruxolitinib)	None
	JAKAFI (ruxolitinib) 5mg, 10 mg	2 tabs/day
	KOSELUGO (selumetinib)	None
	lapatinib	None
	LENVIMA (lenvatinib)	None
	LORBRENA (lorlatinib)	None
	LYNPARZA (olaparib)	None
	MEKINIST (trametinib)	None
	MEKTOVI (binimetinib)	None
	NERLYNX (neratinib)	6 tabs/day
	NINLARO (ixazomib)	None
	ODOMZO (sonidegib)	None
	PIQRAY (alpelisib)	None
	QINLOCK (ripretinib)	None
	RETEVMO (selpercatinib)	None
	RYDAPT (midostaurin)	None
	sorafenib	None
	SPRYCEL (dasatinib)	None
	STIVARGA (regorafenib)	None
	sunitinib	None
	TAFINLAR (dabrafenib)	None
	TAGRISSO (osimertinib)	None
	TAGRISSO (osimertinib) 40 mg	1 tab/day
	TASIGNA (nilotinib)	None
	TUKYSA (tucatinib)	None

Therapy class	Medication name	Quantity limit
	TURALIO (pexidartinib)	None
	VENCLEXTA (venetoclax)	None
	VERZENIO (abemaciclib)	None
	VITRAKVI (larotrectinib)	None
	VIZIMPRO (dacomitinib)	None
	VOTRIENT (pazopanib)	None
	XALKORI (crizotinib)	None
	XOSPATA (gilteritinib)	None
	ZEJULA (niraparib)	None
	ZELBORAF (vemurafenib)	None
	ZYDELIG (idelalisib)	None
Miscellaneous	bexarotene caps	None
	capecitabine	None
	KISQALI (ribociclib)	None
	KISQALI FEMARA DOSE (ribociclib-letrozole) Pack	None
	LONSURF (trifluridine-tipiracil)	None
	ONUREG (azacitidine)	None
	TIBSOVO (ivosidenib)	None
	ZOLINZA (vorinostat)	None
Thalidomide-related agents	POMALYST (pomalidomide)	None
	REVLIMID (lenalidomide)	None
	THALOMID (thalidomide)	None
Oncology (topical)		
Skin Cancer	bexarotene gel	None
Ophthalmology		
Miscellaneous	OXERVATE (cenegermin-bkbj)	2 mL (2 vials)/day
Vascular endothelial growth factor (VEGF) inhibitor	EYLEA (aflibercept)	None
	LUCENTIS (ranibizumab)	None
Respiratory		
Cystic fibrosis	KALYDECO (ivacaftor)	None
	ORKAMBI (lumacaftor-ivacaftor)	4 tabs/day
	ORKAMBI (lumacaftor-ivacaftor) packets	2 packets/day
	PULMOZYME (dornase alfa)	None
	SYMDEKO (tezacaftor-ivacaftor)	2 tabs/day
	TRIKAFTA (elexacaftor-tezacaftor-ivacaftor)	3 tabs/day
Pulmonary fibrosis	ESBRIET (pirfenidone)	None
	OFEV (nintedanib)	None
Respiratory syncytial virus agents	SYNAGIS (palivizumab)	None
Miscellaneous	OXLUMO (lumasiran)	None

PLEASE NOTE: This drug list may have regular updates and may not include all medications. Drugs in this list include brand and generic and all dosage types unless noted. If a new drug is approved and falls into one of the targeted PA categories, the new drug may be automatically added to this list.



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