

Changes in Rx Coverage for Select Drugs as of July 1, 2021 (Will Not Affect Medicare, FEP Members)

Florida Blue coverage for the medical pharmacy drugs listed below will change on July 1, 2021. In addition, we are requiring prior authorization for Feraheme starting October 1. These changes do not affect members on Medicare or the Federal Employee Plan (FEP).

Ziextenzo (Pegfilgrastim-bmez) to Be Added to Preferred Status

Udenyca (Pegfilgrastim-cbqv) to Be Removed from Preferred Status

Starting July 1, 2021, Neulasta, Neulasta OnPro and Ziextenzo will be required before allowing coverage of other pegfilgrastim biosimilar products. Udenyca (pegfilgrastim-cbqv) will no longer be a preferred option. Patients with existing authorizations for Udenyca will be allowed to continue for the duration of their current authorization. This change only applies to our commercial members being newly initiated on treatment.

Preferred Pegfilgrastim Products	Non-Preferred Pegfilgrastim Products
Neulasta, Neulasta OnPro, Ziextenzo	Fulphila, Udenyca, Nyvepria

All pegfilgrastim products will continue to be subject to prior authorization requirements.

Avsola (Infliximab-axxq) and Inflectra (Infliximab-dyyb) to Be Added to Preferred Status

Starting July 1, 2021, Avsola and Inflectra will be preferred infliximab products alongside Remicade. Avsola, Inflectra, and Remicade will be required before allowing coverage of Renflexis. This change only applies to our commercial members being newly initiated on treatment.

Preferred infliximab products	Non-Preferred infliximab products
Avsola, Inflectra, Remicade	Renflexis

All infliximab products will continue to be subject to prior authorization requirements. If you have questions about these changes, please call our Provider Contact Center at 800-727-2227 and select **Authorizations and Referrals**.

Required Prior Authorization for Feraheme Delayed to October

Starting October 1, 2021, Feraheme will be added to our list of IV iron products that require prior authorization. Venofer, Ferrlecit and Infed **will remain as not** requiring prior authorization.

Covered IV Iron Products	
Prior Authorization Required 10/1/2021	No Prior Authorization Required
Feraheme, Injectafer, Monoferric	Ferrlecit, Infed, Venofer

Prior authorization for Feraheme can be requested by calling 800-955-5692. Prior authorization for Injectafer and Monoferric will still be requested through Magellan Rx.