Prior Authorization Program Information* Current 7/1/2015

*Please note that Prior Authorization requirements may vary and member benefits and contract will prevail. 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.

Member cost share may be higher for <u>self-administered specialty drugs</u> 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 <u>PADP section</u> of our online provider manual for a current list of drugs included.

Therapeutic Category	Drugs Included in Program*	Links
Antifungals	Ciclodan Kit, CNL8, Jublia, Kerydin, Lamisil (terbinafine), Noxafil, Pedipirox-4 Nail kit, Sporanox (itraconazole), Onmel, Penlac (ciclopirox nail lacquer), Terbinex, Vfend (voriconazole)	Authorization Forms (select Antifungal on the linked page)
Allergy	Grastek, Oralair, Ragwitek	Authorization Forms (select oral immunotherapy on the linked page)
Anti-Infectives (misc)	Xifaxan	Authorization Forms
	Sivextro (oral, only), Zyvox (oral only)	
Chelating agents	BAL in oil, Calcium EDTA, Edetate Calcium Disodium	1-800-955-5692
Cholesterol Lowering	Praluent, Repatha	Enrollment form if obtaining from Caremark Specialty
Colony Stimulating Factors	Aranesp, Epogen, Granix, Mircera, Mozobil, Neulasta, Neumega, Neupogen, Nplate, Procrit, Promacta, Zarxio Procrit is preferred over Aranesp and Epogen	Authorization form if obtaining from Prime
Enzyme Therapies/Metabolic Agents	Buphenyl ¹ , Cerdelga, Cerezyme, Cystadane ³ , Cystaran, Elelyso ² , Fabrazyme ¹ , Kuvan ¹ , Lumizyme ¹ , Orfadin ² , Procysbi ³ , Ravicti ¹ , Vimizim ¹ , Vpriv, Zavesca ²	Specialty Pharmacy or other If obtaining drug from other source Call 1-800-955-5692
	Not available at Prime Specialty pharmacy. Available through Caremark Specialty 2Authorized by Florida Blue 800-955-5692 and obtained from Centric Health 855-ELELYSO 3Authorized by Florida Blue 800-955-5692 and obtained from AnovoRx 844-288-5007	
Fertility Agents (requires fertility benefit for coverage)	Bravelle, Ceprotin, Cetrotide, Ganirelix, Gonal-F, Follistim, Luveris, Menopur, Novarel, Ovidrel, Pregnyl, Repronex	1-800-955-5692
Gastrointestinal/ Genitourinary	Amitiza, Fulyzaq, Linzess, Movantik	Authorization Forms
	Cialis 2.5mg and 5mg tablets	
Glucose Test Strips	All strips except Bayer Contour products	
	Gattex, Genotropin, Humatrope, Increlex ¹ , Myalept ² , Norditropin, Nutropin, Nutropin AQ, Omnitrope, Saizen, Serostim, Tev-Tropin, Zomacton, Zorbtive	Enrollment form if obtaining from Caremark Specialty
Growth Hormones and related	Norditropin is our preferred agent in this class	Authorization form if obtaining from Prime Specialty Pharmacy or other
	Not available at Prime Specialty pharmacy. Available through Caremark Specialty Authorized by Florida Blue 800-955-5692 and obtained from Accredo Health 877-ACCREDO	specialty Pharmacy or other pharmacy (select Growth Hormones on the linked page)

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Therapeutic Category	Drugs Included in Program*	Links
Growth Hormones and related (continued)	Egrifta	Call 1-800-955-5692
Hemophilia Factors	Advate, Alphanate, Alphanine SD, Alprolix, Bebulin VH, Benefix, Corifact, Eloctate, Feiba NF, Feiba VH Immuno, Helixate FS, Hemofil M, Humate-P, Koate-DVI, Kogenate FS, Monoclate-P, Mononine, Novoseven, Novoseven RT, Obizur, Profilnine SD, Recombinate, ReFacto, Rixubis, Tretten, Wilate, Xyntha Caremark Specialty is our preferred Specialty Pharmacy for Hemophilia factors	Enrollment form if obtaining from Caremark Specialty If obtaining drug from other source Call 1-800-955-5692
Hepatitis C	Copegus, Harvoni, Incivek, Pegasys, Pegasys ProClick, Peg-Intron, Olysio, Rebetol, RibaPak Ribasphere, RibaTab, ribavirin oral tabs and caps Sovaldi, Victrelis, Viekira	Enrollment form if obtaining from Caremark Specialty Authorization form if obtaining from Prime Specialty Pharmacy (select drug Hepatitis C on the linked page)
	Pegasys and Pegasys ProClick are preferred pegylated interferons for the treatment of Hepatitis C Harvoni is preferred over Viekira Pak	If obtaining drug from other source Call 1-800-955-5692
Hereditary Angioedema	Berinert, Cinryze ¹ , Firazyr, Kalbitor ¹ Ruconest 1. Not available at Prime Specialty pharmacy. Available through Caremark Specialty	Enrollment form if obtaining from Caremark Specialty Authorization form if obtaining from Prime Specialty Pharmacy If obtaining drug from other source Call 1-800-955-5692
Homozygous Familial Hypercholesterolemia	Juxtapid ¹ , Kynamro ² 1. authorized by Florida Blue 800-955-5692 accessed through Dohmen Life Sciences 866-336-1336 2. not available at Prime Specialty pharmacy and available at Caremark Specialty	Enrollment form if obtaining from Caremark Specialty
Hormones (medical benefit)	Aveed, Delatestryl (testosterone enanthate), Depo-Provera, Depo-Testosterone (testosterone cypionate), Makena, progesterone in oil, Testopel	Enrollment form if obtaining from Caremark Specialty Authorization form if obtaining from Prime Specialty Pharmacy (select Self-Administered androgens on the linked page)
Hormones (pharmacy benefit)	Androderm, Androgel, Androgel 1.62, Android, Androxy, Axiron, Bio-T-Gel, Delatestryl (testosterone enanthate), Depo Testosterone (testosterone cypionate), Fortesta, Methitest, Natesto, Striant, Testim, Testred, Vogelxo Androderm and Androgel are preferred topical androgens	Authorization Form (select Self-Administered androgens on the linked page)

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Therapeutic Category	Drugs Included in Program*	Links
Immunomodulators	Actemra, Actemra SC, Cimzia, Cimzia prefilled syringe, Cosentyx, Enbrel, Entyvio, Humira, Kineret ¹ , Orencia, Orencia subcutaneous, Otezla, Remicade, Rituxan, Simponi, Simponi Aria, Stelara, Xeljanz 1. Authorized by Prime, dispensed by Rx Connections 866-547-0644	Enrollment form if obtaining from Caremark Specialty Authorization form if from
Immune Globulins	Bivigam, Carimune NF, Flebogamma, GamaSTAN S/D, Gammagard, Gammagard S/D, Gammaked, Gammaplex, Gamunex, Gamunex-C, Hizentra, HyperRho SD, Hyqvia, MICRhoGAM, RhoGAM, Rhophylac, WinRho SDF, Octagam, Panglobulin, Plygam, Privigen, Vivaglobin	Prime Specialty Pharmacy If obtaining drug from other source Call 1-800-955-5692
Insulin	Afrezza, Apidra, Humalog, Humalog Mix50/50, Humalog Mix75/25, Humulin R U-100, Humulin 70/30, Humulin N	Authorization Forms
Miscellaneous	Relistor	Authorization Form
Miscellaneous	Arcalyst, Benlysta, Botox, Carticel, Cholbam, Dexferrum ¹ , Dysport, Ferrelicit ¹ , HP Acthar gel ¹ , Ilaris, Injectafer, Korlym ² , Myobloc, Natpara, Sandostatin LAR depot, Signifor ³ , Soliris ¹ , Somatuline Depot, Thiola, Venofer ¹ , Vivitrol, Xeomin	Enrollment form if obtaining from Caremark Specialty Authorization form if from Prime Specialty Pharmacy
	not available at Prime Specialty. Available at Caremark Specialty authorized by Florida Blue at 800-955-5692 and dispensed by Centric at 866-849-4481 authorized by Florida Blue at 800-955-5692 and dispensed by Accredo 877-ACCREDO	If obtaining drug from other source Call 1-800-955-5692
Multiple Sclerosis	Ampyra, Avonex, Aubagio, Betaseron, Copaxone (glatiramer), Copaxone 40, Extavia, Gilenya, Plegridy, Rebif, Rebif Rebidose, Tecfidera, Tysabri ¹ Betaseron and Rebif are our preferred interferons for the treatment of Multiple Sclerosis	Enrollment form if obtaining from Caremark Specialty Authorization form if from Prime Specialty Pharmacy or other pharmacy
	not available at Prime Specialty. Available at Caremark Specialty	If obtaining drug from other source Call 1-800-955-5692
Nausea Vomiting of Pregnancy	Diclegis	
Neurology	Xenazine	Authorization Forms
Oncology	Afinitor/Disperz, Bosulif, Caprelsa¹, Cometriq², Gilotrif³, Gleevec, Erivedge, Farydak, Hycamtin oral, Ibrance, Iclusig¹, Imbruvica¹, Inlyta, Jakafi, Lenvima¹, Lynparza¹, Mekinist, Nexavar, Pomalyst, Revlimid⁴, Sprycel, Stivarga, Sutent, , Tafinlar, Tarceva, Targretin, Tasigna, Temodar, Thalomid, Tretinoin (oral), Tykerb, Votrient, Xalkori, Xeloda, Xtandi, Zelboraf, Zolinza, Zydelig¹, Zykadia, Zytiga Zytiga preferred over Xtandi 1.authorized by Prime and dispensed by Biologics at 800-850-4306 2. authorized by Prime and dispensed by Diplomat at 877-977-9118 3. authorized by Florida Blue at 800-955-5692 and dispensed by Accredo at 877-ACCREDO 4. not available at Prime Specialty. Available through Caremark Specialty	Enrollment form if obtaining from Caremark Specialty Authorization form if obtaining from Prime Specialty Pharmacy If obtaining drug from other source Call 1-800-955-5692

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Therapeutic Category	Drugs Included in Program*	Links
Oncology (continued)	Abraxane ¹ , Adcetris, Alimta, Aloxi, Avastin, Cyramza, Docefrez, Doxil ³ , doxorubicin liposomal ³ , Eligard, Eloxatin, Erbitux, Erwinaze ² , Folotyn, Fusilev ³ , Ganirelix ¹ , Gazyva, Halaven, Herceptin, Jevtana ¹ , Kadcyla, Keytruda, Kyprolis, Lipodox ³ , Lupaneta, Lupron (leuprolide), Lupron Depot, Perjeta, Rituxan, Supprelin LA, Sylvant, Synribo ¹ , Taxotere (docetaxel), Torisel, Treanda, Trelstar Depot, Trelstar LA, Vantas ¹ , Vectibix, Velcade, Viadur ¹ , Vidaza ¹ , Xgeva, Xofigo, Yervoy, Zaltrap, Zoladex 1. not available at Prime Specialty. Available through Caremark Specialty authorized by Florida Blue at 800-955-5692 and dispensed by Accredo at 877-ACCREDO PA effective 4/1/15	Enrollment form if obtaining from Caremark Specialty Authorization form if obtaining from Prime Specialty Pharmacy If obtaining drug from other source Call 1-800-955-5692 Call 1-800-955-5692
Ophthalmic	Eylea, Lucentis, Macugen, Visudyne	Enrollment form if obtaining from Caremark Specialty If obtaining drug from other source Call 1-800-955-5692
Osteoporosis	Boniva injection, Forteo, Prolia, Reclast, Zometa	Enrollment form if obtaining from Caremark Specialty
Orthopedic	Gel-One, Euflexxa, Hyalgan, Monovisc, Orthovisc, Supartz, Synvisc, Synvisc One Viscosupplement drugs and are not considered medically necessary for commercial lines of business beginning 4/1/15	Authorization form if obtaining from Prime Specialty Pharmacy (for Orthopedic drugs select Viscosupplementation on the linked page) If obtaining drug from other source Call 1-800-955-5692
Orthostatic Hypotension	Northera	Authorization Form
Pain	Abstral, Actiq, Fentora, fentanyl citrate transmucosal/lollipop , Lazanda, Onsolis, Subsys Generic product use required before brand coverage	Authorization Form (select Fentanyl Oral/Nasal on the linked page)
	Bunavail, Subutex, Suboxone, Zubsolv	Authorization Form (select Buprenorphine on the linked page)

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Pulmonary	Adcirca, Adempas ¹ , Aralast ¹ , Esbriet, Flolan (epoprostenol) ¹ , Glassia, Letairis ¹ , Ofev, Opsumit ¹ , Orenitram, Prolastin, Prolastin-C, Remodulin ¹ , Revatio oral (sildenafil), Revatio intravenous ¹ , Synagis, Tracleer ¹ , Tyvaso ¹ , Veletri ¹ , Ventavis ¹ , Xolair ¹ , Zemaira ¹ sildenafil use required prior to Adcirca or Revatio 1.not available at Prime Specialty. Available at Caremark Specialty	Enrollment form if obtaining from Caremark Specialty Authorization form if obtaining from Prime Specialty Pharmacy
	Kalydeco ¹ Orkambi 1.not available at Prime Specialty. Available at Caremark Specialty	If obtaining drug from other source Call 1-800-955-5692
Sleep	Hetlioz Authorized by Prime and dispensed by Walgreens Specialty	Authorization Forms
Sedative/Hypnotics	Xyrem Authorized by Prime and dispensed by Express Scripts	
Stimulants	Adderall, Adderall XR, Aptensio XR, Concerta, Daytrana, Dexedrine, Desoxyn, Focalin, Focalin XR, Intuniv, Kapvay, Metadate CD, Metadate ER, Methylin, Procentra, Quillivant XR, Ritalin, Ritalin LA, Ritalin SR, Strattera, Vyvanse, Zenzedi program only applies to members ≥18 years of age program applies to generics where available	Authorization Form (select Attention Deficit Hyperactivity on the linked page)
	program requires generic use prior to brand use Nuvigil, Provigil (modafinil)	Authorization Form (select Provigil/Nuvigil on the linked page)

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