



These medications require prior authorization when covered under the member's Medical benefits and administered in a clinician's office, outpatient setting, or by the home infusion therapy provider. The requirement applies to commercial HMO, POS*, and Access Blue members* who have a Massachusetts-based primary care provider.

Policy 034 Medical Benefit Prior Authorization Medication List (As of 7/1/2020)

Drug Products	Effective Date
Actemra	1/1/2012
Actimmune**	10/1/2009
Adakveo	2/1/2020
Advate	10/1/2009
Adynovate	1/1/2017
Afstyla	1/1/2018
Alferon-N	10/1/2009
Alphanate	10/1/2009
AlphaNine SD	1/1/2013
Alprolix	7/1/2015
Aralast	10/1/2009
Aranesp**	10/1/2009
Bebulin VH	1/1/2013
BeneFIX	1/1/2013
Berinert	7/1/2019
Bivigam**	1/1/2013
Boniva infusion	10/1/2009
Botox**	10/1/2009
Buprenorphine Implant	3/1/2017
Carimune-NF**	10/1/2009

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Drug Products	Effective Date
Cerezyme	10/1/2009
Cimzia**	9/23/2011
Cinqair	7/1/2019
Cinryze	9/23/2011
Coagadex	1/1/2017
Corifact	1/1/2013
Cosentyx	10/1/2009
Cutaquig	11/1/2019
Cytogam**	7/1/2015
Durolane**	4/1/2018
Dysport injectable**	1/1/2011
Egrifta	7/1/2015
Elelyso	7/1/2015
Eloctate	7/1/2015
Enbrel**	10/1/2009
Entyvio	7/1/2015
Epogen**	10/1/2009
Erbitux	10/1/2009
Esperoct	7/1/2020
Euflexxa**	10/1/2009

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Drug Products	Effective Date
Evenity	8/1/2019
Exondys-51	9/1/2017
Eylea	1/1/2013
Fasenra	7/1/2019
Feiba NF	7/1/2015
Feiba VH Immuno	7/1/2015
Firazyr	7/1/2019
Flebogamma**	10/1/2009
Flebogamma Dif**	10/1/2009
Forteo**	10/1/2009
Gamifant	10/1/2009
Gammagard**	10/1/2009
Gammagard S/D**	10/1/2009
Gammaked**	1/1/2013
Gammaplex**	1/1/2013
Gamunex**	10/1/2009
Gamunex-C**	1/1/2013
Gel-one**	1/1/2013
Gel-Syn**	9/1/2017
Genotropin**	10/1/2009

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Drug Products	Effective Date
Genotropin Miniquick**	10/1/2009
Genvisc**	1/1/2017
Givlaari	2/1/2020
Glassia	7/1/2015
H.P. Acthar Gel	1/1/2012
Haegarda	7/1/2019
Helixate FS	10/1/2009
Hemlibra	7/1/2018
Hemofil M	10/1/2009
Hizentra**	1/1/2013
Humate-P	10/1/2009
Humatrope**	10/1/2009
Humira**	10/1/2009
Hyalgan**	10/1/2009
Hymovis**	1/1/2017
HyQvia	1/1/2013
ibandronate Sodium	7/1/2015
Icatibant	10/1/2009
Idelvion	1/1/2017
Ilaris**	1/1/2011

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Drug Products	Effective Date
Increlex**	10/1/2009
Infergen**	10/1/2009
Inflectra	7/1/2018
Intron A	10/1/2009
Ixinity	9/1/2017
Jivi	4/1/2019
Jetrea	8/1/2014
Kalbitor	7/1/2019
Kanuma	9/1/2017
Kcentra	7/1/2015
Kevzara	10/1/2009
Kineret**	10/1/2009
Koate-DVI	10/1/2009
Kogenate FS	10/1/2009
Kovaltry	9/1/2017
Lemtrada	10/1/2009
Lucentis	1/1/2013
Macugen	1/1/2013
Makena	1/1/2012
Monoclate-P	10/1/2009

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Drug Products	Effective Date
Mononine	7/1/2015
Monovisc	7/1/2015
Myalept	7/1/2015
Myobloc**	10/1/2009
Neulasta	7/1/2019
Neupogen	7/1/2019
Nivestym	3/1/2020
Norditropin**	10/1/2009
NovoEight	9/1/2017
NovoSeven RT	7/1/2015
NovoSeven	7/1/2015
Nucala	7/1/2019
Nutropin**	10/1/2009
Nutropin AQ**	10/1/2009
Nuwiq	1/1/2017
Obizur	9/1/2017
Octagam**	10/1/2009
Omnitrope**	10/1/2009
Onpattro	11/1/2018
Orencia	10/1/2009

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Drug Products	Effective Date
Orthovisc**	10/1/2009
Privigen**	10/1/2009
Procrit**	10/1/2009
Profilnine SD	7/1/2015
Profilnine	7/1/2015
Prolastin	10/1/2009
Prolia**	1/1/2012
Probuphine (Buprenorph Implant)	10/1/2009
Rebinyn	7/1/2018
Reblozyl	2/1/2020
Reclast	1/1/2014
Recombinate	10/1/2009
Regranex	1/1/2013
Remicade**	10/1/2009
Renflexis	7/1/2018
Retacrit	10/1/2009
RiaSTAP	7/1/2015
Rituxan	10/1/2009
Rixubis	7/1/2015
Ruconest	7/1/2019

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Drug Products	Effective Date
Saizen**	10/1/2009
Serostim**	10/1/2009
Siliq	10/1/2009
Simponi (IV formulation & SubQ***)	1/1/2011
Soliris	7/1/2020
Spinraza	1/1/2017
Stelara (IV formulation & SubQ***)	1/1/2011
Supartz**	10/1/2009
Sylatron	1/1/2012
Synagis	10/1/2009
Synjoynt	10/1/2019
Synvisc**	10/1/2009
Takhzyro	2/8/2019
Taltz	10/1/2009
Tegsedi	2/8/2019
Tepezza	4/1/2020
Tev-Tropin**	10/1/2009
Tremfya	1/1/2018
Tretten	7/1/2018
Triluron	10/1/2019

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Drug Products	Effective Date
Tysabri	10/1/2009
Tymlos	11/3/2017
Ultomiris	7/1/2020
Uplizna	8/1/2020
Vectibix	10/1/2009
Visco-3	3/1/2018
Vivaglobin	10/1/2009
Vonvendi	1/1/2017
VPRIV	7/1/2015
Vyondys-53	2/1/2020
Wilate	1/1/2013
Xembify	11/1/2019
Xeomin**	1/1/2012
Xgeva**	1/1/2012
Xiaflex	1/1/2013
Xolair	10/1/2009
Xyntha	10/1/2009
Zemaira	7/1/2015
zoledronic Acid	1/1/2014
Zomacton	9/1/2017

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Drug Products	Effective Date
Zometa	1/1/2014
Zorbtive**	10/1/2009

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