



MASSACHUSETTS

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Pharmacy Medical Policy Non-Covered Drug List

Table of Contents

- [Policy: Commercial](#)
- [Information Pertaining to All Policies](#)
- [Forms](#)
- [Policy: Medicare](#)

Policy Number: 433

BCBSA Reference Number: None

Related Policies

- [#434](#) Formulary Exception Form

Policy

Commercial Members: Managed Care (HMO and POS), PPO, and Indemnity

Note: All requests for outpatient retail pharmacy for indications listed and not listed on the medical policy guidelines may be submitted to BCBSMA Clinical Pharmacy Operations by completing the Prior Authorization Form on the last page of this document. Physicians may also call BCBSMA Pharmacy Operations department at (800)366-7778 to request a prior authorization/formulary exception verbally. Patients must have pharmacy benefits under their subscriber certificates.

Our Formulary

BCBSMA maintains a formulary, or a list of covered drugs. At this time, the BCBSMA formulary applies to most members of group HMO, PPO, POS, and indemnity products, and some members of Managed Blue for Seniors. It also applies to members of the direct-pay products HMO Blue-Direct and PPO Blue-Direct. At this time, the formulary does not apply to Medicare Advantage, Medex[®], direct-pay products such as Managed Major Medical, Comprehensive Managed Major Medical and certain Managed Blue for Seniors plans.

If a patient has a medical basis for a non-covered drug

In order to promote clinically appropriate and cost-effective prescription drug use, BCBSMA may require the use of BCBSMA formulary drugs prior to allowing benefit coverage for a non-formulary drug. Pharmacy benefits and coverage are generally not provided for non-formulary drugs because safe and effective prescription alternatives generally are available on the BCBSMA formulary. The BCBSMA formulary drugs, the covered alternatives in this policy, are used and accepted by regulatory, medical and pharmacy communities. If allowed with Formulary Exception request, the non-formulary drug coverage will be at the highest copayment level and terms as the Plan allows.

You can obtain a complete list of BCBSMA non-covered drugs on the BCBSMA.com website under Medical Policies [#433](#).

Clinical coverage criteria

BCBSMA may authorize coverage for non-formulary prescription medications for a member who meets one of the following clinical criteria:

- The member has documented treatment failure with two covered formulary drugs*; or

- The member has documented adverse effects to two covered formulary drugs*, significant enough to preclude use of the covered formulary drug; or
- There is some other specified clinical basis.

* If there is only one covered alternative for the requested medication, the failure of that alternative will be sufficient to meet the exception requirements.

You can request continued coverage of a non-covered drug through our clinical exception program for members when there is a medical basis for the member not being able to take any of the covered drugs from the same therapeutic class. Physicians or their representatives may call BCBSMA Pharmacy Operations department to request a review for formulary exception for their patients at (800)366-7778. Physicians may request an exception review in writing by using the *Formulary Exception Form*. Prescribers and their representatives may also call BCBSMA Pharmacy Operations department to request a review for prior authorization for patients at (800)366-7778. The Formulary Exception form is included as part of this document for physicians to submit for patients. You can also obtain the *Formulary Exception Form* in the following ways:

- Visit our internet site, <http://www.bluecrossma.com> and click on “**Pharmacy Program.**”

Fax or mail the completed form to BCBSMA. We will respond to your request within two business days of receipt. Once we approve a clinical exception, you will not need to submit another exception form for the same therapy for that patient.

Blue Cross Blue Shield of Massachusetts
Pharmacy Operations Department
25 Technology Place
Hingham, MA 02043
Tel: 1-800-366-7778
Fax: 1-800-583-6289

Drug Class	Non-covered Drug
Acne Treatment, Oral	Absorica LD®
ALS Treatment	Exservan®
Anaphylaxis Management	Adrenaclick® Authorized product, Adyphren® Amp, Adyphren® Amp II, Adyphren®, Adyphren® II, Auvi-Q™, Epinephrine Snap V®, Episnap Convenience Kit®
Anti-Bacterial Cephalosporin	Cedax®, Daxbia®, Maxipime®, Panixine™, Spectracef®
Doxycycline	Acticlate®, Alodox™, Avidoxy™, Avidoxy™ CK, Doryx® DR 80mg, doxycycline 50mg tablets, Doxycycline DR 80, Monodox®, Morgidox®, Ocudox KIT®, Oracea™
Macrolide	Dificid™, PCE®, PCE Dispertabs®, Zithromax®, Zmax™
Quinolone	Avelox®, Cipro® XR, Factive®, Levaquin, Avidoxy™, Maxaquin®, Penetrex™, Tequin™, Zagam®
Tetracycline	Amzeeq®, Cleervue-M™, doxycycline IR-DR, Minocin®, Minocin Combo PAK®, Minocycline Tablets, Minolira ER®, Seysara®, Solodyn™, Ximino ER®, Zilxi®
Other	Aemcolo®, Augmentin XR™, Moxatag™, Solosec®, Xepi®, Xifaxan™
Antiemetic	Akynzeo®, Brexafemme®, Anzemet®, Cesamet®, Sancuso®, Zofran®, Zofran®ODT, Zuplenz®
Anti-Fungal, oral	Lamisil®, Lamisil® Granules, Oravig™, Onmel™, Penlac®, Sporanox®, Tolsura®
Anti-Fungal, topical	Extina®, Jublia®, Kerydin®, Luliconazole, Luzu®, PediPak®, Pedizol®, Sulconazole 1%, tavaborole, TriloCiclo Kit®, Vusion™
Antimalarial	Arakoda®, Krintafel®, Plaquenil®
Antirheumatic	Arava®
Antineoplastic	Arimidex®, Aromasin®, Fusilev®, Gleevec®
Antiparasitic	Alinia®
Anti-Trichomonas	Flagyl® /ER, Flagyl® IV, Flagyl® IV-RTU Viaflex, Tindamax™
Antiviral	Sitavig®, Zovirax®
Antiviral – Hepatitis C	Daklinza®, Ledipasvir/Sofosbuvir, Mavyret®, Olysio®, Sofosbuvir/Velpatasvir, Sovaldi®, Tecnivie®, Viekira PAK®,
Biologics	Cimzia®, Cosentyx®, Entyvio®, Lemtrada®, Orencia®, Siliq®, Simponi®, Simponi Aria®
CNS 5HT Agonists	Alsuma®, Axert®, Frova™, Imitrex® vial, Imitrex® kit refill, Imitrex® pen injector, Maxalt® /MLT, Relpax®, Sumavel™ Dosepro, Treximet™, Zembrace® Reyvow®,

	Symtouch™, Zomig/ZMT®
Alzheimer's disease	Namzaric®
Anticonvulsants	Depakote®, Depakote ER®, Depakote Sprinkle®, Elepsia XR®, Equetro™, Horizant™, Keppra XR™, Lamictal®, Lamictal XR®, Lamictal® ODT™, Neurontin®, Spritam®, Sympazan®, Topamax®, Trileptal®, Zonegran®
Antiparkinsonian	Dhivy®, Emsam®, Gocovri®, Mirapex®, Mirapex®ER, Requip®, Requip® XL™, Neupro®, Osmolex ER®, Rytary ER®, Sinemet®, Stalevo®, Xadago®, Zelapar™
Atypical Antidepressants	Aplenzin™, Brintellix®, Drizalma Sprinkle®, Fetzima®, Forfivo™ XL, Irenka DR®, Remeron®, Wellbutrin®, Wellbutrin® SR, Wellbutrin®XL
Atypical Antipsychotics	Abilify®, Abilify® Discmelt™, Abilify MYCITE®, Calypta®, Fanapt™, FazaClo®, Geodon®, Invega®, Latuda®, Lybalvi®, Perseris ER®, Risperdal® M-tab®, Rexulti®, Saphris®, Seroquel®, Secuado®, Seroquel XR®, Zyprexa®, Zyprexa® IM, Zyprexa® Relprevv, Zyprexa Zydis®
Benzodiazepines	Ativan®, Klonopin™, Loreev XR®, Restoril®, Tranxene® T-Tab®, Valium®, Xanax®, Xanax XR®
Hypnotics	Ambien®, Ambien CR™, Belsomra®, Dayvigo®, Edluar™, Intermezzo®, Lunesta®, Silenor®, Sonata®, Zolpimist®
Multiple Sclerosis	Copaxone®, Extavia®, Ponvory®, Tecfidera®, Vumerity DR®, Zinbryta®
Pain/Opioid	Abstral®, Actiq®, Alzital®, Apadaz®, Arymo® ER, Benzhydrocodone/APAP, Conzip®, Dilaudid®, Duragesic®, Embeda™, Exalgo™, Fentanyl citrate buccal tabs, Fentora™, Hydrocodone ER, Hysingla ER®, Kadian®, Lazanda®, Morphabond ER®, Nucynta™, Nucynta™ ER, Onsolis™, Opana ER®, Oramorph SR™, oxycodone ER, OxyContin®, Percocet®, Roxibond®, Sprix®, Subsys™, Trezix®, Xartemis XR®, Zohydro ER®
Pain/Analgesic/Topical	Adazin®, Agoneaze®, Anodyne LPT®, Aprizo PAK®, Aprizio II PAK®, Capsfenac®, D-Care 100X®, Dermacin® Rx, Dermalid®, Diclofenac Epolamine Patch, Dicloheal-60®, Dolotranz®, Empricaine Kit, Empricaine® II kit, LevaSet®, Gabacaine® kit, Gabapal®, LiprozonePak®, LidoDerm®, LidoPac®, Lido-Prilo Caine Pak®, Licart®, Lidocort®, Lidomark®, Lidotin®, LidoTor®, LidotransKit®, Lidovex®, Lidovix®, Lipritin®, Lipritin II®, Livixil PAK®, LMR Plus®, MAC Patch®, Marvona SUIK Kit®, MedolorKit®, MicroVix LP®, Neumaxin®, Neurcaine®, Nopioide LMC®, Nopioide-TC®, Nuvakaan®, Nuvakaan® Plus, P-Care MG®, P-Care X®, PainGo KFT®, Pennsaicin®, Pentican®, Prikaan®, Prikaan LITE®, PriloHeal Plus 30®, Prilolid® Kit, Prilopatch®, Prilopatch II®, Prilovix®, Prilovix Ultralite Plus®, Prilovixil®, Prizopak®, Prizopak II®, Prizotral®, Prizotral II®, Skyaderm LP®, Solaice®, Solaravix®, Suvicort®, Synvexia TC®, Tramadol 100mg, Tranzarel®, Trixylitral®, Vexa®, Wound Debride 4%®, Xryliderm®, Zeyocaine®, Zilacaine®,
Other	Bunavail®, GelX®, Lyrica®, Lyrica CR®, Norgestic Forte®, orphenadrine/aspirin/caffeine, Savella®, Qdolo®, Suboxone®, Tramadol ER capsules, Trudhesa®, Xywav®, Zubsolv®, Zyban®
Stimulant	Adderall®, Adhansia XR®, Adzenys®, Adzenyz® XR, Amphetamine 1.25mg/ml susp, Azstarys®, Contempla XR®, Daytrana™, Dexedrine®, Evekeo®, Focalin®, Focalin XR®, Jornay PM®, Kapvay®, Methylphenidate ER capsules, Mydayis®, Nuvigil™, ProCentra™, Qelbree®, Quillichew® ER, Quillivant XR™, Relexxi ER®, Ritalin®, Ritalin SR®, Ritalin LA®, Stratterra®, Sunosi®, Vyvanse®, Wakix®
SNRI	Cymbalta®, desvenlafaxine ER, Effexor®, Effexor XR®, Fluoxetine tablet, Khedezla™, Pristiq™, Venlafaxine ER tablet
SSRI	Celexa®, Lexapro®, Paxil®, Paxil CR™, Pexeva™, Prozac®, Prozac® Weekly™, Sarafem®, sertraline capsules, Zoloft®
SSRI/5-HT1A Receptor Partial Agonist	Viibryd™
Other	Alzital®, Episil®, Fiorinal®, Fiorinal® with codeine #3, Intuniv™, Kapvay™, Nuedexta™, Provigil®, Qdolo®, Sunosi®, Ultracet™, Ultram ER®, Wakix®
Tricyclic Antidepressants	Anafranil®, Pamelor®, Tofranil®
Cardiovascular	
ARB	Avapro®, Atacand™, Benicar®, Cozaar®, Diovan®, Edarbi™, Micardis®, Tekturna®
ACEI	Accupril®, Altace™, Epaned™, Lotensin, Prinivil®, Vasotec®, Zestril®

Alpha Blocker	Cardura XL®
Antiplatelet Agents	Pradaxa®
Beta Blocker	Bystolic™, Coreg®, Coreg CR®, Inderal® LA, Inderal®XL, InnoPran XL™, Kaspargo Sprinkle®, Lopressor®, Tenormin®
CCB	Adalat® CC, Cardene® SR, Cardizem® CD, Cardizem® LA, Conjugpri®, Katerzia®, Norvasc®, Sular®, Tiazac®
Combination products	Accuretic®, Atacand® HCT, Avalide®, Azor®, Benicar HCT®, Caduet®, Diovan HCT®, Edarbyclor®, Exforge®, Exforge HCT®, Hyzaar®, Lotrel®, Lotensin® HCT, Micardis® HCT, Prestalia, Tarka®, Tekturna HCT®, Tribenzor®, Twynsta®, Vaseretic®
Hematologic	Mulpleta®
HMG-CoA and combinations	Altoprev™, Caduet®, Crestor®, Ezallor Sprinkle®, FloLipid®, Lescol®/XL, Livalo®, Lipitor®, Pravachol®, Pravigard™ PAC, rosuvastatin/ezetimibe, Roszet®, Simvastatin suspension, Vytorin®, Zocor®, Zypitamag®
Low Molecular Weight Heparins	Arixtra®, Fragmin®, Lovenox®
Erythroid Stimulants	Aranesp®, Epogen®, Procrit®
Granulocyte Colony Stimulating Factor	Neupogen®
Other	Antara™, Brilinta™, Corlanor®, Duralaza®, Fenoglide™, Entresto®, fenofibrate 50mg, 150mg, Fibricor®, Lipofen™, Lovaza®, Nexiclon XR®, Nitro-Dur®, Northera®, Recothrom®, Repatha®, Rythmol®, Savaysa®, Teczem® /HCT, Tricor®, Triglide™, TriLipix™, Vascepa®, Welchol®, Zontivity®
Dermatologic	Aklief®, Absorica™, Absorica LD®, Acanya™, Aczone®, Advanced Allergy Collection Kit®, Aklief®, Aktipak Gel Pouch®, Aloquin™, Altabax®, Alcortin-A®, Alivycin SG®, AlivycinPlus®, Ana-Lex Kit®, Aqua Glycolic HC®, Arazlo®, Atopavo®, Atopiclair™, Atopoderm®, Atralin™, Atrapro™ Dermal Spray, Atrapro CP™, Atrapro Hydrogel™, Avita®, Basadrox®, Benzacilin®, Beser®, Bionect®, Bryhali®, Calcipotriene foam, Calitriol Topical, Carac®, Cem-Urea®, Centany®, Ceramax® Skin Barrier, Clenia Plus®, Cleocin T®, Clindacin® ETZ, Clindacin PAC®, Clindagel®, Clindavix®, Clobex®, Clodan Kit®, Dapsone 7.5%, Deluo®, Dermacin Rx®, Dermacin Silazone Pharpak®, Dermacin® Rx Chlorhexacin Kit®, Dermacin® Rx Therazole PAK®, Derma-Smoothe/FS®, DermaSORB-AF™, DermaSORB-HC™, DermaSORB-TA™, DermaSORB-XM™, DermawaRx® Surgical Plus Pack, DesOwen®, Differin®, Dimentho® kit, Duac®, Duobrii®, Eletone®, Elizia Pack®, EpiCeram®, Epiduo™, Epiduo Forte™, Ertaczo®, Eucrisa®, Evoclin®, Garimide®, Fabior®, Finacea® Plus™, Fluopar®, Fluoroplex®, Fluovix®, Fluovix Plus®, HPR™ Emolient Foam, Halobetasol Propionate Foam, HPR™ Plus, HPR™ Plus Hydrogel, Hydrocortisone-Lidocaine Kit, Hylaguard®, Hylatopic™, Hylatopic™ Plus, Hylatopic™ Plus Aurstat, Impeklo®, Keralyt® Scalp Kit, MB™ Hydrogel, Levicyn Antipruritic®, Lexette®, Loutrex™, Neosalus™, Neosalus CP™, NeoSynalar KIT®, Neuac KIT®, Novacort®, NuCaraClinPack®, NuCaraRxPack®, NuCort®, Nu-Derm RxPack®, NuSurgepak Surgical Prep®, Nutraseb®, NutriaRx Cream PAK®, Nuvesa®, Olux®, Onexton®, Picato®, Plixda®, PR Cream®, Pram-HCA®, Pramosome E™, Presera™, Procort®, Promiseb, Quinixil®, Quinja®, Quinosone®, RadiaGel®, RadiaPlex®, Relador PAK®, Relador PAK Plus®, Retin-A® cream, Retin-A Micro®, Rosadan®, Salicylic Acid 6% Kit, Salicylic Acid/Ceramide Kit, Salkera™, Salvax, Salvax Duo®, Salvax Duo Plus®, SanadermRx Skin Repair®, Scalacort/DK™, Sebuderm®, Silalite PAK®, Sila III® kit, Silazone-II Kit®, SilvrSTAT®, Sklice®, Solaraze®, Soolantra®, Sorilux®, Sumadan®, Sumaxin™, Sumaxin™ CP, Sumaxin™ TS, Synalar Combo PAK®, Synalar TS®, Tasoprol®, Tazorac®, Tersi, Therapevo®, Tovet® kit, Tretin-X™, TriadiMe-80®, triamcinolone 0.05% ointment, Trianex®, TriHeal-80® Kit, TriloCiclo Kit®, Tritocin®, Trivix®, Trixylitral®, Ultrasal ER®, Ultravate® PAC, Ultravate X®, Uramaxin™, Urea Nail Kit, Vacustim® Silver Kit, Vanos™, Vectical®, Veltin™, Veregen™, Virasal®, Vusion®, Whytederm SurgiPAK®, Whytederm Trilisal PAK®, WPR Plus Kit®, Wynzora®, X-Clair™, Xerese®, Xologel Zanaderm Antipruritic Hydrogel®, Zenieva®, Ziana™, Zolpak®, Zyclara®, Zypram™

Diabetic Supplies	Accu-Chek®, Advocate Redi-Code®, Ascensia™, Assure®, B-D™, BG Star®, CareOne®, CareTouch®, CareSens N®, Clever Choice Voice+®, Contour®, Cool® products, CVS Advanced Care®, EasyGluco® G2, EasyMax®, Easy Step®, Easy Talk®, Easy Touch®, Easy Trak®, Embrace™, EQ® Diabetic testing Supplies, EvenCare®, Exactech®, Fifty50®, Fora®, Fortiscare G1®, Freestyle®, G-4®, GE 100®, Genstrip®, Glucocard®, Glucometer®, G-Mate®, Harmony®, HealthPro®, Humana®, KRO Premium®, Lancet®, NovaMax®, On-Call® Plus, Pharmacist Choice®, Pogo® Testing Supplies, Precision® QID, Precision® XTRA, Premium®, Prestige®, Prodigy®, Pro-Voice®, Refuah™ Plus, Relion®, Smart Sense®, Sof-Tact Test Strips®, Solus V2 Audible®, Sure-Test Easyplus™, Test N' Go®, TrueMetrex®, TRUETest™, TrueTrack®, Ultratrak Ultimate™, UniStrip One®, Up & Up®, Verasens®, Vivaguard®, Wavesense®,
DMARD	RediTrex®
Erectile Dysfunction	Cialis®, Levitra®, Staxyn®, Stendra®, Viagra®
Endocrine Androgen	Fortesta®, Natesto Nasal®, Striant®, Testim®, Testone CIK KIT®, Testosterone Gel (Fortesta Authorized generic), testosterone (Tetsim Authorized generic), Testosterone (Vogelxo Authorized generic), Vogelxo®, Xyosted®
Corticosteroid	Alkindi®, Arze-Ject-A Kit®, BSP 0820®, Clobetavix®, Hemady®, Orapred ODT™, Rayos®, Betalolan SUIK®, DMT SUIK Kit®, Lidocidex I®, Medroloan SUIK Kit®, Medroloan II SUIK Kit®, P-Care D40®, P-Care D80®, P-Care D40G®, P-Care D80G®, Pod-Care 100C®, Pod-Care 100CG®, Pod-Care 100K®, Pod-Care 100KG®, P-Care K40®, P-Care K40G®, P-Care K80®, P-Care K80G®, Readysharp Betamethasone Kit®, Readysharp Triamcinolone Kit®, Toronova SUIK Kit®, Toronova II SUIK Kit®, Triloan SUIK Kit®, Triloan IISUIK Kit®
Growth Hormone	Genotropin®, Omnitrope®, Norditropin®, Saizen®, Saizen Prep®, Tev-Tropin®, Zomacton®,
Insulins	Admelog®, Apidra®, Fiasp®, Insulin Aspart, Insulin Glargine, Insulin Lispro, Levemir®, Lyumjev®, Novolog®, Novolin®, Toujeo Solostar®
Diabetes – Other	Adlyxin®, DM2 Kit®, Soliqua®, Tanzeum®, Victoza®, Xultophy®
Osteoporosis, Paget's	Atelvia™, Binosto®, Boniva®, Fosamax®
Thyroid Supplement	Levothyroxine capsules, Tirosint®
Other	Hemady®, Kuvan®, Noctiva®, Qbrexza®
ENT other	Astepro™, Cetraxal®, Dermotic®
GI Bowel Evacuants	CoLyte®, GoLyteLy®, Moviprep®, NuLyteLy®, Osmoprep®, Prepopik®, Suprep®
H2 Antagonists	Pepcid®, Zantac®
H.Pylori	Helidac® Therapy Pack, Omeclamox®, Pylera®, PrevPac®, Talicia DR®
PPI (Excluded for members 18 years and older)	Aciphex™, aspirin/omeprazole, Dexilant®, Esomeprazole Strontium, Esomep-EZS®, Nexium®, NapraPAC™, Omeprazole/Sodium Bicarbonate, Prilosec®, Prevacid® 30mg, Protonix®, Yosprala®, Zegerid®
Other	Asacol HD®, Actigall®, Anusol HC® Suppository, Apriso®, Chenodal™, Colazal®, Delzicol®, Dipentum®, Giazol®, Kristalose®, lactulose 10gm packet, lubiprostone, Megace ES®, mesalamine HD, Motegrity®, Pancreaze™, Pertze®, Symproic®, Trulance®, Viberzi®, Xifaxan®, Zelnorm®
GOUT Treatment	Colchicine capsules, Colcrys® tablets, Duzallo®, Gloperba®, Zurampic®
GU Alpha Blocker	Rapaflo™
Anticholinergic	Detrol®, Detrol® LA, Enablex®, Toviaz™
Antispasmodic	Ditropan XL®, Gelnique™, Oxytrol™
Other	DDAVP®, Nocdurna®, Noctiva®, Vesicare®
Hyaluronic Acids /Joint Fluid Replacement	Durolane®, Euflexxa®, Gel-One®, Hyalgan®, Monovisc®, Orthovisc®, Sodium Hyaluronate 1%, Supartz®, Synvisc®, Synvisc-One®, Triluron®, Trivisc®
Infertility	Bravelle®, Chorionic Gonadotropin®, Follistim® AQ, Ganirelix®, Pergonal®, Pregnyl®
Miscellaneous	AtroPen®, Caphasol®, carbinoxamine 6mg, Gelclair®, ProBarimin QT™, Lysteda™,

	Ryvent®
Musculoskeletal	chlorzoxazone 250, 375, 750mg, cyclobenzaprine 7.5mg, Cyclopak Kit®, Amrix®, Fexmid™, Lorzone®, Nopioic LMC®, Soma®, Zanaflex®
NSAIDs Oral and Topical	Arthrotec®, Cambia™, Cataflam®, Consensi®, Daypro™, Diclo® Gel, diclofenac 25mg capsule, diclofenac 35mg capsule, Diclopak Kit®, Diclophono®, Diclopr Combo Pack®, DicloTrex®, Diclovix®, Diclovix M®, Diclozor Kit®, Dithol®, Duexis®, Dyloject®, Elyxyb®, fenoprofen 200, 400mg, Flector®, Flexipak Kit®, Ibupak®, ibuprofen/famotidine, Indomethacin 20mg, Inflatherm®, Inavix®, Kapzin DC®, ketoprofen 25mg, Ketorolac Tromethamine nasal spray, Lofena®, Lexixryl®, Lodine®/XL, Mobic®, Nalfon®, Naprosyn®/EC, naproxen sodium CR 375mg, 500mg, Naprelan®, Naprelan® CR, Naproxen/Esomeprazole, Nudiclo Solupak®, Nudiclo TabPak®, Pennsaid®, Qmiiz ODT®, Tivorbex®, Varophen®, Vimovo™, Vivlodex®, Voltaren®/XR, Zipsor™, Zorvolex®
OB/GYN Estrogen, Topical	Alora®, Divigel®, Esclim®, Elestrin™, Evamist™, Estrogel®, FemRing®, Menostar™, Novacort™
Estrogen Receptor Antagonist	Soltamox™
Monophasic OC	Balclotra®, Brevicon®, LoSeasonique™, Seasonique™, Taytulla®
Triphasic OC	Rivelsa®, Tri-Norinyl®
Four-phasic OC	Natazia™, Quartette®
Injectable OC	Depo-SubQ Provera 104®
Oral HRT	Activella™, Angeliq®, Bijuva®, Duavee®, Estrace®
Other	Addyi™, Brisdelle®, Divigel®, Imvexxy®, Myfembree®, Oriahnn®, Orilissa®, Osphena®, NuvaRing®
Ophthalmic Anti-infective	AzaSite™, Besivance, Moxeza®, Tobradex® ointment, Tobradex ST®, Vigamox®, Zylet®, Zymaxid™
Other	Acular®, Acular LS®, Acuvail™, Alphagan P®, Alrex™, Azopt®, Bepreve™, Betimol®, Betoptic S®, Bromsite®, Combigan®, Durezol™, Eysuvis®, Flarex®, FML Forte®, FML SOP®, FML Liquifilm®, Ilevro™, Inveltys®, Istalol™, Livostin®, Lotemax®, Lotemax SM®, Maxidex®, Nevanac™, PredMild®, Prolensa™, Rescula®, Restasis® Multidose, Rhopressa®, Rocklatan®, Simbrinza®, Timoptic®, Timoptic Ocudose®, Tyrvaya®, Vyzulta®, Xelpros®
Oral Anti-Diabetic	ActoPlus Met®, ActoPlus Met XR®, alogliptin, alogliptin/metformin, alogliptin/pioglitazone, Fortamet®, Glucophage®, Glucophage® XR, Glumetza™, Invokana®, Invokamet®, Invokamet® XR, Jentadueto®, Kazano®, Metformin ER, Metformin Film Coated ER, Nesina®, Oseni®, Qtern®, Rybelsus®, Segluromet®, Steglatro®, Steglujan®, Tradjenta™
Phosphate Binders	Auryxia®
Respiratory Beta-adrenergic and combinations (inhaled)	Arformoterol, Albuterol Sulfate HFA (Ventolin Authorized Product), Albuterol Sulfate HFA (ProAir Authorized Product), AirDuo DigiHaler®, AirDuo RespiClick®, Arcapta™, ArmonAir™ DigiHaler®, ArmonAir™ RespiClick®, Breo-Ellipta®, Brovana®, Levalbuterol HFA, ProAir DigiHaler®, ProAir® HFA, ProAir®

	RespiClick, Proventil® HFA, Ventolin®, Ventolin® HFA, Ventolin® Rotacaps, Xopenex HFA®, Xopenex® nebulizers
Inhaled Steroid	Arnuity Ellipta®, Alvesco®, Asmanex HFA®, Asmanex Twisthaler®
Leukotriene Modifier	Accolate®, Singulair®, Zyflo™, Zyflo™ CR
Other	Benzonatate 150mg, Budesonide/Formoterol, Daliresp®, Duaklir Pressair®, Kitabis PAK®, Lonhala Magnair®, Tudorza®, Yupelri®
Vitamins/Minerals	Azesco®, DermacinRx Prenatrix®, DermacinRx Prenatryl®, DermacinRx Pretrate®, Nascobal®, PNV 20-1®, Rayaldee®, Trinaz®

To request prior authorization using the Massachusetts Standard Form for Medication Prior Authorization Requests (eForm), click the link below:

<http://www.bluecrossma.org/medical-policies/sites/g/files/csphws2091/files/acquiadam-assets/023%20E%20Form%20medication%20prior%20auth%20instruction%20prn.pdf>