

Alaska Medicaid Interim Prior Authorization List

Last Updated 01/20/2023

Medication	Date Added	Date Removed	Additional Notes
Inвокana 100mg,300mg	4/24/2013		Class 1: at least 1 previously failed therapy required
Osphena 60mg	5/22/2013		Class 1: at least 1 previously failed therapy required
Diclegis DR 10-10	5/22/2013		Class 1: at least 1 previously failed therapy required
Sirturo 100mg	5/22/2013		Class 1: at least 1 previously failed therapy required
Vecamyl 2.5mg	5/22/2013		Class 1: at least 1 previously failed therapy required
Mekinst all strengths	7/17/2013		Class 1: at least 1 previously failed therapy required
Tafnir all strengths	7/17/2013		Class 1: at least 1 previously failed therapy required
Glotifir all strengths	9/18/2013		Class 1: at least 1 previously failed therapy required
Mirvaso 0.33% Gel	9/18/2013		Class 1: at least 1 previously failed therapy required
Adempas (all strengths)	10/23/2013		Class 1: at least 1 previously failed therapy required
Valchlor Gel 0.016%	12/4/2013		Class 1: at least 1 previously failed therapy required
Noxafil DR 100mg tablet	12/27/2013		Class 1: at least 1 previously failed therapy required
Velphoro	3/14/2014		Class 1: at least 1 previously failed therapy required
Kuvan powder pack	3/14/2014		Class 1: at least 1 previously failed therapy required
Tretten 2500 unit vial	4/11/2014		Class 1: at least 1 previously failed therapy required
Kcentra kit	4/11/2014		Class 1: at least 1 previously failed therapy required
Noxafil vial	4/11/2014		Class 1: at least 1 previously failed therapy required
Alprolix vial (all strengths)	5/16/2014, 12/5/2016		Class 1: at least 1 previously failed therapy required
Grastek tab SL	5/16/2014		Class 1: at least 1 previously failed therapy required
Ragwitek tab SL	5/16/2014		Class 1: at least 1 previously failed therapy required
Myalept vial	5/16/2014		Class 1: at least 1 previously failed therapy required
Cyramza vial	5/16/2014		Class 1: at least 1 previously failed therapy required
Tanzeum pen injector	6/27/2014		Class 1: at least 1 previously failed therapy required
Stavig buccal tab	6/27/2014		Class 1: at least 1 previously failed therapy required
Sylvant	7/25/2014		Class 1: at least 1 previously failed therapy required
Karbinal ER Suspension	7/25/2014		Class 1: at least 1 previously failed therapy required
Atryn	7/25/2014		Class 1: at least 1 previously failed therapy required
Sivextro vial and tablet	7/25/2014		Class 1: at least 1 previously failed therapy required
Cyclophosphamide capsule	7/25/2014		Class 1: at least 1 previously failed therapy required
Sutent	7/25/2014		Class 1: at least 1 previously failed therapy required
Kcentra (all forms)	7/25/2014		Class 1: at least 1 previously failed therapy required
Dalvance	7/25/2014		Class 1: at least 1 previously failed therapy required
Midazolam PF 10mg/2mL syringe	10/17/2014		Class 1: at least 1 previously failed therapy required
Beleodaq	10/17/2014		Class 1: at least 1 previously failed therapy required
Northera	10/17/2014		Class 1: at least 1 previously failed therapy required
Keytruda	10/17/2014		Class 1: at least 1 previously failed therapy required
Tybost	12/19/2014		Class 1: at least 1 previously failed therapy required
Esbriet	12/19/2014		Class 1: at least 1 previously failed therapy required
Ofev	12/19/2014		Class 1: at least 1 previously failed therapy required
Belsomra (all strengths)	1/9/2015		Class 1: at least 1 previously failed therapy required
Lynparza	1/9/2015		Class 1: at least 1 previously failed therapy required
Zerbaxa	1/9/2015		Class 1: at least 1 previously failed therapy required
Soolantra cream	1/9/2015		Class 1: at least 1 previously failed therapy required
Incruse Ellipta	1/9/2015		Class 1: at least 1 previously failed therapy required
Reyataz powder pack	1/9/2015		Class 1: at least 1 previously failed therapy required
Paricalcitol	2/6/2015		Class 1: at least 1 previously failed therapy required
Neulasta syringe	2/6/2015		Class 1: at least 1 previously failed therapy required
Evotaz tab	7/31/2015		Class 1: at least 1 previously failed therapy required
Cholbam cap	7/31/2015		Class 1: at least 1 previously failed therapy required
Prezobix tab	7/31/2015		Class 1: at least 1 previously failed therapy required
Prestalia tab	7/31/2015		Class 1: at least 1 previously failed therapy required
Rexulti tab	7/31/2015		Class 1: at least 1 previously failed therapy required
Entresto tab	7/31/2015		Class 1: at least 1 previously failed therapy required
Orkambi tab 200/125mg, 100/125mg	7/31/2015, 11/7/2016		Class 1: at least 1 previously failed therapy required
Invenga Trinz	7/31/2015		Class 1: at least 1 previously failed therapy required
Doryx DR tab - all strengths	7/31/2015		Class 1: at least 1 previously failed therapy required
Silolto Respimat	7/31/2015		Class 1: at least 1 previously failed therapy required
Ixinity	7/31/2015		Class 1: at least 1 previously failed therapy required
Seroquel XR dosepack	7/31/2015		Class 1: at least 1 previously failed therapy required
Juxtapid - all strengths	7/31/2015		Class 1: at least 1 previously failed therapy required
Gammagard S-D	7/31/2015		Class 1: at least 1 previously failed therapy required
Levoleucovorin calcium	7/31/2015		Class 1: at least 1 previously failed therapy required
Jadenu	7/31/2015		Class 1: at least 1 previously failed therapy required
Cresemba vial	7/31/2015		Class 1: at least 1 previously failed therapy required
Gamunex	7/31/2015		Class 1: at least 1 previously failed therapy required
Gammagard liquid	7/31/2015		Class 1: at least 1 previously failed therapy required
Privigen	7/31/2015		Class 1: at least 1 previously failed therapy required
Novoeight	7/31/2015		Class 1: at least 1 previously failed therapy required
Farydak cap	7/31/2015		Class 1: at least 1 previously failed therapy required
Lenvima cap	7/31/2015		Class 1: at least 1 previously failed therapy required
Signifor LAR - all strengths	7/31/2015		Class 1: at least 1 previously failed therapy required
Pazeo ophth	7/31/2015		Class 1: at least 1 previously failed therapy required
Ibrance cap	7/31/2015		Class 1: at least 1 previously failed therapy required
Cosentyx - all strengths, all forms	7/31/2015		Class 1: at least 1 previously failed therapy required
Glyxambi tab	7/31/2015		Class 1: at least 1 previously failed therapy required
Movanik tab	7/31/2015		Class 1: at least 1 previously failed therapy required
Vitekta tab	7/31/2015		Class 1: at least 1 previously failed therapy required

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Ravicti	11/16/2015		Class 1: at least 1 previously failed therapy required
Slioto Respimat	11/16/2015		Class 1: at least 1 previously failed therapy required
Lonsurf	11/16/2015		Class 1: at least 1 previously failed therapy required
Odomzo	11/16/2015		Class 1: at least 1 previously failed therapy required
Praluent syringe, vial	11/16/2015		Class 1: at least 1 previously failed therapy required
Repatha Syringe, Sureclick	11/16/2015		Class 1: at least 1 previously failed therapy required
Kevevis	11/16/2015		Class 1: at least 1 previously failed therapy required
Ceenu	11/30/2015		Class 1: at least 1 previously failed therapy required
Utibron	11/30/2015		Class 1: at least 1 previously failed therapy required
Genvoya	11/30/2015		Class 1: at least 1 previously failed therapy required
Tagrisso	11/30/2015		Class 1: at least 1 previously failed therapy required
Viberzi	11/30/2015		Class 1: at least 1 previously failed therapy required
Cotellic	11/30/2015		Class 1: at least 1 previously failed therapy required
Ninlaro Capsule	12/21/2015		Class 1: at least 1 previously failed therapy required
Adynovate Vial	12/21/2015		Class 1: at least 1 previously failed therapy required
Veltassa	12/21/2015		Class 1: at least 1 previously failed therapy required
Bendeka	1/11/2016		Class 1: at least 1 previously failed therapy required
Portrazza	1/11/2016		Class 1: at least 1 previously failed therapy required
Odefsey	3/25/2016		Class 1: at least 1 previously failed therapy required
Ideivion	3/25/2016		Class 1: at least 1 previously failed therapy required
Cinqair	4/28/2016		Class 1: at least 1 previously failed therapy required
Willate	4/28/2016		Class 1: at least 1 previously failed therapy required
Impavido	4/28/2016		Class 1: at least 1 previously failed therapy required
Briviact	4/28/2016		Class 1: at least 1 previously failed therapy required
Venclexta	4/28/2016		Class 1: at least 1 previously failed therapy required
Cabometyx	5/30/2016		Class 1: at least 1 previously failed therapy required
Oralair	5/30/2016		Class 1: at least 1 previously failed therapy required
Mirvaso 0.33% Gel Pump	5/30/2016		Class 1: at least 1 previously failed therapy required
Ocaliva	6/23/2016		Class 1: at least 1 previously failed therapy required
Cetylev	6/23/2016		Class 1: at least 1 previously failed therapy required
Hyqvia IG Component	6/23/2016		Class 1: at least 1 previously failed therapy required
Hyqvia HY Component	6/23/2016		Class 1: at least 1 previously failed therapy required
Lenvima	6/23/2016		Class 1: at least 1 previously failed therapy required
Afstyla	6/23/2016		Class 1: at least 1 previously failed therapy required
Probuphine	6/23/2016		Class 1: at least 1 previously failed therapy required
Jentadueto XR	7/7/2016		Class 1: at least 1 previously failed therapy required
Repatha Pushtronex	8/1/2016		Class 1: at least 1 previously failed therapy required
Vonvendi	8/1/2016		Class 1: at least 1 previously failed therapy required
Rayaldee	12/5/2016		Class 1: at least 1 previously failed therapy required
Solosec	12/14/2018		Class 1: at least 1 previously failed therapy required
Lokelma	12/14/2018		Class 1: at least 1 previously failed therapy required
Baxdela	12/14/2018	Move to PA 3/11/2019	Class 1: at least 1 previously failed therapy required
Palynziq	12/14/2018	Move to PA 3/11/2019	Class 1: at least 1 previously failed therapy required

Medication	Date Added	Date Removed	Additional Notes
Revcoi	3/11/2019		Class 1: at least 1 previously failed therapy required
Nivestym	4/19/2019		Class 1: at least 1 previously failed therapy required
Tirosent solution	4/19/2019		Class 1: at least 1 previously failed therapy required
Elzonris	4/19/2019		Class 1: at least 1 previously failed therapy required
Bijuvia	4/19/2019		Class 1: at least 1 previously failed therapy required
Douobrii	9/20/2019		Class 1: at least 1 previously failed therapy required
Cautaquig	9/20/2019		Class 1: at least 1 previously failed therapy required
Aklief	11/15/2019		Class 1: at least 1 previously failed therapy required
Fasenra Pen	11/15/2019		Class 1: at least 1 previously failed therapy required
Drizalma Sprinkle	11/15/2019		Class 1: at least 1 previously failed therapy required
Fiasp Penfill	11/15/2019		Class 1: at least 1 previously failed therapy required
Wakix	11/15/2019		Class 1: at least 1 previously failed therapy required
Nyzilam	11/15/2019		Class 1: at least 1 previously failed therapy required
Gvoke	11/15/2019		Class 1: at least 1 previously failed therapy required
Myxredlin	11/15/2019		Class 1: at least 1 previously failed therapy required
Ziextenzo	1/17/2020		Class 1: at least 1 previously failed therapy required
Reblozyl	1/17/2020		Class 1: at least 1 previously failed therapy required
Nexletol	4/17/2020		Class 1: at least 1 previously failed therapy required
Nurtec ODT	4/17/2020		Class 1: at least 1 previously failed therapy required
Palforzia	4/17/2020		Class 1: at least 1 previously failed therapy required
Reyvow	4/17/2020		Class 1: at least 1 previously failed therapy required
Caplyta Capsule	4/17/2020		Class 1: at least 1 previously failed therapy required
Ubrelyv	4/17/2020		Class 1: at least 1 previously failed therapy required
Esperoct	4/17/2020		Class 1: at least 1 previously failed therapy required
Secuado	4/17/2020		Class 1: at least 1 previously failed therapy required
Ortikos	9/18/2020		Class 1: at least 1 previously failed therapy required
Fintepla	9/18/2020		Class 1: at least 1 previously failed therapy required
Bynfezia	9/18/2020		Class 1: at least 1 previously failed therapy required
Lymjev	9/18/2020		Class 1: at least 1 previously failed therapy required
Kynmobi	9/18/2020		Class 1: at least 1 previously failed therapy required
Oriahnn	9/18/2020		Class 1: at least 1 previously failed therapy required
Zeposia	9/18/2020		Class 1: at least 1 previously failed therapy required
Bonsity	9/18/2020		Class 1: at least 1 previously failed therapy required
Xcopri	9/18/2020		Class 1: at least 1 previously failed therapy required
Alkindi Sprinkle	10/20/2021		Class 1: at least 1 previously failed therapy required
Ongentys	10/20/2021		Class 1: at least 1 previously failed therapy required
Semglee	10/20/2021		Class 1: at least 1 previously failed therapy required
Kesimpta	10/20/2021		Class 1: at least 1 previously failed therapy required
Orladeyo	1/15/2021		Class 1: at least 1 previously failed therapy required
Verquvo	4/16/2021		Class 1: at least 1 previously failed therapy required
Klisyri	4/16/2021		Class 1: at least 1 previously failed therapy required
Gemtesa	4/16/2021		Class 1: at least 1 previously failed therapy required
Thyquidity	4/16/2021		Class 1: at least 1 previously failed therapy required
Saphnelo	9/17/2021		Class 1: at least 1 previously failed therapy required
Bylvay	9/17/2021		Class 1: at least 1 previously failed therapy required
Kerendia	9/17/2021		Class 1: at least 1 previously failed therapy required
Rylaze	9/17/2021		Class 1: at least 1 previously failed therapy required
Brexafemme	9/17/2021		Class 1: at least 1 previously failed therapy required
Avakitt	9/17/2021		Class 1: at least 1 previously failed therapy required
Kimrysa	9/17/2021		Class 1: at least 1 previously failed therapy required
Empaveli	9/17/2021		Class 1: at least 1 previously failed therapy required
Qelbree ER	9/17/2021		Class 1: at least 1 previously failed therapy required
Zegalogue	9/17/2021		Class 1: at least 1 previously failed therapy required
Ponvory	9/17/2021		Class 1: at least 1 previously failed therapy required
Tavneos	11/19/2021		Class 1: at least 1 previously failed therapy required
Everolimus	11/19/2021		Class 1: at least 1 previously failed therapy required
Livmarli	11/19/2021		Class 1: at least 1 previously failed therapy required
Trudhesa	11/19/2021		Class 1: at least 1 previously failed therapy required
Ursodiol 200mg & 400mg	11/19/2021		Class 1: at least 1 previously failed therapy required
Wellrege	11/19/2021		Class 1: at least 1 previously failed therapy required
Livtensity	1/17/2022		Class 1: at least 1 previously failed therapy required
Besremi	1/17/2022		Class 1: at least 1 previously failed therapy required
Infliximab (biosimilar)	1/17/2022		Class 1: at least 1 previously failed therapy required
Everolimus	1/17/2022		Class 1: at least 1 previously failed therapy required
Elyxb	1/17/2022		Class 1: at least 1 previously failed therapy required
Injectafer	1/17/2022		Class 1: at least 1 previously failed therapy required
Vuity	1/17/2022		Class 1: at least 1 previously failed therapy required
Gvoke	1/17/2022		Class 1: at least 1 previously failed therapy required
Tezspire	4/15/2022		Class 1: at least 1 previously failed therapy required
Tarpeyo	4/15/2022		Class 1: at least 1 previously failed therapy required
Deferiprone	4/15/2022		Class 1: at least 1 previously failed therapy required
Vasostriect	4/15/2022		Class 1: at least 1 previously failed therapy required
Digoxin 62.5mg	4/15/2022		Class 1: at least 1 previously failed therapy required
Ibsrela	4/15/2022		Class 1: at least 1 previously failed therapy required

Medication	Date Added	Date Removed	Additional Notes
Soaanz	4/15/2022		Class 1: at least 1 previously failed therapy required
Recorlev	4/15/2022		Class 1: at least 1 previously failed therapy required
Vtama	9/16/2022		Class 1: at least 1 previously failed therapy required
Radicava	9/16/2022		Class 1: at least 1 previously failed therapy required
Camzyos	9/16/2022		Class 1: at least 1 previously failed therapy required
Norliqva	9/16/2022		Class 1: at least 1 previously failed therapy required
Valsartan Liquid	9/16/2022		Class 1: at least 1 previously failed therapy required
Verkazia	9/16/2022		Class 1: at least 1 previously failed therapy required
Tlando	9/16/2022		Class 1: at least 1 previously failed therapy required
Adlarity	9/16/2022		Class 1: at least 1 previously failed therapy required
Ztalmy	9/16/2022		Class 1: at least 1 previously failed therapy required
Amvuttra	9/16/2022		Class 1: at least 1 previously failed therapy required
Zoryve	9/16/2022		Class 1: at least 1 previously failed therapy required
Doryx DR	11/18/2022		Class 1: at least 1 previously failed therapy required
Pheburane Pellet	11/18/2022		Class 1: at least 1 previously failed therapy required
Spevigo	11/18/2022		Class 1: at least 1 previously failed therapy required
Sotyktu	11/18/2022		Class 1: at least 1 previously failed therapy required
Auvelity	11/18/2022		Class 1: at least 1 previously failed therapy required
Fynetra	11/18/2022		Class 1: at least 1 previously failed therapy required
Rolvedon	11/18/2022		Class 1: at least 1 previously failed therapy required
Ermeza	11/18/2022		Class 1: at least 1 previously failed therapy required
Stimufend	12/14/2022		Class 1: at least 1 previously failed therapy required

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Medication	Date Added	Date Removed	Additional Notes
Addyi	11/16/2015		Drug Not Covered (7 AAC 105.110)
Papaverine/ Phentolamine/ Alprostadil	7/7/2016		Drug Not Covered (7 AAC 105.110)
Papaverine/ Alprostadil	7/7/2016		Drug Not Covered (7 AAC 105.110)
Papaverine/ Phentolamine	8/1/2016		Drug Not Covered (7 AAC 105.110)
Belviq XR	10/26/2016		Drug Not Covered (7 AAC 120.112 and 7 AAC 105.110)
Buprenorphine Powder	2/23/2011		Active Pharmaceutical Ingredient (API) not covered
Chorionic Gonadotropin Powder	3/2/2011		Active Pharmaceutical Ingredient (API) not covered
Codeine Phosphate Powder	2/23/2011		Active Pharmaceutical Ingredient (API) not covered
Fentanyl Base Powder	2/23/2011		Active Pharmaceutical Ingredient (API) not covered
Fentanyl Citrate Powder	2/23/2011		Active Pharmaceutical Ingredient (API) not covered
Hydrocodone Bitartrate Powder	2/23/2011		Active Pharmaceutical Ingredient (API) not covered
Hydromorphone Powder	2/23/2011		Active Pharmaceutical Ingredient (API) not covered
Metadone Powder	2/23/2011		Active Pharmaceutical Ingredient (API) not covered
Minoxidil Powder	2/23/2011		Active Pharmaceutical Ingredient (API) not covered
Morphine Sulfate Powder	2/23/2011		Active Pharmaceutical Ingredient (API) not covered
Naltrexone Powder	2/23/2011		Active Pharmaceutical Ingredient (API) not covered
Oxycodone Powder	2/23/2011		Active Pharmaceutical Ingredient (API) not covered
Sildenafil Citrate Powder	2/23/2011		Active Pharmaceutical Ingredient (API) not covered
Sufentanyl Powder	2/23/2011		Active Pharmaceutical Ingredient (API) not covered
Auralgan Otic (GSN 48556, 8112, 64389)	2/17/2011		Drug Not Covered - DESI or IRS drugs not covered
Hydrocortisone/Pramoxine (GSN 67048)	3/2/2011		Drug Not Covered - DESI or IRS drugs not covered
Belladonna/Phenobarbital (GSN 4777)	3/2/2011		Drug Not Covered - DESI or IRS drugs not covered