

Alaska Medicaid Interim Prior Authorization List

Last Updated 09/18/2026

Medication	Date Added	Date Removed	Additional Notes
Quantity Limit with No History Edit	2/15/2013, updated 6/30/2019	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Zanaflex Capsules (all strengths)	4/6/2011	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Folic Acid 5mg	4/6/2011	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Vitamin D 50,000 units	4/6/2011	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Makena (hydroxyprogesterone caproate)	4/27/2011	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Human Chorionic Gonadotropin products	5/6/2011	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Proton Pump Inhibitor step-edit	5/18/2011	PA removed 11/1/2022	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Bactroban Cream (15g and 30g)	5/25/2011	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Botulinum Toxin products	5/25/2011	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Victrils	6/3/2011	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Incivex	6/15/2011	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Firazyr	9/8/2011	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Lovaza, Vescopa	11/1/2011, updated 3/15/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Cialis 5mg	1/4/2012	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Egfrifia	1/4/2012	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Oxecta 7.5mg	2/29/2012	Moved to Opioid PA Criteria	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Kalydeco 150mg	2/29/2012	Moved to PA-List 5/8/2013	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Xifaxan	3/1/2012	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Zyvox	3/1/2012	PA removed 11/1/2022	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Subsys 100mcg, 200mcg, 400mcg, 800mcg, 800mcg, 1200mcg, 1600mcg	3/28/2012	Moved to PA-List 5/8/2013	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Korlym 300mg	4/18/2012	Moved to PA-List 5/8/2013	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Berinet 500 Unit Kit	5/23/2012	Moved to PA-List 6/19/2013	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Brand Name Multisource Medications	5/30/2012	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Atypical Antipsychotics (TD and PA)	6/13/2012	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Omeclamox-PAK	6/20/2012	See H-Pylori KITS PA	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Clarinet (All forms)	6/27/2012	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Xyzal (All forms)	6/27/2012	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Kadian 40mg, 70mg, 130mg, 150mg	9/21/2013	7/3/2013 - see new edit	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Exalgo ER 32mg	9/21/2012	7/3/2013 - see new edit	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Bimost 70mg EFF	9/21/2012	See Bisphosphonate Edit	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Nexium DR 2.5mg, 5mg Packet	9/21/2012	7/3/2013 - see new edit	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Opans ER 5, 7.5, 10, 15, 20, 30, 40mg NEW	1/16/2013	7/3/2013 - see new edit	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Vascepa 1g, 0.5g	1/16/2013	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Ludaxel 5mg, 10mg, 20mg	2/20/2013	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Kynamro 200mg/mL syringe	3/20/2013	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Daliresp	5/8/2013	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
H-Pylori Kits	5/8/2013	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Diclegis DR 10-10, Bonjesta	5/22/2013, updated 6/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Berinet	6/19/2013	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
HP Achter Gel	6/19/2013	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Mintrol	6/19/2013	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Noxafil Suspension	6/19/2013	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Rybix ODT	6/19/2013	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Extended Release Opioid Edit	7/31/2013	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Ibandronate 3mg/3mL vial	4/11/2014	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Zydex	10/17/2014	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Eviso	3/16/2015	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Kalydeco gran pack	7/31/2015	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Praxbind	11/16/2015	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Puritan oral suspension	11/16/2015	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Kanuma	12/21/2015	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Coragadex	12/21/2015	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Nucalad	5/10/2016	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Ofadin	6/23/2016	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Orfadin	9/12/2016	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Tecfidera	10/3/2016	2/28/2020	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Tofametil (All forms)	10/3/2016	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Glumetza (All forms)	10/3/2016	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Growth Hormone (Genotropin, Humatrope, Norditropin, Nutropin, Nutropin AQ, Nutropin AQ NuSpin, Omnitrope, Saizen, Skytrofa, Zomacod, Zorbtive)	10/3/2016	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Cambia	10/3/16, updated 1/2/2023	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Viberzi	11/12/2018	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Gralise	11/12/2018	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Horizant	11/12/2018	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Orlissa, Oriahann, Myfembree	1/15/2019, updated 11/1/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Epidiolex	1/15/2019, updated 11/16/20	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
CORP receptor inhibitors (Nurtec, Ubrovelvy, Qulipita, Airmovig, Ajovy, Emgality, Vyepti)	1/15/2019, updated 11/16/20	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Xyrem, Xywav	1/15/2019, updated 01/11/21	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Baxdela	3/11/2019	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Lucemyra	3/11/2019	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Palynziq	3/11/2019	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Nuedexta	3/11/2019	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Hettioz	3/11/2019, updated 5/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Crysalia	6/10/2019	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
VMAT2 inhibitors (Austedo, Ingrezza, Xenazine)	6/10/2019	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Vermlina	6/10/2019	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
benzodiazepine criteria	6/10/2019	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Mavericad	11/11/2019	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Mayzent	11/11/2019, updated 11/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Sunosi	11/11/2019	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Enflaza	11/11/2019	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Enfryo	7/25/2014, updated 3/1/2023	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Finadopa, Ruzorgi	1/6/2020	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Vyndaqel, Vyndamax	1/6/2020	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Corlanor	1/6/2020	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Xiaflex	1/6/2020	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Jynarque, Samsca	3/16/2020, updated 6/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Event	3/16/2020	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Vumerity	3/16/2020	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Dupixent	6/15/2020, updated 11/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Xolair	6/15/2020, updated 11/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Interleukin-5 inhibitors (Cinqair, Nucala, Fasenra)	6/15/2020, updated 01/17/22	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Oxrylia	6/15/2020, updated 11/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Nivensiq	11/16/2020	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Nexletol, Nexizent	11/16/2020	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Oxervate	11/16/2020	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Reyvow	1/11/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Palforzia	1/11/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Apokyn, Kynoli	1/11/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Duvelis	1/11/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Insulin Pens	1/11/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Ofev	3/15/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Finlepla	3/15/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Kesimpta	3/15/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Xcopri	3/15/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Incivive	5/24/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Esbriet	5/24/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Wakix	5/24/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Mytesi	5/24/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Evkeeza	5/24/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Lupkynis	11/1/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Iskaria	11/1/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Adjuvium	11/1/2021	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Lybalvi	1/4/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Kerendia	1/4/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Verquvo	1/4/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Myalept	1/4/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Sphingosine1-Phosphate Receptor Modulator (siponimod, ponesimod, and ozanimod)	3/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Ozempic	3/1/2022, updated 11/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Inhaled Prostaglandins (Tyvaso, Ventavis)	3/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Bertysia	3/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Reclast, Zometa	3/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Prokia, Xgeva	3/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Corevis	3/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Inflimab (Avsola™, Inflectra®, Remicade®, & Relexis®)	3/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Zulresso	6/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Soliris Ultomiris	6/1/2022, updated 11/1/2022	N/A	PA Required See website - https://dhss.alaska.gov/healthdhs/Pages/pharmacy/medprior

Medication	Date Added	Date Removed	Additional Notes
Acthar Selfject	9/20/2024	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Ivabradine	9/20/2024	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Oxycontin 15mg	9/20/2024	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Lofexidine	9/20/2024	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Bevez	9/20/2024	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Bimzek	9/20/2024	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Rysligo	9/20/2024	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Veozah	9/20/2024	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Kiaria	11/1/2024	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Trendia	11/15/2024	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Winreair	11/15/2024	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Zyntego	11/15/2024	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Hympace	1/17/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Auvelity	1/17/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Ocrevus Zunofo	1/17/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Synzi	1/17/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Cinesstity	6/1/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Symproic	6/1/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Zymfentra	6/1/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Ustekinumab	4/14/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Ustekinumab-AEKN	4/29/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Tolvaddon	5/9/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Osmelt	6/4/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Stoboco	6/4/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Imukdosa	6/18/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Bomynta	6/30/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Conexence	6/30/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Rivaroxaban	7/2/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Egrifta WR	7/2/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
CDV Pyszchiva	8/5/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Andemby	11/1/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Ekteny	11/1/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Bidyos	9/11/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Shirevda	9/11/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Onfit	9/15/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Gabapentin ER	10/10/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Selarsi	10/16/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Ospomyv	10/23/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Starjenza	10/27/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Downwera	11/1/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Vykat XR	11/1/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Ustekinumab-AAUZ	11/3/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Cladribine	11/26/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Prednisone DR	12/17/2025	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Anzuppo	3/1/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Elypys	3/1/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Jancayd	3/1/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Rhapido	3/1/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Erobry	1/7/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Xtremo	1/7/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Ustekinumab	2/6/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Aukelio	2/23/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Bosayo	2/23/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Tapentadol ER	3/11/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Justapid	3/13/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Myqorzo	6/1/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Redemlo	6/1/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Rezoifra	6/1/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Voyeast	6/1/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Yovipath	6/1/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Baxferdy	11/1/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Waskyra	11/1/2026	N/A	PA Required See website - https://dhs.alaska.gov/healthdhs/Pages/pharmacy/medpriorauthoriz.aspx
Abstrai (all strengths)	3/2/2011	N/A	Class 2: at least 2 previously failed therapies required
Morgidox	5/18/2011	N/A	Class 2: at least 2 previously failed therapies required
Lotemax Ointment	9/8/2011	N/A	Class 2: at least 2 previously failed therapies required
Lazanda	11/2/2011, 7/7/2016	N/A	Class 2: at least 2 previously failed therapies required
Leukine	11/23/2011	N/A	Class 2: at least 2 previously failed therapies required
TL-Cermide, Epiceram	12/21/2011	N/A	Class 2: at least 2 previously failed therapies required
Jakafi (5mg-25mg)	12/21/2011	N/A	Class 2: at least 2 previously failed therapies required
Alfapig Hydrogel and Dermal Spray	2/29/2012	N/A	Class 2: at least 2 previously failed therapies required
Austat	2/29/2012	N/A	Class 2: at least 2 previously failed therapies required
Recliv	2/29/2012	N/A	Class 2: at least 2 previously failed therapies required
Nafin 2% Cream	3/14/2012	N/A	Class 2: at least 2 previously failed therapies required
Tramadol Hcl 150mg Capsules	3/28/2012	N/A	Class 2: at least 2 previously failed therapies required
Dymista Spray	7/20/2012	N/A	Class 2: at least 2 previously failed therapies required
Zeforne Nasal Spray	7/20/2012	N/A	Class 2: at least 2 previously failed therapies required
Necoxas CP Cream	8/1/2012	N/A	Class 2: at least 2 previously failed therapies required
Gabapentin 250mg/cup, 300mg/6ML	9/21/2012	N/A	Class 2: at least 2 previously failed therapies required
Rayos DR 1mg,2mg,5mg	10/24/2012	N/A	Class 2: at least 2 previously failed therapies required
Lotemax 0.5% Oph Gel	1/16/2013	N/A	Class 2: at least 2 previously failed therapies required
Quilivant XR 25mg/5mL Susp	2/20/2013	N/A	Class 2: at least 2 previously failed therapies required
3rd Surface-Sulfur 6-4.5% Wash (Boomer)	5/22/2013	N/A	Class 2: at least 2 previously failed therapies required
Lipitru all strengths	6/16/2013	N/A	Class 2: at least 2 previously failed therapies required
Nymalize solution	7/17/2013	N/A	Class 2: at least 2 previously failed therapies required
Flonicef Capsule 50-300-40	8/21/2013	N/A	Class 2: at least 2 previously failed therapies required
Zubsolv all strengths	8/21/2013	N/A	Class 2: at least 2 previously failed therapies required
Brisdelle 7.5mg	8/21/2013	N/A	Class 2: at least 2 previously failed therapies required
Astagraf XL all strengths	8/21/2013	N/A	Class 2: at least 2 previously failed therapies required
Exomeprazole DR 24.65mg/49.3mg	9/18/2013	N/A	Class 2: at least 2 previously failed therapies required
Granix 300mcg & 480mcg	12/4/2013	N/A	Class 2: at least 2 previously failed therapies required
Prodin	3/14/2014	N/A	Class 2: at least 2 previously failed therapies required
Adasuve inhaler	3/14/2014	N/A	Class 2: at least 2 previously failed therapies required
Lupaneta kit	3/14/2014	N/A	Class 2: at least 2 previously failed therapies required
Zohydro ER (all strengths)	3/14/2014	N/A	Class 2: at least 2 previously failed therapies required
Karfenis XR	4/11/2014	N/A	Class 2: at least 2 previously failed therapies required
Herloz capsule	4/11/2014	N/A	Class 2: at least 2 previously failed therapies required
Eloctate	10/17/2014	N/A	Class 2: at least 2 previously failed therapies required
Fluphenazine decanoate 100% liquid	10/17/2014	N/A	Class 2: at least 2 previously failed therapies required
Vexa patch	10/17/2014	N/A	Class 2: at least 2 previously failed therapies required
Bunavall	10/17/2014	N/A	Class 2: at least 2 previously failed therapies required
Risuro	10/17/2014	N/A	Class 2: at least 2 previously failed therapies required
Revatio suspension	10/17/2014	N/A	Class 2: at least 2 previously failed therapies required
Obredon solution	2/6/2015	N/A	Class 2: at least 2 previously failed therapies required
Rytary (all strengths)	2/6/2015	N/A	Class 2: at least 2 previously failed therapies required
Humalog Kwipen	7/31/2015	N/A	Class 2: at least 2 previously failed therapies required
Proair Respiclick	7/31/2015	N/A	Class 2: at least 2 previously failed therapies required
Nuvessa gel	7/31/2015	N/A	Class 2: at least 2 previously failed therapies required
Fentanyl Patch [37.5, 62.5, 87.5 mcg/h]	7/31/2015	N/A	Class 2: at least 2 previously failed therapies required
Oxydo	11/16/2015	N/A	Class 2: at least 2 previously failed therapies required
Otrexup syringe	11/16/2015	N/A	Class 2: at least 2 previously failed therapies required
Zecuity Patch	11/16/2015	N/A	Class 2: at least 2 previously failed therapies required
Dyloject Vial	11/16/2015	N/A	Class 2: at least 2 previously failed therapies required
Hycofenix	11/16/2015	N/A	Class 2: at least 2 previously failed therapies required
Epiduo Forte	11/16/2015	N/A	Class 2: at least 2 previously failed therapies required
Tolax 4%	11/16/2015	N/A	Class 2: at least 2 previously failed therapies required
Belbuca Film	12/21/2015	N/A	Class 2: at least 2 previously failed therapies required
Vivodox Capsule	12/21/2015	N/A	Class 2: at least 2 previously failed therapies required
Upravi	1/11/2016	N/A	Class 2: at least 2 previously failed therapies required
Dyanavel XR	2/4/2016	N/A	Class 2: at least 2 previously failed therapies required
Metoprolol Tartrate (37.5 mg and 75mg only)	3/25/2016	N/A	Class 2: at least 2 previously failed therapies required
Otrexup 22.5 MG, 17.5 MG	4/28/2016	N/A	Class 2: at least 2 previously failed therapies required
Adzenys XR-ODT	4/28/2016	N/A	Class 2: at least 2 previously failed therapies required
Xtampza ER	5/30/2016	N/A	Class 2: at least 2 previously failed therapies required
Doryx MPC	8/1/2016	N/A	Class 2: at least 2 previously failed therapies required
Otrexup 12.5mg	8/1/2016	N/A	Class 2: at least 2 previously failed therapies required
Gialax	8/29/2016	N/A	Class 2: at least 2 previously failed therapies required
Gelsyn-3	8/29/2016	N/A	Class 2: at least 2 previously failed therapies required
Qbrelex	8/29/2016	N/A	Class 2: at least 2 previously failed therapies required
Byvalson	8/29/2016	N/A	Class 2: at least 2 previously failed therapies required
Lazanda	11/2/2011, 7/7/2016	N/A	Class 2: at least 2 previously failed therapies required
Yosprala	11/7/2016	N/A	Class 2: at least 2 previously failed therapies required
Gonitro	11/7/2016	N/A	Class 2: at least 2 previously failed therapies required
Cuvitru	11/7/2016	N/A	Class 2: at least 2 previously failed therapies required
Bromsite	11/7/2016	N/A	Class 2: at least 2 previously failed therapies required
Micort-HC	11/7/2016	N/A	Class 2: at least 2 previously failed therapies required
Imbria	4/19/2019	N/A	Class 2: at least 2 previously failed therapies required
Ezallor Sprinkle	9/20/2019	N/A	Class 2: at least 2 previously failed therapies required
Proair Digihaler	11/15/2019	N/A	Class 2: at least 2 previously failed therapies required
Ozobax	11/15/2019	N/A	Class 2: at least 2 previously failed therapies required
Rybelsus	11/15/2019	N/A	Class 2: at least 2 previously failed therapies required
Tosyma	11/15/2019	N/A	Class 2: at least 2 previously failed therapies required
Amzeeq	1/17/2020	N/A	Class 2: at least 2 previously failed therapies required
Gabacaine	1/17/2020	N/A	Class 2: at least 2 previously failed therapies required
Nalao	4/17/2020	N/A	Class 2: at least 2 previously failed therapies required
Triajardy XR	4/17/2020	N/A	Class 2: at least 2 previously failed therapies required
Zerviate	4/17/2020	N/A	Class 2: at least 2 previously failed therapies required
Riomet ER	4/17/2020	N/A	Class 2: at least 2 previously failed therapies required
simvastatin (Fiolipid Sol)	4/17/2020	N/A	Class 2: at least 2 previously failed therapies required
Talicia	4/17/2020	N/A	Class 2: at least 2 previously failed therapies required
Conesni	4/17/2020	N/A	Class 2: at least 2 previously failed therapies required
Breztzi Aerosphere	9/18/2020	N/A	Class 2: at least 2 previously failed therapies required
Nexlizent	9/18/2020	N/A	Class 2: at least 2 previously failed therapies required
Qdolo	11/20/2020	N/A	Class 2: at least 2 previously failed therapies required
Airduo Digihaler	11/20/2020	N/A	Class 2: at least 2 previously failed therapies required
Winlivi	1/15/2021	N/A	Class 2: at least 2 previously failed therapies required
Ivermectin Lotion	1/15/2021	N/A	Class 2: at least 2 previously failed therapies required
Prolate	4/16/2021	N/A	Class 2: at least 2 previously failed therapies required
Reltone	4/16/2021	N/A	Class 2: at least 2 previously failed therapies required
Vesicare Susp	4/16/2021	N/A	Class 2: at least 2 previously failed therapies required
Reditrex	4/16/2021	N/A	Class 2: at least 2 previously failed therapies required
Rezurack	9/17/2021	N/A	Class 2: at least 2 previously failed therapies required
Azastarys	9/17/2021	N/A	Class 2: at least 2 previously failed therapies required
Rozet	9/17/2021	N/A	Class 2: at least 2 previously failed therapies required
Elepsia XR	9/17/2021	N/A	Class 2: at least 2 previously failed therapies required
Tyrva	11/19/2021	N/A	Class 2: at least 2 previously failed therapies required
Sertraline 150mg & 200mg	11/19/2021	N/A	Class 2: at least 2 previously failed therapies required
Opzelura	11/19/2021	N/A	Class 2: at least 2 previously failed therapies required
LoreveaXR	11/19/2021	N/A	Class 2: at least 2 previously failed therapies required
Baclofen liquid	11/19/2021	N/A	Class 2: at least 2 previously failed therapies required
Levio	1/17/2022	N/A	Class 2: at least 2 previously failed therapies required
Oxycodone/Apap 10/300 Per 5ml	1/17/2022	N/A	Class 2: at least 2 previously failed therapies required
Lofena	1/17/2022	N/A	Class 2: at least 2 previously failed therapies required
Eprontia	1/17/2022	N/A	Class 2: at least 2 previously failed therapies required
Susvimo	1/17/2022	N/A	Class 2: at least 2 previously failed therapies required
Fenofibrate (New Generic Strength)	1/17/2022	N/A	Class 2: at least 2 previously failed therapies required
Dartisa	4/15/2022	N/A	Class 2: at least 2 previously failed therapies required
Adbry	4/15/2022	N/A	Class 2: at least 2 previously failed therapies required
Seglentis	4/15/2022	N/A	Class 2: at least 2 previously failed therapies required
Fleguuy Suspension	4/15/2022	N/A	Class 2: at least 2 previously failed therapies required
Climingo	4/15/2022	N/A	Class 2: at least 2 previously failed therapies required
Tramadol 25mg/5 ML	4/15/2022	N/A	Class 2: at least 2 previously failed therapies required
Twyno	4/15/2022	N/A	Class 2: at least 2 previously failed therapies required

Medication	Date Added	Date Removed	Additional Notes
Citalopram Capsule	4/15/2022	N/A	Class 2: at least 2 previously failed therapies required
Voquezna dual pak	9/16/2022	N/A	Class 2: at least 2 previously failed therapies required
Voquezna triple pak	9/16/2022	N/A	Class 2: at least 2 previously failed therapies required
Meftormin 625mg	9/16/2022	N/A	Class 2: at least 2 previously failed therapies required
Lyvispah	9/16/2022	N/A	Class 2: at least 2 previously failed therapies required
Mounjaro	9/16/2022	N/A	Class 2: at least 2 previously failed therapies required
Epsolay	9/16/2022	N/A	Class 2: at least 2 previously failed therapies required
Aspruzyo	9/16/2022	N/A	Class 2: at least 2 previously failed therapies required
Vivjoa	9/16/2022	N/A	Class 2: at least 2 previously failed therapies required
Dyanavel XR	9/16/2022	N/A	Class 2: at least 2 previously failed therapies required
Venlafaxine ER 112.5mg	9/16/2022	N/A	Class 2: at least 2 previously failed therapies required
Entadri	9/16/2022	N/A	Class 2: at least 2 previously failed therapies required
Ryaltis	11/18/2022	N/A	Class 2: at least 2 previously failed therapies required
Zonisomide 100mg/5ml	11/18/2022	N/A	Class 2: at least 2 previously failed therapies required
Tadliq	11/18/2022	N/A	Class 2: at least 2 previously failed therapies required
Methocarbamol	11/18/2022	N/A	Class 2: at least 2 previously failed therapies required
Allopurinol 200mg	11/18/2022	N/A	Class 2: at least 2 previously failed therapies required
Furoscix	11/18/2022	N/A	Class 2: at least 2 previously failed therapies required
Kelstrym	11/18/2022	N/A	Class 2: at least 2 previously failed therapies required
Methylphenidate Er	11/17/2022	N/A	Class 2: at least 2 previously failed therapies required
Relexxii ER	11/18/2022	N/A	Class 2: at least 2 previously failed therapies required
Tascenso ODT	12/15/2022	N/A	Class 2: at least 2 previously failed therapies required
Ezetimibe-atorvastatin	6/1/2023	N/A	Class 2: at least 2 previously failed therapies required
Aponvie	6/1/2023	N/A	Class 2: at least 2 previously failed therapies required
Konvomep	6/1/2023	N/A	Class 2: at least 2 previously failed therapies required
Piperacillin-tazobactam	4/21/2023	N/A	Class 2: at least 2 previously failed therapies required
Streptomycin	4/21/2023	N/A	Class 2: at least 2 previously failed therapies required
Amphotericin B	4/21/2023	N/A	Class 2: at least 2 previously failed therapies required
Voriconazole (injection)	4/21/2023	N/A	Class 2: at least 2 previously failed therapies required
Baclofen suspension	11/1/2023	N/A	Class 2: at least 2 previously failed therapies required
Lumyz	11/1/2023	N/A	Class 2: at least 2 previously failed therapies required
Zolpidem 7.5mg	11/1/2023	N/A	Class 2: at least 2 previously failed therapies required
Zavzpret	11/1/2023	N/A	Class 2: at least 2 previously failed therapies required
Luprev	11/1/2023	N/A	Class 2: at least 2 previously failed therapies required
Izuzeh	11/1/2023	N/A	Class 2: at least 2 previously failed therapies required
Airsupra	1/1/2024	N/A	Class 2: at least 2 previously failed therapies required
Glipizide 2.5mg	1/1/2024	N/A	Class 2: at least 2 previously failed therapies required
Ozobax DS	3/1/2024	N/A	Class 2: at least 2 previously failed therapies required
Calbreco	3/1/2024	N/A	Class 2: at least 2 previously failed therapies required
lyamvo	3/1/2024	N/A	Class 2: at least 2 previously failed therapies required
Coanto	3/1/2024	N/A	Class 2: at least 2 previously failed therapies required
Oxaprozin 300mg	3/1/2024	N/A	Class 2: at least 2 previously failed therapies required
Tramadol 25mg tablet	4/19/2024	N/A	Class 2: at least 2 previously failed therapies required
Nitroglycerin Ointment	4/19/2024	N/A	Class 2: at least 2 previously failed therapies required
Alvaiz	4/19/2024	N/A	Class 2: at least 2 previously failed therapies required
Winrevair	9/20/2024	Moved to MAP 11/15/2024	Class 2: at least 2 previously failed therapies required
Baclofen 15mg	9/20/2024	N/A	Class 2: at least 2 previously failed therapies required
Tryvio	9/20/2024	N/A	Class 2: at least 2 previously failed therapies required
Acitretin	9/20/2024	N/A	Class 2: at least 2 previously failed therapies required
Libervant	9/20/2024	N/A	Class 2: at least 2 previously failed therapies required
Adbry	9/20/2024	N/A	Class 2: at least 2 previously failed therapies required
Ohtuwaye	9/20/2024	N/A	Class 2: at least 2 previously failed therapies required
Ondansetron 16mg ODT	9/20/2024	N/A	Class 2: at least 2 previously failed therapies required
Halcionide	9/20/2024	N/A	Class 2: at least 2 previously failed therapies required
Vafseo	9/20/2024	N/A	Class 2: at least 2 previously failed therapies required
Tanlor	9/20/2024	N/A	Class 2: at least 2 previously failed therapies required
Crexont ER	9/20/2024	N/A	Class 2: at least 2 previously failed therapies required
Uvidesi	9/20/2024	Moved to Class 1 5/19/2026	Class 2: at least 2 previously failed therapies required
Onydia XR	9/20/2024	N/A	Class 2: at least 2 previously failed therapies required
Oxycedone tablet (Bryant Ranch)	11/15/2024	N/A	Class 2: at least 2 previously failed therapies required
Zituvimet	11/15/2024	N/A	Class 2: at least 2 previously failed therapies required
Glimepiride 3mg	11/15/2024	N/A	Class 2: at least 2 previously failed therapies required
Azmiro	11/15/2024	N/A	Class 2: at least 2 previously failed therapies required
Opiqza	11/15/2024	N/A	Class 2: at least 2 previously failed therapies required
Enrosi	11/15/2024	N/A	Class 2: at least 2 previously failed therapies required
Tryngolza	11/15/2024	N/A	Class 2: at least 2 previously failed therapies required
Hydrocortisone 2.5% sol'n	11/15/2024	N/A	Class 2: at least 2 previously failed therapies required
Tramadol 75mg	11/15/2024	N/A	Class 2: at least 2 previously failed therapies required
Memantine/donepezil ER	1/10/2025	N/A	Class 2: at least 2 previously failed therapies required
Journalvix	2/4/2025	N/A	Class 2: at least 2 previously failed therapies required
Mataxalone 640mg	2/25/2025	N/A	Class 2: at least 2 previously failed therapies required
Ralidesy	3/3/2025	N/A	Class 2: at least 2 previously failed therapies required
Inzirgo	3/10/2025	N/A	Class 2: at least 2 previously failed therapies required
Symbravo	3/14/2025	N/A	Class 2: at least 2 previously failed therapies required
Finasteride-Tadalafil	3/28/2025	N/A	Class 2: at least 2 previously failed therapies required
Terulry	4/3/2025	N/A	Class 2: at least 2 previously failed therapies required
Combogescic	4/8/2025	N/A	Class 2: at least 2 previously failed therapies required
Arbli	4/16/2025	N/A	Class 2: at least 2 previously failed therapies required
Bisoprolol 2.5mg	4/11/2025	N/A	Class 2: at least 2 previously failed therapies required
Dolobid	4/18/2025	N/A	Class 2: at least 2 previously failed therapies required
Hemiclor	5/1/2025	N/A	Class 2: at least 2 previously failed therapies required
Lopressor 10mg/ml	7/7/2025	N/A	Class 2: at least 2 previously failed therapies required
Topiramate 25mg/ml	7/7/2025	N/A	Class 2: at least 2 previously failed therapies required
Escitalopram 15mg	9/19/2025	N/A	Class 2: at least 2 previously failed therapies required
Zanaflex 8mg	9/23/2025	N/A	Class 2: at least 2 previously failed therapies required
Carbidopa-levodopa ER capsule	10/20/2025	N/A	Class 2: at least 2 previously failed therapies required
Piperacillin-Tazo 4.5g	10/22/2025	N/A	Class 2: at least 2 previously failed therapies required
Vyscoxa	10/21/2025	N/A	Class 2: at least 2 previously failed therapies required
Tommy	10/24/2025	N/A	Class 2: at least 2 previously failed therapies required
Laxx Onny	11/12/2025	N/A	Class 2: at least 2 previously failed therapies required
Desloratadine 0.5mg/ml solution	11/17/2025	N/A	Class 2: at least 2 previously failed therapies required
Javadin	11/24/2025	N/A	Class 2: at least 2 previously failed therapies required
Metoprolol 12.5mg	1/5/2026	N/A	Class 2: at least 2 previously failed therapies required
Onidis	1/13/2026	N/A	Class 2: at least 2 previously failed therapies required
Salem	1/20/2026	N/A	Class 2: at least 2 previously failed therapies required
Lopressor 12.5mg	1/23/2026	N/A	Class 2: at least 2 previously failed therapies required
Ontrafly	2/3/2026	N/A	Class 2: at least 2 previously failed therapies required
Tizanidine 8mg capsule	2/10/2026	N/A	Class 2: at least 2 previously failed therapies required
Desmoda	3/2/2026	N/A	Class 2: at least 2 previously failed therapies required
Atmeksi 750mg/5ml	3/26/2026	N/A	Class 2: at least 2 previously failed therapies required
Atomoxetine oral solution	7/9/2026	N/A	Class 2: at least 2 previously failed therapies required
Alpmou	5/29/2026	N/A	Class 2: at least 2 previously failed therapies required
Baxferdy	5/19/2026	moved to MAP 11/1/2026	Class 2: at least 2 previously failed therapies required
Breznit Aerosphere	6/8/2026	N/A	Class 2: at least 2 previously failed therapies required
Busiprone 12.5mg tablet	6/5/2026	N/A	Class 2: at least 2 previously failed therapies required
Busiprone 2.5mg tablet	6/5/2026	N/A	Class 2: at least 2 previously failed therapies required
Clenidine 0.5mg	4/14/2026	N/A	Class 2: at least 2 previously failed therapies required
Duloxetine 80mg	6/23/2026	N/A	Class 2: at least 2 previously failed therapies required
Duloxetine 90mg	6/23/2026	N/A	Class 2: at least 2 previously failed therapies required
Duloxetine 120mg	6/23/2026	N/A	Class 2: at least 2 previously failed therapies required
Furoscix Readyflow	8/3/2026	N/A	Class 2: at least 2 previously failed therapies required
Fikri	5/13/2026	N/A	Class 2: at least 2 previously failed therapies required
Gabapentin 200mg	6/1/2026	N/A	Class 2: at least 2 previously failed therapies required
Glipizide 15mg	5/12/2026	N/A	Class 2: at least 2 previously failed therapies required
Nereus	4/3/2026	N/A	Class 2: at least 2 previously failed therapies required
Niktimvo	8/7/2026	N/A	Class 2: at least 2 previously failed therapies required
Relgaabi	3/30/2026	N/A	Class 2: at least 2 previously failed therapies required
Rizafilm	8/24/2026	N/A	Class 2: at least 2 previously failed therapies required
Stablipkin phos	5/28/2026	N/A	Class 2: at least 2 previously failed therapies required
Wicidapik	4/22/2026	N/A	Class 2: at least 2 previously failed therapies required
Zyiga	5/18/2011	N/A	Class 1: at least 1 previously failed therapy required
Zelboraf	9/8/2011	N/A	Class 1: at least 1 previously failed therapy required
Zioplan 0.0015% Eye Drops	3/14/2012	N/A	Class 1: at least 1 previously failed therapy required
Heconia 0.5mg, 1mg, 5mg	7/20/2012	N/A	Class 1: at least 1 previously failed therapy required
VioKace 10 and 20	9/21/2012	N/A	Class 1: at least 1 previously failed therapy required
Xandi 40mg	10/24/2011	N/A	Class 1: at least 1 previously failed therapy required
Linzess 145mcg and 290mcg	12/12/2012	N/A	Class 1: at least 1 previously failed therapy required
Iclusig 15mg and 45 mg	1/16/2013	N/A	Class 1: at least 1 previously failed therapy required
Cometriq 60mg,100mg,140mg	2/20/2013	N/A	Class 1: at least 1 previously failed therapy required
Gattex 5mg KIT	2/20/2013	N/A	Class 1: at least 1 previously failed therapy required
Fulvazac 125mg DR tablet	3/20/2013	N/A	Class 1: at least 1 previously failed therapy required
Sigifor ampule All strengths	4/24/2013	N/A	Class 1: at least 1 previously failed therapy required
Invokana 100mg,300mg	4/24/2013	N/A	Class 1: at least 1 previously failed therapy required
Osphena 60mg	5/22/2013	N/A	Class 1: at least 1 previously failed therapy required
Diclegis DR 10-10	5/22/2013	N/A	Class 1: at least 1 previously failed therapy required
Sirturo 100mg	5/22/2013	N/A	Class 1: at least 1 previously failed therapy required
Vescamiy 2.5mg	5/22/2013	N/A	Class 1: at least 1 previously failed therapy required
Mekinsat all strengths	7/17/2013	N/A	Class 1: at least 1 previously failed therapy required
Tafinar all strengths	7/17/2013	N/A	Class 1: at least 1 previously failed therapy required
Glicitrif all strengths	9/18/2013	N/A	Class 1: at least 1 previously failed therapy required
Mirvaso 0.33% Gel	9/18/2013	N/A	Class 1: at least 1 previously failed therapy required
Adempas (all strengths)	10/23/2013	N/A	Class 1: at least 1 previously failed therapy required
Vachkor Gel 0.016%	12/4/2013	N/A	Class 1: at least 1 previously failed therapy required
Noxafil DR 100mg tablet	12/7/2013	N/A	Class 1: at least 1 previously failed therapy required
Vagphoro	3/14/2014	N/A	Class 1: at least 1 previously failed therapy required
Kuvan powder pack	3/14/2014	N/A	Class 1: at least 1 previously failed therapy required
Tretten 2500 unit vial	4/11/2014	N/A	Class 1: at least 1 previously failed therapy required
Koentra kit	4/11/2014	N/A	Class 1: at least 1 previously failed therapy required
Noxafil vial	4/11/2014	N/A	Class 1: at least 1 previously failed therapy required
Aproxis vial (all strengths)	5/16/2014, 12/5/2016	N/A	Class 1: at least 1 previously failed therapy required
Grastek tab SL	5/16/2014	N/A	Class 1: at least 1 previously failed therapy required
Ragwitek tab SL	5/16/2014	N/A	Class 1: at least 1 previously failed therapy required
Myalept vial	5/16/2014	N/A	Class 1: at least 1 previously failed therapy required
Cyramza vial	5/16/2014	N/A	Class 1: at least 1 previously failed therapy required
Tanzum pen injector	6/27/2014	N/A	Class 1: at least 1 previously failed therapy required
Stavis buccal tab	6/27/2014	N/A	Class 1: at least 1 previously failed therapy required
Sylvant	7/25/2014	N/A	Class 1: at least 1 previously failed therapy required
Karbinal ER Suspension	7/25/2014	N/A	Class 1: at least 1 previously failed therapy required
Ablyn	7/25/2014	N/A	Class 1: at least 1 previously failed therapy required
Sivextro vial and tablet	7/25/2014	N/A	Class 1: at least 1 previously failed therapy required
Silent	7/25/2014	N/A	Class 1: at least 1 previously failed therapy required
Koentra (all forms)	7/25/2014	N/A	Class 1: at least 1 previously failed therapy required
Dalvance	7/25/2014	N/A	Class 1: at least 1 previously failed therapy required
Entyvio	7/25/2014, Updated 3/1/2023	N/A	Moved to MAP PA list
Midazolam PF 10mg/2mL syringe	10/17/2014	N/A	Class 1: at least 1 previously failed therapy required
Beledoaq	10/17/2014	N/A	Class 1: at least 1 previously failed therapy required
Northera	10/17/2014	N/A	Class 1: at least 1 previously failed therapy required
Keytruda	10/17/2014	N/A	Class 1: at least 1 previously failed therapy required
Tylosol	12/19/2014	N/A	Class 1: at least 1 previously failed therapy required
Esbriet	12/19/2014	N/A	Class 1: at least 1 previously failed therapy required
Olev	12/19/2014	N/A	Class 1: at least 1 previously failed therapy required
Belsomra (all strengths)	1/9/2015	N/A	Class 1: at least 1 previously failed therapy required
Lynparza	1/9/2015	N/A	Class 1: at least 1 previously failed therapy required
Zerbaxa	1/9/2015	N/A	Class 1: at least 1 previously failed therapy required
Scoliotra cream	1/9/2015	N/A	Class 1: at least 1 previously failed therapy required
Incruse Ellipta	1/9/2015	N/A	Class 1: at least 1 previously failed therapy required
Reyataz powder pack	1/9/2015	N/A	Class 1: at least 1 previously failed therapy required
Paricalcitol	2/6/2015	N/A	Class 1: at least 1 previously failed therapy required
Neulasta syringe	2/6/2015	N/A	Class 1: at least 1 previously failed therapy required
Evotaz tab	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Cholibam cap	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Prezcobix tab	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required

Medication	Date Added	Date Removed	Additional Notes
Prestalia tab	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Rexulti tab	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Entresto tab	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Onxomitab 200/125mg, 100/125mg	7/31/2015, 11/7/2016	N/A	Class 1: at least 1 previously failed therapy required
Invega Trinza	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Dorxy DR tab - all strengths	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Stiolto Respimat	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Ixinity	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Seroquel XR dosepack	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Ludogel - all strengths	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Gammagard S-D	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Levoleucovorin calcium	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Jadenu	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Cresamba vial	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Gammunex	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Gammagard liquid	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Plavigin	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Novoseight	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Farydak cap	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Lenvima cap	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Signifor LAR - all strengths	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Pazeo ophth	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Ibrance cap	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Cosentyx - all strengths, all forms	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Glyxambi tab	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Movantik tab	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Vilektia tab	7/31/2015	N/A	Class 1: at least 1 previously failed therapy required
Ravict	11/16/2015	N/A	Class 1: at least 1 previously failed therapy required
Stiolto Respimat	11/16/2015	N/A	Class 1: at least 1 previously failed therapy required
Odorono	11/16/2015	N/A	Class 1: at least 1 previously failed therapy required
Praluent syringe, vial	11/16/2015	N/A	Class 1: at least 1 previously failed therapy required
Repatha Syringe, Sureclick	11/16/2015	N/A	Class 1: at least 1 previously failed therapy required
Kevevis	11/16/2015	N/A	Class 1: at least 1 previously failed therapy required
Ceenu	11/30/2015	N/A	Class 1: at least 1 previously failed therapy required
Lithbron	11/30/2015	N/A	Class 1: at least 1 previously failed therapy required
Genvoya	11/30/2015	N/A	Class 1: at least 1 previously failed therapy required
Viberzi	11/30/2015	N/A	Class 1: at least 1 previously failed therapy required
Cotellic	11/30/2015	N/A	Class 1: at least 1 previously failed therapy required
Ninlaro Capsule	12/21/2015	N/A	Class 1: at least 1 previously failed therapy required
Adynovate Vial	12/21/2015	N/A	Class 1: at least 1 previously failed therapy required
Yellasa	12/21/2015	N/A	Class 1: at least 1 previously failed therapy required
Bendeka	1/11/2016	N/A	Class 1: at least 1 previously failed therapy required
Portrazza	1/11/2016	N/A	Class 1: at least 1 previously failed therapy required
Odefsey	3/25/2016	N/A	Class 1: at least 1 previously failed therapy required
Idelvion	3/25/2016	N/A	Class 1: at least 1 previously failed therapy required
Cinqair	4/28/2016	N/A	Class 1: at least 1 previously failed therapy required
Wilate	4/28/2016	N/A	Class 1: at least 1 previously failed therapy required
Impavido	4/28/2016	N/A	Class 1: at least 1 previously failed therapy required
Briviact	4/28/2016	N/A	Class 1: at least 1 previously failed therapy required
Venclexta	4/28/2016	N/A	Class 1: at least 1 previously failed therapy required
Cabometyx	5/30/2016	N/A	Class 1: at least 1 previously failed therapy required
Orinase	5/30/2016	N/A	Class 1: at least 1 previously failed therapy required
Mivvaso 0.33% Gel Pump	5/30/2016	N/A	Class 1: at least 1 previously failed therapy required
Ocaliva	6/23/2016	N/A	Class 1: at least 1 previously failed therapy required
Cetylev	6/23/2016	N/A	Class 1: at least 1 previously failed therapy required
Hyqvia IG Component	6/23/2016	N/A	Class 1: at least 1 previously failed therapy required
Hyqvia HY Component	6/23/2016	N/A	Class 1: at least 1 previously failed therapy required
Lenvima	6/23/2016	N/A	Class 1: at least 1 previously failed therapy required
Astyla	6/23/2016	N/A	Class 1: at least 1 previously failed therapy required
Protophine	6/23/2016	N/A	Class 1: at least 1 previously failed therapy required
Jentadueto XR	7/7/2016	N/A	Class 1: at least 1 previously failed therapy required
Repatha Pushtronex	8/1/2016	N/A	Class 1: at least 1 previously failed therapy required
Vonvendi	8/1/2016	N/A	Class 1: at least 1 previously failed therapy required
Rayaldee	12/5/2016	N/A	Class 1: at least 1 previously failed therapy required
Solosec	12/14/2016	N/A	Class 1: at least 1 previously failed therapy required
Lokelma	12/14/2018	N/A	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
Revcovi	3/11/2019	N/A	Class 1: at least 1 previously failed therapy required
Nivestym	4/19/2019	N/A	Class 1: at least 1 previously failed therapy required
Tirocent solution	4/19/2019	N/A	Class 1: at least 1 previously failed therapy required
Eloquis	4/19/2019	N/A	Class 1: at least 1 previously failed therapy required
Biluvia	4/19/2019	N/A	Class 1: at least 1 previously failed therapy required
Douobrii	9/20/2019	N/A	Class 1: at least 1 previously failed therapy required
Cautaquig	9/20/2019	N/A	Class 1: at least 1 previously failed therapy required
Aklief	11/15/2019	N/A	Class 1: at least 1 previously failed therapy required
Fasena Pen	11/15/2019	N/A	Class 1: at least 1 previously failed therapy required
Drizalma Sprinkle	11/15/2019	N/A	Class 1: at least 1 previously failed therapy required
Fiasp Penfill	11/15/2019	N/A	Class 1: at least 1 previously failed therapy required
Wakix	11/15/2019	N/A	Class 1: at least 1 previously failed therapy required
Nyzilam	11/15/2019	N/A	Class 1: at least 1 previously failed therapy required
Gvoke	11/15/2019	N/A	Class 1: at least 1 previously failed therapy required
Myxredlin	11/15/2019	N/A	Class 1: at least 1 previously failed therapy required
Zientenz	1/17/2020	N/A	Class 1: at least 1 previously failed therapy required
Reblozyl	1/17/2020	N/A	Class 1: at least 1 previously failed therapy required
Nexletol	4/17/2020	N/A	Class 1: at least 1 previously failed therapy required
Nurtec ODT	4/17/2020	N/A	Class 1: at least 1 previously failed therapy required
Palforzia	4/17/2020	N/A	Class 1: at least 1 previously failed therapy required
Revvity	4/17/2020	N/A	Class 1: at least 1 previously failed therapy required
Caphyta Capsule	4/17/2020	N/A	Class 1: at least 1 previously failed therapy required
Ubrelvy	4/17/2020	N/A	Class 1: at least 1 previously failed therapy required
Esperoct	4/17/2020	N/A	Class 1: at least 1 previously failed therapy required
Secuado	4/17/2020	N/A	Class 1: at least 1 previously failed therapy required
Ortikos	9/18/2020	N/A	Class 1: at least 1 previously failed therapy required
Fintepia	9/18/2020	N/A	Class 1: at least 1 previously failed therapy required
Bynfexia	9/18/2020	N/A	Class 1: at least 1 previously failed therapy required
Lymjev	9/18/2020	N/A	Class 1: at least 1 previously failed therapy required
Kynmobi	9/18/2020	N/A	Class 1: at least 1 previously failed therapy required
Oriahnn	9/18/2020	N/A	Class 1: at least 1 previously failed therapy required
Zeposia	9/18/2020	N/A	Class 1: at least 1 previously failed therapy required
Bonsiv	9/18/2020	N/A	Class 1: at least 1 previously failed therapy required
Xcopri	9/18/2020	N/A	Class 1: at least 1 previously failed therapy required
Alkindi Sprinkle	10/20/2021	N/A	Class 1: at least 1 previously failed therapy required
Ongentys	10/20/2021	N/A	Class 1: at least 1 previously failed therapy required
Semglee	10/20/2021	N/A	Class 1: at least 1 previously failed therapy required
Kesimpta	10/20/2021	N/A	Class 1: at least 1 previously failed therapy required
Orinaseo	1/15/2021	N/A	Class 1: at least 1 previously failed therapy required
Verquvo	4/16/2021	N/A	Class 1: at least 1 previously failed therapy required
Klisyri	4/16/2021	N/A	Class 1: at least 1 previously failed therapy required
Gemtesa	4/16/2021	N/A	Class 1: at least 1 previously failed therapy required
Thyquidity	4/16/2021	N/A	Class 1: at least 1 previously failed therapy required
Saphnelo	9/17/2021	N/A	Class 1: at least 1 previously failed therapy required
Bykay	9/17/2021	N/A	Class 1: at least 1 previously failed therapy required
Kerendia	9/17/2021	Moved to MAP PA 1/4/2022	Class 1: at least 1 previously failed therapy required
Rylaze	9/17/2021	N/A	Class 1: at least 1 previously failed therapy required
Brexafemme	9/17/2021	N/A	Class 1: at least 1 previously failed therapy required
Kimrysa	9/17/2021	N/A	Class 1: at least 1 previously failed therapy required
Empaveli	9/17/2021	N/A	Class 1: at least 1 previously failed therapy required
Qalbree ER	9/17/2021	N/A	Class 1: at least 1 previously failed therapy required
Zegalogue	9/17/2021	N/A	Class 1: at least 1 previously failed therapy required
Ponvory	9/17/2021	N/A	Class 1: at least 1 previously failed therapy required
Tavneos	11/19/2021	N/A	Class 1: at least 1 previously failed therapy required
Livmarli	11/19/2021	N/A	Class 1: at least 1 previously failed therapy required
Trudhesa	11/19/2021	N/A	Class 1: at least 1 previously failed therapy required
Unasolol 200mg & 400mg	11/19/2021	N/A	Class 1: at least 1 previously failed therapy required
Livtenicity	1/17/2022	N/A	Class 1: at least 1 previously failed therapy required
Besremi	1/17/2022	N/A	Class 1: at least 1 previously failed therapy required
Infliximab (biosimilar)	1/17/2022	N/A	Class 1: at least 1 previously failed therapy required
Everolimus	1/17/2022	N/A	Class 1: at least 1 previously failed therapy required
Elyxb	1/17/2022	N/A	Class 1: at least 1 previously failed therapy required
Injectafer	1/17/2022	N/A	Class 1: at least 1 previously failed therapy required
Vuity	1/17/2022	N/A	Class 1: at least 1 previously failed therapy required
Gvoke	1/17/2022	N/A	Class 1: at least 1 previously failed therapy required
Tetzpire	4/15/2022	N/A	Class 1: at least 1 previously failed therapy required
Tarpeyo	4/15/2022	N/A	Class 1: at least 1 previously failed therapy required
Deferiprone	4/15/2022	N/A	Class 1: at least 1 previously failed therapy required
Vasostriect	4/15/2022	N/A	Class 1: at least 1 previously failed therapy required
Digoxin 62.5mg	4/15/2022	N/A	Class 1: at least 1 previously failed therapy required
Ibupro	4/15/2022	N/A	Class 1: at least 1 previously failed therapy required
Soaanz	4/15/2022	N/A	Class 1: at least 1 previously failed therapy required
Recorlev	4/15/2022	N/A	Class 1: at least 1 previously failed therapy required
Vtama	9/16/2022	N/A	Class 1: at least 1 previously failed therapy required
Radicava	9/16/2022	N/A	Class 1: at least 1 previously failed therapy required
Camayor	9/16/2022	N/A	Class 1: at least 1 previously failed therapy required
Norditva	9/16/2022	N/A	Class 1: at least 1 previously failed therapy required
Valsartan liquid	9/16/2022	N/A	Class 1: at least 1 previously failed therapy required
Verkazia	9/16/2022	N/A	Class 1: at least 1 previously failed therapy required
Tlando	9/16/2022	N/A	Class 1: at least 1 previously failed therapy required
Adaliray	9/16/2022	N/A	Class 1: at least 1 previously failed therapy required
Etalmu	9/16/2022	N/A	Class 1: at least 1 previously failed therapy required
Amvuttra	9/16/2022	N/A	Class 1: at least 1 previously failed therapy required
Zoryve	9/16/2022	N/A	Class 1: at least 1 previously failed therapy required
Dorxy DR	11/18/2022	N/A	Class 1: at least 1 previously failed therapy required
Pheburane Pellet	11/18/2022	N/A	Class 1: at least 1 previously failed therapy required
Spevigo	11/18/2022	N/A	Class 1: at least 1 previously failed therapy required
Sonyku	11/18/2022	N/A	Class 1: at least 1 previously failed therapy required
Auveilly	11/18/2022	N/A	Class 1: at least 1 previously failed therapy required
Fylnetra	11/18/2022	N/A	Class 1: at least 1 previously failed therapy required
Rolivedon	11/18/2022	N/A	Class 1: at least 1 previously failed therapy required
Ermeza	11/18/2022	N/A	Class 1: at least 1 previously failed therapy required
Stimufend	12/14/2022	N/A	Class 1: at least 1 previously failed therapy required
Amjevita	6/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Atoralig	6/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Oxybutinin	6/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Primidone 125mg	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Sogroya	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Amjevita 10mg	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Vezoh	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Misibo	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Yusimry	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Idacio	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Adalimumab-FKP	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Hulio	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Cytexo	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Adalimumab-ADAZ(cf)	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Sulfave	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Yuflyma(cf)	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Hyrmoz(cf)	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Xdermy	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Ycanth	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Ngentia pen	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required
Brenzavvy	11/1/2023	N/A	Class 1: at least 1 previously failed therapy required

Medication	Date Added	Date Removed	Additional Notes
Opvee	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Lodoco	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Nitrofurantoin 20mg/5ml susp	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Iesduwroq	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Ojinsa	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Adalimumab-ADBM	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Hyrmoz	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Trientine	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Motpoly XR	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Abriada	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Bimzelx	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Likmez	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Baclofen 10mg/5ml	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Velsipity	1/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Xphozah	3/1/2024	N/A	Class 1: at least 1 previously failed therapy required
OmvoH	3/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Bevagliflozin	3/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Voquezna	3/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Yuflyma(cf)	3/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Amjevita	3/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Adalimumab	3/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Yeye	3/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Ziluvio	3/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Zoryve	3/1/2024	N/A	Class 1: at least 1 previously failed therapy required
Zilbrysq	4/19/2024	N/A	Class 1: at least 1 previously failed therapy required
Agamree	4/19/2024	N/A	Class 1: at least 1 previously failed therapy required
Filsuvez	4/19/2024	N/A	Class 1: at least 1 previously failed therapy required
Opyemv	4/19/2024	N/A	Class 1: at least 1 previously failed therapy required
Simlanti	4/19/2024	N/A	Class 1: at least 1 previously failed therapy required
Eohilia	4/19/2024	N/A	Class 1: at least 1 previously failed therapy required
Tiopronin DR	4/19/2024	N/A	Class 1: at least 1 previously failed therapy required
sitagliptin	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
adalimumab-aat	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
adalimumab-nyk	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
adalimumab	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Cyltezo	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Tofidence	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
OmvoH	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
metronidazole(generic Nuessa)	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Myhibbin	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Focimez	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Hydrocortisone 2%	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Iqirvo	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Rytelo	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Sitagliptin-metformin	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Hulio	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Sofdra	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Zoryve	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Tacrolimus XL	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Livmarli	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Zigafyde	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Nemivuvio	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Idacio	9/20/2024	N/A	Class 1: at least 1 previously failed therapy required
Yorvipath	11/15/2024	Moved to MAP PA 6/1/2026	Class 1: at least 1 previously failed therapy required
Ebgyss	11/15/2024	Moved to MAP PA 6/1/2026	Class 1: at least 1 previously failed therapy required
Miplyffa	11/15/2024	N/A	Class 1: at least 1 previously failed therapy required
Cobenfy	11/15/2024	N/A	Class 1: at least 1 previously failed therapy required
Alcraftadine	11/15/2024	N/A	Class 1: at least 1 previously failed therapy required
Ydale	11/15/2024	N/A	Class 1: at least 1 previously failed therapy required
Ryzumvi	1/17/2025	N/A	Class 1: at least 1 previously failed therapy required
Sacubitril-valsartan	1/17/2025	N/A	Class 1: at least 1 previously failed therapy required
Simlanti	1/17/2025	N/A	Class 1: at least 1 previously failed therapy required
Adalimumab-adaz	1/17/2025	N/A	Class 1: at least 1 previously failed therapy required
Labetalol 400mg	1/17/2025	N/A	Class 1: at least 1 previously failed therapy required
Conesity	1/17/2025	N/A	Class 1: at least 1 previously failed therapy required
Weszlana	1/17/2025	N/A	Class 1: at least 1 previously failed therapy required
Taltz	4/18/2025	N/A	Class 1: at least 1 previously failed therapy required
Tobramycin 300mg/4ml	4/18/2025	N/A	Class 1: at least 1 previously failed therapy required
Alhemo	4/18/2025	N/A	Class 1: at least 1 previously failed therapy required
Metformin 750mg	4/18/2025	N/A	Class 1: at least 1 previously failed therapy required
Tosipramate 50mg sprinkle	4/18/2025	N/A	Class 1: at least 1 previously failed therapy required
Metronidazole 125mg	4/18/2025	N/A	Class 1: at least 1 previously failed therapy required
Niktimo	4/18/2025	N/A	Class 1: at least 1 previously failed therapy required
Simlanti	4/18/2025	N/A	Class 1: at least 1 previously failed therapy required
OmvoH	4/18/2025	N/A	Class 1: at least 1 previously failed therapy required
Xromi	4/18/2025	N/A	Class 1: at least 1 previously failed therapy required
Zunveyi DR	4/18/2025	N/A	Class 1: at least 1 previously failed therapy required
Qffitia	4/18/2025	N/A	Class 1: at least 1 previously failed therapy required
Vanrafia	4/4/2025	N/A	Class 1: at least 1 previously failed therapy required
Vvygart Hytrulio	4/11/2025	N/A	Class 1: at least 1 previously failed therapy required
Jubbonti	5/5/2025	N/A	Class 1: at least 1 previously failed therapy required
Livmarli	5/5/2025	N/A	Class 1: at least 1 previously failed therapy required
Piscarpine 1.25%	5/8/2025	N/A	Class 1: at least 1 previously failed therapy required
Wyost	5/5/2025	N/A	Class 1: at least 1 previously failed therapy required
Eltrombopag	5/13/2025	N/A	Class 1: at least 1 previously failed therapy required
Sitagliptin/metformin	5/13/2025	N/A	Class 1: at least 1 previously failed therapy required
BucapsoL	5/19/2025	N/A	Class 1: at least 1 previously failed therapy required
Yutrepia	5/24/2025	N/A	Class 1: at least 1 previously failed therapy required
Rhindiwi	5/26/2025	N/A	Class 1: at least 1 previously failed therapy required
Zelsuvmi	6/2/2025	N/A	Class 1: at least 1 previously failed therapy required
Brynovin	6/17/2025	N/A	Class 1: at least 1 previously failed therapy required
Andembry	6/18/2025	Moved to MAP PA 11/1/2025	Class 1: at least 1 previously failed therapy required
Tryptyr	6/23/2025	N/A	Class 1: at least 1 previously failed therapy required
Ekerlyr	7/7/2025	Moved to MAP PA 11/1/2025	Class 1: at least 1 previously failed therapy required
Dicyclanide 40mg	7/18/2025	N/A	Class 1: at least 1 previously failed therapy required
Anzupgo 2% cream	7/25/2025	Moved to MAP PA 3/1/2026	Class 1: at least 1 previously failed therapy required
Spevigo	7/25/2025	N/A	Class 1: at least 1 previously failed therapy required
Sephience powder	7/30/2025	N/A	Class 1: at least 1 previously failed therapy required
Vizz	8/4/2025	N/A	Class 1: at least 1 previously failed therapy required
Gvokex Vialdx	8/15/2025	N/A	Class 1: at least 1 previously failed therapy required
Dawniera	8/22/2025	Moved to MAP PA 01/01/2026	Class 1: at least 1 previously failed therapy required
Blupspa	9/8/2025	N/A	Class 1: at least 1 previously failed therapy required
Doptelet Sprinkle	9/22/2025	N/A	Class 1: at least 1 previously failed therapy required
Enbumyst	9/22/2025	N/A	Class 1: at least 1 previously failed therapy required
Exxua ER	9/23/2025	N/A	Class 1: at least 1 previously failed therapy required
Otezla XR 75	9/22/2025	N/A	Class 1: at least 1 previously failed therapy required
Paksonify	9/29/2025	N/A	Class 1: at least 1 previously failed therapy required
Rhapido	10/1/2025	Moved to MAP PA 3/1/2026	Class 1: at least 1 previously failed therapy required
Jascayd	10/8/2025	Moved to MAP PA 3/1/2026	Class 1: at least 1 previously failed therapy required
Zoryve 0.05% cream	10/8/2025	N/A	Class 1: at least 1 previously failed therapy required
Glycerol phenylbut	10/16/2025	N/A	Class 1: at least 1 previously failed therapy required
Lynkuet	10/27/2025	N/A	Class 1: at least 1 previously failed therapy required
Subvenite suspension	11/10/2025	N/A	Class 1: at least 1 previously failed therapy required
Redempro	11/20/2025	Moved to MAP PA 6/1/2026	Class 1: at least 1 previously failed therapy required
Omlonti	12/2/2025	N/A	Class 1: at least 1 previously failed therapy required
Voyxact	12/1/2025	Moved to MAP PA 6/1/2026	Class 1: at least 1 previously failed therapy required
Pokanza	12/5/2025	N/A	Class 1: at least 1 previously failed therapy required
CDV-Adalimumab	12/12/2025	N/A	Class 1: at least 1 previously failed therapy required
Cefixime	12/16/2025	N/A	Class 1: at least 1 previously failed therapy required
Potassium 40mEq packet	12/17/2025	N/A	Class 1: at least 1 previously failed therapy required
Tobramycin-loteprednol	12/18/2025	N/A	Class 1: at least 1 previously failed therapy required
Cardamyst	12/19/2025	N/A	Class 1: at least 1 previously failed therapy required
Exdensur	12/19/2025	N/A	Class 1: at least 1 previously failed therapy required
Gammagard Liquid ERC	1/9/2026	N/A	Class 1: at least 1 previously failed therapy required
Myqozzo	1/13/2026	Moved to MAP PA 6/1/2026	Class 1: at least 1 previously failed therapy required
Phya	1/20/2026	N/A	Class 1: at least 1 previously failed therapy required
Nystatin Enfit Syringe	1/30/2026	N/A	Class 1: at least 1 previously failed therapy required
Tapentadol	2/2/2026	N/A	Class 1: at least 1 previously failed therapy required
Rilpivirine	2/10/2026	N/A	Class 1: at least 1 previously failed therapy required
Oriadevo	2/19/2026	N/A	Class 1: at least 1 previously failed therapy required
Avtozma	2/24/2026	N/A	Class 1: at least 1 previously failed therapy required
Loargys	2/25/2026	N/A	Class 1: at least 1 previously failed therapy required
Yuvezzi	2/23/2026	N/A	Class 1: at least 1 previously failed therapy required
Yuviwel	3/2/2026	N/A	Class 1: at least 1 previously failed therapy required
Contepo	3/4/2026	N/A	Class 1: at least 1 previously failed therapy required
Arynta 10mg/ml sol	3/16/2026	N/A	Class 1: at least 1 previously failed therapy required
Icityde	3/19/2026	N/A	Class 1: at least 1 previously failed therapy required
Kygevi	3/13/2026	N/A	Class 1: at least 1 previously failed therapy required
Letrochol	3/18/2026	N/A	Class 1: at least 1 previously failed therapy required
Neulasta	3/20/2026	N/A	Class 1: at least 1 previously failed therapy required
Livdelzi	5/19/2026	N/A	Class 1: at least 1 previously failed therapy required
Awikli	7/10/2026	N/A	Class 1: at least 1 previously failed therapy required
Besemi	7/20/2026	N/A	Class 1: at least 1 previously failed therapy required
BucapsoL 5mg	7/27/2026	N/A	Class 1: at least 1 previously failed therapy required
Blyqlvi	4/2/2026	N/A	Class 1: at least 1 previously failed therapy required
Bysanti	5/13/2026	N/A	Class 1: at least 1 previously failed therapy required
Doxycycline 75mg cap	7/6/2026	N/A	Class 1: at least 1 previously failed therapy required
Folic acid oral solution	5/12/2026	N/A	Class 1: at least 1 previously failed therapy required
Lipifendra	7/21/2026	N/A	Class 1: at least 1 previously failed therapy required
Lumvea	6/30/2026	N/A	Class 1: at least 1 previously failed therapy required
Lynavoy	6/17/2026	N/A	Class 1: at least 1 previously failed therapy required
Quiofic oral solution	4/23/2026	N/A	Class 1: at least 1 previously failed therapy required
Tofactinib ER	5/15/2026	N/A	Class 1: at least 1 previously failed therapy required
Trutakna	7/8/2026	N/A	Class 1: at least 1 previously failed therapy required
Tapentadol solution	7/10/2026	N/A	Class 1: at least 1 previously failed therapy required
Unsolign 150mg	7/23/2026	N/A	Class 1: at least 1 previously failed therapy required
Xtizo	6/17/2026	N/A	Class 1: at least 1 previously failed therapy required
Zolymbus 0.01%	5/6/2026	N/A	Class 1: at least 1 previously failed therapy required
Ammuttra	6/21/2022	N/A	Class 0: verification of covered, labeled indication required
Aphexda	9/18/2023	N/A	Class 0: verification of covered, labeled indication required
Aqneurua	9/26/2024	N/A	Class 0: verification of covered, labeled indication required
Atovalliq	3/6/2023	N/A	Class 0: verification of covered, labeled indication required
Attrubry	11/26/2024	N/A	Class 0: verification of covered, labeled indication required
Avlayah	3/26/2026	N/A	Class 0: verification of covered, labeled indication required
Bosentan	6/17/2025	N/A	Class 0: verification of covered, labeled indication required
Brinsupri	8/13/2025	N/A	Class 0: verification of covered, labeled indication required
Cagevy	12/11/2023	N/A	Class 0: verification of covered, labeled indication required
Cresbina	1/30/2025	N/A	Class 0: verification of covered, labeled indication required
Curvir	4/3/2023	N/A	Class 0: verification of covered, labeled indication required
Daybue	3/15/2023	N/A	Class 0: verification of covered, labeled indication required
Daybue Stix	1/7/2026	N/A	Class 0: verification of covered, labeled indication required
Duvyzat	6/21/2024	N/A	Class 0: verification of covered, labeled indication required
Filspari	2/22/2023	N/A	Class 0: verification of covered, labeled indication required
Ferzinity	10/2/2025	N/A	Class 0: verification of covered, labeled indication required
Heqdudex Vial	5/27/2026	N/A	Class 0: verification of covered, labeled indication required
Hytor	6/28/2022	N/A	Class 0: verification of covered, labeled indication required
Kygevi	3/13/2026	N/A	Class 0: verification of covered, labeled indication required
Lenmeldy	3/21/2024	N/A	Class 0: verification of covered, labeled indication required
Lyfgenia	12/11/2023	N/A	Class 0: verification of covered, labeled indication required
Olorova	11/1/2024	N/A	Class 0: verification of covered, labeled indication required
Opfofda	10/2/2022	N/A	Class 0: verification of covered, labeled indication required
Papzimeos	8/20/2025	N/A	Class 0: verification of covered, labeled indication required

Medication	Date Added	Date Removed	Additional Notes
Plasky	7/15/2024	N/A	Class 0: verification of covered, labeled indication required
Pombiliti	10/2/2023	N/A	Class 0: verification of covered, labeled indication required
Radicava ORS	5/16/2022	N/A	Class 0: verification of covered, labeled indication required
Relivrio	9/30/2021	N/A	Class 0: verification of covered, labeled indication required
Rivfloza	1/22/2024	N/A	Class 0: verification of covered, labeled indication required
Ryzneuta	6/1/2026	N/A	Class 0: verification of covered, labeled indication required
Sohonos	8/29/2023	N/A	Class 0: verification of covered, labeled indication required
Tembeza	7/19/2022	N/A	Class 0: verification of covered, labeled indication required
Tobramycin	6/1/2025	N/A	Class 0: verification of covered, labeled indication required
Upluna	5/23/2022	N/A	Class 0: verification of covered, labeled indication required
Vovist	5/4/2023	N/A	Class 0: verification of covered, labeled indication required
Voydeya	4/3/2024	N/A	Class 0: verification of covered, labeled indication required
Wainua	12/26/2023	N/A	Class 0: verification of covered, labeled indication required
Wegovy	5/15/2024	N/A	Class 0: verification of covered, labeled indication required
Wegovy tablet	12/23/2025	N/A	Class 0: verification of covered, labeled indication required
Xenposyme	9/12/2021	N/A	Class 0: verification of covered, labeled indication required
Xocova	6/5/2026	N/A	Class 0: verification of covered, labeled indication required
Xolremdi	5/6/2024	N/A	Class 0: verification of covered, labeled indication required
Yartemlea	1/14/2026	N/A	Class 0: verification of covered, labeled indication required
Yimmugo	9/29/2025	N/A	Class 0: verification of covered, labeled indication required
Zipbound	1/30/2025	N/A	Class 0: verification of covered, labeled indication required
Zyubio	1/28/2026	N/A	Class 0: verification of covered, labeled indication required
Clotic	8/18/2026	N/A	Class 0: verification of covered, labeled indication required
Genglycos	8/25/2026	N/A	Class 0: verification of covered, labeled indication required
Pasatru	8/21/2026	N/A	Class 0: verification of covered, labeled indication required
Waskyra	8/4/2026	Moved to MAP PA 11/1/2026	Class 0: verification of covered, labeled indication required
Adlysi	11/16/2015	N/A	Drug Not Covered (7 AAC 105.110)
Papaverine/ Phentolamine/ Alprostadil	7/7/2016	N/A	Drug Not Covered (7 AAC 105.110)
Papaverine/ Alprostadil	7/7/2016	N/A	Drug Not Covered (7 AAC 105.110)
Papaverine/ Phentolamine	8/1/2016	N/A	Drug Not Covered (7 AAC 105.110)
Belviq XR	10/26/2016	N/A	Drug Not Covered (7 AAC 120.112 and 7 AAC 105.110)
Buprenorphine Powder	2/23/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Chorionic Gonadotropin Powder	3/2/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Codine Phosphate Powder	2/23/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Fentanyl Base Powder	2/23/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Fentanyl Citrate Powder	2/23/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Hydrocodone Bitartrate Powder	2/23/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Hydromorphone Powder	2/23/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Methadone Powder	2/23/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Minoxidil Powder	2/23/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Morphine Sulfate Powder	2/23/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Naltrexone Powder	2/23/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Oxycodone Powder	2/23/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Sildenafil Citrate Powder	2/23/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Sufentanyl Powder	2/23/2011	N/A	Active Pharmaceutical Ingredient (API) not covered
Aurigan Dtic (GSN 48556, 8112, 64389)	2/17/2011	N/A	Drug Not Covered- DESI or IRS drugs not covered
Hydrocodisone/Pramoaine (GSN 67048)	3/2/2011	N/A	Drug Not Covered- DESI or IRS drugs not covered
Belladonna/Phenobarbital (GSN 4777)	3/2/2011	N/A	Drug Not Covered- DESI or IRS drugs not covered
Vivitrol®	N/A	11/19/2010	PA requirement removed prior to implementation
Naltrexone Oral Tablets	N/A	5/9/2012	Removed from Prior Authorization
Nucynta ER	9/28/2011	7/31/2013 - See New ER Edit	Historical / Class 2: at least 2 previously failed therapies required
Dalirep	6/18/2012	12/29/2012	Class 1: at least 1 previously failed therapy required
Gabiflen	2/9/2011	9/28/2011	Historical / Class 1: at least 1 previously failed therapy required
Nexiclon™ XR	2/9/2011	10/17/2014	Historical / Class 2: at least 2 previously failed therapies required
Latuda®	2/9/2011	7/20/2012	Historical / Class 1: at least 1 previously failed therapy required
Safyral™	2/9/2011	9/28/2011	Historical / Class 2: at least 2 previously failed therapies required
Mayzent	4/19/2019	N/A	Historical / Class 1: at least 1 previously failed therapy required
Hectorol Injection	2/9/2011	9/28/2011	Historical / Class 2: at least 2 previously failed therapies required
Fortesta	2/16/2011	12/2/2012	Historical / Class 2: at least 2 previously failed therapies required
Nexa Select PMV	2/16/2011	9/28/2011	Historical / Class 2: at least 2 previously failed therapies required
Nestabs DHA combo pack	2/16/2011	9/28/2011	Historical / Class 2: at least 2 previously failed therapies required
Escavite Chewable Tablet	3/2/2011	9/28/2011	Historical / Class 2: at least 2 previously failed therapies required
Nephrocaps QT Tablet	3/2/2011	9/28/2011	Historical / Class 2: at least 2 previously failed therapies required
Aluvea Cream (all strengths)	3/23/2011	10/17/2014	Historical / Class 2: at least 2 previously failed therapies required
Citranatal Harmony	3/23/2011	9/28/2011	Historical / Class 2: at least 2 previously failed therapies required
Edarbi (all strengths)	3/23/2011	12/2/2012	Historical / Class 1: at least 1 previously failed therapy required
Clindacin PAC	3/23/2011	12/2/2012	Historical / Class 2: at least 2 previously failed therapies required
Alsuma	4/13/2011	12/2/2012	Historical / Class 2: at least 2 previously failed therapies required
Virasal	4/13/2011	11/30/2011	Historical / Class 2: at least 2 previously failed therapies required
Axiron	4/13/2011	12/2/2012	Historical / Class 2: at least 2 previously failed therapies required
Tropazone cream (combination #57)	4/13/2011	10/17/2014	Historical / Class 2: at least 2 previously failed therapies required
Corfact	4/13/2011	11/30/2011	Historical / Class 1: at least 1 previously failed therapy required
Nebusal	4/13/2011	11/30/2011	Historical / Class 2: at least 2 previously failed therapies required
Yervoy	4/13/2011	11/30/2011	Historical / Class 1: at least 1 previously failed therapy required
Sylatron	5/6/2011	12/2/2012	Historical / Class 1: at least 1 previously failed therapy required
Taron-Duo EC	5/6/2011	11/30/2011	Historical / Class 2: at least 2 previously failed therapies required
Neevo Combo Pack	5/6/2011	11/30/2011	Historical / Class 2: at least 2 previously failed therapies required
Satonet-EC	5/6/2011	11/30/2011	Historical / Class 2: at least 2 previously failed therapies required
EZFE Forte	5/6/2011	11/30/2011	Historical / Class 2: at least 2 previously failed therapies required
PROFE Forte	5/6/2011	11/30/2011	Historical / Class 2: at least 2 previously failed therapies required
Tradenta	5/18/2011	12/2/2012	Historical / Class 1: at least 1 previously failed therapy required
Andropel 1.62% gel pump	5/18/2011	12/2/2012	Historical / Class 2: at least 2 previously failed therapies required
Vibryd	6/15/2011	12/2/2012	Historical / Class 1: at least 1 previously failed therapy required
Staxi	6/15/2011	12/2/2012	Historical / Class 2: at least 2 previously failed therapies required
Genadur	6/15/2011	6/2012 Not Rebate Eligible	Historical / Class 1: at least 1 previously failed therapy required
Mononine	6/15/2011	2/1/2012	Historical / Class 1: at least 1 previously failed therapy required
Ciclodan Kit	6/15/2011	12/2/2012	Historical / Class 2: at least 2 previously failed therapies required
Desoni	7/1/2011	12/2/2012	Historical / Class 2: at least 2 previously failed therapies required
Viofelo/One	7/1/2011	2/1/2012	Historical / Class 2: at least 2 previously failed therapies required
Phoslyra	7/1/2011	12/2/2012	Historical / Class 2: at least 2 previously failed therapies required
Difodi	7/1/2011	12/2/2012	Historical / Class 1: at least 1 previously failed therapy required
Naprodrem	7/18/2011	12/2/2012	Historical / Class 2: at least 2 previously failed therapies required
Nuljix	7/18/2011	2/1/2012	Historical / Class 1: at least 1 previously failed therapy required
OB Complete 400	7/18/2011	2/1/2012	Historical / Class 2: at least 2 previously failed therapies required
Alzera	8/3/2011	2/29/2012	Historical / Class 1: at least 1 previously failed therapy required
Flu-Pred	8/3/2011	2/29/2012	Historical / Class 2: at least 2 previously failed therapies required
Comlera	8/24/2011	3/28/2012	Historical / Class 1: at least 1 previously failed therapy required
Purefe Plus	8/24/2011	3/28/2012	Historical / Class 2: at least 2 previously failed therapies required
Purefe OB Plus	8/24/2011	3/28/2012	Historical / Class 2: at least 2 previously failed therapies required
Arcapta Neohaler	8/24/2011	12/2/2012	Historical / Class 1: at least 1 previously failed therapy required
Sumadon	8/24/2011	12/2/2012	Historical / Class 2: at least 2 previously failed therapies required
OB Complete with DHA	8/24/2011	3/28/2012	Historical / Class 2: at least 2 previously failed therapies required
Edurant	9/8/2011	3/28/2012	Historical / Class 1: at least 1 previously failed therapy required
Adcetris	9/8/2011	3/28/2012	Historical / Class 1: at least 1 previously failed therapy required
Conzip ER	9/8/2011	12/2/2012	Historical / Class 2: at least 2 previously failed therapies required
Xyntha Solofuse	9/28/2011	5/2/2012	Historical / Class 1: at least 1 previously failed therapy required
Sonifone Topical Emulsion	9/28/2011	10/17/2014	Historical / Class 2: at least 2 previously failed therapies required
ANIMIL 3 with Vitamin D	9/28/2011	10/17/2014	Historical / Class 2: at least 2 previously failed therapies required
Cyanokit	11/2/2011	10/24/2012	Historical / Class 1: at least 1 previously failed therapy required
Neosalus Lotion	11/2/2011	10/17/2014	Historical / Class 2: at least 2 previously failed therapies required
Juvisync	11/2/2011	12/12/2012	Historical / Class 1: at least 1 previously failed therapy required
TL-Assure + DHA combo Pack	11/2/2011	10/24/2012	Historical / Class 2: at least 2 previously failed therapies required
Lyelle	11/9/2011	10/17/2014	Historical / Class 2: at least 2 previously failed therapies required
Hydrotic Plus Cream	11/9/2011	10/17/2014	Historical / Class 2: at least 2 previously failed therapies required
Androderm	11/23/2011	12/12/2012	Historical / Class 2: at least 2 previously failed therapies required
Nitromist	11/23/2011	10/24/2012	Historical / Class 1: at least 1 previously failed therapy required
Lamital	11/23/2011	12/12/2012	Historical / Class 2: at least 2 previously failed therapies required
Dologesic	11/23/2011	10/17/2014	Historical / Class 2: at least 2 previously failed therapies required
Texacort	11/23/2011	12/12/2012	Historical / Class 2: at least 2 previously failed therapies required
Fluoxetine HCL 60mg Tablet	11/23/2011	12/12/2012	Historical / Class 2: at least 2 previously failed therapies required
Lamictal XR 300mg	12/21/2011	12/12/2012	Historical / Class 2: at least 2 previously failed therapies required
Sumaxin CP kit	1/4/2012	12/12/2012	Historical / Class 2: at least 2 previously failed therapies required
Sumadan kit	1/4/2012	12/12/2012	Historical / Class 2: at least 2 previously failed therapies required
Edarbyclor 40-12.5mg, 40-25mg	2/1/2012	12/12/2012	Historical / Class 2: at least 2 previously failed therapies required
Outoprot 25-12.5-50-12.5, 100-12.5mg	2/1/2012	12/12/2012	Historical / Class 2: at least 2 previously failed therapies required
Leifadexlor 2.5/1000,2.5/650,2.5/500	2/29/2012	12/12/2012	Historical / Class 1: at least 1 previously failed therapy required
Einvedge	2/29/2012	10/24/2012	Historical / Class 2: at least 2 previously failed therapies required
Hylase Wound Gel	2/29/2012	7/2012 Not Rebate Eligible	Historical / Class 2: at least 2 previously failed therapy required
Irlitya 1mg and 5mg	2/29/2012	10/24/2012	Historical / Class 1: at least 1 previously failed therapy required
Bydureon	2/29/2012	12/12/2012	Historical / Class 1: at least 1 previously failed therapy required
Janumet XR 50-500,50-1000,100-1000	3/14/2012	12/12/2012	Historical / Class 2: at least 2 previously failed therapies required
Zitranol 1% Shampoo	3/14/2012	10/17/2014	Historical / Class 2: at least 2 previously failed therapies required
Zyclara 3.75% Pump	3/14/2012	10/24/2012	Historical / Class 2: at least 2 previously failed therapy required
Orbivan CF	4/18/2012	10/17/2014	Historical / Class 2: at least 2 previously failed therapy required
Aqua Glycolic HC 2% Kit	4/18/2012	10/17/2014	Historical / Class 2: at least 2 previously failed therapy required
Omronys 10mg/mL	4/18/2012	12/12/2012	Historical / Class 2: at least 2 previously failed therapy required
Lidovir 4% - 4% Ointment Kit	5/2/2012	The FDA has not approved Lidovir ointment to cure, treat, or mitigate disease. 10/2/12	Historical / Class 1: at least 1 previously failed therapy required
Differin Gel Pump 0.3%	5/23/2012	2/20/2013	Historical / Class 2: at least 2 previously failed therapies required
Metrogel 1% Topical Pump	5/23/2012	2/20/2013	Historical / Class 2: at least 2 previously failed therapies required
Epiduo Gel with Pump	5/23/2012	2/20/2013	Historical / Class 2: at least 2 previously failed therapies required
Stahque 3% Gel Pump	5/23/2012	2/20/2013	Historical / Class 2: at least 2 previously failed therapies required
Elsyso	6/20/2012	2/20/2013	Historical / Class 1: at least 1 previously failed therapy required
Codine Sulf 30mg/mL Oral	7/20/2012	4/24/2013	Historical / Class 2: at least 2 previously failed therapies required
Pertzye DR 8,000 and 16,000	7/20/2012	4/24/2013	Historical / Class 1: at least 1 previously failed therapy required
Combivent Respiant	7/20/2012	4/24/2013	Historical / Class 1: at least 1 previously failed therapy required
Angeltis U.S. - 0.25mg	7/20/2012	4/24/2013	Historical / Class 2: at least 2 previously failed therapies required
Ketodan 2% Foam	7/20/2012	4/24/2013	Historical / Class 2: at least 2 previously failed therapy required
Nurmigel AG 0.11% Wound Gel	8/17/2012	10/2012 Not Rebate Eligible	Historical / Class 2: at least 2 previously failed therapy required
Ketodan 2% Foam Kit	8/17/2012	4/24/2013	Historical / Class 2: at least 2 previously failed therapy required
Benzeopro 5.3% and 9.8% emol-foam	8/17/2012	4/24/2013	Historical / Class 2: at least 2 previously failed therapies required
Zyclara 2.5% Pump	9/21/2012	5/22/2013	Historical / Class 2: at least 2 previously failed therapies required
Stribild	9/21/2012	5/22/2013	Historical / Class 1: at least 1 previously failed therapy required
Zaltrap 100mg and 200mg Vial	9/21/2012	5/22/2013	Historical / Class 1: at least 1 previously failed therapy required
Lucentis 0.3mg Vial	9/21/2012	5/22/2013	Historical / Class 1: at least 1 previously failed therapy required
Prepopik powder packet	10/24/2012	12/4/2013	Historical / Class 1: at least 1 previously failed therapy required
Aubagio 7mg and 14mg	10/24/2012	1/24/2014	Historical / Class 1: at least 1 previously failed therapy required
Ultresa DR 13,800 unit, 20,700 unit, 23,000unit	10/24/2012	12/4/2013	Historical / Class 1: at least 1 previously failed therapy required
Nesina 6.25mg, 12.5mg & 25mg	2/20/2013	12/4/2013	Historical / Class 1: at least 1 previously failed therapy required
Koziva 12.5-500 & 12.5-1000	2/20/2013	12/4/2013	Historical / Class 1: at least 1 previously failed therapy required
Oxent all strengths	2/20/2013	12/4/2013	Historical / Class 1: at least 1 previously failed therapy required
Abilify Maintena ER all strengths	3/20/2013	12/4/2013	Historical / Class 2: at least 2 previously failed therapy required
Suclicar Bowel Prep-Kit	4/24/2013	12/4/2013	Historical / Class 1: at least 1 previously failed therapy required
Tecfidera DR 120mg,240mg,Starter-Pack	4/24/2013	1/24/2014	Historical / Class 1: at least 1 previously failed therapy required
Opium Tincture 10mg/mL (Phakoxi)	2/16/2011	N/A	Not approved under NDA/ANDA
Durast 26% liquid	6/3/2011	N/A	Not approved under NDA/ANDA
Hyalotpic Plus	9/8/2011	N/A	Not approved under NDA/ANDA
Floricef with Codeine 50-300-40-30	8/21/2013	12/10/2018	Historical / Class 2: at least 2 previously failed therapies required
Spiriva Respiant	12/19/2014	12/10/2018	Historical / Class 1: at least 1 previously failed therapy required
Opsumit 10mg tablet	12/4/2013	12/10/2018	Historical / Class 1: at least 1 previously failed therapy required
Onrentam ER	4/11/2014	12/10/2018	Historical / Class 2: at least 2 previously failed therapies required
Oxazle - all strengths	4/11/2014	12/10/2018	Historical / Class 1: at least 1 previously failed therapy required
Striverdi Respiant	4/28/2016	12/10/2018	Historical / Class 1: at least 1 previously failed therapy required
Bydureon pen	10/17/2014	12/10/2018	Historical / Class 1: at least 1 previously failed therapy required
Incruse Ellipta	1/9/2015	12/10/2018	Historical / Class 1: at least 1 previously failed therapy required
Ryanodex	10/17/2014	12/10/2018	Historical / Class 2: at least 2 previously failed therapies required
Amnuty Ellipta	1/9/2015	12/10/2018	Historical / Class 1: at least 1 previously failed therapy required
Truility	10/17/2014	12/10/2018	Historical / Class 1: at least 1 previously failed therapy required
Milgavie	12/19/2014	12/10/2018	Historical / Class 1: at least 1 previously failed therapy required
Humira syringe kit	12/19/2014	12/10/2018	Historical / Class 1: at least 1 previously failed therapy required
Aristada Syr	11/16/2015	12/10/2018	Historical / Class 2: at least 2 previously failed therapies required
Quillichew ER	3/7/2016	12/10/2018	Historical / Class 2: at least 2 previously failed therapies required
Keljanx XR	3/25/2016	12/10/2018	Historical / Class 2: at least 2 previously failed therapies required

Medication	Date Added	Date Removed	Additional Notes
Zinbryta	8/1/2016	12/10/2018	Historical / Class 1: at least 1 previously failed therapy required
Relistor 150mg Tablet	9/12/2016	12/10/2018	Historical / Class 2: at least 2 previously failed therapies required
Statins step-edit	5/18/2011, updated 9/20/2019	11/1/2019	Statins-Cell required, see http://dhs.alaska.gov/hcpa/Pages/clinical/medpriorauthoriz.aspx for details.
Kayvee ER 0.1mg	12/21/2011	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
QNASL 80mcg Nasal Spray	4/18/2012	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Ciclodan 0.77% Cream Kit	8/17/2012	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Ultravate X Ointment combo	8/17/2012	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Ultravate X Cream combo	8/17/2012	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Reprexain 2.5/200, 5/200, 10/200	9/21/2012	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Forfivo XL 450mg	9/21/2012	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Synalar TS 0.01% kit	10/24/2012	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Ornel 200mg	1/16/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Synalar 0.025% Crm & Oint Kit	1/16/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Oxellar XR 150mg,300mg,600mg	1/16/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Uceris 9mg ER	2/20/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Delzicol DR 400mg capsule	3/20/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Simbrinza 1% - 0.2% drops	5/22/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Zipsor 25mg	5/22/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Prolema 0.07% drops	5/22/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Topicort 0.25% Spray	5/22/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Namenda XR pack and all strengths	5/22/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Trokenid XR all strengths	9/18/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Fabior 0.1% Foam	9/18/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Brinlifix (all strengths)	10/23/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Zorvolex (all strengths)	12/4/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Actemra 162mg/0.9mL	12/4/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Feldzima (all strengths)	12/27/2013	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Hydrocodone/APAP 8/300mg	5/16/2014	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Hydrocodone/APAP 7.5/300mg	5/16/2014	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Hydrocodone/APAP 10/300mg	5/16/2014	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Quelox XR cap	6/27/2014	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Ciclodan 0.05%	10/17/2014	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Sumavel Dosepro	12/19/2014	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Akynzeo	12/19/2014	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Treziq	1/9/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Hysingla ER	1/9/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Sulfacetamide sodium 10% cleanser gel	1/9/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Onexton gel with pump	1/9/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Afrezza	1/9/15, 8/29/16, 9/12/16	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Onexton gel	2/6/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Embeeda ER (all strengths)	2/6/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Afrezza Int	7/31/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Toujeo Solostar	7/31/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Durlaza	11/16/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Pandel 0.1% cream	11/16/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Vanik	11/16/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Envarsus XR	11/16/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Synjardy	11/16/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Clobetasol Spray	11/16/2015	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Enstilar	2/4/2016	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Spitam	3/25/2016	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Zembrace SymTouch	4/28/2016	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Sermiso	4/28/2016	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Ultravate Lotion	5/30/2016	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Delzicol (manufactured by Allergan)	6/23/2016	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Emend 125mg Suspension	8/29/2016	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Invokamet XR	11/7/2016	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Thiame	12/14/2018	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Chempic	12/14/2018	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Motegrity	3/11/2019	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Yupelri	3/11/2019	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Adapaz	4/19/2019	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Jornay PM	9/20/2019	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Adhansia XR	9/20/2019	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Katerzia	9/20/2019	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Evekeo ODT	9/20/2019	12/1/2019	Historical / Class 2: at least 2 previously failed therapies required
Aplom	3/14/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Luzu 1% cream	3/14/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Faniga	3/14/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Ecoza 1% foam	3/14/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Jubia solution	6/27/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Zontivity tab	6/27/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Hemangeol	6/27/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Kerydin	10/17/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Neo-synalar 0.5-0.025% cream	10/17/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Jardiance	10/17/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Invokamet	10/17/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Lemtrada	12/19/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Xigduo XR	12/19/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Plegidy (all strengths)	12/19/2014	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Mircera syringe (all strengths)	1/9/2015	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Kilbas Pak	1/9/2015	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Quest Children	2/6/2015	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Savaysa (all strengths)	2/6/2015	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Cymbalta DR 40mg	7/31/2015	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Pristiq ER	7/31/2015	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Seebri	11/30/2015	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Otiprio	3/7/2016	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Vaylar	3/7/2016	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Humulin R U-500 kwikPen	3/25/2016	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Taltz	4/28/2016	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Orenicia Clicklect	7/7/2016	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Fycompa	3/14/2014, 7/7/2016	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Besvesi Aerosphere	8/1/2016	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Kiara	8/29/2016	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Otozel	8/29/2016	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Zurampic	9/12/2016	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Adlyxin	9/12/2016	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Vemlidy	12/5/2016	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Olumiant	12/14/2018	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Humrya	12/14/2018	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Kevora	12/14/2018	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Vyzulta	12/14/2018	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Takthyro	12/14/2018	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
ZTlido	12/14/2018	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Symporic	12/14/2018	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Diacont	12/14/2018	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Rhopressa	12/14/2018	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Rocklatan	4/19/2019	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Evenity	9/20/2019	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Tremfya	9/20/2019	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Skizal	9/20/2019	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Rimwo ER	11/15/2019	12/1/2019	Historical / Class 1: at least 1 previously failed therapy required
Vumerity	11/17/2019	Moved to PA 3/16/2020	Historical / Class 1: at least 1 previously failed therapy required
Absorca LD	4/17/2020	6/1/2021	Historical / Class 2: at least 2 previously failed therapies required
Aciclate	10/17/2014	6/1/2021	Historical / Class 2: at least 2 previously failed therapies required
Afinitor Disperp 2mg,3mg,5mg	5/22/2013	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Alecensa	1/11/2016	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Ailital	3/7/2016	6/1/2021	Historical / Class 2: at least 2 previously failed therapies required
Acenon	11/7/2020	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Avesed 750mg/3mL vial	4/11/2014	6/1/2021	Historical / Class 2: at least 2 previously failed therapies required
Bivigam	7/31/2015	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Bosulf 100mg, 500mg	10/24/2012	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Cerdaga	10/17/2014	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Dorxy DR 200mg	7/17/2013	6/1/2021	Historical / Class 2: at least 2 previously failed therapies required
Egater	9/20/2019	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Emplicit Vial	12/21/2015	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Feriprox Solution	12/21/2015	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Galafold	12/14/2018	6/1/2021	Historical / Class 2: at least 2 previously failed therapies required
Imbruvica 140mg	12/14/2013	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Keflex 750mg	2/29/2012	6/1/2021	Historical / Class 2: at least 2 previously failed therapies required
Nalpara ceritidge	7/31/2015	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Natroba 0.9%	2/9/2011	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Picato 0.05% and 0.015% Gel	3/14/2012	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Pretomanid	1/17/2020	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Primlev (all strengths)	12/14/2013	6/1/2021	Historical / Class 2: at least 2 previously failed therapies required
Quzyrtir	4/17/2020	6/1/2021	Historical / Class 2: at least 2 previously failed therapies required
Risaden	9/28/2011	6/1/2021	Historical / Class 2: at least 2 previously failed therapies required
Sklice 0.5% Lotion	7/20/2012	6/1/2021	Historical / Class 2: at least 2 previously failed therapies required
Tegsedl	3/11/2019	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Xemify	11/15/2019	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Xepi	12/14/2018	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Xyosted	12/14/2018	6/1/2021	Historical / Class 2: at least 2 previously failed therapies required
Znag Intradermal system (lidocaine)	11/16/2016	6/1/2021	Historical / Class 2: at least 2 previously failed therapies required
Zykadia cap	5/16/2014	6/1/2021	Historical / Class 1: at least 1 previously failed therapy required
Benlysta	3/23/2011	3/1/2022	Historical / Class 1: at least 1 previously failed therapy required Requires PA
Vaccocin	3/1/2012	11/1/2021	Removed from Prior Authorization
Lidoderm Patches	4/27/2011	1/14/2022	Removed from Prior Authorization
Eucrisa	11/12/2018, updated 3/15/21	3/1/2022	Removed from Prior Authorization
Valtoco	4/17/2020	3/1/2022	Historical / Class 2: at least 2 previously failed therapies required
Duopa	7/31/2015	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Hemady	10/20/2021	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Gocovi	12/14/2018	5/1/2022	Historical / Class 2: at least 2 previously failed therapies required
Bafertam	9/18/2020	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Hyqvia	10/17/2014	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Lumipit	10/20/2021	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Vimizin	3/14/2014	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Gammplex	7/31/2015	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Conjupri	11/20/2020	5/1/2022	Historical / Class 2: at least 2 previously failed therapies required
Mycapssa	10/20/2021	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Duaklir Pressair	11/15/2019	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Tektonic Clk kit	7/31/2015	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Gimoti	11/20/2020	5/1/2022	Historical / Class 2: at least 2 previously failed therapies required
Flebogamma DIF	7/31/2015	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Nourianz	11/15/2019	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Finacea 15%	11/16/2015	5/1/2022	Historical / Class 2: at least 2 previously failed therapies required
Sevenfact	10/20/2021	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Virepti	4/17/2020	3/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Winzora	1/15/2021	5/1/2022	Historical / Class 2: at least 2 previously failed therapies required
Xenleta	11/15/2019	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Beovu	11/15/2019	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Nyvepria	1/15/2021	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Somavert	10/17/2014	5/1/2022	Historical / Class 1: at least 1 previously failed therapy required
Diclovik M	9/18/2020	5/1/2022	Historical / Class 2: at least 2 previously failed therapies required
Orimolex ER	12/14/2013	5/1/2022	Historical / Class 2: at least 2 previously failed therapies required
Zlira	9/18/2020	5/1/2022	Historical / Class 2: at least 2 previously failed therapies required
Tohi Podhaler	9/19/2014	6/1/2022	Removed from Prior Authorization
Celebrex all strengths	5/8/2013	11/18/2022	Removed from Prior Authorization
Lonsurf	11/16/2015	3/1/2024	Class 1: at least 1 previously failed therapy required
Everolimus	11/19/2021	3/1/2024	Class 1: at least 1 previously failed therapy required
Pomalyst all strengths	3/20/2013	3/1/2024	Class 2: at least 2 previously failed therapies required
Xalkori	9/28/2011	3/1/2024	Class 1: at least 1 previously failed therapy required

Medication	Date Added	Date Removed	Additional Notes
Stivarga 40mg	10/24/2012	3/1/2024	Class 1: at least 1 previously failed therapy required
Cyclophosphamide capsule	7/25/2014	3/1/2024	Class 1: at least 1 previously failed therapy required
Tegrisso	11/30/2015	3/1/2024	Class 1: at least 1 previously failed therapy required
Wellirege	11/19/2021	3/1/2024	Class 1: at least 1 previously failed therapy required
Ayvakit	9/17/2023	3/1/2024	Class 1: at least 1 previously failed therapy required
Hadlima	11/1/2023	11/1/2024	Class 1: at least 1 previously failed therapy required
Abilify Asimtufii	11/1/2023	11/1/2024	Class 2: at least 2 previously failed therapies required
Descovy	4/28/2016	PA retired 2020	Historical: Class 2: at least 2 previously failed therapies required
Uzedy	11/1/2023	6/2/2025	Historical / Class 2: at least 2 previously failed therapies required