October 2020

NEW YORK STATE | The Empire Plan

Drugs That Require Prior Authorization for the Empire Plan Prescription Drug Program – Flexible Formulary

abiraterone (Zytiga)
Actemra IV
Acthar
Actimmune
Adagen
Adakveo
Adcetris
Adempas
Aldurazyme
Alecensa
Alferon N
Alunbrig
ambrisentan (Letairis)
Apokyn
Aralast NP
Aranesp
Arcalyst
Arestin
armodafinil (Nuvigil)
Arzerra
Asceniv
Asparlas
Aubagio
Austedo
Avastin
Aveed
Avonex
Avsola
azacitidine (Vidaza)
Bavencio
Beleodaq
bendamustine (Bendeka)
Benlysta
benzphetamine (Regimex)
Beovu
Berinert
Besponsa
Betaseron
Bethkis
Bivigam
Blincyto
bortezomib (Velcade)
bosentan (Tracleer)
Bosulif
Botox
Bynfezia
Cabometyx
capecitabine (Xeloda)
Caprelsa
Carbaglu
Carimune
Cayston
Cerdelga
Cerezyme
Cetrotide
Cholbam
chorionic gonadotropin (Novarel, Pregnyl)
Cimzia
cinacalcet (Sensipar)
Cinqair
Cinryze
Coagadex
Cometriq
Contrave
Cosentyx
Cotellic
Crysvita
Cuvitru
Cyramza
Cystagon
Cystaran
dalfampridine (Ampyra)
Darzalex
Darzalex Faspro
Daurismo
decitabine (Dacogen)
deferasirox (Exjade, Jadenu)
deferoxamine (Desferal)
diclofenac gel 3% (Solaraze)
diethylpropion
diethylpropion ER
dofetilide (Tikosyn)
Dojolvi
Dupixent
Dysport
Egrifta
Elaprase
Elelyso
Eligard
Emflaza
Empliciti
Enbrel
Enhertu
Entyvio
Epclusa
Epidiolex
Epogen
epoprostenol (Flolan, Veletri)
Erbitux
Erivedge
Erleada
Erwinaze
Esbriet
Esperoct

everolimus (Afinitor)
Evrysdi
Exondys-51
Fabrazyme
Farydak
Fasenra
fentanyl (Abstral, Actiq)
Fentora
Ferriprox
Firmagon
Folotyn
Fusilev
Fuzeon
Gamifant
Gammagard Liquid
Gammagard S/D
Gammaked
Gammaplex
Gamunex-C
Ganirelix
Gattex
Gazyva
Genotropin
Gilenya
Gilotrif
Glassia
glatiramer (Copaxone)
Glatopa
Gonal-F
Gonal-F RFF
Granix
Haegarda
Halaven
Harvoni
Herceptin
Herceptin Hylecta
Herzuma
Hetlioz
Hizentra
Humatrope
Humira
Hycamtin Capsules
Hyqvia
Ibrance
icatibant (Firazyr)
Iclusig
IDHIFA
Ilaris
imatinib (Gleevec)
Imbruvica
Imfinzi
Imlygic
Inbrija
Increlex
Inflectra
Ingrezza
Inlyta
Inqovi
Intron A
Iressa
itraconazole (Sporanox)
Ixempra
Jadenu Sprinkle
Jakafi
Jevtana
Jublia
Juxtapid
Kadcyla
Kalbitor
Kalydeco
Kanjinti
Kanuma
Kerydin
Kevzara
Keytruda
Khapzory
Kineret
Kisqali
Kitabis
Korlym
Koselugo
Krystexxa
Kuvan
Kynamro
Kyprolis
Lartruvo
Lazanda
Lemtrada
Lenvima
Leukine
leuprolide (Lupron)
Levoleucovorin
Libtayo
lidocaine patch (Lidoderm)
Lonsurf
Lorbrena
Lumizyme
Lumoxiti
Lupaneta Pack
Lupron Depot
Lupron Depot-PED
Lynparza
Macugen
Makena
Mavenclad
Mavyret
Mayzent
Mekinist
Menopur
Mepsevii
miglustat (Zavesca)
mitoxantrone
modafanil
Mozobil

Mulpleta
Mvasi
Myalept
Mycapssa
Mylotarg
Myobloc
Naglazyme
Natpara
Nerlynx
Neulasta
Neumega
Nexavar
Ninlaro
nitisinone (Orfadin)
Nityr
Northera
Nplate
Nucala
Nuplazid
Ocaliva
Ocrevus
Octagam
octreotide (Sandostatin)
Odomzo
Ofev
Ogivri
Olumiant
Olysio
Oncaspar
Onmel
Onsolis
Ontruzant
Opdivo
Opsumit
Orencia
Orenitram
Orkambi
Otezla
Otrexup
Ovidrel
Padcev
Palynziq
Panzyga
Parsabiv
Pegasys
PegIntron
Perjeta
phendimetrazine
phentermine (Adipex-P)
Phesgo
Plegridy
Polivy
Pomalyst
Portrazza
Prialt
Privigen
Procysbi
Prolastin-C
Proleukin
Prolia
Promacta
Pulmozyme
Radicava
Rasuvo
Ravicti
Rebif
Reclast
Remicade
Renflexis
Repatha
Repronex
Retacrit
Retevmo
Revlimid
ribavirin
Rinvoq
Rituxan
Rituxan Hycela
romidepsin (Istodax)
Rozlytrek
Rubraca
Ruconest
Ruxience
Rydapt
Sandostatin LAR
Sarclisa
Saxenda
Scenesse
Serostim
Signifor
sildenafil (Revatio)
Siliq
Simponi ARIA
Skyrizi
sodium Phenylbutyrate (Buphenyl)
Soliris
Somatuline Depot
Somavert
Sovaldi
Spinraza
Sprycel
Stelara
Stivarga
Strensiq
Subsys
Supprelin LA
Sutent
Sylatron
Sylvant
Symdeko
Synagis
Synribo
Tabrecta
tadalafil (Adcirca, Alyq)

Tafinlar
Tagrisso
Taltz
Talzenna
Tarceva
Targretin
Tasigna
tazarotene (Tazorac)
Tecentriq
Tecfidera
temozolomide (Temodar)
temsirolimus (Torisel)
terbinafine
teriparatide (Forteo)
tetrabenazine (Xenazine)
Thalomid
tobramycin inhalation solution
tolvaptan (Samsca)
Trazimera
Treanda
Trelstar
Tremfya
treprostinil (Remodulin)
Truxima
Tykerb
Tymlos
Tysabri
Tyvaso
Ultomiris
Uptravi
Valchlor
Vantas
Vectibix
Venclexta
Ventavis
Verzenio
Viekira Pak
vigabatrin (Sabril, Vigadrone)
Vimizim
Visudyne
Vitrakvi
Vizimpro
Vosevi
Votrient
VPRIV
Xalkori
Xeljanz
Xeljanz XR
Xenical
Xeomin
Xermelo
Xgeva
Xolair
Xtandi
Xyrem
Yervoy
Yonsa
Zaltrap
Zejula
Zelboraf
Zemaira
Zepatier
Zeposia
Zinbryta
Zirabev
Zoladex
zoledronic acid
Zolgensma
Zolinza
Zorbtive
Zulresso
Zydelig
Zykadia

This list represents brand products beginning with a capital letter and generic products are in lowercase. Prior authorization applies to both brand and generic products. Certain medications that require prior authorization based on age, gender or quantity limit specifications are not listed here. Compound drugs that have a claim cost to the Program that exceeds $200 will require prior authorization under this Program. This list of drugs is subject to change. For the most current list of drugs requiring prior authorization, call the Empire Plan Prescription Drug Program at the number below. For more information about drugs requiring prior authorization and how to obtain it, visit www.empireplanrxprogram.com or call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and select option 4 for the Empire Plan Prescription Drug Program.
If the prior authorization review results in authorization for payment, you will receive Empire Plan Prescription Drug Program benefits for the drug. If the payment is not authorized, no Empire Plan Prescription Drug Program benefits will be paid for the drug.
An appeal process allows you or your doctor to ask for further review if authorization is not granted. You may call the Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and select option 4 for the Empire Plan Prescription Drug Program for information on how to initiate an appeal. Products covered by a plan member's prescription and medical benefit plan may change from time to time. In addition, a member's specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance on this document at any time.
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