



The Empire Plan

Drugs That Require Prior Authorization for The Empire Plan Prescription Drug Program - Advanced Flexible Formulary

Abiraterone	Alymsys	(Treanda)
Abrilada	ambrisentan (Letairis)	Benefix
Actemra IV	Amondys 45	Benlysta
Acthar	Amvuttra	benzphetamine (Regimex)
Actimmune	apomorphine (Apokyn)	Beovu
Adagen	Aralast NP	Berinert
Adakveo	Aranesp	Besponsa
adalimumab-aacf	Arcalyst	Besremi
adalimumab-adbm	Arestin	betaine anhydrous (Cystadane)
adalimumab-adaz	Arikayce	Betaseron
Adbry	armodafinil (Nuvigil)	Bethkis
Adcetris	Asceniv	bexarotene (Targretin)
Adempas	Asparlas	Bimzelx
Advate	Augtyro	Bivigam
Adynovate	Austedo	Blinicyto
Adzynma	Austedo XR	bortezomib (Velcade)
Afstyla	Avastin	bosentan (Tracleer)
Agamree	Aveed	Bosulif
Akeega	Avonex	Botox
Aldurazyme	Avsola	Braftovi
Alecensa	Ayvakit	Brineura
Alferon N	azacitidine (Vidaza)	Briumvi
Aliqopa	Balversa	Bronchitol
Alphanate	Bavencio	Brukinsa
Alphanine SD	Beleodaq	Bylvay
Alprolix	Belrapzo	Bynfezia
Altuviiiio	bendamustine (Bendeka)	Byooviz
Alunbrig	bendamustine lyophilized	Cabenuva

Cablivi	Crysvita	Elaprase
Cabometyx	Cutaquig	Elelyso
Calquence	Cuvitru	Elfabrio
Camcevi	Cyramza	Eligard
Camzyos	CystaDrops	Eloctate
capecitabine (Xeloda)	Cystagon	Elrexvio
Caprelsa	Cystaran	Elzonris
Carbaglu	dalfampridine (Ampyra)	Emflaza
carglumic acid (Carbaglu)	Danyelza	Empaveli
Carimune	Darzalex	Empliciti
Cayston	Darzalex Faspro	Enbrel
Cerdelga	Daurismo	Endari
Cerezyme	Daxxify	Enhertu
cetorelix acetate	Daybue	Enjaymo
Chenodal	decitabine (Dacogen)	Enspryng
Cholbam	deferasirox (Exjade, Jadenu)	Entyvio
chorionic gonadotropin (Novarel, Pregnyl)	deferiprone (Ferriprox)	Epclusa
Cibinqo	deferoxamine (Desferal)	Epidiolex
Cimerli	dichlorphenamide (Keveyis)	Epkinly
cinacalcet (Sensipar)	diclofenac gel 3% (Solaraze)	Epogen
Cinqair	diethylpropion	epoprostenol (Flolan, Veletri)
Cinryze	diethylpropion ER	Erbix
Coagadex	dimethyl fumarate	Erivedge
Columvi	dofetilide (Tikosyn)	Erleada
Cometriq	Dojolvi	erlotinib
Contrave	Doptelet	Esperoct
Copiktra	droxidopa (Northera)	Evenity
Corifact	Duopa	everolimus (Afinitor)
Cortrophin	Dupixent	Evkeeza
Cosela	Dysport	Evrysdi
Cosentyx	Egrifta	Exkivity
Cotellic	Elahere	Exondys-51

Eylea	gefitinib (Iressa)	Imbruvica
Fabhalta	Gilotrif	Imcivree
Fabrazyme	Givlaari	Imfinzi
Fasenra	Glassia	Imjudo
Feiba	glatiramer (Copaxone)	Imlygic
Fensolvi	Glatopa	Inbrija
fentanyl (Abstral, Actiq)	Gonal-F	Increlex
Fentora	Gonal-F RFF	Inflectra
Fibryga	Granix	Infliximab
Filspari	Hadlima	Ingrezza
fingolimod (Gilenya)	Haegarda	Inlyta
Fintepla	Halaven	Inqovi
Firdapse	Harvoni	Inrebic
Firmagon	Hemlibra	Intron A
Flebogamma DIF	Hemofil-M	Isturisa
Fotivda	Herceptin	itraconazole (Sporanox)
Fruzaqla	Herceptin Hylecta	Iwilfin
fulvestrant (Faslodex)	Herzuma	Ixempra
Fuzeon	Hizentra	Ixinity
Fyarro	Humate-P	Izervay
Fylnetra	Humatrope	Jadenu Sprinkle
Galafold	Humira	Jakafi
Gamastan S/D	Hycamtin Capsules	javygtor (Kuvan)
Gammagard Liquid	Hyqvia	Jaypirca
Gammagard S/D	Hyrimoz (Cordavis)	Jemperli
Gammaked	Ibrance	Jesduvroq
Gammaplex	icatibant (Firazyr)	Jevtana
Gamunex-C	Iclusig	Jivi
Ganirelix	Idelvion	Joenja
Gattex	IDHIFA	Juxtapid
Gavreto	Ilaris	Jynarque
Gazyva	imatinib	Kadcyla

Kalbitor	Liqrev	Mounjaro
Kalydeco	Litfulo	Mozobil
Kanjinti	Livmarli	Mulpleta
Kanuma	Lonsurf	Mvasi
Kesimpta	Loqtorzi	Myalept
Keytruda	Lorbrena	Mycapssa
Khapzory	Lucentis	Mylotarg
Kimmtrak	Lumakras	Myobloc
Kisqali	Lumizyme	Naglazyme
Kitabis	Lumryz	Nerlynx
Koate	Lunsumio	Neulasta
Korlym	Lupron Depot	Neumega
Koselugo	Lupron Depot-PED	Nexviazyme
Kovaltry	Lutathera	Ngenla
Krazati	Luxturna	Ninlaro
Krystexxa	Lynparza	nitisinone (Orfadin)
Kymriah	Lytgobi	Nityr
Kyprolis	Macugen	Nivestym
Lamzedo	Margenza	Norditropin
Lanreotide	Mavenclad	Novoeight
lapatinib (Tykerb)	Mayzent	Novoseven
Lartruvo	Mekinist	Nplate
Lemtrada	Mektovi	Nubeqa
lenalidomide (Revlimid)	Menopur	Nucala
Lenvima	Mepsevii	Nulibry
Leqvio	miglustat (Zavesca)	Nuplazid
Leukine	Mircera	Nuwiq
leuprolide (Lupron)	mitoxantrone	Nyvepria
Leuprolide Acetate Injection Depot	modafinil	Obizur
Levoleucovorin	Monjuvi	Ocaliva
Libtayo	Monoclate-P	Ocrevus
lidocaine patch (Lidoderm)	Mononine	Octagam

octreotide (Sandostatin)	Palynziq	Pyrukynd
Odomzo	Panzyga	Qinlock
Ofev	Parsabiv	Radicava
Ogivri	pazopanib (Votrient)	Radicava ORS
Ogsiveo	Pedmark	Rasuvo
Ojjaara	PegIntron	Ravicti
Olpruva	Pemazyre	Rebif
OmvoH	Perjeta	Rebinyn
Oncaspar	Pheburane	Reblozyl
Onpattro	phendimetrazine	Rebyota
Onsolis	phentermine (Adipex-P)	Reclast
Ontruzant	Phesgo	Recombinate
Onureg	Piqray	Recorlev
Opdivo	pirfenidone (Esbriet)	Reditrex
Opdualag	Plegridy	Releuko
Opfolda	plerixafor	Relyvrio
Opsumit	Polivy	Remicade
Opzelura	Pomalyst	Renflexis
Orencia	Pombiliti	Repatha
Orenitram	Portrazza	Repronex
Orgovyx	Poteligeo	Retacrit
Orkambi	pralatrexate (Folotyn)	Retevmo
Orladeyo	Prialt	Rezlidhia
Orserdu	Privigen	Rezurock
Otezla	Procysbi	Riabni
Otrexup	Profilnine SD	ribavirin
Ovidrel	Prolastin-C	Riastap
Oxbryta	Proleukin	Rinvoq
Oxervate	Prolia	Rituxan
Oxlumo	Promacta	Rituxan Hycela
Ozempic	Pulmozyme	Rixubis
Padcev	Purixan	Rolvedon

romidepsin (Istodax)	Somatuline Depot	Tasigna
Rozlytrek	Somavert	tasimelteon (Hetlioz)
Rubraca	sorafenib (Nexavar)	Tavalisse
Ruconest	Sotyktu	Tavneos
Ruxience	Sovaldi	tazarotene (Tazorac)
Ruzurgi	Spevigo	Tazverik
Rybelsus	Spinraza	Tecentriq
Rybrevant	Sprycel	Tecvayli
Rydapt	Stelara	Tegsedi
Rylaze	Stimate	temozolomide (Temodar)
Ryplazim	Stimufend	temsirolimus (Torisel)
Rystiggo	Stivarga	Tepezza
Sajazir	Strensiq	Tepmetko
Sandostatin LAR	Subsys	terbinafine
Saphnelo	sunitinib (Sutent)	teriflunomide (Aubagio)
sapropterin dihydrochloride (Kuvan)	Supprelin LA	teriparatide (Forteo)
Sarclisa	Susvimo	tetrabenazine (Xenazine)
Saxenda	Syfovre	Tezspire
Scemblix	Sylatron	Thalomid
Scenesse	Sylvant	Tibsovo
Serostim	Symdeko	Tivdak
Sevenfact	Synagis	tobramycin inhalation
Signifor	Tabrecta	tolvaptan (Samsca)
sildenafil (Revatio)	tadalafil (Adcirca, Alyq)	Trazimera
Simponi ARIA	Tadliq	Treanda
Skyclarys	Tafinlar	Trelstar
Skyrizi	Tagrisso	Tremfya
Skytrofa	Takhzyro	treprostinil (Remodulin)
sodium phenylbutyrate (Buphenyl)	Talvey	Tretten
Sogroya	Talzenna	Trikafta
Sohonos	Tarpeyo	Trodelvy
Soliris	Tascenso ODT	Trulicity

Truqap	Vonjo	Xtandi
Truxima	Vonvendi	Xyntha
Tukysa	Vosevi	Xywav
Turalio	Vowst	Yargesa
Tymlos	Voxzogo	Yervoy
Tysabri	VPRIV	Yescarta
Tyvaso	Vumerity	Yonsa
Tyvaso DPI	Vyjuvek	Zaltrap
Tzield	Vyndamax	Zejula
Udenyca	Vyndaqel	Zelboraf
Ultomiris	Vyondys 53	Zemaira
Uplizna	Vyvgart	Zepbound
Uptravi	Vyvgart Hytrulo	Zeposia
Vabysmo	Wainua	Zepzelca
Valchlor	Wakix	Ziextenzo
Vanflyta	Wegovy	Zilbrysq
Vectibix	Welireg	Zirabev
Vegzelma	Wilate	Zokinvy
Velsipity	Xalkori	Zoladex
Venclexta	Xeljanz	zoledronic acid
Ventavis	Xeljanz XR	Zolgensma
Veopoz	Xembify	Zolinza
Verzenio	Xenical	Ztalmy
Victoza	Xenpozyme	Zulresso
vigabatrin (Sabril, Vigadrone)	Xeomin	Zurzuvae
Vijoice	Xermelo	Zydelig
Viltepso	Xgeva	Zykadia
Vimizim	Xiaflex	Zynlonta
Visudyne	Xipere	Zynyz
Vitrakvi	Xolair	Zytiga 250 mg
Vivimusta	Xospata	
Vizimpro	Xpovio	

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 [Empireplanrxprogram.com](http://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 The Empire Plan Prescription Drug Program benefits for the drug. If the payment is not authorized, The Empire Plan Prescription Drug Program benefits will not pay 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 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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