

## Commercial and Other Pharmacy Program Updates Effective April 2021

The following changes to our pharmacy programs will become effective **April 1, 2021**. These changes affect our preferred drug lists and medication guides, including prior authorization requirements, the Responsible Quantity Program, Responsible Steps and the Pharmacy Coverage Exclusions List. Important changes are summarized below.

### Preferred Drug List Changes and Medication Guides

Changes to our preferred drug lists and the current list are available at [floridablue.com/providers](http://floridablue.com/providers). Select **Tools & Resources**, **Medical & Pharmacy Policies, Guidelines** and then **Medication Guides**. Here is the direct link to the [Medication Guides](#).

### Responsible Quantity Program

We will add the following drugs and drug-dispensing limits to the Responsible Quantity Program effective April 1. This applies only to members whose plans are part of the Responsible Quantity Program.

**Please note:** Responsible Quantity Program limits apply to generic drugs where applicable.

Drugs Added to the Responsible Quantity Program		
Brand/Generic Name	Strength	Dispensing Limit Per Month (unless noted otherwise)
Enspryng		1 syringe / 28 days
Epclusa	200 - 50	30 tabs
Impeklo	0.05%	204 g / 28 days
Lampit	30 mg	540 tabs / 180 days
Lampit	120 mg	450 tabs / 180 days
Prolate	10–300 / 5ml	90 ml
Qdolo	5 mg / ml	240 ml
Wynzora		120 g
Updates to Drugs Already in the Responsible Quantity Program		
Brand/Generic Name	Strength	Dispensing Limit Per Month (unless noted otherwise)
Buprenorphine-naloxone film	4 mg / 1mg	60 films

## New Pharmacy Coverage Exclusions

Our commercial pharmacy plans will no longer cover the brand-name or generic drugs listed below. We will cover many of their therapeutic or generic alternatives. This exclusion list applies only to members enrolled in health plans that allow pharmacy coverage exclusions.

New Coverage Exclusions	
Airduo Digihaler	Alkindi Sprinkles
Arthrotec 50–0.2 mg	Armonair Digihaler
Bafiertam	Benzonatate 150 mg
Conjupri	Gimoti
Hemady	Imipramine pamoate caps
Indomethacin 20 mg caps	Mefamenic acid caps
Nalfon 200 mg	Ongentys
Samsca 30 mg	Semglee
Tretinoin 0.05% gel	Trexall 5 mg, 7.5 mg, 10 mg, 15 mg
Upneeq	
Drugs added back to Coverage	
Quillivant	Quillichew

## Medications Requiring Prior Authorization

Prior authorization requirements for the following list of medications will change under the member's pharmacy benefits. This applies only to members whose plans are part of the Prior Authorization Program. New-to-market drugs may still be under review for a coverage decision as a part of our New-to-Market Program.

Drugs Added to the Prior Authorization Program	
Drug	Covered Condition(s)*
Epclusa 200–50	FDA approved indication(s)
Hetlioz LQ	FDA approved indication(s)
Imcivree	FDA approved indication(s)
Nyvepria	FDA approved indication(s)
Orgovyx	FDA approved indication(s)
Orladeyo	FDA approved indication(s)
Prolate	FDA approved indication(s)
Qdolo	FDA approved indication(s)
Zokinvy	FDA approved indication(s)
*Summary of criteria and additional information are available with our authorization forms.	

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## Step Therapy Program Changes

The following changes apply to the Step Therapy Program.

Program	Program Change
Methotrexate	RediTrex added as a target
Topical corticosteroids	Impeklo added as a target
Xanthine oxidase inhibitors	Program retired

## Net Results Formulary Program Updates

The following changes only apply to members with the Net Results formulary as part of their plan.

### Net Results Pharmacy Coverage Exclusions

Effective April 1, 2021, Net Results will no longer cover the brand-name or generic drugs listed below.

Net Results New Exclusions	
Airduo Digihaler	Alkindi Sprinkle
Armonair Digihaler	Bafiertam
Butalbital acetaminophen caffeine 50-300-40	Ciprodex otic
Concerta	Condylox
Copaxone	Conjupri
Emtriva	Gimoti
Hemady	Jadenu Sprinkle
Lamictal ODT	Kesimpta
Ongentys	Protonix
Ranitidine caps, tabs and syrup	Retevmo
Symfi	Smyfi Lo
Timoptic XE	Upneeq
Zileuton	Zyflo
Net Results Drugs Added Back to Coverage	
Palforzia	

### Net Results Step Therapy Program Changes

The following changes apply to the Step Therapy Program.

Program	Net Results Program Change
Methotrexate	Addition of RediTrex as a target

## Net Results Quantity Limit Program

The following drugs and drug-dispensing limits to the Net Results Quantity Limit Program become effective April 1, 2021.

Brand/Generic Name	Net Results Quantity per 30 day supply unless otherwise indicated
Enspryng	1 syringe / 28 days
Epclusa 200–50	30 tabs
Impeklo lotion 0.05%	204 g / 28 days
Orladeyo	30 caps
Prolate oral solution	90 ml
Qdolo oral solution	240 ml
Rukobia	60 tabs
Xeljanz oral solution	240 ml
Updates to drugs already included in the Net Results Quantity Limit Program	
Rybelsus 3 mg	30 tabs / 180 days

## Net Results Medications Requiring Prior Authorization

Prior authorization requirements for the following list of medications will change for members using our Net Results Formulary effective April 1, 2021.

Drugs Added to the Net Results Prior Authorization Program	
Drug	Covered Condition(s)*
Enspryng	FDA approved indication(s)
Epclusa 200-50	FDA approved indication(s)
Orladeyo	FDA approved indication(s)
Xeljanz oral solution	FDA approved indication(s)
*Summary of criteria, additional details and authorization forms are available at <a href="http://myprime.com">myprime.com</a>	

## Net Results Authorization Request Forms

Net Results authorization request forms are available at [myprime.com](http://myprime.com). Create a profile or click on **Forms** and then select **Continue without signing in**. Select **Florida Blue** from the top drop-down menu and **No** to the question regarding Medicare status. At the top of the following page, click **Forms** and then select **Florida Blue Net Results Formulary**. You will see a list of form categories.

## Verify Eligibility and Benefits on Availity

As a reminder, you can verify your patients' eligibility and pharmacy benefits through Availity®<sup>1</sup> at [availity.com](http://availity.com). If you have questions about your patients' Florida Blue benefits or these pharmacy updates, please call the Provider Contact Center at 800-727-2227.

<sup>1</sup>Availity, LLC is a multi-payer joint venture company. For more information, visit [availity.com](http://availity.com).