

## Prior Authorization Programs for Members on the New Mexico Performance Full Drug List

Drug Category*	Prescription Drugs within the Category*	
<i>Non-Specialty Prior Authorization</i>		
<b>Accrufer</b>	Accrufer	
<b>Acute Migraine</b>	Elyxyb Migranal	Reyvow Trudhesa
<b>Alternative Dosage Form</b>	Carafate/ sucralfate suspension Cuvposa solution Diphenoxylate-atropine Liquid Entresto sprinkles Epaned solution Fleqsuvy suspension Gimoti (metoclopramide HCl) nasal spray Indocin suppository Indocin suspension Katerzia suspension Lyvispah (baclofen) granules	Meloxicam suspension Naprosyn/ naproxen suspension Nexium granules Norliqva (amlodipine) Oral solution Ozobax solution/ baclofen Qbrelix solution Sotylize solution Sprix/ ketorolac nasal spray Tiglutik suspension
<b>Androgens Anabolic Steroids</b>	Androderm Androgel/ generic testosterone Aveed Azmiro danazol Delatestryl Depo Testosterone Fortesta Jatenzo Kyzatrex Methitest	Methyltestosterone Natesto Testim Testopel testosterone enanthate Testosterone TD Gel Tlando Undecatrex Vogelxo Xyosted
<b>Antifungals (formerly Antifungal Agents)</b>	Brexafemme Cresemba Noxafil/ posaconazole	Tolsura Vfend/ voriconazole Vivjoa
<b>Bempedoic Acid</b>	Nexletol	Nexlizet

<b>Bonjesta/Diclegis</b>	Bonjesta	Diclegis/ doxylamine - pyridoxine
<b>Calcitonin Gene-Related Peptide (CGRP)</b>	Aimovig Ajovy Emgality	Nurtec ODT Qulipta Ubrelvy
<b>Cannabidiol</b>	Epidiolex	
<b>Continuous Glucose Monitor</b>	Dexcom G6 CGM System Dexcom G7 CGM System Freestyle Libre	Freestyle Libre 2 Freestyle Libre 3
<b>Fintepla</b>	Fintepla	
<b>Furoscix</b>	Furoscix	
<b>GLP-1 (glucagon-like peptide-1) Agonists</b>	Adlyxin Bydureon Bcise Byetta Liraglutide Mounjaro	Ozempic Rybelsus Trulicity Victoza
<b>Hyftor</b>	Hyftor	
<b>Hyperhidrosis</b>	Qbrexza	Sofdra
<b>Hyperpolarization-Activated Cyclic Nucleotide-Gated (HCN) Channel Blocker</b>	Corlanor/ ivabradine	
<b>Hypoactive Sexual Desire Disorder (HSDD) (formerly Addyi)</b>	Addyi	Vyleesi
<b>Insulin Pumps</b>	iLet Bionic Pancreas Omnipod Classic Pods Omnipod DASH Kit Intro Omnipod DASH pods Omnipod 5 G6 Kit Intro	Omnipod 5 G6 Pods Omnipod 5 G7 Kit Intro Omnipod 5 G7 Pods twist
<b>Kerendia</b>	Kerendia	
<b>Metformin</b>	Glumetza/ metformin extended-release	Metformin 625 mg Riomet
<b>Northera</b>	Northera	
<b>Onychomycosis (formerly Antifungal Agents - Onychomycosis)</b>	Ciclopirox Jublia	Kerydin/ tavaborole Sporanox
<b>Opioids</b>	Oxycontin	
<b>PCSK9 Inhibitors</b>	Praluent	Repatha
<b>Pseudobulbar Affect</b>	Nuedexta	
<b>Selective Serotonin Inverse Agonist (SSIA)</b>	Nuplazid	
<b>Supplemental Therapeutic Alternatives</b>	Daraprim Elepsia XR	Rytary
<b>Therapeutic Alternatives</b>	Absorica/Absorica LD Adapalene AirDuo Resplick Ala-Scalp	Ketoprofen ER 200 mg Konvomep suspension Librax Lorzone

	Alphagan-P Amrix Aplenzin Ativan Azelex Bethkis Bupap Cabtreo Cafergot Cambia/diclofenac Carbinoxamine Maleate 6mg Chlorzoxazone/ Parafon Forte Cordran Coxanto Denavir Cream 1% Diflorasone/ Psorcon cream diflorasone ointment diclofenac potassium Doral Econazole Nitrate 1% foam Epinephrine Ergomar Ertaczo 2% cream Exelderm 1% cream Exelderm 1% solution Extina fenofibrate 120 mg Fenoprofen Fexmid/ cyclobenzaprine Flurazepam Halog Innopran XL Kenalog spray Ketoprofen 25 mg Ketoprofen 50 mg	Luzu 1% cream mefenamic acid mupirocin cream naftifine 1% cream Naftin 2% cream Naftin 1% gel Naftin 2% gel Nalfon Nalocet Naprelan Neffy Noritate Oxistat prednisolone sodium phosphate solution prednisolone tablet phospholine ophthalmic solution Prolate Reltone Rhofade Sitavig SoriluxTanlor TOBI/ Kitabis TOBI Podhaler Treximet 85/500 mg Vivlodex Wellbutrin XL Xerese Zegerid/ omeprazole-sodium bicarbonate Zipsor Zovirax cream 5% Zyflo Zyflo CR/ zileuton CR
<b>Topical Doxepin</b>	Doxepin Prudoxin	Zonalon cream
<b>Topical Lidocaine</b>	Lidoderm/ lidocaine patch lidocaine ointment Pliaglis	Synera Ztlido
<b>Topiramate ER</b>	Qudexy XR/ Topiramate ER	Trokendi XR
<b>Transmucosal Immediate Release Fentanyl</b>	Actiq/ fentanyl lozenge Fentanyl buccal tablets	Fentora Subsys
<b>Vascepa</b>	Vascepa/ icosapent ethyl	
<b>Vasomotor Symptoms (formerly Neurokinin Receptor Antagonists)</b>	Veozah	
<b>Verquvo</b>	Verquvo	
<b>Vitamin B12 Deficiency</b>	Nascobal	

<b>Winlevi</b>	Winlevi 1% cream	
<b>Xhance</b>	Xhance	
<b>Xphozah</b>	Xphozah	
<b>Specialty Prior Authorization</b>		
<b>Agamree Emflaza (formerly Emflaza)</b>	Agamree	Emflaza
<b>Arikayce</b>	Arikayce	
<b>Camzyos</b>	Camzyos	
<b>Cholestasis Pruritus</b>	Bylvay	Livmarli
<b>Coagulation Factor VIIa</b>	NovoSeven RT	Sevenfact
<b>Corticotropin (formerly H.P. Acthar)</b>	Acthar Gel	Cortrophin Gel
<b>Cystic Fibrosis Transmembrane Conductance Regulator (CFTR) (formerly Cystic Fibrosis)</b>	Alyftrek Kalydeco Orkambi	Symdeko Trikafta
<b>Daybue</b>	Daybue	
<b>Dojolvi</b>	Dojolvi	
<b>Duvyzat</b>	Duvyzat	
<b>Egrifta</b>	Egrifta SV	
<b>Endari (formerly Sickle Cell Disease)</b>	Endari/ L-glutamine	
<b>Erythropoiesis (formerly Erythropoiesis Stimulating Agents (ESAs))</b>	Aranesp Epogen Mircera	Procrit Retacrit
<b>Factor VIII and von Willebrand Factor (formerly Factor VIII and von Willebrand Factor and Hemophilia Factor IX)</b>	Advate Adynovate Afstyla Alphanate Altuviiiio Eloctate Esperoct Hemofil M Humate P Jivi	Koāte Kogenate FS Kovaltry NovoEight Nuwiq Recombinate Vonvendi Wilate Xyntha Xyntha Solofuse
<b>Filsuvez</b>	Filsuvez	
<b>Galafold (formerly Fabry Disease)</b>	Galafold	
<b>Gattex (formerly Short Bowel Syndrome)</b>	Gattex	
<b>Growth Hormone (formerly Growth Hormone/ Egrifta)</b>	Genotropin Humatrope Norditropin Flexpro Ngenla Nutropin AQ Omnitrope	Saizen Serostim Skytrofa Sogroya Zomacton Zorbtive
<b>Hemlibra</b>	Hemlibra	

<b>Hemophilia Factor IX (formerly Factor VIII and von Willebrand Factor and Hemophilia Factor IX)</b>	AlphaNine SD Alprolix BeneFIX Idelvion	Ixinity Profilnine SD Rebinyn Rixubis
<b>Hereditary Angioedema</b>	Berinert Cinryze Firazyr/ icatibant Haegarda	Orladeyo Ruconest Takhzyro
<b>Hetlioz (formerly Circadian Rhythm Disorders)</b>	Hetlioz	Hetlioz LQ
<b>Hympavzi</b>	Hympavzi	
<b>Homozygous Familial Hypercholesterolemia (HoFH)</b>	Juxtapid	
<b>Imcivree</b>	Imcivree	
<b>Iron Chelation (formerly Deferasirox)</b>	Exjade/ deferasirox Ferriprox	Jadenu/ deferasirox
<b>Isturisa</b>	Isturisa	
<b>Joenja</b>	Joenja	
<b>Jynarque (formerly Polycystic Kidney Disease)</b>	Jynarque	
<b>Korlym</b>	Korlym/mifepristone	
<b>Myalept</b>	Myalept	
<b>Neurotrophic Keratitis</b>	Oxervate	
<b>Niemann-Pick Disease Type C Agents</b>	Aqneursa	Miplyffa
<b>Ohtuvayre</b>	Ohtuvayre	
<b>Otezla</b>	Otezla	
<b>Parathyroid Hormone Analog Osteoporosis (formerly Osteoporosis)</b>	Forteo Teriparatide	teriparatide Tymlos
<b>Peg-interferon</b>	Pegasys	
<b>Phenylketonuria (formerly Enzyme Deficiency)</b>	Javygtor Kuvan/ sapropterin	Palynziq
<b>Procysbi</b>	Procysbi	
<b>Pulmonary Arterial Hypertension (PAH) (formerly Oral Pulmonary Arterial Hypertension (PAH))</b>	Adcirca/ tadalafil Adempas Alyq Letairis/ ambrisentan Liqrev Opsumit Opsynvi Orenitram	Revatio Sildenafil suspension Tadliq Tracleer/ bosentan Tyvaso Uptravi Ventavis Winrevair
<b>Radicava</b>	Radicava ORS	
<b>Recorlev</b>	Recorlev	
<b>Resmetirom</b>	Rezdiffra	
<b>Risdiplam</b>	Evrysdi	
<b>Rivfloza</b>	Rivfloza	
<b>Sohonos</b>	Sohonos	

<b>Skyclarys</b>	Skyclarys	
<b>Somatostatins (formerly Somatostatin Analogs)</b>	Mycapssa	Somavert
<b>Strensiq</b>	Strensiq	
<b>Substrate Reduction Therapy (formerly Cerdelga)</b>	Cerdelga Opfolda	Zavesca/ miglustat
<b>Sucraid</b>	Sucraid	
<b>Tryvio</b>	Tryvio	
<b>Urea Cycle Disorders</b>	Buphenyl/ sodium phenylbutyrate Olpruva	Pheburane Ravicti
<b>Vijoice</b>	Vijoice	
<b>VMAT2 Inhibitors (formerly Huntington's Disease/Tardive Dyskinesia)</b>	Austedo Austedo XR	Ingrezza Xenazine/ tetrabenazine
<b>Vowst</b>	Vowst	
<b>Voxzogo</b>	Voxzogo	
<b>Xolremdi</b>	Xolremdi	
<b>Yorvipath</b>	Yorvipath	
<b>Zokinvy</b>	Zokinvy	

If you have any questions, call the number listed on your member ID card.

*\*Third-party brand names are the property of their respective owners. These programs are subject to change from time to time and additional drugs may be added to the categories listed. These are only examples of drug categories and specific medications for which a prior authorization program may be included as part of your prescription drug benefit plan. If your drug is not on the Drug List, you, or your prescribing health care provider, can ask for an exception review. As part of the review, you may have to meet the drug's prior authorization program criteria before your request may be approved. To start the review process, you can call the number on your Member ID card or ask your doctor to visit [bcbsnm.com/provider](http://bcbsnm.com/provider).*