



Prior Authorization

Prior Authorization Drug

(If the drug you take is on this list, Express Scripts will check to make sure it meets your plan's conditions for coverage.)

Base Offering

Brand Name	Generic Name
Adcirca®	tadalafil
Aranesp®	darbepoetin alfa
Botox®	botulinum toxin type A
Cimzia®	certolizumab pegol for injection
Dysport®	abobotulinumtoxina
Egrifta™	tesamorelin for injection
Epogen®	epoetin alfa
Flolan®	epoprostenol injection
Genotropin® Humatrope® Norditropin® Nutropin® Nutropin® AQ® Omnitrope™ Saizen® Serostim® Tev-Tropin® Zorbitive®	somatropin
Increlex®	Mecasermin
Letairis®	Ambrisentan
Myobloc®	botulinum toxin type B
Procrit®	epoetin alfa
Prolastin®, Aralast®, Zemaira®	alpha ₁ -proteinase inhibitor
Regranex®	Becaplermin
Remodulin®	treprostinil injection
Revatio®	sildenafil
Tazorac®	tazarotene
Tracleer®	bosentan
Tyvaso®	treprostinil inhalation
Ventavis®	iloprost
Xeomin®	incobotulinumtoxima



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Supplemental Offering

Brand Name	Generic Name
Actemra®	tocilizumab
Amevive®	alefacept
Atralin®	topical tretinoin
Avita®	topical tretinoin
Differin®	adapalene
Enbrel®	etanercept
Forteo®	teriparatide
Humira®	adalimumab
Kineret®	anakinra
Lidoderm®	lidocaine transdermal
Neulasta®	pegfilgrastim
Neupogen®	filgrastim
Nuvigil®	armodafinil
Orencia®	abatacept
Provigil®	modafinil
Remicade®	infliximab
Retin-A®/Micro	topical tretinoin
Rituxan®	rituxamab
Simponi®	golimumab injection
Stelara®	ustekinumab
Topamax®	topiramate
Tretin-X®	topical tretinoin
Xolair®	omalizumab
Ziana®	topical tretinoin
Zonegran®	zonisamide