

Blue Cross Blue Shield of North Dakota Drug List Updates



January 2020

TRADE NAME (generic name) or generic name	Brand/ Generic Product	Effective Date	Description of Change
arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)	Generic	9/22/19	Addition, generic for TRISENOX
BUNAVAIL (buprenorphine-naloxone buccal film 2.1-0.3 mg (base equiv))	Brand	1/1/20	Addition
BUNAVAIL (buprenorphine-naloxone buccal film 4.2-0.7 mg (base equiv))	Brand	1/1/20	Addition
BUNAVAIL (buprenorphine-naloxone buccal film 6.3-1 mg (base equiv))	Brand	1/1/20	Addition
digoxin oral soln 0.05 mg/ml	Generic	10/13/19	Addition, generic for DIGOXIN
DOCETAXEL (docetaxel for inj conc 160 mg/8ml (20 mg/ml))	Brand	1/1/20	Removal, generics available
EMGALITY (galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml)	Brand	1/1/20	Addition
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)	Generic	8/25/19	Addition, generic for EPIPEN-JR 2-PAK
EPIPEN-JR 2-PAK (epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000))	Brand	1/1/20	Removal, generics available
FIASP PENFILL (insulin aspart (with niacinamide) soln cartridge 100 unit/ml)	Brand	9/29/19	Addition
fosaprepitant dimeglumine for iv infusion 150 mg (base eq)	Generic	9/8/19	Addition, generic for EMEND
GEMCITABINE (gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml) (base equiv))	Brand	1/1/20	Removal, generics available
GEMCITABINE (gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml) (base equiv))	Brand	1/1/20	Removal, generics available
GEMCITABINE (gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv))	Brand	1/1/20	Removal, generics available
HARVONI (ledipasvir-sofosbuvir tab 45-200 mg)	Brand	10/13/19	Addition
hydrocortisone acetate suppos 25 mg	Generic	1/1/20	Addition
LOTEMAX (loteprednol etabonate ophth susp 0.5%)	Brand	1/1/20	Removal, generics available
MAVENCLAD (cladribine tab therapy pack 10 mg (10 tabs))	Brand	1/1/20	Addition
MAVENCLAD (cladribine tab therapy pack 10 mg (4 tabs))	Brand	1/1/20	Addition
MAVENCLAD (cladribine tab therapy pack 10 mg (5 tabs))	Brand	1/1/20	Addition
MAVENCLAD (cladribine tab therapy pack 10 mg (6 tabs))	Brand	1/1/20	Addition
MAVENCLAD (cladribine tab therapy pack 10 mg (7 tabs))	Brand	1/1/20	Addition
MAVENCLAD (cladribine tab therapy pack 10 mg (8 tabs))	Brand	1/1/20	Addition
MAVENCLAD (cladribine tab therapy pack 10 mg (9 tabs))	Brand	1/1/20	Addition
MORPHINE SULFATE (morphine sulfate tab 15 mg)	Brand	1/1/20	Removal, generics available
MORPHINE SULFATE (morphine sulfate tab 30 mg)	Brand	1/1/20	Removal, generics available
morphine sulfate tab 15 mg	Generic	9/1/19	Addition, generic for MORPHINE SULFATE
morphine sulfate tab 30 mg	Generic	9/1/19	Addition, generic for MORPHINE SULFATE
NORDITROPIN FLEXPPO (somatropin inj 10 mg/1.5ml)	Brand	1/1/20	Addition
NORDITROPIN FLEXPPO (somatropin inj 15 mg/1.5ml)	Brand	1/1/20	Addition
NORDITROPIN FLEXPPO (somatropin inj 30 mg/3ml)	Brand	1/1/20	Addition
NORDITROPIN FLEXPPO (somatropin inj 5 mg/1.5ml)	Brand	1/1/20	Addition

continued

TRADE NAME (generic name) or generic name	Brand/ Generic Product	Effective Date	Description of Change
NOXAFIL (posaconazole tab delayed release 100 mg)	Brand	1/1/20	Removal, generics available
OMNITROPE (somatropin for inj 5.8 mg)	Brand	1/1/20	Removal
OMNITROPE (somatropin inj 10 mg/1.5ml)	Brand	1/1/20	Removal
OMNITROPE (somatropin inj 5 mg/1.5ml)	Brand	1/1/20	Removal
PIQRAY 200MG DAILY DOSE (alpelisib tab therapy pack 200 mg daily dose)	Brand	1/1/20	Addition
PIQRAY 250MG DAILY DOSE (alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs))	Brand	1/1/20	Addition
PIQRAY 300MG DAILY DOSE (alpelisib tab pack 300 mg daily dose (2x150 mg tab))	Brand	1/1/20	Addition
posaconazole tab delayed release 100 mg	Generic	9/1/19	Addition, generic for NOXAFIL
PROGLYCEM (diazoxide susp 50 mg/ml)	Brand	1/1/20	Addition
RINVOQ (upadacitinib tab er 24hr 15 mg)	Brand	1/1/20	Addition
SIMPONI (golimumab subcutaneous soln auto-injector 100 mg/ml)	Brand	1/1/20	Removal
SIMPONI (golimumab subcutaneous soln auto-injector 50 mg/0.5ml)	Brand	1/1/20	Removal
SIMPONI (golimumab subcutaneous soln prefilled syringe 100 mg/ml)	Brand	1/1/20	Removal
SIMPONI (golimumab subcutaneous soln prefilled syringe 50 mg/0.5ml)	Brand	1/1/20	Removal
SOVALDI (sofosbuvir tab 200 mg)	Brand	10/13/19	Addition
SUNOSI (solriamfetol hcl tab 150 mg (base equiv))	Brand	1/1/20	Addition
SUNOSI (solriamfetol hcl tab 75 mg (base equiv))	Brand	1/1/20	Addition
SUPRAX (cefixime cap 400 mg)	Brand	1/1/20	Removal, generics available
TRACLEER (bosentan tab 125 mg)	Brand	1/1/20	Removal, generics available
TRACLEER (bosentan tab 62.5 mg)	Brand	1/1/20	Removal, generics available
VERZENIO (abemaciclib tab 100 mg)	Brand	1/1/20	Addition
VERZENIO (abemaciclib tab 150 mg)	Brand	1/1/20	Addition
VERZENIO (abemaciclib tab 200 mg)	Brand	1/1/20	Addition
VERZENIO (abemaciclib tab 50 mg)	Brand	1/1/20	Addition
VITRAKVI (larotrectinib sulfate cap 100 mg (base equivalent))	Brand	1/1/20	Addition
VITRAKVI (larotrectinib sulfate cap 25 mg (base equivalent))	Brand	1/1/20	Addition
VITRAKVI (larotrectinib sulfate oral soln 20 mg/ml (base equivalent))	Brand	1/1/20	Addition
VYNDAMAX (tafamidis cap 61 mg)	Brand	1/1/20	Addition
VYNDAQEL (tafamidis meglumine (cardiac) cap 20 mg)	Brand	1/1/20	Addition
ZUBSOLV (buprenorphine hcl-naloxone hcl sl tab 0.7-0.18 mg (base eq))	Brand	1/1/20	Addition
ZUBSOLV (buprenorphine hcl-naloxone hcl sl tab 1.4-0.36 mg (base eq))	Brand	1/1/20	Addition
ZUBSOLV (buprenorphine hcl-naloxone hcl sl tab 11.4-2.9 mg (base eq))	Brand	1/1/20	Addition
ZUBSOLV (buprenorphine hcl-naloxone hcl sl tab 2.9-0.71 mg (base eq))	Brand	1/1/20	Addition
ZUBSOLV (buprenorphine hcl-naloxone hcl sl tab 5.7-1.4 mg (base eq))	Brand	1/1/20	Addition
ZUBSOLV (buprenorphine hcl-naloxone hcl sl tab 8.6-2.1 mg (base eq))	Brand	1/1/20	Addition

Utilization Management Implementations

Prior Authorizations and Step Therapy Programs

Medications	Utilization Management
Aklief Cream (trifarotene) cream	ST
Amzeeq (minocycline) topical foam	ST
Brukinsa (zanubrutinib)	PA and QL
Drizalma (duloxetine sprinkle)	ST and QL
Inrebic (fedratinib)	PA and QL
Kanjinti (trastuzumab)	PA
Mvasi (bavacizumab)	PA
Polivy (polatuzumab)	PA
Rinvoq (upadacitinib ER)	PA and QL
Rozlytree (entrectinib)	PA and QL
Rybulus (semaglutide)	ST and QL
Tosymra (sumatriptan nasal spray)	ST and QL
Vumerity (diroximel)	PA and QL
Vyndamax (tafamidis)	PA and QL

Dispensing Limits

Medication Name	Dispensing Limit
Brukinsa (zanubrutinib)	4 capsules per day
Drizalma (duloxetine sprinkle)	2 capsules per day
Inrebic (fedratinib)	4 capsules per day
Rinvoq (upadacitinib ER)	1 tablet per day
Rozlytree (entrectinib) 100 mg	1 capsule per day
Rozlytree (entrectinib) 200 mg	3 capsules per day
Rybulus (semaglutide)	1 tablet per day
Tosymra (sumatriptan nasal spray)	18 sprays per month
Vumerity (diroximel)	4 capsules per day
Vyndamax (tafamidis)	1 capsule per day

Note: Coverage is subject to each member's specific benefits. Group specific policies will supersede these policies when applicable. Please refer to the member's benefit plans.

For complete details, medical policies may be viewed on the Blue Cross website at <https://www.bcbsnd.com/quantitylimits>