

Blue Cross Blue Shield of North Dakota Drug List Updates



April 2022

TRADE NAME (generic name) or generic name	Brand/ Generic Product	Effective Date	Description of Change
AFINITOR (everolimus tab 10 mg)	Brand	4/1/22	Removal, generics available
AFINITOR DISPERZ (everolimus tab for oral susp 2 mg)	Brand	4/1/22	Removal, generics available
AFINITOR DISPERZ (everolimus tab for oral susp 3 mg)	Brand	4/1/22	Removal, generics available
AFINITOR DISPERZ (everolimus tab for oral susp 5 mg)	Brand	4/1/22	Removal, generics available
ALREX (loteprednol etabonate ophth susp 0.2%)	Brand	4/1/22	Removal
atropine sulfate ophth soln 1%	Generic	12/5/21	Addition, generic for ATROPINE SULFATE
BIKTARVY (bictegravir-emtricitabine-tenofovir af tab 30-120-15 mg)	Brand	12/5/21	Addition
brinzolamide ophth susp 1%	Generic	4/1/22	Removal
calcipotriene oint 0.005%	Generic	4/1/22	Removal
carglumic acid tab 200 mg	Generic	12/19/21	Addition, generic for CARBAGLU
DIFICID (fidaxomicin for susp 40 mg/ml)	Brand	4/1/22	Addition
DIFICID (fidaxomicin tab 200 mg)	Brand	4/1/22	Addition
DUPIXENT (dupilumab subcutaneous soln prefilled syringe 100 mg/0.67ml)	Brand	1/1/22	Addition
everolimus tab 1 mg	Generic	11/28/21	Addition, generic for ZORTRESS
EXFORGE HCT (amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg)	Brand	4/1/22	Addition
EXFORGE HCT (amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg)	Brand	4/1/22	Addition
EXFORGE HCT (amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg)	Brand	4/1/22	Addition
EXFORGE HCT (amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg)	Brand	4/1/22	Addition
EXFORGE HCT (amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg)	Brand	4/1/22	Addition
imiquimod cream 3.75%	Generic	4/1/22	Removal
LITHIUM CARBONATE (lithium carbonate cap 300 mg)	Brand	4/1/22	Removal, generics available
MYFEMBREE (relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg)	Brand	4/1/22	Addition
naloxone hcl nasal spray 4 mg/0.1ml	Generic	12/26/21	Addition, generic for NARCAN
pimecrolimus cream 1%	Generic	4/1/22	Removal
RINVOQ (upadacitinib tab er 24hr 30 mg)	Brand	1/23/22	Addition
SUTENT (sunitinib malate cap 12.5 mg (base equivalent))	Brand	4/1/22	Removal, generics available
SUTENT (sunitinib malate cap 25 mg (base equivalent))	Brand	4/1/22	Removal, generics available
SUTENT (sunitinib malate cap 37.5 mg (base equivalent))	Brand	4/1/22	Removal, generics available
SUTENT (sunitinib malate cap 50 mg (base equivalent))	Brand	4/1/22	Removal, generics available
ZORTRESS (everolimus tab 1 mg)	Brand	4/1/22	Removal, generics available

continued

Blue Cross Blue Shield of North Dakota Drug List Updates continued

Utilization Management Implementations

Prior Authorizations and Step Therapy Programs

Medications	Utilization Management
Oxbryta (voxelotor) tablet for oral suspension	PA and QL
Rinvoq (upadacitinib) tablet	PA and QL
Talzenna (talazoparib) capsule	PA and QL

Dispensing Limits

Medication Name	Dispensing Limit
Oxbryta (voxelotor) 300 mg tablet for oral suspension	150 tablets per 30 days
Xarelto (rivaroxaban) 1 mg/mL suspension	620 mL per 30 days
Rinvoq (upadacitinib) 30 mg tablet	30 tablets per 30 days
Talzenna (talazoparib) 0.5 mg, 0.75 mg capsules	30 capsules per 30 days
Seglantis (celecoxib/tramadol) 56 mg/44 mg tablet	120 tablets per 30 days
Molnupiravir 200 mg capsules	40 capsules per 30 days
Paxlovid (nirmatrelvir/ritonavir) 150 mg/100 mg tablet pack	30 capsules per 30 days

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>