



Provider-Administered Precertification Drug List

The following drugs will be subject to the Provider-Administered Drug Review Program. Precertification for these provider-administered drugs is required when administered in a provider's office, outpatient facility, or home health setting. Treatments indicated as Gene Therapy/Cellular Immunotherapy (+) require precertification when administered in any place of treatment.

FOR PEEHIP Members Only: Coverage excludes the provider-administered medications outlined in this drug policy from being accessed through a specialty pharmacy. It must be obtained through buy and bill. Lemtrada, Synagis, and Spravato are exceptions to this policy. Lemtrada will require the use of a specialty pharmacy. Synagis and Spravato may be obtained through buy and bill or specialty pharmacy.

Abecma ⁺	Columvi	Haegarda	Mepsevii	Reblozyl	Tezspire
Abraxane	Cosentyx	Halaven	Monjuvi	Releuko	Tivdak
Actemra IV	Crysvita	Hemgenix ⁺	Monoferric	Remicade	Tofidence
Adakveo	Cutaquig	Herceptin	Mvasi	Renflexis	Trazimera
Adcetris	Cuvitru	Hylecta	Mylotarg	Retacrit	Treanda
Adstiladrin ⁺	Cyramza	Herzuma	Myobloc	Rethymic ⁺	Tremfya
Adzynma	Danyelza	Hizentra	Naglazyme	Riabni	Trodelvy
Akynzeo	Darzalex	HyQvia	Neulasta	Rituxan IV	Trogarzo
Aldurazyme	Darzalex Faspro	Ilaris	Neupogen	Rituxan Hycela	Truxima
Alimta	Elahere	Ilumya	Nexviazyme	Roctavian ⁺	Tyenne
Aloxi	Elaprase	Imfinzi	Niktimvo	Rolvedon	Tyruko
Alyglo	Elelyso	Imjudo	Nivestym	Ruconest	Tysabri
Alymsys	Elfabrio	Imylgic	Nplate	Ruxience	Tzield
Amtagvi ⁺	Elitek	Inflectra	Nucala	Rybrevent	Udenyca
Amvuttra	Elrexio	Infliximab	Nulibry	Rystiggo	Ultomiris
Anktiva	Elzonris	Injectafer	Nyvepria	Rytelo	Uplizna
Arzerra	Empliciti	Ixempra	Ocrevus	Ryzneuta	Vabysmo
Asceniv	Enhertu	Izervay	Ocrevus Zunovo	Sarclisa	Vectibix
Avastin ⁺	Enjaymo	Jelmyto	Octagam	Saphnelo	Vegzelma
Avsolaa	Entyvio	Jemperli	Ogivri	Scenesse	Veopoz
Bavencio	Epkinly	Jevtana	Omisirge	Simponi Aria	Vimizim
Belrapzo	Epoetin alfa	Kadcyla	OmvoH	Skyrizi IV	Visudyne
bendamustine	Epogen	Kalbitor	Onivyde	Skysona ⁺	Vivimusta
Bendeka	Erbitux	Kanuma	Onpattro	Soliris	Vivitrol
Benlysta IV	Evkeeza	Kanjinti	Ontruzant	Spevigo	Vpriv
Beovu	Evomela	Keytruda	Opdivo	Spinraza	Vyepti
Beqvez ⁺	Eylea	Kimtrak	Opdualag	Spravato	Vyjuvek ⁺
Berinert	Eylea HD	Kisunla	Orencia	Stelara	Vyvgart
Besponsa	Fabrazyme	Krystexxa	Orthovisc	Stimufend	Vyvgart Hytrulo
Bivigam	Fasenra	Kymriah ⁺	Oxlumo	Sublocade	Vyxeos
Bkemv	Faslodex	Kyprolis	Padcev	Sustol	Xembify
Blenrep	Firazyr	Lamzede	palonosetron	Susvimo	Xenpozyme
Blincyto	Flebogamma	Lemtrada	Panzyga	Syfovre	Xiaflex
Botox	Fulphila	Lenmeldy	Pedmark	Sylvant	Xipere
Breyanzi ⁺	Fulvestrant	Leqembi	pemetrexed	Synagis	Xolair
Brineura	Fyarro	Leqvio	Pemfexy	Synvisc	Yervoy
Briumvi	Fynetra	Leukine	Perjeta	Synvisc-One	Yescarta ⁺
Byooviz	Gamifant	Libtayo	Phesgo	Takhzyro	Yondelis
Carimune NF	Gammagard S/D	Lucentis	Piasky	Talvey	Zarxio
Carvykti ⁺	Gammgard Liquid	Lumizyme	Polivy	Tecartus ⁺	Zaltrap
Casgevvy ⁺	Gammaked	Lumoxiti	Pombiliti	Tecelra	Zepzelca
Cerezyme	Gammplex Liquid	Lunsumio	Portrazza	Tecentriq	Ziextenzo
Cimerli	Gamunex-C	Luxturna ⁺	Poteligeo	Tecentriq Hybreza	Zirabev
Cimzia	Gazyva	Lyfgenia ⁺	Privigen	Tecvayli	Zolgensma ⁺
Cinqair	Givlaari	Lymphir	Procrit	Tepezza	Zynlonta
Cinryze	Granix	Macugen	Provenge	Testopel	Zynteglo ⁺
Cinvanti	H.P. Acthar	Margenza	Radicava	Tevimbra	Zynzy

⁺ Indicates Gene Therapy/Cellular Immunotherapy Product

⁺For Avastin, PA required for oncology indications only

Product names are the property of their respective owners. This list is updated monthly and is subject to change without notice.

Online policies can be found at AlabamaBlue.com/Pharmacy by selecting "Provider-Administered Drug Policies."