Blue Cross Blue Shield of

North Dakota Drug List Updates

July 2025

TRADE NAME (generic name) or generic name	Brand/ Generic Product	Effective Date	Description of Change
ADALIMUMAB-AATY CD/UC/HSSTARTER (adalimumab-aaty auto-injector kit 80 mg/0.8ml)	Brand	4/20/25	Addition
ADALIMUMAB-ADAZ (adalimumab-adaz soln auto-injector 80 mg/0.8ml)	Brand	4/1/25	Addition
ADALIMUMAB-ADAZ (adalimumab-adaz soln prefilled syringe 10 mg/0.1ml)	Brand	4/6/25	Addition
ADALIMUMAB-ADAZ (adalimumab-adaz soln prefilled syringe 20 mg/0.2ml)	Brand	4/1/25	Addition
ATTRUBY (acoramidis hcl tab pack 356 mg (712 mg twice daily))	Brand	7/1/25	Addition
EBGLYSS (lebrikizumab-lbkz solution prefilled syringe 250 mg/2ml)	Brand	7/1/25	Addition
EBGLYSS (lebrikizumab-lbkz subcutaneous soln auto-inject 250 mg/2ml)	Brand	7/1/25	Addition
ESPEROCT (antihemophilic factor recomb glycopeg-exei for inj 4000 unit)	Brand	2/2/25	Addition
ITOVEBI (inavolisib tab 3 mg)	Brand	7/1/25	Addition
ITOVEBI (inavolisib tab 9 mg)	Brand	7/1/25	Addition
mercaptopurine susp 2000 mg/100ml (20 mg/ml)	Generic	3/9/25	Addition, generic for PURIXAN
MESNEX (mesna tab 400 mg)	Brand	7/1/25	Removal, generics available
MORPHINE SULFATE (morphine sulfate oral soln 20 mg/5ml)	Brand	7/1/25	Removal, generics available
NEMLUVIO (nemolizumab-ilto for subcutaneous auto-injector 30 mg)	Brand	7/1/25	Addition
NEXIUM (esomeprazole magnesium for delayed release susp pack 2.5 mg)	Brand	7/1/25	Removal, generics available
NEXIUM (esomeprazole magnesium for delayed release susp packet 5 mg)	Brand	7/1/25	Removal, generics available
PAXLOVID (nirmatrelvir tab 6 x 150 mg & ritonavir tab 5 x 100 mg pak)	Brand	4/20/25	Addition
rivaroxaban tab 2.5 mg	Generic	3/23/25	Addition, generic for XARELTO
SELARSDI (ustekinumab-aekn soln prefilled syringe 45 mg/0.5ml)	Brand	7/1/25	Addition
SELARSDI (ustekinumab-aekn soln prefilled syringe 90 mg/ml)	Brand	7/1/25	Addition
SIMLANDI (adalimumab-ryvk prefilled syringe kit 20 mg/0.2ml)	Brand	2/2/25	Addition
SIMLANDI (adalimumab-ryvk prefilled syringe kit 80 mg/0.8ml)	Brand	2/2/25	Addition
SIMLANDI 1-PEN KIT (adalimumab-ryvk auto-injector kit 80 mg/0.8ml)	Brand	3/23/25	Addition
STELARA (ustekinumab inj 45 mg/0.5ml)	Brand	7/1/25	Removal
STELARA (ustekinumab soln prefilled syringe 45 mg/0.5ml)	Brand	7/1/25	Removal
STELARA (ustekinumab soln prefilled syringe 90 mg/ml)	Brand	7/1/25	Removal
STEQEYMA (ustekinumab-stba soln prefilled syringe 45 mg/0.5ml)	Brand	7/1/25	Addition
STEQEYMA (ustekinumab-stba soln prefilled syringe 90 mg/ml)	Brand	7/1/25	Addition
ticagrelor tab 90 mg	Generic	4/13/25	Addition, generic for BRILINTA
TREMFYA INDUCTION PACK FOR CROHNS DISEASE (guselkumab soln auto-injector 200 mg/2ml)	Brand	3/30/25	Addition
TREMFYA PEN (guselkumab soln auto-injector 100 mg/ml)	Brand	4/6/25	Addition
YESINTEK (ustekinumab-kfce soln prefilled syringe 45 mg/0.5ml)	Brand	7/1/25	Addition
YESINTEK (ustekinumab-kfce soln prefilled syringe 90 mg/ml)	Brand	7/1/25	Addition
YESINTEK (ustekinumab-kfce subcutaneous soln 45 mg/0.5ml)	Brand	7/1/25	Addition

Utilization Management Implementations

Prior Authorizations and Step Therapy Programs

Medications	Utilization Management
Evrysdi 5 mg tablets	PA+QL
Ustekinumab-ttwe syringe	PA+QL
Pyzchiva syringe	PA+QL
Otulfi syringe	PA+QL
Gomekli capsules	PA+QL

continued

Medications	Utilization Management
Gomekli tablets for oral suspension	PA+QL
Romvimza capsules	PA+QL
Cortrophin prefilled syringe	PA
Sevenfact 2 mg	PA
Xpovio 10 mg tablets	PA+QL
PAXLOVID PAK (nirmaltrelvir tab 6 x 150 mg & ritonavir tab 5 x 100 mg pak	QL
ADALIMUMAB-AATY CD/UC/HS kit	PA+QL
Symbravo	ST+QL

Dispensing Limits

Medication Name	Dispensing Limit
Evrysdi 5 mg tablets	30 tablets per 30 days
Ustekinumab-ttwe 45 mg syringe	1 syringe per 84 days
Ustekinumab-ttwe 90 mg syringe	1 syringe per 56 days
Pyzchiva syringe 45 mg syringe	1 syringe per 84 days
Pyzchiva syringe 90 mg syringe	1 syringe per 56 days
Otulfi syringe 45 mg syringe	1 syringe per 84 days
Otulfi syringe 90 mg syringe	1 syringe per 56 days
Zepbound 7.5 mg vial	4 vials per 28 days
Zepbound 10 mg vial	4 vials per 28 days
Gomekli 2 mg capsules	84 capsules per 28 days
Gomekli 1 mg capsules	168 capsules per 28 days
Gomekli 1 mg tablets for oral suspension	168 tablets per 28 days
Rybelsus 1.5 mg tablets	30 tablets per 180 days
Rybelsus 4 mg tablets	30 tablets per 30 days
Rybelsus 9 mg tablets	30 tablets per 30 days
Omvoh 100mg/200mg pen kit	2 pens per 28 days
Omvoh 100mg/200mg syringe kit	2 syringes per 28 days
Romvimza 14 mg capsules	8 capsules per 28 days
Romvimza 20 mg capsules	8 capsules per 28 days
Romvimza 30 mg capsules	8 capsules per 28 days
Xpovio 10 mg tablets	16 tablets per 28 days
Revuforj 25 mg tablets	240 tablets per 30 days
PAXLOVID PAK (nirmaltrelvir tab 6 x 150 mg & ritonavir tab 5 x 100 mg pak	11 tablets per 30 days
ADALIMUMAB-AATY CD/UC/HS kit	1 kit per 180 days
Symbravo	9 tablets per 30 days

Note: Coverage is subject to each member's specific benefits. Group specific policies will superesede 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**

In accordance with federal regulations, Blue Cross Blue Shield of North Dakota is required to provide you the following disclosure:

Blue Cross Blue Shield of North Dakota complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, gender identity, sexual orientation or sex. Blue Cross Blue Shield of North Dakota does not exclude people or treat them differently because of race, color, national origin, age, disability, gender identity, sexual orientation or sex.

Blue Cross Blue Shield of North Dakota:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, please call Member Services at 1-844-363-8457 (toll-free) or through the North Dakota Relay at 1-800-366-6888 or 711.

If you believe that Blue Cross Blue Shield of North Dakota has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, gender identity, sexual orientation or sex, you can file a grievance with:

Civil Rights Coordinator
4510 13th Ave S
Fargo, ND 58121
701-297-1638 or North Dakota Relay at 800-366-6888 or 711
701-282-1804 (fax)
CivilRightsCoordinator@bcbsnd.com (email) (Communication by unencrypted email presents a risk.)

You can file a grievance in person or by mail, fax, or email within 180 days of the date of the alleged discrimination. Grievance forms are available at http://www.bcbsnd.com/report or by calling 1-844-363-8457. If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at *https://ocrportal.hhs.gov/ocr/portal/lobby.jsf*, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue SW.
Room 509F, HHH Building
Washington, DC 20201
800-368-1019 or 800-537-7697 (TDD)

Complaint forms are available at *http://www.hhs.gov/ocr/office/file/index.html*

Español (Spanish)

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-844-363-8457 (TTY: 1-800-366-6888 o 711).

Deutsch (German)

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-844-363-8457 (TTY: 1-800-366-6888 oder 711).

中文 (Chinese)

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-844-363-8457（TTY：1-800-366-6888 或 711）。

Oroomiffa (Oromo)

XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 1-844-363-8457 (TTY: 1-800-366-6888 ykn 711).

Tiếng Việt (Vietnamese)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn.
Gọi số 1-844-363-8457 (TTY: 1-800-366-6888 hoặc 711).

Ikirundi (Bantu – Kirundi)

ICITONDERWA: Nimba uvuga Ikirundi, uzohabwa serivisi zo gufasha mu ndimi, ku buntu.
Woterefona 1-844-363-8457 (TTY: 1-800-366-6888 canke 711).

العربية (Arabic)

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-844-363-8457 (رقم هاتف الصم والبكم: 1-800-366-6888 أو711).

Kiswahili (Swahili)

KUMBUKA: Ikiwa unazungumza Kiswahili, unaweza kupata, huduma za lugha, bila malipo.
Piga simu 1-844-363-8457 (TTY: 1-800-366-6888 au 711).

Русский (Russian)

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода.
Звоните 1-844-363-8457 (телетайп: 1-800-366-6888 или 711).

日本語 (Japanese)

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-844-363-8457
（TTY: 1-800-366-6888 または 711）まで、お電話にてご連絡ください。

नेपाली (Nepali)

ध्यान दिनुहोस्: तपाईले नेपाली बोल्नुहुन्छ भने तपाईको निम्ति भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ । फोन गर्नुहोस् 1-844-363-8457 (टिटिवाइ: 1-800-366-6888 वा 711) ।

Français (French)

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement.
Appelez le 1-844-363-8457 (ATS : 1-800-366-6888 ou 711).

한국어 (Korean)

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-844-363-8457
(TTY: 1-800-366-6888 또는 711)번으로 전화해 주십시오.

Tagalog (Tagalog – Filipino)

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-844-363-8457 (TTY: 1-800-366-6888 o 711).

Norsk (Norwegian)

MERK: Hvis du snakker norsk, er gratis språkassistansetjenester tilgjengelige for deg. Ring 1-844-363-8457 (TTY: 1-800-366-6888 eller 711).

Diné Bizaad (Navajo)

Díí baa akó nínízin: Díí saad bee yáníłti'go **Diné Bizaad**, saad bee áká'ánída'áwo'dęę', t'áá jiik'eh, éí ná hóló, kojį' hódíílnih 1-844-363-8457 (TTY: 1-800-366-6888 éí doodagó 711.)