

# Blue Cross Blue Shield of North Dakota Drug List Updates



April 2017

TRADE NAME (generic name)	Brand/ Generic Product	Effective Date	Description of Change
abacavir sulfate-lamivudine tab 600-300 mg	Generic	10/9/16	Addition, generic for EPZICOM
aprepitant capsule 80 mg	Generic	1/1/17	Addition, generic for EMEND
aprepitant capsule therapy pack 80 & 125 mg	Generic	1/1/17	Addition, generic for EMEND
EMEND (aprepitant capsule 80 mg)	Brand	4/1/17	Removal, generics available
EMEND (aprepitant capsule therapy pack 80 & 125 mg)	Brand	4/1/17	Removal, generics available
EPINEPHRINE (epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)) (Mylan Products)	Brand	12/15/16	Addition
EPINEPHRINE (epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)) (Mylan Products)	Brand	12/15/16	Addition
EPZICOM (abacavir sulfate-lamivudine tab 600-300 mg)	Brand	4/1/17	Removal, generics available
estradiol vaginal tab 10 mcg	Generic	10/14/16	Addition, generic for VAGIFEM
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	Generic	12/4/16	Addition
ezetimibe tab 10 mg	Generic	12/11/16	Addition, generic for ZETIA
INVOKAMET XR (canagliflozin-metformin hcl tab sr 24hr 150-1000 mg)	Brand	4/1/17	Addition
INVOKAMET XR (canagliflozin-metformin hcl tab sr 24hr 150-500 mg)	Brand	4/1/17	Addition
INVOKAMET XR (canagliflozin-metformin hcl tab sr 24hr 50-1000 mg)	Brand	4/1/17	Addition
INVOKAMET XR (canagliflozin-metformin hcl tab sr 24hr 50-500 mg)	Brand	4/1/17	Addition
oseltamivir phosphate cap 30 mg (base equiv)	Generic	12/11/16	Addition, generic for TAMIFLU
oseltamivir phosphate cap 45 mg (base equiv)	Generic	12/11/16	Addition, generic for TAMIFLU
oseltamivir phosphate cap 75 mg (base equiv)	Generic	12/11/16	Addition, generic for TAMIFLU
quetiapine fumarate tab sr 24hr 400 mg	Generic	11/1/16	Addition, generic for SEROQUEL XR
SEROQUEL XR (quetiapine fumarate tab sr 24hr 400 mg)	Brand	4/1/17	Removal, generics available
SOOLANTRA (ivermectin cream 1%)	Brand	4/1/17	Addition
TAMIFLU (oseltamivir phosphate cap 30 mg (base equiv))	Brand	4/1/17	Removal, generics available
TAMIFLU (oseltamivir phosphate cap 45 mg (base equiv))	Brand	4/1/17	Removal, generics available
TAMIFLU (oseltamivir phosphate cap 75 mg (base equiv))	Brand	4/1/17	Removal, generics available
VAGIFEM (estradiol vaginal tab 10 mcg)	Brand	4/1/17	Removal, generics available

## Utilization Management Implementations

### Prior Authorizations & Step Therapy Programs

Medications	Utilization Management
Adlyxin (lixisenatide)	ST and QL
Emflaza (deflazacort)	PA
Eucrisa (crisaborole)	ST
Rubraca (racaparib)	PA and QL

### Dispensing Limits

Medication Name	Dispensing Limit
Adlyxin (lixisenatide) 20 mcg injection	2 pens per 28 days
Adlyxin (lixisenatide) starter pack	1 kit per 180 days
Rubraca (racaparib)	4 tablets per day
Zubsolv (buprenorphine/naloxone)	1 tablet 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>.