

Pharmacy Specialty Overview by Prior Authorization Approval or Denial 4th Quarter 2023

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3961	UNSPECIFIED	ABIRATERONE	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	ABIRATERONE	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOINJECTOR	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	HEMATOLOGY & ONCOLOGY	ALECENSA	ANTINEOPLASTICS	Approved	1
3965	HEMATOLOGY & ONCOLOGY	ALECENSA	ANTINEOPLASTICS	Denied	1
3956	PHYSICIAN, ONCOLOGY, MEDICAL	ALECENSA	ANTINEOPLASTICS	Approved	1
3951	CARDIOLOGY	AMBRISENTAN	DERMATOLOGICAL AGENTS	Approved	1
3951	FAMILY PRACTICE	AMBRISENTAN	DERMATOLOGICAL AGENTS	Approved	1
3956	PULMONARY DISEASES	AMBRISENTAN	DERMATOLOGICAL AGENTS	Approved	2
3964	UNSPECIFIED	AMBRISENTAN	DERMATOLOGICAL AGENTS	Approved	1
3956	UNSPECIFIED	AMBRISENTAN	DERMATOLOGICAL AGENTS	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	AMJEVITA	ANTIRHEUMATIC	Approved	1
3963	UNSPECIFIED	AMJEVITA	ANTIRHEUMATIC	Denied	1
3956	UNSPECIFIED	APOKYN	PARKINSON'S AGENT	Denied	1
3956	PEDIATRICS	ARANESP	HEMATINICS & BLOOD CELL STIMULATORS	Denied	1
3956	NEUROLOGY	AUBAGIO	MULTIPLE SCLEROSIS AGENT	Approved	2
3956	UNSPECIFIED	AUBAGIO	MULTIPLE SCLEROSIS AGENT	Approved	2
3963	UNSPECIFIED	AUBAGIO	MULTIPLE SCLEROSIS AGENT	Denied	1
3961	UNSPECIFIED	AUBAGIO	MULTIPLE SCLEROSIS AGENT	Approved	1
3969	NEUROLOGY	AUSTEDO	NEUROLOGICAL AGENTS	Approved	1
3963	NEUROLOGY	AVONEX	MULTIPLE SCLEROSIS AGENT	Approved	1
3951	UNSPECIFIED	AVONEX	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	HEMATOLOGY & ONCOLOGY	BALVERSA	TYROSINE KINASE INHIBITOR	Denied	1
3963	RHEUMATOLOGY	BENLYSTA	LUPUS THERAPY	Approved	3
3963	UNSPECIFIED	BENLYSTA	LUPUS THERAPY	Approved	4
3963	UNSPECIFIED	BETASERON	MISCELLANEOUS	Approved	1
3969	HEMATOLOGY & ONCOLOGY	BOSULIF	ANTINEOPLASTICS	Approved	1
3951	HEMATOLOGY & ONCOLOGY	BRUKINSA	ANTINEOPLASTICS	Approved	1
3963	INTERNAL MEDICINE	BRUKINSA	ANTINEOPLASTICS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	HEMATOLOGY & ONCOLOGY	CABOMETYX	ANTINEOPLASTICS	Approved	4
3963	INTERNAL MEDICINE	CABOMETYX	ANTINEOPLASTICS	Approved	1
3951	INTERNAL MEDICINE	CABOMETYX	ANTINEOPLASTICS	Approved	1
3963	MEDICAL ONCOLOGY	CABOMETYX	ANTINEOPLASTICS	Approved	1
3956	PEDIATRICS	CABOMETYX	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	CABOMETYX	ANTINEOPLASTICS	Approved	2
3963	UNSPECIFIED	CABOMETYX	ANTINEOPLASTICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	CABOMETYX 40MG OR TABS	ANTINEOPLASTICS	Approved	1
3961	HEMATOLOGY & ONCOLOGY	CALQUENCE TABLET	ANTINEOPLASTICS	Approved	1
3963	INTERNAL MEDICINE	CALQUENCE TABLET	ANTINEOPLASTICS	Approved	1
3963	PHYSICIAN, ONCOLOGY, MEDICAL	CALQUENCE TABLET	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	CALQUENCE TABLET	ANTINEOPLASTICS	Approved	1
3963	CARDIOLOGY	CAMZYOS	CARDIOVASCULAR AGENTS	Denied	1
3963	CARDIOLOGY	CAMZYOS	CARDIOVASCULAR AGENTS	Approved	1
3963	UNSPECIFIED	CAMZYOS	CARDIOVASCULAR AGENTS	Denied	1
3956	HEMATOLOGY & ONCOLOGY	CAPECITABINE	ANTINEOPLASTICS	Approved	4
3963	HEMATOLOGY & ONCOLOGY	CAPECITABINE	ANTINEOPLASTICS	Approved	5
3965	HEMATOLOGY & ONCOLOGY	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3961	HEMATOLOGY & ONCOLOGY	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3963	INTERNAL MEDICINE	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3956	INTERNAL MEDICINE	CAPECITABINE	ANTINEOPLASTICS	Approved	4
3963	MEDICAL ONCOLOGY	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3956	MEDICAL ONCOLOGY	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3963	MEDICAL ONCOLOGY	CAPECITABINE	ANTINEOPLASTICS	Denied	1
3963	UNSPECIFIED	CAPECITABINE	ANTINEOPLASTICS	Approved	3
3963	UNSPECIFIED	CAPECITABINE	ANTINEOPLASTICS	Denied	1
3956	UNSPECIFIED	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3969	UNSPECIFIED	CAPECITABINE	ANTINEOPLASTICS	Approved	1
3969	ENDOCRINOLOGY, DIABETES & METABOLISM	CINACALCET	THYROID PRODUCT	Approved	1
3956	INTERNAL MEDICINE	CINACALCET	THYROID PRODUCT	Approved	2
3963	NEPHROLOGY / RENAL MEDICINE	CINACALCET	THYROID PRODUCT	Denied	1
3956	NEPHROLOGY / RENAL MEDICINE	CINACALCET	THYROID PRODUCT	Approved	3
3961	NEPHROLOGY / RENAL MEDICINE	CINACALCET	THYROID PRODUCT	Approved	1
3963	NEPHROLOGY / RENAL MEDICINE	CINACALCET	THYROID PRODUCT	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	CINACALCET	THYROID PRODUCT	Approved	1
3963	UNSPECIFIED	CINACALCET	THYROID PRODUCT	Approved	1
3956	UNSPECIFIED	CINACALCET	THYROID PRODUCT	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3964	UNSPECIFIED	CINACALCET	THYROID PRODUCT	Approved	1
3962	UNSPECIFIED	CINACALCET	THYROID PRODUCT	Approved	1
3956	UNSPECIFIED	CINACALCET	THYROID PRODUCT	Denied	1
3956	UNSPECIFIED	COPAXONE 20MG	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	UNSPECIFIED	COPAXONE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	DERMATOLOGY	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Denied	4
3962	DERMATOLOGY	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	DERMATOLOGY	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3951	DERMATOLOGY	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	DERMATOLOGY	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	INTERNAL MEDICINE	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	RHEUMATOLOGY	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3969	RHEUMATOLOGY	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	RHEUMATOLOGY	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	UNSPECIFIED	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Approved	6
3965	UNSPECIFIED	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	UNSPECIFIED	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3951	UNSPECIFIED	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Denied	4
3956	UNSPECIFIED	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Denied	6
3969	UNSPECIFIED	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3964	UNSPECIFIED	COSENTYX	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	COSENTYX SENSOREADY (300 MG) 150MG/ML SC SOAJ	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	DERMATOLOGY	COSENTYX UNOREADY PEN	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	DERMATOLOGY	COSENTYX UNOREADY PEN	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	COSENTYX UNOREADY PEN	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	COSENTYX UNOREADY PEN	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	COSENTYX UNOREADY PEN	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3962	UNSPECIFIED	COSENTYX UNOREADY PEN	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3965	UNSPECIFIED	COSENTYX UNOREADY PEN	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	UNSPECIFIED	COSENTYX UNOREADY PEN	IMMUNOSUPPRESSIVES/DMARDS	Denied	1

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3956	UNSPECIFIED	COSENTYX UNOREADY PEN	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	UNSPECIFIED	CRYSVITA	ANTINEOPLASTICS	Approved	1
3963	ALLERGY & IMMUNOLOGY	CUTAQUIG	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3956	NEUROLOGY	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	NEUROLOGY	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	UNSPECIFIED	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS AGENT	Approved	1
3964	UNSPECIFIED	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS AGENT	Approved	1
3951	UNSPECIFIED	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	UNSPECIFIED	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS AGENT	Approved	2
3965	UNSPECIFIED	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	NEUROLOGY	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	NEUROLOGY	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS AGENT	Approved	1
3961	NEUROLOGY	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	UNSPECIFIED	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	UNSPECIFIED	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS AGENT	Approved	1
3951	FAMILY PRACTICE	DOFETILIDE	CARDIOVASCULAR AGENTS	Approved	1
3956	CARDIOLOGY	DOFETILIDE	CARDIOVASCULAR AGENTS	Approved	1
3963	CARDIOLOGY, INTERVENTIONAL	DOFETILIDE	CARDIOVASCULAR AGENTS	Approved	1
3956	PHYSICIAN, CARDIAC ELECTROPHYSIOLOGY	DOFETILIDE	CARDIOVASCULAR AGENTS	Approved	5
3963	PHYSICIAN, CARDIAC ELECTROPHYSIOLOGY	DOFETILIDE	CARDIOVASCULAR AGENTS	Approved	1
3956	UNSPECIFIED	DOFETILIDE	CARDIOVASCULAR AGENTS	Approved	3
3963	UNSPECIFIED	DOFETILIDE	CARDIOVASCULAR AGENTS	Approved	1
3956	UNSPECIFIED	DOFETILIDE	CARDIOVASCULAR AGENTS	Denied	1
3951	HEMATOLOGY & ONCOLOGY	DOPTELET	HEMATOPOIETIC AGENT	Approved	1
3956	UNSPECIFIED	DOPTELET	HEMATOPOIETIC AGENT	Approved	2
3956	UNSPECIFIED	DOPTELET	HEMATOPOIETIC AGENT	Denied	1
3951	NEUROLOGY	DUOPA	ANTIPARKINSON	Approved	1
3956	ALLERGY & IMMUNOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	3
3963	ALLERGY & IMMUNOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	6
3969	ALLERGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	ALLERGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	3
3962	ALLERGY & IMMUNOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2
3951	ALLERGY & IMMUNOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3965	ALLERGY & IMMUNOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3956	ALLERGY & IMMUNOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2
3963	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3956	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	8

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	11
3951	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2
3965	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3956	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	4
3964	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3961	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3964	DERMATOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3951	EMERGENCY MEDICINE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	FAMILY PRACTICE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3963	FAMILY PRACTICE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3964	FAMILY PRACTICE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3956	GASTROENTEROLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3951	GASTROENTEROLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3956	INTERNAL MEDICINE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3962	INTERNAL MEDICINE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3963	INTERNAL MEDICINE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3969	INTERNAL MEDICINE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3963	NURSE PRACTITIONER, ACUTE CARE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	5
3951	NURSE PRACTITIONER, FAMILY HEALTH	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	NURSE PRACTITIONER, PEDIATRIC CARE	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3965	OTOLARYNGOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3963	OTOLARYNGOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	6
3956	OTOLARYNGOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	5
3961	OTOLARYNGOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3962	OTOLARYNGOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	OTOLARYNGOLOGY	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3963	PEDIATRICS	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	5
3962	PEDIATRICS	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	PEDIATRICS	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2
3956	PEDIATRICS	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	18
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	3
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	8

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3956	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	10
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	5
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3961	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3962	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3951	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3961	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3969	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3956	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3963	PULMONARY DISEASES	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	3
3956	PULMONARY DISEASES	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3964	PULMONARY DISEASES	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3956	PULMONARY DISEASES	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3964	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	4
3963	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	15
3956	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	15
3963	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	24
3951	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	3
3951	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3956	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	12
3965	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3969	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3964	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	2
3967	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3962	UNSPECIFIED	DUPIXENT	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	2
3962	PEDIATRICS	DUPIXENT 200MG/1.14ML SC SOPN	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3963	UNSPECIFIED	DUPIXENT 200MG/1.14ML SC SOPN	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3962	INTERNAL MEDICINE	DUPIXENT 200MG/1.14ML SC SOSY	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	DUPIXENT 300MG/2ML SC SOPN	IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	ELIGARD	ANTINEOPLASTICS	Denied	1
3963	UROLOGY	ELIGARD	ANTINEOPLASTICS	Approved	2
3956	UNSPECIFIED	ELIGARD	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	EMFLAZA	CORTICOSTEROID	Approved	1
3963	ALLERGY & IMMUNOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1

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3963	ALLERGY & IMMUNOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	ALLERGY & IMMUNOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	FAMILY PRACTICE	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	INTERNAL MEDICINE	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	INTERNAL MEDICINE	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3956	INTERNAL MEDICINE	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	5
3956	NURSE PRACTITIONER, FAMILY HEALTH	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	14
3956	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	12
3951	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3969	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3962	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3965	RHEUMATOLOGY	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	11
3956	UNSPECIFIED	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	6
3965	UNSPECIFIED	ENBREL 50MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	GASTROENTEROLOGY	ENTECAVIR	ANTIVIRALS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	ENTECAVIR	ANTIVIRALS	Approved	1
3956	PHARMACIST CLINICIAN	ENTECAVIR	ANTIVIRALS	Approved	1
3956	UNSPECIFIED	ENTECAVIR	ANTIVIRALS	Approved	1
3951	FAMILY PRACTICE	EPIDIOLEX	ANTICONVULSANTS	Denied	1
3963	NEUROLOGY, PEDIATRIC	EPIDIOLEX	ANTICONVULSANTS	Approved	1
3969	NEUROLOGY, PEDIATRIC	EPIDIOLEX	ANTICONVULSANTS	Denied	1
3963	NEUROLOGY, PEDIATRIC	EPIDIOLEX	ANTICONVULSANTS	Denied	1
3963	UNSPECIFIED	EPIDIOLEX	ANTICONVULSANTS	Denied	1
3965	DERMATOLOGY	ERIVEDGE	ANTINEOPLASTICS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	ERIVEDGE	ANTINEOPLASTICS	Approved	1
3963	UROLOGY	ERLEADA	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	ERLEADA	ANTINEOPLASTICS	Approved	2
3956	HEMATOLOGY & ONCOLOGY	EVEROLIMUS 10 MG	ANTINEOPLASTICS	Approved	1
3963	ALLERGY & IMMUNOLOGY	FASENRA	RESPIRATORY AGENTS	Approved	2
3956	ALLERGY & IMMUNOLOGY	FASENRA	RESPIRATORY AGENTS	Approved	1
3963	NEUROLOGY	FASENRA	RESPIRATORY AGENTS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	FASENRA	RESPIRATORY AGENTS	Approved	2
3956	PULMONARY DISEASES	FASENRA	RESPIRATORY AGENTS	Denied	1
3964	PULMONARY DISEASES	FASENRA	RESPIRATORY AGENTS	Denied	1
3963	UNSPECIFIED	FASENRA	RESPIRATORY AGENTS	Denied	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3964	UNSPECIFIED	FASENRA	RESPIRATORY AGENTS	Denied	1
3963	UNSPECIFIED	FASENRA	RESPIRATORY AGENTS	Approved	2
3956	UNSPECIFIED	FASENRA	RESPIRATORY AGENTS	Denied	2
3956	UNSPECIFIED	FASENRA	RESPIRATORY AGENTS	Approved	2
3964	UNSPECIFIED	FASENRA	RESPIRATORY AGENTS	Approved	1
3956	FAMILY PRACTICE	FINGOLIMOD	MULTIPLE SCLEROSIS AGENT	Denied	1
3956	UNSPECIFIED	FINGOLIMOD	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	FORTEO	OSTEOPOROSIS AGENTS	Denied	2
3964	RHEUMATOLOGY	FORTEO	OSTEOPOROSIS AGENTS	Approved	1
3963	UNSPECIFIED	FORTEO	OSTEOPOROSIS AGENTS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	FULVESTRANT	ANTINEOPLASTICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	GAVRETO	ANTINEOPLASTICS	Approved	1
3963	ENDOCRINOLOGY, PEDIATRIC	GENOTROPIN	HORMONES	Approved	1
3963	PEDIATRICS	GENOTROPIN	HORMONES	Approved	1
3951	PEDIATRICS	GENOTROPIN	HORMONES	Approved	1
3956	UNSPECIFIED	GENOTROPIN	HORMONES	Approved	1
3964	UNSPECIFIED	GENOTROPIN	HORMONES	Denied	1
3969	HEMATOLOGY & ONCOLOGY	GILOTRIF	ANTINEOPLASTICS	Denied	1
3962	NEUROLOGY	GLATIRAMER ACETATE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	NEUROLOGY	GLATIRAMER ACETATE 40MG	MULTIPLE SCLEROSIS AGENT	Denied	1
3963	NEUROLOGY	GLATIRAMER ACETATE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	4
3951	NEUROLOGY	GLATIRAMER ACETATE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	UNSPECIFIED	GLATIRAMER ACETATE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	3
3962	UNSPECIFIED	GLATIRAMER ACETATE 40MG	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	NEUROLOGY	GLATIRAMER ACETATE 40MG/ML SC SOSY	MULTIPLE SCLEROSIS AGENT	Denied	1
3963	NURSE PRACTITIONER, PSYCHIATRIC	HETLIOZ	SEDATIVES/HYPNOTICS	Denied	1
3969	ALLERGY & IMMUNOLOGY	HIZENTRA	BIOLOGICALS	Approved	1
3963	ALLERGY & IMMUNOLOGY	HIZENTRA	BIOLOGICALS	Approved	1
3963	RHEUMATOLOGY	HUMIRA 20 MG	ANTIRHEUMATIC	Approved	2
3962	RHEUMATOLOGY	HUMIRA 20 MG	ANTIRHEUMATIC	Approved	1
3956	UNSPECIFIED	HUMIRA 20 MG	ANTIRHEUMATIC	Denied	1
3956	FAMILY PRACTICE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	DERMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3951	DERMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3969	DERMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	DERMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	DERMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	DERMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3951	DERMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	FAMILY PRACTICE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	GASTROENTEROLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	8
3963	GASTROENTEROLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	5
3963	GASTROENTEROLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3962	GASTROENTEROLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3961	GASTROENTEROLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	GASTROENTEROLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3951	GASTROENTEROLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3969	GASTROENTEROLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	INTERNAL MEDICINE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3963	INTERNAL MEDICINE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3956	INTERNAL MEDICINE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3951	INTERNAL MEDICINE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3962	INTERNAL MEDICINE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NEPHROLOGY / RENAL MEDICINE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	NURSE PRACTITIONER, ACUTE CARE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3956	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3965	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3963	NURSE PRACTITIONER, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	NURSE PRACTITIONER, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3969	PEDIATRICS	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3961	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	14
3963	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	18

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3961	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	6
3962	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3951	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3969	RHEUMATOLOGY	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	17
3956	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	4
3963	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	13
3951	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	7
3964	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3965	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3961	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3969	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3965	UNSPECIFIED	HUMIRA 40MG/0.4ML SC PSKT	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	DERMATOLOGY	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	DERMATOLOGY	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	NURSE PRACTITIONER, ACUTE CARE	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3956	UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3965	UNSPECIFIED	HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3963	GASTROENTEROLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3956	GASTROENTEROLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	NURSE PRACTITIONER, ACUTE CARE	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3962	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3962	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	DERMATOLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	4
3956	DERMATOLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	GASTROENTEROLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3962	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3956	UNSPECIFIED	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	NURSE PRACTITIONER, ACUTE CARE	HUMIRA PED. UC STARTER PACK + 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3964	UNSPECIFIED	HUMIRA PED. UC STARTER PACK + 80 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3962	RHEUMATOLOGY	HUMIRA PEN 40MG/0.4ML SC PNKT	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	RHEUMATOLOGY	HUMIRA PEN 40MG/0.4ML SC PNKT	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	UNSPECIFIED	HUMIRA PEN 40MG/0.4ML SC PNKT	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3962	RHEUMATOLOGY	HUMIRA PEN 40MG/0.8ML SC PNKT	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	HUMIRA PEN-CD/UC/HS STARTER 80MG/0.8ML SC PNKT	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	DERMATOLOGY	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	UNSPECIFIED	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3965	UNSPECIFIED	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	UNSPECIFIED	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3964	ALLERGY & IMMUNOLOGY	HYQVIA	BIOLOGICALS	Approved	1
3963	UNSPECIFIED	HYRIMOZ	BIOLOGICALS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	IBRANCE	ANTINEOPLASTICS	Approved	4
3956	HEMATOLOGY & ONCOLOGY	IBRANCE	ANTINEOPLASTICS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	HEMATOLOGY & ONCOLOGY	IBRANCE	ANTINEOPLASTICS	Approved	1
3969	INTERNAL MEDICINE	IBRANCE	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	IBRANCE	ANTINEOPLASTICS	Approved	2
3963	UNSPECIFIED	ILARIS	ANTIRHEUMATIC	Approved	1
3963	HEMATOLOGY	IMATINIB MESYLATE	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	IMATINIB MESYLATE	ANTINEOPLASTICS	Approved	1
3951	HEMATOLOGY & ONCOLOGY	IMATINIB MESYLATE	ANTINEOPLASTICS	Approved	1
3951	HEMATOLOGY & ONCOLOGY	IMATINIB MESYLATE	ANTINEOPLASTICS	Denied	1
3963	HEMATOLOGY & ONCOLOGY	IMATINIB MESYLATE	ANTINEOPLASTICS	Approved	1
3963	MEDICAL ONCOLOGY	IMATINIB MESYLATE	ANTINEOPLASTICS	Approved	1
3956	PHYSICIAN, ONCOLOGY, MEDICAL	IMATINIB MESYLATE	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	IMATINIB MESYLATE	ANTINEOPLASTICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	IMBRUVICA	ANTINEOPLASTICS	Approved	1
3956	MEDICAL ONCOLOGY	IMBRUVICA	ANTINEOPLASTICS	Approved	1
3956	MEDICAL ONCOLOGY	IMBRUVICA	ANTINEOPLASTICS	Denied	1
3963	UNSPECIFIED	IMBRUVICA	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	INFLIXIMAB	ANTIRHEUMATIC	Approved	1
3956	UNSPECIFIED	INFLIXIMAB	ANTIRHEUMATIC	Denied	2
3963	NEUROLOGY	INGREZZA	PSYCHOTHERAPEUTIC	Denied	1
3963	PSYCHIATRY	INGREZZA	PSYCHOTHERAPEUTIC	Approved	1
3963	UNSPECIFIED	INGREZZA	PSYCHOTHERAPEUTIC	Approved	1
3963	UNSPECIFIED	INLYTA	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	JAKAFI	ANTINEOPLASTICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	JAKAFI	ANTINEOPLASTICS	Approved	1
3963	NURSE PRACTITIONER, PEDIATRICS CRITICAL CARE	JAKAFI	ANTINEOPLASTICS	Approved	1
3963	PHYSICIAN, ONCOLOGY, MEDICAL	JAKAFI	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	JAKAFI	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	JAKAFI 10MG TAB	ANTINEOPLASTICS	Denied	1
3963	UNSPECIFIED	JAVYGTOR	MISCELLANEOUS	Approved	1
3963	NEUROLOGY	KESIMPTA	MULTIPLE SCLEROSIS AGENT	Approved	2
3956	NEUROLOGY	KESIMPTA	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	NEUROLOGY	KESIMPTA	MULTIPLE SCLEROSIS AGENT	Denied	1
3951	NURSE PRACTITIONER, UNSPECIFIED	KESIMPTA	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	UNSPECIFIED	KESIMPTA	MULTIPLE SCLEROSIS AGENT	Denied	1
3963	RHEUMATOLOGY	KEVZARA	IMMUNOSUPPRESSIVES/DMARDS	Approved	5
3956	RHEUMATOLOGY	KEVZARA	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	UNSPECIFIED	KEVZARA	IMMUNOSUPPRESSIVES/DMARDS	Denied	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	HEMATOLOGY	KEYTRUDA	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	KEYTRUDA	ANTINEOPLASTICS	Approved	4
3956	HEMATOLOGY & ONCOLOGY	KEYTRUDA	ANTINEOPLASTICS	Denied	1
3961	HEMATOLOGY & ONCOLOGY	KEYTRUDA	ANTINEOPLASTICS	Approved	1
3956	INTERNAL MEDICINE	KEYTRUDA	ANTINEOPLASTICS	Denied	2
3956	UNSPECIFIED	KEYTRUDA	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	KEYTRUDA	ANTINEOPLASTICS	Denied	1
3951	HEMATOLOGY	KISQALI	ANTINEOPLASTICS	Approved	1
3951	HEMATOLOGY & ONCOLOGY	KISQALI	ANTINEOPLASTICS	Approved	1
3956	INTERNAL MEDICINE	KISQALI	ANTINEOPLASTICS	Approved	1
3956	MEDICAL ONCOLOGY	KISQALI	ANTINEOPLASTICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	LAPATINIB	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	LENALIDOMIDE	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	LENVIMA	ANTINEOPLASTICS	Approved	1
3963	MEDICAL ONCOLOGY	LENVIMA	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	LENVIMA	ANTINEOPLASTICS	Approved	1
3956	OBSTETRICS & GYNECOLOGY	LUPRON DEPOT 3.75 MG	HORMONES/HORMONE MODIFIERS	Approved	1
3964	OBSTETRICS & GYNECOLOGY	LUPRON DEPOT 3.75MG	HORMONES/HORMONE MODIFIERS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	LYNPARZA	ANTINEOPLASTICS	Approved	1
3962	HEMATOLOGY & ONCOLOGY	LYNPARZA	ANTINEOPLASTICS	Approved	1
3963	NURSE PRACTITIONER, ACUTE CARE	LYNPARZA	ANTINEOPLASTICS	Approved	1
3951	UNSPECIFIED	LYNPARZA	ANTINEOPLASTICS	Denied	1
3963	UNSPECIFIED	LYNPARZA	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	MAVENCLAD	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	UNSPECIFIED	MAVENCLAD	MULTIPLE SCLEROSIS AGENT	Denied	2
3956	HEMATOLOGY & ONCOLOGY	MEKINIST	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	MEKINIST	ANTINEOPLASTICS	Approved	1
3964	HEMATOLOGY & ONCOLOGY	NERLYNX	ANTINEOPLASTICS	Approved	2
3965	HEMATOLOGY & ONCOLOGY	NERLYNX	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	NINLARO	ANTINEOPLASTICS	Approved	1
3963	DERMATOLOGY	NIVESTYM	COLONY STIMULATING FACTORS	Approved	1
3963	DERMATOLOGY	NIVESTYM	COLONY STIMULATING FACTORS	Denied	1
3956	HEMATOLOGY & ONCOLOGY	NIVESTYM	COLONY STIMULATING FACTORS	Approved	3
3963	HEMATOLOGY & ONCOLOGY	NIVESTYM	COLONY STIMULATING FACTORS	Denied	1
3963	HEMATOLOGY & ONCOLOGY	NIVESTYM	COLONY STIMULATING FACTORS	Approved	2
3956	HEMATOLOGY & ONCOLOGY	NIVESTYM	COLONY STIMULATING FACTORS	Denied	1
3956	INTERNAL MEDICINE	NIVESTYM	COLONY STIMULATING FACTORS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	NIVESTYM	COLONY STIMULATING FACTORS	Approved	2
3963	ENDOCRINOLOGY, PEDIATRIC	NORDITROPIN	HORMONES	Approved	1
3951	PEDIATRICS	NORDITROPIN	HORMONES	Approved	1
3951	PEDIATRICS	NORDITROPIN	HORMONES	Denied	1
3951	UNSPECIFIED	NORDITROPIN	HORMONES	Approved	1
3956	HEMATOLOGY & ONCOLOGY	NUBEQA	ANTINEOPLASTICS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	NUBEQA	ANTINEOPLASTICS	Approved	1
3965	NURSE PRACTITIONER, FAMILY HEALTH	NUBEQA	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	NUBEQA	ANTINEOPLASTICS	Approved	1
3964	INTERNAL MEDICINE	NUCALA	MISCELLANEOUS	Denied	1
3965	OTOLARYNGOLOGY	NUCALA	MISCELLANEOUS	Approved	1
3963	PULMONARY DISEASES	NUCALA	MISCELLANEOUS	Approved	3
3963	PULMONARY DISEASES	NUCALA	MISCELLANEOUS	Denied	1
3969	PULMONARY DISEASES	NUCALA	MISCELLANEOUS	Denied	1
3963	UNSPECIFIED	NUCALA	MISCELLANEOUS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	NYVEPRIA	COLONY STIMULATING FACTORS	Approved	3
3956	UNSPECIFIED	NYVEPRIA	COLONY STIMULATING FACTORS	Denied	1
3956	HEMATOLOGY & ONCOLOGY	NYVEPRIA 6MG/0.6ML SC SOSY	COLONY STIMULATING FACTORS	Approved	1
3964	UNSPECIFIED	OCALIVA	BILE THERAPY	Approved	1
3963	INTERNAL MEDICINE	OFEV	TYROSINE KINASE INHIBITOR	Approved	1
3963	INTERNAL MEDICINE	OFEV	TYROSINE KINASE INHIBITOR	Denied	1
3956	PULMONARY DISEASES	OFEV	TYROSINE KINASE INHIBITOR	Approved	2
3956	PULMONARY DISEASES	OFEV	TYROSINE KINASE INHIBITOR	Denied	1
3963	PULMONARY DISEASES	OFEV	TYROSINE KINASE INHIBITOR	Approved	1
3963	PULMONARY DISEASES	OFEV	TYROSINE KINASE INHIBITOR	Denied	1
3963	UNSPECIFIED	OFEV	TYROSINE KINASE INHIBITOR	Approved	1
3963	UNSPECIFIED	OMNITROPE	GROWTH HORMONE THERAPY	Denied	1
3956	UNSPECIFIED	OMNITROPE	GROWTH HORMONE THERAPY	Denied	1
3956	CARDIOLOGY	OPSUMIT	TYROSINE KINASE INHIBITOR	Approved	1
3963	CARDIOLOGY	OPSUMIT	TYROSINE KINASE INHIBITOR	Approved	1
3956	INTERNAL MEDICINE	OPSUMIT	TYROSINE KINASE INHIBITOR	Approved	1
3963	INTERNAL MEDICINE	OPSUMIT	TYROSINE KINASE INHIBITOR	Approved	1
3956	UNSPECIFIED	OPSUMIT	TYROSINE KINASE INHIBITOR	Approved	1
3956	CARDIOLOGY	ORENITRAM	VASODILATORS	Approved	1
3963	INTERNAL MEDICINE	ORGOVYX	ANTINEOPLASTICS	Approved	1
3965	NURSE PRACTITIONER, FAMILY HEALTH	ORGOVYX	ANTINEOPLASTICS	Approved	2
3951	NURSE PRACTITIONER, FAMILY HEALTH	ORGOVYX	ANTINEOPLASTICS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UROLOGY	ORGOVYX	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	ORGOVYX	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	ORKAMBI	CYSTIC FIBROSIS AGENTS	Approved	1
3964	UNSPECIFIED	ORKAMBI	CYSTIC FIBROSIS AGENTS	Approved	1
3956	DERMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3963	DERMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3956	DERMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3963	DERMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	FAMILY PRACTICE	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	FAMILY PRACTICE	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3963	FAMILY PRACTICE	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3963	FAMILY PRACTICE	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3951	INTERNAL MEDICINE	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	INTERNAL MEDICINE	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	NURSE PRACTITIONER, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	5
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	RHEUMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	RHEUMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3962	RHEUMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	RHEUMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3963	RHEUMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3956	RHEUMATOLOGY	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	6
3963	UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3956	UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3951	UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3965	UNSPECIFIED	OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	FAMILY PRACTICE	OTEZLA STARTER PACK + OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3956	FAMILY PRACTICE	OTEZLA STARTER PACK + OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	FAMILY PRACTICE	OTEZLA STARTER PACK + OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	OTEZLA STARTER PACK + OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	OTEZLA STARTER PACK + OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	OTEZLA STARTER PACK + OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3965	UNSPECIFIED	OTEZLA STARTER PACK + OTEZLA 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	INTERNAL MEDICINE	PIQRAY	ANTINEOPLASTICS	Approved	1
3963	PULMONARY DISEASES	PIRFENIDONE	ANTIFIBROTIC AGENT	Approved	2
3963	NURSE PRACTITIONER, UNSPECIFIED	PLEGRIDY	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	INTERNAL MEDICINE	POMALYST	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	POMALYST	ANTINEOPLASTICS	Approved	1
3956	ANESTHESIOLOGY	PRALUENT	LIPOTROPICS	Denied	5
3951	ANESTHESIOLOGY	PRALUENT	LIPOTROPICS	Denied	1
3956	CARDIOLOGY	PRALUENT	LIPOTROPICS	Approved	5
3956	CARDIOLOGY	PRALUENT	LIPOTROPICS	Denied	16
3963	CARDIOLOGY	PRALUENT	LIPOTROPICS	Approved	2
3961	CARDIOLOGY	PRALUENT	LIPOTROPICS	Denied	1
3963	CARDIOLOGY	PRALUENT	LIPOTROPICS	Denied	3
3961	CARDIOLOGY, INTERVENTIONAL	PRALUENT	LIPOTROPICS	Denied	2
3963	CARDIOLOGY, INTERVENTIONAL	PRALUENT	LIPOTROPICS	Approved	1
3963	FAMILY PRACTICE	PRALUENT	LIPOTROPICS	Denied	3
3951	FAMILY PRACTICE	PRALUENT	LIPOTROPICS	Denied	1
3961	FAMILY PRACTICE	PRALUENT	LIPOTROPICS	Denied	2
3956	FAMILY PRACTICE	PRALUENT	LIPOTROPICS	Approved	1
3956	FAMILY PRACTICE	PRALUENT	LIPOTROPICS	Denied	6
3963	FAMILY PRACTICE	PRALUENT	LIPOTROPICS	Approved	1
3956	INTERNAL MEDICINE	PRALUENT	LIPOTROPICS	Denied	6
3963	INTERNAL MEDICINE	PRALUENT	LIPOTROPICS	Denied	3
3956	INTERNAL MEDICINE	PRALUENT	LIPOTROPICS	Approved	3
3951	INTERNAL MEDICINE	PRALUENT	LIPOTROPICS	Denied	1
3951	INTERNAL MEDICINE	PRALUENT	LIPOTROPICS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	PRALUENT	LIPOTROPICS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	PRALUENT	LIPOTROPICS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	PRALUENT	LIPOTROPICS	Denied	4
3963	NURSE PRACTITIONER, UNSPECIFIED	PRALUENT	LIPOTROPICS	Denied	1
3956	UNSPECIFIED	PRALUENT	LIPOTROPICS	Denied	9
3956	UNSPECIFIED	PRALUENT	LIPOTROPICS	Approved	3
3961	UNSPECIFIED	PRALUENT	LIPOTROPICS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	UNSPECIFIED	PRALUENT	LIPOTROPICS	Denied	3
3961	HEMATOLOGY & ONCOLOGY	PROCRIT	HEMATINICS & BLOOD CELL STIMULATORS	Denied	1
3956	HEMATOLOGY & ONCOLOGY	PROCRIT	HEMATINICS & BLOOD CELL STIMULATORS	Denied	1
3956	PULMONARY DISEASES	PROLASTIN-C	RESPIRATORY AGENTS	Approved	1
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	PROLIA	BONE-MODIFYING AGENT	Approved	1
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	PROLIA	BONE-MODIFYING AGENT	Denied	1
3956	FAMILY PRACTICE	PROLIA	BONE-MODIFYING AGENT	Approved	4
3956	FAMILY PRACTICE	PROLIA	BONE-MODIFYING AGENT	Denied	3
3956	INTERNAL MEDICINE	PROLIA	BONE-MODIFYING AGENT	Approved	4
3956	INTERNAL MEDICINE	PROLIA	BONE-MODIFYING AGENT	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	PROLIA	BONE-MODIFYING AGENT	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	PROLIA	BONE-MODIFYING AGENT	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	PROLIA	BONE-MODIFYING AGENT	Approved	1
3956	PEDIATRICS	PROLIA	BONE-MODIFYING AGENT	Approved	1
3956	UNSPECIFIED	PROLIA	BONE-MODIFYING AGENT	Approved	6
3956	UNSPECIFIED	PROLIA	BONE-MODIFYING AGENT	Denied	1
3964	HEMATOLOGY & ONCOLOGY	PROMACTA	HEMOSTATICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	PROMACTA	HEMOSTATICS	Denied	1
3963	HEMATOLOGY & ONCOLOGY	PROMACTA	HEMOSTATICS	Approved	1
3963	UNSPECIFIED	PROMACTA	HEMOSTATICS	Denied	1
3963	NURSE PRACTITIONER, PEDIATRIC CARE	PULMOZYME	MUCOLYTIC AGENT	Approved	1
3962	PEDIATRICS	PULMOZYME	MUCOLYTIC AGENT	Approved	1
3963	PULMONARY DISEASES	PULMOZYME	MUCOLYTIC AGENT	Approved	1
3963	UNSPECIFIED	PULMOZYME	MUCOLYTIC AGENT	Approved	1
3963	UNSPECIFIED	REBIF	MULTIPLE SCLEROSIS AGENT	Approved	1
3951	UNSPECIFIED	REBIF	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	CARDIOLOGY	REPATHA	LIPOTROPICS	Approved	8
3963	CARDIOLOGY	REPATHA	LIPOTROPICS	Denied	21
3969	CARDIOLOGY	REPATHA	LIPOTROPICS	Denied	4
3951	CARDIOLOGY	REPATHA	LIPOTROPICS	Denied	2
3951	CARDIOLOGY	REPATHA	LIPOTROPICS	Approved	1
3964	CARDIOLOGY	REPATHA	LIPOTROPICS	Approved	2
3965	CARDIOLOGY	REPATHA	LIPOTROPICS	Denied	1
3962	CARDIOLOGY, INTERVENTIONAL	REPATHA	LIPOTROPICS	Denied	3
3962	CARDIOLOGY, INTERVENTIONAL	REPATHA	LIPOTROPICS	Approved	1
3965	FAMILY PRACTICE	REPATHA	LIPOTROPICS	Denied	1
3951	FAMILY PRACTICE	REPATHA	LIPOTROPICS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	FAMILY PRACTICE	REPATHA	LIPOTROPICS	Denied	4
3963	FAMILY PRACTICE	REPATHA	LIPOTROPICS	Denied	6
3969	FAMILY PRACTICE	REPATHA	LIPOTROPICS	Denied	1
3964	FAMILY PRACTICE	REPATHA	LIPOTROPICS	Denied	2
3963	HOSPITALIST	REPATHA	LIPOTROPICS	Denied	3
3963	INTERNAL MEDICINE	REPATHA	LIPOTROPICS	Denied	5
3962	INTERNAL MEDICINE	REPATHA	LIPOTROPICS	Denied	2
3965	INTERNAL MEDICINE	REPATHA	LIPOTROPICS	Denied	1
3963	INTERNAL MEDICINE	REPATHA	LIPOTROPICS	Approved	2
3964	INTERNAL MEDICINE	REPATHA	LIPOTROPICS	Approved	1
3964	INTERNAL MEDICINE	REPATHA	LIPOTROPICS	Denied	1
3962	INTERNAL MEDICINE	REPATHA	LIPOTROPICS	Approved	1
3963	NURSE PRACTITIONER, ACUTE CARE	REPATHA	LIPOTROPICS	Denied	1
3963	NURSE PRACTITIONER, CRITICAL CARE	REPATHA	LIPOTROPICS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	REPATHA	LIPOTROPICS	Approved	2
3951	NURSE PRACTITIONER, FAMILY HEALTH	REPATHA	LIPOTROPICS	Denied	1
3969	NURSE PRACTITIONER, FAMILY HEALTH	REPATHA	LIPOTROPICS	Denied	1
3962	NURSE PRACTITIONER, FAMILY HEALTH	REPATHA	LIPOTROPICS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	REPATHA	LIPOTROPICS	Denied	5
3963	NURSE PRACTITIONER, UNSPECIFIED	REPATHA	LIPOTROPICS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	REPATHA	LIPOTROPICS	Denied	3
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	REPATHA	LIPOTROPICS	Denied	2
3963	UNSPECIFIED	REPATHA	LIPOTROPICS	Denied	19
3963	UNSPECIFIED	REPATHA	LIPOTROPICS	Approved	7
3951	UNSPECIFIED	REPATHA	LIPOTROPICS	Approved	1
3965	UNSPECIFIED	REPATHA	LIPOTROPICS	Denied	1
3951	UNSPECIFIED	REPATHA	LIPOTROPICS	Denied	2
3962	UNSPECIFIED	REPATHA	LIPOTROPICS	Approved	1
3964	UNSPECIFIED	REPATHA	LIPOTROPICS	Denied	3
3964	UNSPECIFIED	REPATHA	LIPOTROPICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	RETACRIT	HEMATOPOIETIC AGENT	Approved	1
3956	HEMATOLOGY & ONCOLOGY	RETACRIT	HEMATOPOIETIC AGENT	Denied	1
3963	NEPHROLOGY / RENAL MEDICINE	RETACRIT	HEMATOPOIETIC AGENT	Denied	1
3963	UNSPECIFIED	RETACRIT	HEMATOPOIETIC AGENT	Denied	1
3963	HEMATOLOGY & ONCOLOGY	REVLIMID	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	REVLIMID	ANTINEOPLASTICS	Approved	2
3963	NURSE PRACTITIONER, ACUTE CARE	REVLIMID	ANTINEOPLASTICS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	PHYSICIAN, ONCOLOGY, MEDICAL	REVLIMID	ANTINEOPLASTICS	Approved	1
3965	UNSPECIFIED	REVLIMID	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	REVLIMID	ANTINEOPLASTICS	Approved	1
3956	DERMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	DERMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	DERMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	GASTROENTEROLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	GASTROENTEROLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	INTERNAL MEDICINE	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	NURSE PRACTITIONER, UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3964	PHYSICIAN ASSISTANT, UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	12
3956	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	4
3963	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	8
3963	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3951	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3965	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3965	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3951	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3961	RHEUMATOLOGY	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	6
3963	UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3956	UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	5
3961	UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3965	UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3963	UNSPECIFIED	RINVOQ 15MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3963	DERMATOLOGY	RINVOQ 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	GASTROENTEROLOGY	RINVOQ 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	GASTROENTEROLOGY	RINVOQ 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3963	GASTROENTEROLOGY	RINVOQ 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	GASTROENTEROLOGY	RINVOQ 30MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	UNSPECIFIED	RINVOQ 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	UNSPECIFIED	RINVOQ 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	GASTROENTEROLOGY	RINVOQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3961	GASTROENTEROLOGY	RINVOQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	GASTROENTEROLOGY	RINVOQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	GASTROENTEROLOGY	RINVOQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	UNSPECIFIED	RINVOQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3965	UNSPECIFIED	RINVOQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	GASTROENTEROLOGY	RINVOQ 45MG + 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	RINVOQ 45MG + 15MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	GASTROENTEROLOGY	RINVOQ 45MG + 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3951	GASTROENTEROLOGY	RINVOQ 45MG + 30MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	GASTROENTEROLOGY	RINVOQ 45MG ER TAB	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	RYDAPT	ANTINEOPLASTICS	Approved	1
3961	PHYSICIAN ASSISTANT, UNSPECIFIED	SAPROPTERIN	ENZYMES	Approved	1
3963	UNSPECIFIED	SAPROPTERIN	ENZYMES	Approved	1
3963	FAMILY PRACTICE	SILDENAFIL 20MG TABLET	VASODILATORS	Denied	3
3964	INTERNAL MEDICINE	SILDENAFIL 20MG TABLET	VASODILATORS	Denied	1
3965	NURSE PRACTITIONER, UNSPECIFIED	SILDENAFIL 20MG TABLET	VASODILATORS	Approved	1
3963	PEDIATRICS	SILDENAFIL 20MG TABLET	VASODILATORS	Denied	1
3963	PULMONARY DISEASES	SILDENAFIL 20MG TABLET	VASODILATORS	Approved	1
3963	UROLOGY	SILDENAFIL 20MG TABLET	VASODILATORS	Denied	1
3964	UNSPECIFIED	SILDENAFIL 20MG TABLET	VASODILATORS	Approved	1
3967	UNSPECIFIED	SILDENAFIL 20MG TABLET	VASODILATORS	Approved	1
3963	UNSPECIFIED	SILDENAFIL 20MG TABLET	VASODILATORS	Denied	4
3965	UNSPECIFIED	SILDENAFIL 20MG TABLET	VASODILATORS	Denied	1
3951	UNSPECIFIED	SILDENAFIL 20MG TABLET	VASODILATORS	Denied	1
3956	FAMILY PRACTICE	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	7
3961	FAMILY PRACTICE	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1
3963	FAMILY PRACTICE	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1
3951	FAMILY PRACTICE	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1
3956	INTERNAL MEDICINE	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1
3956	PULMONARY DISEASES	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	2
3956	UNSPECIFIED	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	3
3963	UNSPECIFIED	SILDENAFIL 20MG TABLETS	VASODILATORS	Denied	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	SILDENAFIL CITRATE 20MG OR TABS	VASODILATORS	Denied	1
3963	DERMATOLOGY	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	7
3961	DERMATOLOGY	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	3

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	DERMATOLOGY	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	8
3951	DERMATOLOGY	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	DERMATOLOGY	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	2
3965	DERMATOLOGY	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	FAMILY PRACTICE	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3963	FAMILY PRACTICE	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	GASTROENTEROLOGY	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3951	GASTROENTEROLOGY	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	INTERNAL MEDICINE	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	2
3956	INTERNAL MEDICINE	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	NURSE PRACTITIONER, ACUTE CARE	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	NURSE PRACTITIONER, UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	2
3963	NURSE PRACTITIONER, UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3951	NURSE PRACTITIONER, UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3964	NURSE PRACTITIONER, UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	3
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	5
3965	PHYSICIAN ASSISTANT, UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	2
3963	RHEUMATOLOGY	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	4
3964	RHEUMATOLOGY	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3964	RHEUMATOLOGY	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3951	UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	2
3962	UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3969	UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	2
3951	UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3956	UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	10
3963	UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	13
3961	UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3965	UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3964	UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3963	UNSPECIFIED	SKYRIZI 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3956	GASTROENTEROLOGY	SKYRIZI 360MG + 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	2
3956	GASTROENTEROLOGY	SKYRIZI 360MG + 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3951	GASTROENTEROLOGY	SKYRIZI 360MG + 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3951	GASTROENTEROLOGY	SKYRIZI 360MG + 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	SKYRIZI 360MG + 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	GASTROENTEROLOGY	SKYRIZI 360MG + 180MG + 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3956	GASTROENTEROLOGY	SKYRIZI 600MG + 360MG + 180MG + 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3951	UNSPECIFIED	SKYRIZI 600MG + 360MG + 180MG + 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3965	UNSPECIFIED	SKYRIZI 600MG + 360MG + 180MG + 150MG	SYSTEMIC ANTIPSORIASIS AGENTS	Approved	1
3963	UNSPECIFIED	SODIUM OXYBATE 500MG/ML OR SOLN	NARCOLEPSY AGENTS	Denied	1
3963	PEDIATRICS	SOGROYA	GROWTH HORMONE THERAPY	Approved	2
3963	PEDIATRICS	SOGROYA	GROWTH HORMONE THERAPY	Denied	1
3963	UNSPECIFIED	SOGROYA	GROWTH HORMONE THERAPY	Approved	1
3956	INTERNAL MEDICINE	SOMATULINE DEPOT	SOMATOSTATIN ANALOG	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	SOMATULINE DEPOT	SOMATOSTATIN ANALOG	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	SOMATULINE DEPOT	SOMATOSTATIN ANALOG	Denied	1
3963	GENERAL PRACTICE	SPRAVATO	ANTIDEPRESSANTS	Denied	1
3963	GENERAL PRACTICE	SPRAVATO	ANTIDEPRESSANTS	Approved	1
3964	NURSE PRACTITIONER, FAMILY HEALTH	SPRAVATO	ANTIDEPRESSANTS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	SPRAVATO	ANTIDEPRESSANTS	Approved	1
3969	NURSE PRACTITIONER, PSYCHIATRIC	SPRAVATO	ANTIDEPRESSANTS	Approved	1
3969	NURSE PRACTITIONER, PSYCHIATRIC	SPRAVATO	ANTIDEPRESSANTS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	SPRAVATO	ANTIDEPRESSANTS	Approved	1
3951	PEDIATRICS	SPRAVATO	ANTIDEPRESSANTS	Denied	1
3951	PEDIATRICS	SPRAVATO	ANTIDEPRESSANTS	Approved	2
3951	PSYCHIATRY	SPRAVATO	ANTIDEPRESSANTS	Approved	1
3963	UNSPECIFIED	SPRAVATO	ANTIDEPRESSANTS	Approved	5
3964	UNSPECIFIED	SPRAVATO	ANTIDEPRESSANTS	Approved	3
3965	UNSPECIFIED	SPRAVATO	ANTIDEPRESSANTS	Approved	3
3963	UNSPECIFIED	SPRAVATO	ANTIDEPRESSANTS	Denied	4
3951	UNSPECIFIED	SPRAVATO	ANTIDEPRESSANTS	Denied	1
3951	CLINICAL NURSE SPECIALIST, UNSPECIFIED	SPRYCEL	ANTINEOPLASTICS	Approved	1
3951	CLINICAL NURSE SPECIALIST, UNSPECIFIED	SPRYCEL	ANTINEOPLASTICS	Denied	1
3963	HEMATOLOGY & ONCOLOGY	SPRYCEL	ANTINEOPLASTICS	Approved	1
3961	HEMATOLOGY & ONCOLOGY	SPRYCEL	ANTINEOPLASTICS	Approved	1
3969	HEMATOLOGY & ONCOLOGY	SPRYCEL	ANTINEOPLASTICS	Approved	1
3951	HEMATOLOGY & ONCOLOGY	SPRYCEL	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	SPRYCEL	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	SPRYCEL	ANTINEOPLASTICS	Denied	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	INTERNAL MEDICINE	SPRYCEL	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	SPRYCEL	ANTINEOPLASTICS	Approved	4
3963	UNSPECIFIED	SPRYCEL	ANTINEOPLASTICS	Approved	1
3963	GASTROENTEROLOGY	STELARA 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	GASTROENTEROLOGY	STELARA 45MG VIALS	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	DERMATOLOGY	STELARA 90MG/ML SC SOSY	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	GASTROENTEROLOGY	STELARA IV + STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3964	DERMATOLOGY	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	DERMATOLOGY	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	5
3963	GASTROENTEROLOGY	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	4
3956	GASTROENTEROLOGY	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	3
3963	GASTROENTEROLOGY	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3956	GASTROENTEROLOGY	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3961	PHYSICIAN ASSISTANT, UNSPECIFIED	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	UNSPECIFIED	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	UNSPECIFIED	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	STELARA SQ 45MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3964	DERMATOLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	DERMATOLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	DERMATOLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	EMERGENCY MEDICINE	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	EMERGENCY MEDICINE	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	GASTROENTEROLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	5
3956	GASTROENTEROLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3963	GASTROENTEROLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	4
3956	GASTROENTEROLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	4
3965	GASTROENTEROLOGY	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	INTERNAL MEDICINE	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	NURSE PRACTITIONER, FAMILY HEALTH	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	NURSE PRACTITIONER, UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3951	PHYSICIAN ASSISTANT, UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3956	UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	6
3956	UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3951	UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3965	UNSPECIFIED	STELARA SQ 90MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	STIVARGA	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	STIVARGA	ANTINEOPLASTICS	Approved	1
BCBSAR	INTERNAL MEDICINE	SYNAGIS	RESPIRATORY AGENTS	Denied	1
BCBSAR	PEDIATRICS	SYNAGIS	RESPIRATORY AGENTS	Approved	1
3963	CARDIOLOGY	TADALAFIL 20MG	VASODILATORS	Approved	1
3951	CARDIOLOGY	TADALAFIL 20MG	VASODILATORS	Approved	1
3956	CARDIOLOGY	TADALAFIL 20MG	VASODILATORS	Approved	1
3956	FAMILY PRACTICE	TADALAFIL 20MG	VASODILATORS	Denied	1
3956	PULMONARY DISEASES	TADALAFIL 20MG	VASODILATORS	Approved	1
3964	PULMONARY DISEASES	TADALAFIL 20MG	VASODILATORS	Approved	1
3951	UNSPECIFIED	TADALAFIL 20MG	VASODILATORS	Approved	1
3964	UNSPECIFIED	TADALAFIL 20MG	VASODILATORS	Approved	1
3956	UNSPECIFIED	TADALAFIL 20MG	VASODILATORS	Denied	1
3963	UNSPECIFIED	TADALAFIL 20MG	VASODILATORS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	TAFINLAR	ANTINEOPLASTICS	Approved	1
3956	UNSPECIFIED	TAFINLAR	ANTINEOPLASTICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	TAGRISSE	ANTINEOPLASTICS	Approved	1
3963	INTERNAL MEDICINE	TAGRISSE	ANTINEOPLASTICS	Approved	1
3956	DERMATOLOGY	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	14
3963	DERMATOLOGY	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	4
3951	DERMATOLOGY	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3956	FAMILY PRACTICE	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	2
3961	INTERNAL MEDICINE	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3956	INTERNAL MEDICINE	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3951	INTERNAL MEDICINE	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	2
3956	NURSE PRACTITIONER, FAMILY HEALTH	TALTZ	ALL OTHER DERMATOLOGICALS	Denied	1
3956	NURSE PRACTITIONER, UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	18
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	3

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Denied	1
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Denied	1
3961	PHYSICIAN ASSISTANT, UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	2
3956	RHEUMATOLOGY	TALTZ	ALL OTHER DERMATOLOGICALS	Denied	2
3956	RHEUMATOLOGY	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	2
3956	UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Denied	8
3963	UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	6
3956	UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	19
3951	UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Denied	1
3951	UNSPECIFIED	TALTZ	ALL OTHER DERMATOLOGICALS	Approved	2
3956	UNSPECIFIED	TALTZ 80MG/ML SC SOAJ	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3962	PHYSICIAN ASSISTANT, UNSPECIFIED	TASIMELTEON	HYPNOTIC	Denied	1
3963	UNSPECIFIED	TAVNEOS	COMPLEMENT INHIBITOR	Approved	1
3956	HEMATOLOGY & ONCOLOGY	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	3
3963	HEMATOLOGY & ONCOLOGY	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	1
3969	HEMATOLOGY & ONCOLOGY	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	1
3963	MEDICAL ONCOLOGY	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	1
3951	UNSPECIFIED	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	TEMOZOLOMIDE	ANTINEOPLASTICS	Approved	1
3962	NEUROLOGY	TERIFLUNOMIDE	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	NEUROLOGY	TERIFLUNOMIDE	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	NEUROLOGY	TERIFLUNOMIDE	MULTIPLE SCLEROSIS AGENT	Approved	1
3964	NEUROLOGY	TERIFLUNOMIDE	MULTIPLE SCLEROSIS AGENT	Approved	1
3956	NURSE PRACTITIONER, GERONTOLOGY	TERIFLUNOMIDE	MULTIPLE SCLEROSIS AGENT	Approved	1
3951	UNSPECIFIED	TERIFLUNOMIDE	MULTIPLE SCLEROSIS AGENT	Approved	2
3962	UNSPECIFIED	TERIFLUNOMIDE	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	UNSPECIFIED	TERIFLUNOMIDE	MULTIPLE SCLEROSIS AGENT	Approved	3
3956	UNSPECIFIED	TERIFLUNOMIDE	MULTIPLE SCLEROSIS AGENT	Approved	1
3951	NEUROLOGY	TETRABENAZINE	VESICULAR MONOAMINE TRANSPORTER 2 INHIBITOR	Approved	1
3956	NEUROLOGY	TETRABENAZINE	VESICULAR MONOAMINE TRANSPORTER 2 INHIBITOR	Approved	1
3956	UNSPECIFIED	TETRABENAZINE	VESICULAR MONOAMINE TRANSPORTER 2 INHIBITOR	Approved	1
3963	INTERNAL MEDICINE	TEZSPIRE	ASTHMA	Approved	1
3963	INTERNAL MEDICINE	TEZSPIRE	ASTHMA	Denied	1
3963	NEUROLOGY	TEZSPIRE	ASTHMA	Approved	1
3963	PULMONARY DISEASES	TEZSPIRE	ASTHMA	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3969	PULMONARY DISEASES	TEZSPIRE	ASTHMA	Approved	1
3962	UNSPECIFIED	TEZSPIRE	ASTHMA	Approved	1
3963	HEMATOLOGY	THALOMID	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	THALOMID	ANTINEOPLASTICS	Approved	1
3969	PULMONARY DISEASES	TOBRAMYCIN INHALATION SOLUTION	RESPIRATORY AGENTS	Approved	1
3956	INTERNAL MEDICINE	TOLVAPTAN	VASOPRESSIN ANTAGONIST	Denied	1
3956	DERMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	8
3956	DERMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3963	DERMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3951	DERMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	DERMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	FAMILY PRACTICE	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	FAMILY PRACTICE	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	INTERNAL MEDICINE	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	INTERNAL MEDICINE	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	NURSE PRACTITIONER, FAMILY HEALTH	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	7
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3965	RHEUMATOLOGY	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	8
3951	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	4
3965	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3965	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3956	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3964	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3963	UNSPECIFIED	TREMFYA	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3956	DERMATOLOGY	TREMFYA 100MG/ML SC SOPN	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	INTERNAL MEDICINE	TRIKAFTA	CYSTIC FIBROSIS AGENTS	Approved	1
3962	PEDIATRICS	TRIKAFTA	CYSTIC FIBROSIS AGENTS	Approved	1
3963	PULMONARY DISEASES	TRIKAFTA	CYSTIC FIBROSIS AGENTS	Approved	6
3956	PULMONARY DISEASES	TRIKAFTA	CYSTIC FIBROSIS AGENTS	Approved	1
3963	UNSPECIFIED	TRIKAFTA	CYSTIC FIBROSIS AGENTS	Approved	1
3956	CLINICAL NURSE SPECIALIST, FAMILY HEALTH	TYMLOS	OSTEOPOROSIS AGENTS	Approved	3
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	TYMLOS	OSTEOPOROSIS AGENTS	Approved	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Standard Code Description	Decision	Count
3963	INTERNAL MEDICINE	TYMLOS	OSTEOPOROSIS AGENTS	Approved	2
3956	INTERNAL MEDICINE	TYMLOS	OSTEOPOROSIS AGENTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	TYMLOS	OSTEOPOROSIS AGENTS	Approved	1
3956	UNSPECIFIED	TYMLOS	OSTEOPOROSIS AGENTS	Denied	2
3963	UNSPECIFIED	TYMLOS	OSTEOPOROSIS AGENTS	Approved	3
3956	UNSPECIFIED	TYMLOS	OSTEOPOROSIS AGENTS	Approved	3
3963	CARDIOLOGY	TYVASO DRY POWDER INHALER (DPI)	VASODILATORS	Approved	1
3963	PULMONARY DISEASES	UPTRAVI	ANTIHYPERTENSIVES	Denied	1
3956	UNSPECIFIED	UPTRAVI	ANTIHYPERTENSIVES	Approved	1
3963	GASTROENTEROLOGY	VALGANCICLOVIR	ANTIVIRALS	Approved	2
3963	INFECTIOUS DISEASES	VALGANCICLOVIR	ANTIVIRALS	Denied	1
3956	NURSE PRACTITIONER, ACUTE CARE	VALGANCICLOVIR	ANTIVIRALS	Approved	1
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	VALGANCICLOVIR	ANTIVIRALS	Approved	1
3951	UNSPECIFIED	VALGANCICLOVIR	ANTIVIRALS	Approved	1
3956	UNSPECIFIED	VALGANCICLOVIR	ANTIVIRALS	Approved	3
3956	UNSPECIFIED	VALGANCICLOVIR	ANTIVIRALS	Denied	1
3969	HEMATOLOGY & ONCOLOGY	VENCLEXTA	ANTINEOPLASTICS	Approved	1
3951	HEMATOLOGY & ONCOLOGY	VENCLEXTA	ANTINEOPLASTICS	Approved	1
3963	INTERNAL MEDICINE	VENCLEXTA	ANTINEOPLASTICS	Approved	1
3963	UNSPECIFIED	VENCLEXTA	ANTINEOPLASTICS	Approved	1
3963	INTERNAL MEDICINE	VERZENIO	ANTINEOPLASTICS	Approved	1
3963	MEDICAL ONCOLOGY	VERZENIO	ANTINEOPLASTICS	Approved	2
3963	UNSPECIFIED	VIGABATRIN POWDER	ANTICONVULSANTS	Approved	1
3956	UNSPECIFIED	VIGABATRIN TABLETS	ANTICONVULSANTS	Denied	1
3963	UNSPECIFIED	VOTRIENT	ANTINEOPLASTICS	Approved	1
3962	UNSPECIFIED	VOWST	GASTROINTESTINAL AGENTS	Denied	1
3969	UNSPECIFIED	VUMERITY	MULTIPLE SCLEROSIS AGENT	Approved	1
3963	INTERNAL MEDICINE	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3962	INTERNAL MEDICINE	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	NURSE PRACTITIONER, ADULT HEALTH	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3963	NURSE PRACTITIONER, UNSPECIFIED	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3965	UNSPECIFIED	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3963	UNSPECIFIED	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	UNSPECIFIED	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	UNSPECIFIED	XELJANZ 5 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1
3956	RHEUMATOLOGY	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	3
3964	RHEUMATOLOGY	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	1

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3963	RHEUMATOLOGY	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	RHEUMATOLOGY	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	2
3956	UNSPECIFIED	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3951	UNSPECIFIED	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	UNSPECIFIED	XELJANZ XR 11 MG	IMMUNOSUPPRESSIVES/DMARDS	Approved	2
3956	GASTROENTEROLOGY	XELJANZ XR 22 MG	IMMUNOSUPPRESSIVES/DMARDS	Denied	1
3956	ALLERGY & IMMUNOLOGY	XOLAIR	RESPIRATORY AGENTS	Approved	10
3963	ALLERGY & IMMUNOLOGY	XOLAIR	RESPIRATORY AGENTS	Approved	14
3963	ALLERGY	XOLAIR	RESPIRATORY AGENTS	Approved	1
3956	ALLERGY	XOLAIR	RESPIRATORY AGENTS	Approved	1
3963	ALLERGY & IMMUNOLOGY	XOLAIR	RESPIRATORY AGENTS	Denied	2
3969	ALLERGY & IMMUNOLOGY	XOLAIR	RESPIRATORY AGENTS	Approved	1
3961	ALLERGY & IMMUNOLOGY	XOLAIR	RESPIRATORY AGENTS	Approved	1
3963	FAMILY PRACTICE	XOLAIR	RESPIRATORY AGENTS	Denied	1
3963	INTERNAL MEDICINE	XOLAIR	RESPIRATORY AGENTS	Denied	1
3956	INTERNAL MEDICINE	XOLAIR	RESPIRATORY AGENTS	Denied	1
3956	NURSE PRACTITIONER, ACUTE CARE	XOLAIR	RESPIRATORY AGENTS	Denied	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	XOLAIR	RESPIRATORY AGENTS	Approved	1
3963	PEDIATRICS	XOLAIR	RESPIRATORY AGENTS	Approved	3
3963	PHYSICIAN ASSISTANT, UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	2
3956	PHYSICIAN ASSISTANT, UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	3
3963	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	XOLAIR	RESPIRATORY AGENTS	Approved	3
3956	PULMONARY DISEASES	XOLAIR	RESPIRATORY AGENTS	Denied	2
3963	PULMONARY DISEASES	XOLAIR	RESPIRATORY AGENTS	Denied	1
3962	PULMONARY DISEASES	XOLAIR	RESPIRATORY AGENTS	Denied	1
3951	UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	1
3951	UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Denied	1
3963	UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	4
3956	UNSPECIFIED	XOLAIR	RESPIRATORY AGENTS	Approved	3
3965	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	XOLAIR 150MG/ML SC SOSY	RESPIRATORY AGENTS	Approved	1
3956	PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC	XOLAIR 150MG/ML SC SOSY	RESPIRATORY AGENTS	Approved	1
3969	HEMATOLOGY & ONCOLOGY	XTANDI	ANTINEOPLASTICS	Approved	1
3956	MEDICAL ONCOLOGY	XTANDI	ANTINEOPLASTICS	Approved	1
3956	NURSE PRACTITIONER, FAMILY HEALTH	XTANDI	ANTINEOPLASTICS	Approved	1
3965	UNSPECIFIED	XTANDI	ANTINEOPLASTICS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	XTANDI 40MG OR TABS	ANTINEOPLASTICS	Approved	1
3963	NEUROLOGY	XYREM	CNS DEPRESSANTS	Approved	1

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3956	NURSE PRACTITIONER, UNSPECIFIED	XYREM	CNS DEPRESSANTS	Approved	1
3969	NEUROLOGY	XYWAV	CNS DEPRESSANTS	Denied	1
3969	NURSE PRACTITIONER, FAMILY HEALTH	XYWAV	CNS DEPRESSANTS	Approved	1
3963	PULMONARY DISEASES	XYWAV	CNS DEPRESSANTS	Approved	1
3963	UNSPECIFIED	XYWAV	CNS DEPRESSANTS	Approved	1
3956	HEMATOLOGY & ONCOLOGY	ZEJULA	ANTINEOPLASTICS	Approved	1
3963	HEMATOLOGY & ONCOLOGY	ZEJULA	ANTINEOPLASTICS	Approved	1
3962	UNSPECIFIED	ZEJULA	ANTINEOPLASTICS	Approved	1
3956	INTERNAL MEDICINE	ZEPOSIA	MULTIPLE SCLEROSIS AGENT	Denied	1