



BlueShield of Northeastern New York  
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# STAT Bulletin

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**To: All MD/DO**

**Contracts affected: Commercial only**

## Updated Drug Therapy Guidelines Available Online

<p>Why you're receiving this stat</p>	<p>The following drug therapy guidelines have been updated.</p>
<p>What you need to know</p>	<p>These guidelines are available online at <b>bsneny.com/provider</b>. To access them, select <i>Policies &amp; Guidelines &gt; Drug Therapy Guidelines</i>.</p>
<p>What you need to do</p>	<p>Please refer to these updated guidelines when discussing treatment options with your BlueShield of Northeastern New York patients.</p> <p>If you do not have access to the Internet, you may request a paper copy by calling Provider Service at 1-800-444-4552 or (518) 220-5620.</p>

## Updated Drug Therapy Guidelines

Please refer to individual policies for details, which are available online.

### Guidelines to be Posted by January 15, 2019, and effective on February 15, 2019

Actemra®	Infliximab	Preferred Drug Step Therapy: Testosterone Replacements
Adalimumab (Previously called Humira®)	Kalydeco®	Preferred Drug Step Therapy: Topical Dermatologics
Appetite Suppressants	Kyprolis®	Preferred Drug Step Therapy: Yupelri™
Antinarcotic Agents	Libtayo®	Preferred Drug Step Therapy: Yupelri™
Bavencio®	Lorbrena®	Procybsi®
Calcitonin Gene-Related Peptide (CGRP) Inhibitors (Previously called Aimovig™)	Lumoxiti™	Promacta®
Cimzia®	Nplate®	Revcovi™
Colony Stimulating Factors (CSFs)	Nutritional Supplements	Simponi®
Copiktra™	Orencia®	Spinraza®
Dupixent®	Orkambi®	Stelara®
Emflaza®	Otezla®	Sucraid®
Enbrel®	Oxervate™	Taltz®
Entyvio®	Preferred Drug Step Therapy: Select Non-Steroidal Anti-Inflammatory Drugs (NSAIDs) (Previously called Topical Non-Steroidal Anti-Inflammatory Drugs and Vivlodex®)	Talzenna®
Erectile Dysfunction Agents	Preferred Drug Step Therapy: Prostaglandin Analogs	Tegsedi™
Esbriet®	Preferred Drug Step Therapy: Select Tetracyclines (Previously called Extended-Release Antibiotics)	Vizimpro®
Ferriprox®	Preferred Drug Step Therapy: Simpazan™	Xeljanz®
Forteo®	Preferred Drug Step Therapy: Tiglutik™	Xolair®
Gamifant®		Xyrem®
Glassia		Yervoy®
Gonadotropin-releasing hormone (GnRH) Agonists		Yutiq™
Hemlibra®		

**Guidelines to be Posted by January 15, 2019, and effective immediately**

Abiraterone	Preferred Drug Step Therapy: BPH (alpha-antagonists)	Transmucosal Immediate-Release Fentanyl (TIRF)
Abbreviated Criteria: Syprine®		
Abbreviated Criteria: Xatmep®	Preferred Drug Step Therapy: Epinephrine Products	Tykerb®
Cinqair®	Preferred Drug Step Therapy: Inhaled Combinations	Tymlos®
Duzallo®		Uloric
Endari™	Preferred Drug Step Therapy: Inhaled Corticosteroids	Valchlor®
Exondys 51™	Preferred Drug Step Therapy: Intranasal Steroids	Vectibix®
Fasenra™		Verzenio™
Grastek®	Preferred Drug Step Therapy: Proton Pump Inhibitors (PPIs)	Vidaza
Incretin Mimetics	Preferred Drug Step Therapy: Osteoporosis Agents	Votrient®
Jynarque™		Xalkori®
Kevzara®	Preferred Drug Step Therapy: Urinary Agents	Xhance®
Kineret®	Penicillamine Products	Xtandi®
Krystexxa®	Poteligeo®	Yescarta®
Lartruvo®	Pulmonary Arterial Hypertension (PAH Agents)	Zaltrap®
Lutathera®		Zejula®
Nucala®	Ragwitek®	Zelboraf®
Odactra™	Rubraca®	Zolinza®
Ofev®	Sedative Hypnotics	Zurampic®
Olumiant®	Symdeko™	Zydelig®
Oralair®	Tavalisse™	Zykadia®
Preferred Drug Step Therapy: Beta Agonist Inhalers	Topical Immunomodulators	

**Retired Policies**

Incretin Mimetics/Insulin Combos	Preferred Drug Step Therapy: Statins
Intravenous (IV) Bisphosphonates	RANKL Inhibitors
Lucentis®	