



PRIOR AUTHORIZATION DRUG LISTING

Below is a list of medications that require prior approval from your doctor.

The symbol (SP) indicates that the drug is restricted to Axiom Specialty Pharmacy.

Actemra	Adcirca
Alferon N (SP)	Aloxi (SP)
Amevive (SP)	Ampyra
Anzemet vial (SP)	Aranesp (SP)
Arcalyst	Aredia, pamidronate (SP)
Arixtra	Avastin (SP)
Avonex (SP)	Betaseron (SP)
Boniva syringe (SP)	Botulinum Toxins: Botox, Myobloc (SP)
<i>buprenorphine</i>	Byetta
Chenodal	Cimzia (SP)
Cinryze	Combination Beta Agonist: Advair, Symbicort
Copaxone (SP)	Enbrel (SP)
Epogen (SP)	Erbitux (SP)
Exjade	Forteo (SP)
Fuzeon (SP)	Gleevec (SP)
Gonadotropin Releasing Hormone Agonists (GnRH): Eligard, leuprolide, Lupron, Trelstar, Zoladex (SP)	<i>granisteron, granisol (SP)</i>
Growth Hormone: Genotropin, Geref , Humatrope, Norditropin, Nutropin, Omnitrope, Saizen, Serostim, Tev-Tropin (SP)	Humira (SP)
Hyaluronic Acid Derivatives: Euflexxa, Hyalgan, Orthovisc, supartz, Synvisc (SP)	Ilaris
Increlex (SP)	Infergen (SP)

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Intron A (SP)	Kalbitor
Kineret (SP)	Kuvan
Leukine (SP)	Lidoderm
Lovenox	Lyrica
Nplate (SP)	Neulasta (SP)
Neupogen (SP)	Nexavar (SP)
<i>Ondansetron</i>	Ophthalmic Prostaglandins: Lumigan, Xalatan
Orencia (SP)	Pegasys (SP)
Pegintron (SP)	Procrit (SP)
Prolastin	Promacta
Provigil	Raptiva (SP)
Rebetol (SP)	Rebif (SP)
Reclast (SP)	Regranex
Remicade (SP)	Remodulin
Restasis	Revatio
Ribavirin: Copegus, ribasphere, ribavirin, ribapak (SP)	Risperdal Consta (SP)
Rituxan (SP)	Roferon-A (SP)
Samsca	Suboxone
Sutent (SP)	Symlyn /Symlinpen
Synagis (SP)	<i>tamsulosin</i>
Tazorac	<i>topiramate</i>
Tracleer	Tysabri
Vfend	Weight Loss Drugs: <i>benzphetamine, diethylpropion, Fastin, phentermine, phendimetrazine, Meridia</i>
Xeloda (SP)	Xenazine
Xolair (SP)	Zemplar (SP)
Zometa (SP)	<i>zonisamide</i>
Zymar	Zyvox

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