

# Provider Bulletin



## News and Information

September 10, 2021

### **Updated Prior Authorization Criteria for Drugs on the UCare Individual & Family Plans and UCare Individual & Family Plans with M Health Fairview Plans Formulary**

On November 1, 2021, prior authorization criteria for the drugs listed below will be updated. These changes will be reflected in the [2021 Prior Authorization Criteria](#) document.

[Click here](#) to see updated criteria effective November 1, 2021.

- Braftovi
- Chenodal
- Cotellic
- Filgrastim
- Imbruvica
- Mekinist
- Mektovi
- Nucala
- Odactra
- Oxervate
- Somavert
- Tafinlar
- Turalio
- Zelboraf

[Pharmacy resources](#) are available on the UCare Provider website.