

# Provider Bulletin



## News and Information

August 15, 2022

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

On October 1, 2022 prior authorization criteria for the drugs listed below will be updated. These changes will be reflected in the [2022 Prior Authorization Criteria](#) document.

[Click here](#) to see updated criteria effective October 1, 2022.

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

- Alecensa
- Alunbrig
- Ayvakit
- Cabometyx
- Calquence
- Caprelsa
- Cometriq
- Copiktra
- Glucagon-Like Peptide-1 Agonists
- Imbruvica
- Inlyta
- Lenvima
- Lorbrena
- Lumakras
- Nexavar
- Orkambi
- Piqray
- Strensiq
- Sutent
- Trikafta
- Truseltiq
- Venclexta
- Votrient
- Zydelig
- Zykadia