

Part B drugs requiring prior authorization

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Medicare Part B covers a limited number of outpatient prescription drugs under limited conditions. Usually, Part B drugs are medical drugs you wouldn't give to yourself. They are administered at a doctor's office or hospital outpatient setting. Some of these drugs require prior authorization. These drugs include:

- Acthar
- Alimta
- Aranesp
- **Avastin (removed 7/1/2021)**
- Berinert
- Bivigam
- Botox
- Carimune
- Cerezyme
- Cinryze
- Dysport
- ElELYso
- Entyvio
- Erbitux
- Euflexxa
- Evenity
- Exondys 51
- **Eylea (removed 7/1/2021)**
- Firazyr
- Flebogamma
- Gamastan S/D
- Gamifant
- Gammagard
- Gammaplex
- Gamunex-C
- Gel-One
- Gelsyn-3
- Genvisc
- Haegarda
- Herceptin
- Hizentra
- Hyalgan
- Hymovis
- Jetrea
- Kadcylla
- Kalbitor
- Keytruda
- Lemtrada
- **Lucentis (removed 7/1/2021)**
- Lumizyme
- Monovisc
- Myobloc
- Neulasta
- Nplate
- Octagam
- Oncaspar
- Onpattro
- Opdivo
- Orenicia
- Orthovisc
- Perjeta
- Privigen
- Probuphine
- **Prolia/Xgeva (removed 7/1/2021)**
- Reclast
- Regranex
- Remicade
- Rituxan
- Rituxan Hycela
- Ruconest

- Sandostatin
- Simponi
- Soliris
- Supartz/Visco-3
- Synojoynt
- Synvisc/Synvisc-One
- Takhzyro
- Triluron
- Trivisc
- Tysabri
- Vectibix
- Velcade
- VPRIV
- Xeomin
- Xiaflex
- Xolair
- Yervoy

If your treatment includes any of the medical drugs listed, ask your provider if this change affects you. If so, your provider must submit a Prior Authorization request by fax to Senior Whole at 1-508-823-6375.

- Your provider must give us supporting documentation with all requests.
- Your provider must provide your treatment history information.