

**Colorado Coverage Determinations**

<b>Outcome</b>	<b>EOC Count</b>
Approved	2,300
Denied	4,237
Total	6,537

**Colorado Coverage Determination Denials  
by Type**

<b>Denial Reason</b>	<b>EOC Count</b>
Criteria Not Met	1,815
Not Medically Accepted Indication	445
Lack of Response	1,174
Covered Under Part B	1
DMR	4
May Be Covered Under Part B	1
Missing Criteria	698
Benefit Exclusion	99
Total	4,237

**Colorado Coverage Determination Appeals  
by Type**

<b>Event Type</b>	<b>EOC Count</b>
First Level Appeal- Approval	308
First Level Appeal- Denial	820
Second Level Appeal- Approved	54
Second Level Appeal- Denied	116
Total	1,298

## Colorado Coverage Determinations

by Drug

Drug Name	Outcome	EOC Count	%
ABILIFY MAINTENA ER 400 MG VL	Denied	1	100.00%
ABIRATERONE ACETATE 250 MG TAB	Approved	4	100.00%
ABSORICA 30 MG CAPSULE	Approved	6	60.00%
ABSORICA 30 MG CAPSULE	Denied	4	40.00%
ABSORICA 40 MG CAPSULE	Approved	1	16.67%
ABSORICA 40 MG CAPSULE	Denied	5	83.33%
ACCRUFER 30 MG CAPSULE	Denied	1	100.00%
ACCU-CHEK AVIVA PLUS TEST STRP	Denied	2	100.00%
ACCU-CHEK FASTCLIX LANCET DRUM	Denied	1	100.00%
ACCU-CHEK GUIDE TEST STRIP	Approved	2	25.00%
ACCU-CHEK GUIDE TEST STRIP	Denied	6	75.00%
AC CUTANE 20 MG CAPSULE	Approved	4	66.67%
AC CUTANE 20 MG CAPSULE	Denied	2	33.33%
AC CUTANE 30 MG CAPSULE	Approved	4	44.44%
AC CUTANE 30 MG CAPSULE	Denied	5	55.56%
AC CUTANE 40 MG CAPSULE	Approved	6	35.29%
AC CUTANE 40 MG CAPSULE	Denied	11	64.71%
ACETAMINOP-CODEINE 120-12 MG/5	Denied	2	100.00%
ACETAMINOPHEN-COD #4 TABLET	Approved	1	100.00%
ACETAZOLAMIDE ER 500 MG CAP	Denied	1	100.00%
ACTEMRA 162 MG/0.9 ML SYRINGE	Approved	1	33.33%
ACTEMRA 162 MG/0.9 ML SYRINGE	Denied	2	66.67%
ACTEMRA ACTPEN 162 MG/0.9 ML	Approved	3	33.33%
ACTEMRA ACTPEN 162 MG/0.9 ML	Denied	6	66.67%
ACYCLOVIR 5% CREAM	Denied	5	100.00%
ACYCLOVIR 5% OINTMENT	Approved	9	29.03%
ACYCLOVIR 5% OINTMENT	Denied	22	70.97%
ACZONE 5% GEL	Approved	1	50.00%
ACZONE 5% GEL	Denied	1	50.00%
ACZONE 7.5% GEL PUMP	Approved	5	16.67%
ACZONE 7.5% GEL PUMP	Denied	25	83.33%
ADAPALENE-BNZZYL PEROX 0.1-2.5%	Approved	8	57.14%
ADAPALENE-BNZZYL PEROX 0.1-2.5%	Denied	6	42.86%
ADDERALL 10 MG TABLET	Approved	1	50.00%
ADDERALL 10 MG TABLET	Denied	1	50.00%
ADDERALL 15 MG TABLET	Denied	2	100.00%
ADDERALL 20 MG TABLET	Approved	1	50.00%
ADDERALL 20 MG TABLET	Denied	1	50.00%
ADDERALL XR 10 MG CAPSULE	Approved	6	46.15%
ADDERALL XR 10 MG CAPSULE	Denied	7	53.85%
ADDERALL XR 15 MG CAPSULE	Denied	3	100.00%
ADDERALL XR 20 MG CAPSULE	Approved	6	60.00%

ADDERALL XR 20 MG CAPSULE	Denied	4	40.00%
ADDERALL XR 30 MG CAPSULE	Approved	3	27.27%
ADDERALL XR 30 MG CAPSULE	Denied	8	72.73%
ADDYI 100 MG TABLET	Approved	1	20.00%
ADDYI 100 MG TABLET	Denied	4	80.00%
ADEMPAS 0.5 MG TABLET	Denied	1	100.00%
ADEMPAS 1 MG TABLET	Approved	1	100.00%
ADEMPAS 2.5 MG TABLET	Denied	1	100.00%
ADRENALIN 1 MG/ML VIAL	Denied	1	100.00%
ADVATE 801-1,200 UNIT VIAL	Approved	1	100.00%
AIMOVIG 140 MG/ML AUTOINJECTOR	Approved	25	47.17%
AIMOVIG 140 MG/ML AUTOINJECTOR	Denied	28	52.83%
AIMOVIG 70 MG/ML AUTOINJECTOR	Approved	10	55.56%
AIMOVIG 70 MG/ML AUTOINJECTOR	Denied	8	44.44%
AIRDUO DIGIHALER 113-14 MCG	Approved	2	100.00%
AIRDUO DIGIHALER 232-14 MCG	Approved	1	100.00%
AIRDUO RESPICLICK 232-14 MCG	Denied	2	100.00%
AJOVY 225 MG/1.5 ML AUTOINJECT	Approved	7	53.85%
AJOVY 225 MG/1.5 ML AUTOINJECT	Denied	6	46.15%
AJOVY 225 MG/1.5 ML SYRINGE	Approved	10	76.92%
AJOVY 225 MG/1.5 ML SYRINGE	Denied	3	23.08%
AKLIEF 0.005% CREAM	Denied	18	100.00%
ALBENDAZOLE 200 MG TABLET	Denied	3	100.00%
ALBUTEROL HFA 90 MCG INHALER	Denied	1	100.00%
ALENDRONATE SODIUM 10 MG TAB	Denied	1	100.00%
ALINIA 100 MG/5 ML SUSPENSION	Denied	2	100.00%
ALOGLIPTIN 25 MG TABLET	Approved	3	75.00%
ALOGLIPTIN 25 MG TABLET	Denied	1	25.00%
ALOSETRON HCL 0.5 MG TABLET	Approved	1	100.00%
ALPHAGAN P 0.1% DROPS	Denied	4	100.00%
ALPRAZOLAM 0.5 MG TABLET	Denied	1	100.00%
ALPRAZOLAM ER 1 MG TABLET	Approved	2	50.00%
ALPRAZOLAM ER 1 MG TABLET	Denied	2	50.00%
ALPRAZOLAM ER 2 MG TABLET	Approved	1	100.00%
ALPRAZOLAM XR 0.5 MG TABLET	Denied	1	100.00%
ALPRAZOLAM XR 1 MG TABLET	Denied	2	100.00%
ALPRAZOLAM XR 2 MG TABLET	Approved	1	100.00%
ALREX 0.2% EYE DROPS	Denied	1	100.00%
ALTRENO 0.05% LOTION	Denied	1	100.00%
ALVESCO 160 MCG INHALER	Approved	2	28.57%
ALVESCO 160 MCG INHALER	Denied	5	71.43%
ALVESCO 80 MCG INHALER	Denied	6	100.00%
AMBIEN 10 MG TABLET	Denied	3	100.00%
AMBRISANTAN 10 MG TABLET	Approved	2	66.67%
AMBRISANTAN 10 MG TABLET	Denied	1	33.33%
AMITIZA 24 MCG CAPSULES	Approved	1	33.33%
AMITIZA 24 MCG CAPSULES	Denied	2	66.67%

AMITIZA 8 MCG CAPSULE	Approved	1	100.00%
AMNESTEEM 20 MG CAPSULE	Approved	2	100.00%
AMNESTEEM 40 MG CAPSULE	Approved	3	100.00%
AMOX-CLAV 250-62.5 MG/5 ML SUS	Denied	2	100.00%
AMPYRA ER 10 MG TABLET	Denied	1	100.00%
AMZEEQ 4% FOAM	Denied	1	100.00%
ANDROGEL 1.62% GEL PUMP	Denied	1	100.00%
ANDROGEL 1.62%(1.25G) GEL PCKT	Approved	1	100.00%
ANGELIQ 0.25 MG-0.5 MG TABLET	Denied	1	100.00%
ANGELIQ 0.5 MG-1 MG TABLET	Denied	1	100.00%
ANNOVERA VAGINAL RING	Approved	4	50.00%
ANNOVERA VAGINAL RING	Denied	4	50.00%
ANUCORT-HC 25 MG SUPPOSITORY	Approved	2	10.53%
ANUCORT-HC 25 MG SUPPOSITORY	Denied	17	89.47%
ANUSOL-HC 25 MG SUPPOSITORY	Denied	1	100.00%
APIDRA SOLOSTAR 100 UNIT/ML	Denied	2	100.00%
APLENZIN ER 174 MG TABLET	Denied	3	100.00%
APLENZIN ER 348 MG TABLET	Denied	2	100.00%
APO-VARENICLINE 1 MG TABLET	Denied	2	100.00%
APREPITANT 125-80-80 MG PACK	Approved	1	100.00%
APTENSIO XR 50 MG CAPSULE	Denied	1	100.00%
ARALAST NP 1,000 MG VIAL	Approved	1	100.00%
ARIKAYCE 590 MG/8.4 ML VIAL	Approved	1	100.00%
ARIPIRAZOLE 2 MG TABLET	Approved	2	66.67%
ARIPIRAZOLE 2 MG TABLET	Denied	1	33.33%
ARIPIRAZOLE 5 MG TABLET	Approved	4	80.00%
ARIPIRAZOLE 5 MG TABLET	Denied	1	20.00%
ARIPIRAZOLE ODT 15 MG TABLET	Denied	2	100.00%
ARMODAFINIL 150 MG TABLET	Denied	3	100.00%
ARMODAFINIL 250 MG TABLET	Approved	1	25.00%
ARMODAFINIL 250 MG TABLET	Denied	3	75.00%
ASA-BUTALB-CAFF-COD #3 CAPSULE	Denied	1	100.00%
ASENAPINE 2.5 MG TABLET SL	Approved	1	100.00%
ASENAPINE 5 MG TABLET SL	Approved	1	100.00%
ASMANEX HFA 50 MCG INHALER	Approved	1	25.00%
ASMANEX HFA 50 MCG INHALER	Denied	3	75.00%
ATELVIA DR 35 MG TABLET	Denied	1	100.00%
ATOMOXETINE HCL 18 MG CAPSULE	Denied	5	100.00%
ATOMOXETINE HCL 25 MG CAPSULE	Denied	4	100.00%
ATOMOXETINE HCL 40 MG CAPSULE	Approved	2	33.33%
ATOMOXETINE HCL 40 MG CAPSULE	Denied	4	66.67%
ATROVENT 17 MCG HFA INHALER	Approved	1	33.33%
ATROVENT 17 MCG HFA INHALER	Denied	2	66.67%
AURYXIA 210 MG TABLET	Denied	1	100.00%
AUTOSOFT 90 INFUSN SET 23" 6MM	Denied	1	100.00%
AUTOSOFT 90 INFUSN SET 43" 6MM	Denied	1	100.00%
AUVI-Q 0.1 MG AUTO-INJECTOR	Approved	3	37.50%

AUVI-Q 0.1 MG AUTO-INJECTOR	Denied	5	62.50%
AUVI-Q 0.3 MG AUTO-INJECTOR	Denied	2	100.00%
AVAR CLEANSER	Denied	1	100.00%
AVONEX PEN 30 MCG/0.5 ML KIT	Approved	1	100.00%
AZASAN 100 MG TABLET	Denied	1	100.00%
AZATHIOPRINE 75 MG TABLET	Approved	1	100.00%
AZELAIC ACID 15% GEL	Approved	7	43.75%
AZELAIC ACID 15% GEL	Denied	9	56.25%
AZELASTIN-FLUTIC 137-50MCG SPR	Denied	2	100.00%
AZELEX 20% CREAM	Denied	2	100.00%
AZULFIDINE ENTAB 500 MG	Denied	2	100.00%
BABY DDROPS 400 UNIT/DROP CONC	Denied	1	100.00%
BACLOFEN 5 MG TABLET	Denied	1	100.00%
BAFIERTAM DR 95 MG CAPSULE	Denied	1	100.00%
BAQSIMI 3 MG SPRAY ONE PACK	Denied	5	100.00%
BAQSIMI 3 MG SPRAY TWO PACK	Approved	3	18.75%
BAQSIMI 3 MG SPRAY TWO PACK	Denied	13	81.25%
BASAGLAR 100 UNIT/ML KWIKPEN	Approved	12	33.33%
BASAGLAR 100 UNIT/ML KWIKPEN	Denied	24	66.67%
BD 3 ML SYRINGE WITH NEEDLE	Approved	1	33.33%
BD 3 ML SYRINGE WITH NEEDLE	Denied	2	66.67%
BECONASE AQ 0.042% SPRAY	Approved	1	100.00%
BELBUCA 600 MCG FILM	Denied	3	100.00%
BELBUCA 75 MCG FILM	Approved	3	75.00%
BELBUCA 75 MCG FILM	Denied	1	25.00%
BELBUCA 900 MCG FILM	Approved	1	100.00%
BELSOMRA 10 MG TABLET	Approved	1	14.29%
BELSOMRA 10 MG TABLET	Denied	6	85.71%
BELSOMRA 15 MG TABLET	Approved	1	25.00%
BELSOMRA 15 MG TABLET	Denied	3	75.00%
BELSOMRA 20 MG TABLET	Approved	1	20.00%
BELSOMRA 20 MG TABLET	Denied	4	80.00%
BELSOMRA 5 MG TABLET	Denied	1	100.00%
BENEFIX 3,000 UNIT RANGE	Approved	1	100.00%
BENLYSTA 200 MG/ML AUTOINJECT	Approved	2	40.00%
BENLYSTA 200 MG/ML AUTOINJECT	Denied	3	60.00%
BENZAFLIN GEL 35G PUMP	Denied	2	100.00%
BENZONATATE 200 MG CAPSULE	Denied	6	100.00%
BETIMOL 0.5% EYE DROPS	Denied	1	100.00%
BETOPTIC S 0.25% EYE DROPS	Denied	1	100.00%
BEYAZ 28 TABLET	Approved	1	33.33%
BEYAZ 28 TABLET	Denied	2	66.67%
BIJUVA 1 MG-100 MG CAPSULE	Denied	1	100.00%
BIKTARVY 50-200-25 MG TABLET	Approved	7	63.64%
BIKTARVY 50-200-25 MG TABLET	Denied	4	36.36%
BIMATOPROST 0.03% EYE DROPS	Approved	1	100.00%
BONIVA 150 MG TABLET	Denied	1	100.00%

BONJESTA ER 20-20 MG TABLET	Approved	1	50.00%
BONJESTA ER 20-20 MG TABLET	Denied	1	50.00%
BOTOX 100 UNIT VIAL	Approved	2	22.22%
BOTOX 100 UNIT VIAL	Denied	7	77.78%
BOTOX 200 UNIT VIAL	Approved	4	33.33%
BOTOX 200 UNIT VIAL	Denied	8	66.67%
BRAFTOVI 75 MG CAPSULE	Approved	1	50.00%
BRAFTOVI 75 MG CAPSULE	Denied	1	50.00%
BREO ELLIPTA 200-25 MCG INH	Denied	2	100.00%
BREZTRI AEROSPHERE INHALER	Denied	7	100.00%
BRIVIACT 100 MG TABLET	Approved	1	25.00%
BRIVIACT 100 MG TABLET	Denied	3	75.00%
BUDESONIDE 0.5 MG/2 ML SUSP	Approved	2	50.00%
BUDESONIDE 0.5 MG/2 ML SUSP	Denied	2	50.00%
BUDESONIDE 1 MG/2 ML INH SUSP	Denied	2	100.00%
BUPRENO-NALOX 2-0.5 MG SL FILM	Approved	1	20.00%
BUPRENO-NALOX 2-0.5 MG SL FILM	Denied	4	80.00%
BUPRENOR-NALOX 12-3 MG SL FILM	Approved	1	50.00%
BUPRENOR-NALOX 12-3 MG SL FILM	Denied	1	50.00%
BUPRENORPHINE 10 MCG/HR PATCH	Approved	3	60.00%
BUPRENORPHINE 10 MCG/HR PATCH	Denied	2	40.00%
BUPRENORPHINE 15 MCG/HR PATCH	Approved	1	100.00%
BUPRENORPHINE 2 MG TABLET SL	Approved	1	33.33%
BUPRENORPHINE 2 MG TABLET SL	Denied	2	66.67%
BUPRENORPHINE 20 MCG/HR PATCH	Approved	3	75.00%
BUPRENORPHINE 20 MCG/HR PATCH	Denied	1	25.00%
BUPRENORPHINE 5 MCG/HR PATCH	Approved	1	25.00%
BUPRENORPHINE 5 MCG/HR PATCH	Denied	3	75.00%
BUPRENORPHINE 8 MG TABLET SL	Approved	2	33.33%
BUPRENORPHINE 8 MG TABLET SL	Denied	4	66.67%
BUPRENORPHINE-NALOX 12-3MG FLM	Denied	2	100.00%
BUPRENORPHINE-NALOX 2-0.5MG FM	Denied	1	100.00%
BUPRENORPHINE-NALOX 2-0.5MG TB	Denied	1	100.00%
BUPRENORPHINE-NALOX 8-2MG FILM	Approved	4	66.67%
BUPRENORPHINE-NALOX 8-2MG FILM	Denied	2	33.33%
BUPRENORP-NALOX 4-1 MG SL FILM	Approved	3	60.00%
BUPRENORP-NALOX 4-1 MG SL FILM	Denied	2	40.00%
BUPRENORP-NALOX 8-2 MG SL FILM	Approved	5	55.56%
BUPRENORP-NALOX 8-2 MG SL FILM	Denied	4	44.44%
BUPROPION HCL XL 450 MG TABLET	Approved	3	30.00%
BUPROPION HCL XL 450 MG TABLET	Denied	7	70.00%
BUTALB-ACETAMIN-CAFF 50-300-40	Denied	2	100.00%
BUTORPHANOL 10 MG/ML SPRAY	Denied	4	100.00%
BUTRANS 10 MCG/HR PATCH	Approved	1	50.00%
BUTRANS 10 MCG/HR PATCH	Denied	1	50.00%
BUTRANS 20 MCG/HR PATCH	Approved	3	75.00%
BUTRANS 20 MCG/HR PATCH	Denied	1	25.00%

BUTRANS 5 MCG/HR PATCH	Approved	1	100.00%
BYDUREON BCISE 2 MG AUTOINJECT	Approved	2	28.57%
BYDUREON BCISE 2 MG AUTOINJECT	Denied	5	71.43%
BYSTOLIC 10 MG TABLET	Approved	2	28.57%
BYSTOLIC 10 MG TABLET	Denied	5	71.43%
BYSTOLIC 2.5 MG TABLET	Denied	2	100.00%
BYSTOLIC 20 MG TABLET	Approved	3	50.00%
BYSTOLIC 20 MG TABLET	Denied	3	50.00%
BYSTOLIC 5 MG TABLET	Approved	3	50.00%
BYSTOLIC 5 MG TABLET	Denied	3	50.00%
CABLIVI 11 MG KIT	Approved	1	100.00%
CABOMETYX 40 MG TABLET	Denied	3	100.00%
CALCIPOTR 0.005%-CLOBETA 0.05%	Denied	1	100.00%
CALCIPOTRIENE 0.005% FOAM	Denied	1	100.00%
CALCIPOTRIENE-BETAMETH DP OINT	Approved	5	55.56%
CALCIPOTRIENE-BETAMETH DP OINT	Denied	4	44.44%
CALCIPOTRIENE-BETAMETH DP SUSP	Approved	1	50.00%
CALCIPOTRIENE-BETAMETH DP SUSP	Denied	1	50.00%
CALCITRIOL 3 MCG/G OINTMENT	Denied	1	100.00%
CALQUENCE 100 MG CAPSULE	Approved	1	100.00%
CAMBIA 50 MG POWDER PACKET	Denied	6	100.00%
CANASA 1,000 MG SUPPOSITORY	Denied	2	100.00%
CAPECITABINE 150 MG TABLET	Approved	2	100.00%
CAPECITABINE 500 MG TABLET	Approved	5	100.00%
CARAFATE 1 GM TABLET	Denied	1	100.00%
CARAFATE 1 GM/10 ML SUSP	Denied	2	100.00%
CARDURA 4 MG TABLET	Approved	1	100.00%
CARDURA XL 4 MG TABLET	Denied	1	100.00%
CARDURA XL 8 MG TABLET	Denied	1	100.00%
CARISOPRODOL 250 MG TABLET	Denied	2	100.00%
CAROSPIR 25 MG/5 ML SUSPENSION	Denied	1	100.00%
CARVEDILOL ER 20 MG CAPSULE	Approved	1	33.33%
CARVEDILOL ER 20 MG CAPSULE	Denied	2	66.67%
CELEBREX 200 MG CAPSULE	Denied	5	100.00%
CELLCEPT 250 MG CAPSULE	Approved	1	100.00%
CEQUA 0.09% SOLUTION	Approved	3	21.43%
CEQUA 0.09% SOLUTION	Denied	11	78.57%
CEVIMELINE HCL 30 MG CAPSULE	Denied	3	100.00%
CHANTIX 1 MG CONT MONTH BOX	Denied	1	100.00%
CHANTIX STARTING MONTH BOX	Denied	1	100.00%
CHLORDIAZEPOXIDE-CLIDINIUM CAP	Denied	1	100.00%
CHOLESTYRAMINE LIGHT PACKET	Denied	2	100.00%
CHOLESTYRAMINE PACKET	Approved	1	9.09%
CHOLESTYRAMINE PACKET	Denied	10	90.91%
CICLOPIROX 0.77% CREAM	Approved	1	33.33%
CICLOPIROX 0.77% CREAM	Denied	2	66.67%
CICLOPIROX 1% SHAMPOO	Denied	2	100.00%

CICLOPIROX 8% SOLUTION	Denied	11	100.00%
CIMZIA 2X200 MG/ML SYRINGE KIT	Approved	6	75.00%
CIMZIA 2X200 MG/ML SYRINGE KIT	Denied	2	25.00%
CIMZIA 2X200 MG/ML(X3)START KT	Denied	3	100.00%
CINACALCET HCL 30 MG TABLET	Approved	1	16.67%
CINACALCET HCL 30 MG TABLET	Denied	5	83.33%
CIPRO HC OTIC SUSPENSION	Denied	4	100.00%
CITALOPRAM HBR 40 MG TABLET	Denied	1	100.00%
CLARAVIS 10 MG CAPSULE	Approved	1	100.00%
CLARAVIS 20 MG CAPSULE	Approved	3	100.00%
CLARAVIS 30 MG CAPSULE	Approved	13	86.67%
CLARAVIS 30 MG CAPSULE	Denied	2	13.33%
CLARAVIS 40 MG CAPSULE	Approved	26	76.47%
CLARAVIS 40 MG CAPSULE	Denied	8	23.53%
CLENPIQ SOLUTION	Denied	3	100.00%
CLIMARA PRO PATCH	Denied	3	100.00%
CLIND PH-BENZOYL PERO 1.2-2.5%	Denied	2	100.00%
CLIND PH-BENZOYL PEROX 1.2-5%	Approved	3	37.50%
CLIND PH-BENZOYL PEROX 1.2-5%	Denied	5	62.50%
CLINDAMYCIN HCL POWDER	Denied	1	100.00%
CLINDA-TRETINOIN 1.2%-0.025%	Denied	1	100.00%
CLOBAZAM 10 MG TABLET	Approved	1	100.00%
CLOBETASOL 0.05% CREAM	Approved	8	9.76%
CLOBETASOL 0.05% CREAM	Denied	74	90.24%
CLOBETASOL 0.05% GEL	Denied	3	100.00%
CLOBETASOL 0.05% OINTMENT	Approved	14	21.54%
CLOBETASOL 0.05% OINTMENT	Denied	51	78.46%
CLOBETASOL 0.05% SHAMPOO	Approved	1	20.00%
CLOBETASOL 0.05% SHAMPOO	Denied	4	80.00%
CLOBETASOL 0.05% SOLUTION	Approved	5	20.83%
CLOBETASOL 0.05% SOLUTION	Denied	19	79.17%
CLOBETASOL 0.05% TOPICAL LOTN	Denied	2	100.00%
CLOBETASOL EMOLLIENT 0.05% CRM	Approved	1	33.33%
CLOBETASOL EMOLLIENT 0.05% CRM	Denied	2	66.67%
CLOBETASOL EMOLLNT 0.05% FOAM	Denied	1	100.00%
CLOBETASOL PROP 0.05% FOAM	Approved	1	12.50%
CLOBETASOL PROP 0.05% FOAM	Denied	7	87.50%
CLOBETASOL PROP 0.05% SPRAY	Denied	3	100.00%
CLOMIPHENE CITRATE 50 MG TAB	Denied	3	100.00%
CLOMIPRAMINE 50 MG CAPSULE	Denied	1	100.00%
CLONAZEPAM 0.25 MG ODT	Approved	1	25.00%
CLONAZEPAM 0.25 MG ODT	Denied	3	75.00%
CLONAZEPAM 0.5 MG DIS TABLET	Denied	1	100.00%
CLONAZEPAM 1 MG DIS TABLET	Approved	1	100.00%
CLONIDINE HCL ER 0.1 MG TABLET	Denied	4	100.00%
COLCHICINE 0.6 MG CAPSULE	Approved	3	33.33%
COLCHICINE 0.6 MG CAPSULE	Denied	6	66.67%



COLCHICINE 0.6 MG TABLET	Approved	16	24.62%
COLCHICINE 0.6 MG TABLET	Denied	49	75.38%
COMBIGAN 0.2%-0.5% EYE DROPS	Approved	1	25.00%
COMBIGAN 0.2%-0.5% EYE DROPS	Denied	3	75.00%
COMBIPATCH 0.05-0.14 MG PTCH	Approved	2	66.67%
COMBIPATCH 0.05-0.14 MG PTCH	Denied	1	33.33%
COMBIPATCH 0.05-0.25 MG PTCH	Denied	2	100.00%
COMBIVENT RESPIMAT 20-100 MCG	Approved	1	20.00%
COMBIVENT RESPIMAT 20-100 MCG	Denied	4	80.00%
COMP-AIR NEBULIZER SYSTEM	Denied	1	100.00%
CONCERTA ER 18 MG TABLET	Denied	2	100.00%
CONCERTA ER 36 MG TABLET	Approved	1	50.00%
CONCERTA ER 36 MG TABLET	Denied	1	50.00%
CONDYLOX 0.5% GEL	Denied	1	100.00%
CONTOUR TES NEXT	Approved	1	100.00%
CONTOUR NEXT LINK METER	Approved	1	100.00%
CONTOUR NEXT TEST STRIP	Approved	12	75.00%
CONTOUR NEXT TEST STRIP	Denied	4	25.00%
CONTRAVE ER 8-90 MG TABLET	Denied	3	100.00%
COPAXONE INJ 40MG/ML	Denied	1	100.00%
COPAXONE 40 MG/ML SYRINGE	Approved	2	50.00%
COPAXONE 40 MG/ML SYRINGE	Denied	2	50.00%
CORDRAN 4 MCG/SQ CM TAPE LARGE	Denied	1	100.00%
CORLANOR 5 MG TABLET	Denied	1	100.00%
CORTISPORIN-TC EAR SUSPENSION	Denied	1	100.00%
COSENTYX 150 MG/ML PEN INJECT	Approved	3	50.00%
COSENTYX 150 MG/ML PEN INJECT	Denied	3	50.00%
COSENTYX 300 MG DOSE-2 PENS	Approved	2	50.00%
COSENTYX 300 MG DOSE-2 PENS	Denied	2	50.00%
COSENTYX 300 MG DOSE-2 SYRINGE	Approved	2	50.00%
COSENTYX 300 MG DOSE-2 SYRINGE	Denied	2	50.00%
COSOPT PF EYE DROPS	Denied	2	100.00%
CRESEMBA 186 MG CAPSULE	Approved	2	40.00%
CRESEMBA 186 MG CAPSULE	Denied	3	60.00%
CROMOLYN 20 MG/2 ML NEB SOLN	Denied	1	100.00%
CRYSVITA 20 MG/ML VIAL	Approved	1	100.00%
CYTOMEL 5 MCG TABLET	Approved	2	50.00%
CYTOMEL 5 MCG TABLET	Denied	2	50.00%
DALFAMPRIDINE ER 10 MG TABLET	Approved	1	25.00%
DALFAMPRIDINE ER 10 MG TABLET	Denied	3	75.00%
DAPSONE 5% GEL	Approved	1	16.67%
DAPSONE 5% GEL	Denied	5	83.33%
DAPSONE 7.5% GEL PUMP	Denied	2	100.00%
DAPTOMYCIN 500 MG VIAL	Denied	1	100.00%
DARIFENACIN ER 15 MG TABLET	Denied	4	100.00%
DAYTRANA 10 MG/9 HR PATCH	Approved	1	100.00%
DAYTRANA 20 MG/9 HOUR PATCH	Denied	1	100.00%

DAYVIGO 10 MG TABLET	Approved	1	33.33%
DAYVIGO 10 MG TABLET	Denied	2	66.67%
DAYVIGO 5 MG TABLET	Approved	2	10.53%
DAYVIGO 5 MG TABLET	Denied	17	89.47%
DENA VIR 1% CREAM	Approved	1	50.00%
DENA VIR 1% CREAM	Denied	1	50.00%
DEPAKOTE DR 500 MG TABLET	Approved	1	100.00%
DEPAKOTE ER 500 MG TABLET	Denied	1	100.00%
DEPO-ESTRADIOL 5 MG/ML VIAL	Approved	1	25.00%
DEPO-ESTRADIOL 5 MG/ML VIAL	Denied	3	75.00%
DEPO-TESTOSTERONE 100 MG/ML VL	Denied	1	100.00%
DEPO-TESTOSTERONE 200 MG/ML	Approved	1	100.00%
DESCOVY 200-25 MG TABLET	Approved	9	39.13%
DESCOVY 200-25 MG TABLET	Denied	14	60.87%
DESMOPRESSIN 10 MCG/0.1 ML SPR	Denied	1	100.00%
DESVENLAFAXINE ER 100 MG TAB	Denied	1	100.00%
DESVENLAFAXINE ER 50 MG TAB	Denied	2	100.00%
DESVENLAFAXINE SUCCNT ER 100MG	Approved	6	37.50%
DESVENLAFAXINE SUCCNT ER 100MG	Denied	10	62.50%
DESVENLAFAXINE SUCCNT ER 25 MG	Approved	3	27.27%
DESVENLAFAXINE SUCCNT ER 25 MG	Denied	8	72.73%
DESVENLAFAXINE SUCCNT ER 50 MG	Approved	11	39.29%
DESVENLAFAXINE SUCCNT ER 50 MG	Denied	17	60.71%
DEXCOM G6 RECEIVER	Denied	1	100.00%
DEXCOM G6 SENSOR	Denied	1	100.00%
DEXILANT DR 30 MG CAPSULE	Denied	1	100.00%
DEXILANT DR 60 MG CAPSULE	Approved	5	27.78%
DEXILANT DR 60 MG CAPSULE	Denied	13	72.22%
DEXMETHYLPHENIDATE 10 MG TAB	Denied	1	100.00%
DEXMETHYLPHENIDATE 5 MG TAB	Approved	1	100.00%
DEXMETHYLPHENIDATE ER 10 MG CP	Approved	2	66.67%
DEXMETHYLPHENIDATE ER 10 MG CP	Denied	1	33.33%
DEXMETHYLPHENIDATE ER 15 MG CP	Approved	2	50.00%
DEXMETHYLPHENIDATE ER 15 MG CP	Denied	2	50.00%
DEXMETHYLPHENIDATE ER 20 MG CP	Approved	1	25.00%
DEXMETHYLPHENIDATE ER 20 MG CP	Denied	3	75.00%
DEXMETHYLPHENIDATE ER 25 MG CP	Denied	3	100.00%
DEXMETHYLPHENIDATE ER 5 MG CAP	Denied	4	100.00%
DEXTROAMP-AMPHET ER 10 MG CAP	Approved	6	37.50%
DEXTROAMP-AMPHET ER 10 MG CAP	Denied	10	62.50%
DEXTROAMP-AMPHET ER 15 MG CAP	Denied	6	100.00%
DEXTROAMP-AMPHET ER 20 MG CAP	Approved	15	57.69%
DEXTROAMP-AMPHET ER 20 MG CAP	Denied	11	42.31%
DEXTROAMP-AMPHET ER 25 MG CAP	Approved	1	25.00%
DEXTROAMP-AMPHET ER 25 MG CAP	Denied	3	75.00%
DEXTROAMP-AMPHET ER 30 MG CAP	Approved	8	34.78%
DEXTROAMP-AMPHET ER 30 MG CAP	Denied	15	65.22%

DEXTROAMP-AMPHET ER 5 MG CAP	Approved	1	20.00%
DEXTROAMP-AMPHET ER 5 MG CAP	Denied	4	80.00%
DIAZEPAM 10 MG RECTAL GEL SYST	Denied	6	100.00%
DICLEGIS DR 10-10 MG TABLET	Approved	1	50.00%
DICLEGIS DR 10-10 MG TABLET	Denied	1	50.00%
DICLOFENAC 35 MG CAPSULE	Denied	1	100.00%
DICLOFENAC EPOLAMINE 1.3% PTCH	Denied	1	100.00%
DICLOFENAC SODIUM 3% GEL	Denied	1	100.00%
DIFICID 200 MG TABLET	Approved	2	20.00%
DIFICID 200 MG TABLET	Denied	8	80.00%
DIMETHYL FUMARATE 30D START PK	Approved	1	100.00%
DIOVAN HCT 160-12.5 MG TAB	Denied	2	100.00%
DIVIGEL 0.25 MG GEL PACKET	Denied	1	100.00%
DIVIGEL 0.5 MG GEL PACKET	Approved	1	100.00%
DIVIGEL 0.75 MG GEL PACKET	Approved	1	100.00%
DIVIGEL 1 MG GEL PACKET	Approved	2	66.67%
DIVIGEL 1 MG GEL PACKET	Denied	1	33.33%
DOTTI 0.025 MG PATCH	Denied	1	100.00%
DOTTI 0.1 MG PATCH	Denied	1	100.00%
DOXEPIN HCL 3 MG TABLET	Approved	1	33.33%
DOXEPIN HCL 3 MG TABLET	Denied	2	66.67%
DOXEPIN HCL 6 MG TABLET	Denied	3	100.00%
DOXYCYCLINE 50 MG TABLET	Denied	2	100.00%
DOXYCYCLINE HCL DR 200 MG TAB	Denied	2	100.00%
DOXYCYCLINE HCL DR 50 MG TAB	Denied	3	100.00%
DOXYCYCLINE IR-DR 40 MG CAP	Denied	1	100.00%
DOXYCYCLINE MONO 100 MG TABLET	Denied	3	100.00%
DOXYCYCLINE MONO 75 MG CAPSULE	Denied	1	100.00%
DOXYLAMINE-PYRIDOXINE 10-10 MG	Approved	1	100.00%
DRYSOL DAB-O-MATIC SOLUTION	Approved	2	40.00%
DRYSOL DAB-O-MATIC SOLUTION	Denied	3	60.00%
DRYSOL SOLUTION	Approved	1	100.00%
DUEXIS 800-26.6 MG TABLET	Approved	2	28.57%
DUEXIS 800-26.6 MG TABLET	Denied	5	71.43%
DULERA 100 MCG-5 MCG INHALER	Approved	2	15.38%
DULERA 100 MCG-5 MCG INHALER	Denied	11	84.62%
DULERA 200 MCG-5 MCG INHALER	Approved	5	41.67%
DULERA 200 MCG-5 MCG INHALER	Denied	7	58.33%
DULOXETINE HCL DR 20 MG CAP	Approved	2	50.00%
DULOXETINE HCL DR 20 MG CAP	Denied	2	50.00%
DULOXETINE HCL DR 30 MG CAP	Approved	3	33.33%
DULOXETINE HCL DR 30 MG CAP	Denied	6	66.67%
DULOXETINE HCL DR 40 MG CAP	Approved	3	30.00%
DULOXETINE HCL DR 40 MG CAP	Denied	7	70.00%
DUOBRII 0.01%-0.045% LOTION	Denied	2	100.00%
DUPIXENT 200 MG/1.14 ML PEN	Denied	1	100.00%
DUPIXENT 200 MG/1.14 ML SYRING	Approved	1	33.33%

DUPIXENT 200 MG/1.14 ML SYRINGE	Denied	2	66.67%
DUPIXENT 300 MG/2 ML PEN	Approved	8	28.57%
DUPIXENT 300 MG/2 ML PEN	Denied	20	71.43%
DUPIXENT 300 MG/2 ML SYRINGE	Approved	19	48.72%
DUPIXENT 300 MG/2 ML SYRINGE	Denied	20	51.28%
DUREZOL 0.05% EYE DROPS	Approved	1	25.00%
DUREZOL 0.05% EYE DROPS	Denied	3	75.00%
DUROLANE 60 MG/3 ML SYRINGE	Denied	2	100.00%
DUTASTERIDE-TAMSULOSIN 0.5-0.4	Denied	1	100.00%
DYSPORT 300 UNIT VIAL	Approved	1	33.33%
DYSPORT 300 UNIT VIAL	Denied	2	66.67%
DYSPORT 500 UNITS VIAL	Approved	1	50.00%
DYSPORT 500 UNITS VIAL	Denied	1	50.00%
EDARBYCLOR 40-25 MG TABLET	Approved	1	100.00%
EFFEXOR XR 150 MG CAPSULE	Approved	1	50.00%
EFFEXOR XR 150 MG CAPSULE	Denied	1	50.00%
ELETRIPTAN HBR 20 MG TABLET	Approved	2	40.00%
ELETRIPTAN HBR 20 MG TABLET	Denied	3	60.00%
ELETRIPTAN HBR 40 MG TABLET	Approved	2	33.33%
ELETRIPTAN HBR 40 MG TABLET	Denied	4	66.67%
ELIDEL 1% CREAM	Denied	3	100.00%
ELIGARD 22.5 MG SYRINGE KIT	Approved	1	100.00%
ELIQUIS 5 MG TABLET	Approved	1	25.00%
ELIQUIS 5 MG TABLET	Denied	3	75.00%
ELMIRON 100 MG CAPSULE	Approved	3	33.33%
ELMIRON 100 MG CAPSULE	Denied	6	66.67%
ELOCTATE 4,000 UNIT NOMINAL	Approved	1	100.00%
ELURYNG VAGINAL RING	Denied	2	100.00%
EMGALITY 100 MG/ML SYR(1 OF 3)	Approved	2	50.00%
EMGALITY 100 MG/ML SYR(1 OF 3)	Denied	2	50.00%
EMGALITY 120 MG/ML PEN	Approved	27	49.09%
EMGALITY 120 MG/ML PEN	Denied	28	50.91%
EMGALITY 120 MG/ML SYRINGE	Approved	3	42.86%
EMGALITY 120 MG/ML SYRINGE	Denied	4	57.14%
EMGALITY 300 MG (100 MG X3SYR)	Approved	3	60.00%
EMGALITY 300 MG (100 MG X3SYR)	Denied	2	40.00%
EMTRICITABINE 200 MG CAPSULE	Denied	1	100.00%
EMTRICITABINE-TENOFV 200-300MG	Approved	71	87.65%
EMTRICITABINE-TENOFV 200-300MG	Denied	10	12.35%
EMVERM 100 MG TABLET CHEW	Denied	1	100.00%
ENBREL 50 MG/ML MINI CARTRIDGE	Approved	1	100.00%
ENBREL 50 MG/ML SURECLICK	Approved	30	81.08%
ENBREL 50 MG/ML SURECLICK	Denied	7	18.92%
ENBREL 50 MG/ML SYRINGE	Approved	5	50.00%
ENBREL 50 MG/ML SYRINGE	Denied	5	50.00%
ENDOMETRIN 100 MG VAG INSERT	Denied	1	100.00%
ENSTILAR 0.005%-0.064% FOAM	Denied	2	100.00%

ENTECAVIR 0.5 MG TABLET	Approved	4	57.14%
ENTECAVIR 0.5 MG TABLET	Denied	3	42.86%
ENTRESTO 24 MG-26 MG TABLET	Approved	10	55.56%
ENTRESTO 24 MG-26 MG TABLET	Denied	8	44.44%
ENTRESTO 49 MG-51 MG TABLET	Approved	3	60.00%
ENTRESTO 49 MG-51 MG TABLET	Denied	2	40.00%
ENTRESTO 97 MG-103 MG TABLET	Approved	3	100.00%
ENTYVIO 300 MG VIAL	Approved	5	45.45%
ENTYVIO 300 MG VIAL	Denied	6	54.55%
ENVARUSUS XR 0.75 MG TABLET	Approved	2	66.67%
ENVARUSUS XR 0.75 MG TABLET	Denied	1	33.33%
ENVARUSUS XR 1 MG TABLET	Approved	1	100.00%
EPCLUSA 400 MG-100 MG TABLET	Denied	1	100.00%
EPIDUO FORTE 0.3-2.5% GEL PUMP	Approved	2	20.00%
EPIDUO FORTE 0.3-2.5% GEL PUMP	Denied	8	80.00%
EPINEPHRINE 0.3 MG AUTO-INJECT	Denied	1	100.00%
EPIPEN 2-PAK 0.3 MG AUTO-INJCT	Denied	1	100.00%
ERLEADA 60 MG TABLET	Denied	1	100.00%
ERYTHROMYCIN DR 500 MG TABLET	Denied	1	100.00%
ESBRIET 801 MG TABLET	Denied	1	100.00%
ESCITALOPRAM 10 MG TABLET	Approved	2	28.57%
ESCITALOPRAM 10 MG TABLET	Denied	5	71.43%
ESCITALOPRAM 20 MG TABLET	Approved	13	52.00%
ESCITALOPRAM 20 MG TABLET	Denied	12	48.00%
ESCITALOPRAM 5 MG TABLET	Approved	1	25.00%
ESCITALOPRAM 5 MG TABLET	Denied	3	75.00%
ESOMEPRAZOLE DR 10 MG PACKET	Approved	1	100.00%
ESOMEPRAZOLE DR 20 MG PACKET	Denied	1	100.00%
ESOMEPRAZOLE MAG DR 20 MG CAP	Denied	6	100.00%
ESOMEPRAZOLE MAG DR 40 MG CAP	Approved	2	9.52%
ESOMEPRAZOLE MAG DR 40 MG CAP	Denied	19	90.48%
ESTRADIOL 0.01% CREAM	Denied	2	100.00%
ESTRADIOL 0.025 MG PATCH(1/WK)	Denied	1	100.00%
ESTRADIOL 0.025 MG PATCH(2/WK)	Approved	1	100.00%
ESTRADIOL 0.05 MG PATCH (2/WK)	Approved	1	33.33%
ESTRADIOL 0.05 MG PATCH (2/WK)	Denied	2	66.67%
ESTRADIOL 0.1 MG PATCH (1/WK)	Approved	1	50.00%
ESTRADIOL 0.1 MG PATCH (1/WK)	Denied	1	50.00%
ESTRADIOL 0.1 MG PATCH (2/WK)	Approved	1	25.00%
ESTRADIOL 0.1 MG PATCH (2/WK)	Denied	3	75.00%
ESTRADIOL 10 MCG VAGINAL INSRT	Approved	3	10.34%
ESTRADIOL 10 MCG VAGINAL INSRT	Denied	26	89.66%
ESTRING 2 MG VAGINAL RING	Approved	2	15.38%
ESTRING 2 MG VAGINAL RING	Denied	11	84.62%
ESTROGEL 0.06% GEL	Approved	1	25.00%
ESTROGEL 0.06% GEL	Denied	3	75.00%
ESTROGEN-METHYLTESTOS F.S. TAB	Denied	2	100.00%

ESZOPICLONE 1 MG TABLET	Approved	2	25.00%
ESZOPICLONE 1 MG TABLET	Denied	6	75.00%
ESZOPICLONE 2 MG TABLET	Approved	2	11.76%
ESZOPICLONE 2 MG TABLET	Denied	15	88.24%
ESZOPICLONE 3 MG TABLET	Approved	4	26.67%
ESZOPICLONE 3 MG TABLET	Denied	11	73.33%
EUCRISA 2% OINTMENT	Approved	4	66.67%
EUCRISA 2% OINTMENT	Denied	2	33.33%
EUFLEXXA 20 MG/2 ML SYRINGE	Denied	1	100.00%
EZETIMIBE-SIMVASTATIN 10-40 MG	Denied	1	100.00%
EZETIMIBE-SIMVASTATIN 10-80 MG	Denied	2	100.00%
FARXIGA 10 MG TABLET	Approved	11	42.31%
FARXIGA 10 MG TABLET	Denied	15	57.69%
FARXIGA 5 MG TABLET	Approved	5	41.67%
FARXIGA 5 MG TABLET	Denied	7	58.33%
FASENRA 30 MG/ML SYRINGE	Approved	1	50.00%
FASENRA 30 MG/ML SYRINGE	Denied	1	50.00%
FASENRA PEN 30 MG/ML	Approved	1	100.00%
FEBUXOSTAT 40 MG TABLET	Approved	2	100.00%
FEBUXOSTAT 80 MG TABLET	Approved	1	50.00%
FEBUXOSTAT 80 MG TABLET	Denied	1	50.00%
FEM PH VAGINAL JELLY	Denied	1	100.00%
FENOFIBRATE 120 MG TABLET	Denied	2	100.00%
FENTANYL 12 MCG/HR PATCH	Approved	5	83.33%
FENTANYL 12 MCG/HR PATCH	Denied	1	16.67%
FENTANYL 25 MCG/HR PATCH	Approved	8	66.67%
FENTANYL 25 MCG/HR PATCH	Denied	4	33.33%
FENTANYL 37.5 MCG/HR PATCH	Approved	2	66.67%
FENTANYL 37.5 MCG/HR PATCH	Denied	1	33.33%
FENTANYL 50 MCG/HR PATCH	Approved	2	100.00%
FENTANYL 75 MCG/HR PATCH	Approved	2	66.67%
FENTANYL 75 MCG/HR PATCH	Denied	1	33.33%
FERROUS SULF 220 MG/5 ML ELIX	Denied	1	100.00%
FETZIMA ER 20 MG CAPSULE	Approved	1	100.00%
FINACEA 15% GEL	Approved	1	50.00%
FINACEA 15% GEL	Denied	1	50.00%
FINASTERIDE 1 MG TABLET	Denied	8	100.00%
FIRAZYR 30 MG/3 ML SYRINGE	Approved	1	100.00%
FLOVENT HFA 110 MCG INHALER	Approved	7	16.67%
FLOVENT HFA 110 MCG INHALER	Denied	35	83.33%
FLOVENT HFA 220 MCG INHALER	Approved	2	11.76%
FLOVENT HFA 220 MCG INHALER	Denied	15	88.24%
FLOVENT HFA 44 MCG INHALER	Approved	7	22.58%
FLOVENT HFA 44 MCG INHALER	Denied	24	77.42%
FLUOCINOLONE 0.01% BODY OIL	Denied	6	100.00%
FLUOCINONIDE 0.05% CREAM	Denied	12	100.00%
FLUOCINONIDE 0.1% CREAM	Approved	1	12.50%

FLUOCINONIDE 0.1% CREAM	Denied	7	87.50%
FLUOROURACIL 0.5% CREAM	Denied	1	100.00%
FLUOXETINE HCL 10 MG TABLET	Approved	3	23.08%
FLUOXETINE HCL 10 MG TABLET	Denied	10	76.92%
FLUOXETINE HCL 20 MG TABLET	Approved	1	12.50%
FLUOXETINE HCL 20 MG TABLET	Denied	7	87.50%
FLUOXETINE HCL 60 MG TABLET	Approved	1	20.00%
FLUOXETINE HCL 60 MG TABLET	Denied	4	80.00%
FLURANDRENOLIDE 0.05% CREAM	Denied	1	100.00%
FLURBIPROFEN 100 MG TABLET	Approved	1	50.00%
FLURBIPROFEN 100 MG TABLET	Denied	1	50.00%
FLUTICASONE-SALMETEROL 100-50	Approved	2	20.00%
FLUTICASONE-SALMETEROL 100-50	Denied	8	80.00%
FLUTICASONE-SALMETEROL 113-14	Denied	1	100.00%
FLUTICASONE-SALMETEROL 232-14	Denied	1	100.00%
FLUTICASONE-SALMETEROL 250-50	Approved	8	33.33%
FLUTICASONE-SALMETEROL 250-50	Denied	16	66.67%
FLUTICASONE-SALMETEROL 500-50	Approved	3	20.00%
FLUTICASONE-SALMETEROL 500-50	Denied	12	80.00%
FLUVOXAMINE ER 100 MG CAPSULE	Denied	1	100.00%
FLUVOXAMINE MALEATE 100 MG TAB	Approved	2	50.00%
FLUVOXAMINE MALEATE 100 MG TAB	Denied	2	50.00%
FLUVOXAMINE MALEATE 50 MG TAB	Approved	2	25.00%
FLUVOXAMINE MALEATE 50 MG TAB	Denied	6	75.00%
FOCALIN XR 10 MG CAPSULE	Approved	1	50.00%
FOCALIN XR 10 MG CAPSULE	Denied	1	50.00%
FOCALIN XR 15 MG CAPSULE	Approved	1	100.00%
FOLIC ACID 1 MG TABLET	Approved	6	60.00%
FOLIC ACID 1 MG TABLET	Denied	4	40.00%
FORTEO 600 MCG/2.4 ML PEN INJ	Approved	3	60.00%
FORTEO 600 MCG/2.4 ML PEN INJ	Denied	2	40.00%
FORTEO 620 MCG/2.48 ML PEN INJ	Approved	6	60.00%
FORTEO 620 MCG/2.48 ML PEN INJ	Denied	4	40.00%
FREESTYLE LIBRE 14 DAY READER	Denied	1	100.00%
FREESTYLE LITE TEST STRIP	Denied	1	100.00%
FREESTYLE TEST STRIPS	Approved	1	100.00%
FROVATRIPTAN SUCC 2.5 MG TAB	Approved	1	25.00%
FROVATRIPTAN SUCC 2.5 MG TAB	Denied	3	75.00%
GABAPENTIN 600 MG TABLET	Approved	1	50.00%
GABAPENTIN 600 MG TABLET	Denied	1	50.00%
GALZIN 50 MG CAPSULE	Denied	2	100.00%
GAMMAGARD LIQUID 10% VIAL	Approved	1	25.00%
GAMMAGARD LIQUID 10% VIAL	Denied	3	75.00%
GAMUNEX-C 40 GRAM/400 ML VIAL	Approved	1	100.00%
GEL-ONE 30 MG/3 ML SYRINGE	Denied	5	100.00%
GEMMILY 1 MG-20 MCG CAPSULE	Approved	1	100.00%
GEMTESA 75 MG TABLET	Denied	1	100.00%

GENOTROPIN 12 MG CARTRIDGE	Approved	1	50.00%
GENOTROPIN 12 MG CARTRIDGE	Denied	1	50.00%
GILENYA 0.5 MG CAPSULE	Approved	4	80.00%
GILENYA 0.5 MG CAPSULE	Denied	1	20.00%
GLATIRAMER 40 MG/ML SYRINGE	Approved	2	50.00%
GLATIRAMER 40 MG/ML SYRINGE	Denied	2	50.00%
GLATOPA 20 MG/ML SYRINGE	Approved	1	100.00%
GLATOPA 40 MG/ML SYRINGE	Denied	1	100.00%
GLEEVEC 400 MG TABLET	Approved	3	60.00%
GLEEVEC 400 MG TABLET	Denied	2	40.00%
GLEOSTINE 100 MG CAPSULE	Approved	1	100.00%
GLIPIZIDE ER 10 MG TABLET	Denied	1	100.00%
GLUCAGON 1 MG EMERGENCY KIT	Denied	3	100.00%
GRALISE ER 600 MG TABLET	Denied	8	100.00%
GUARDIAN SENSOR 3	Approved	1	25.00%
GUARDIAN SENSOR 3	Denied	3	75.00%
GVOKE HYOPEN 1-PK 1 MG/0.2 ML	Approved	1	100.00%
GVOKE HYOPEN 2-PK 1 MG/0.2 ML	Denied	2	100.00%
GVOKE PFS 2-PK 1 MG/0.2 ML SYR	Denied	1	100.00%
HEMLIBRA 150 MG/ML VIAL	Denied	1	100.00%
HEPARIN 50 UNITS/5 ML (10/ML)	Denied	1	100.00%
HIZENTRA 10 GRAM/50 ML VIAL	Approved	1	100.00%
HORIZANT ER 300 MG TABLET	Denied	2	100.00%
HORIZANT ER 600 MG TABLET	Denied	1	100.00%
HUMALOG 100 UNIT/ML CARTRIDGE	Approved	1	50.00%
HUMALOG 100 UNIT/ML CARTRIDGE	Denied	1	50.00%
HUMALOG 100 UNIT/ML KWIKPEN	Approved	1	12.50%
HUMALOG 100 UNIT/ML KWIKPEN	Denied	7	87.50%
HUMALOG 100 UNIT/ML VIAL	Approved	3	15.79%
HUMALOG 100 UNIT/ML VIAL	Denied	16	84.21%
HUMALOG JR 100 UNIT/ML KWIKPEN	Approved	1	25.00%
HUMALOG JR 100 UNIT/ML KWIKPEN	Denied	3	75.00%
HUMIRA 40 MG/0.8 ML SYRINGE	Approved	1	33.33%
HUMIRA 40 MG/0.8 ML SYRINGE	Denied	2	66.67%
HUMIRA PEN 40 MG/0.8 ML	Approved	1	100.00%
HUMIRA PEN CROHN-UC-HS 40 MG	Approved	1	100.00%
HUMIRA(CF) 40 MG/0.4 ML SYRING	Approved	8	72.73%
HUMIRA(CF) 40 MG/0.4 ML SYRING	Denied	3	27.27%
HUMIRA(CF) PEN 40 MG/0.4 ML	Approved	45	67.16%
HUMIRA(CF) PEN 40 MG/0.4 ML	Denied	22	32.84%
HUMIRA(CF) PEN 80 MG/0.8 ML	Approved	2	66.67%
HUMIRA(CF) PEN 80 MG/0.8 ML	Denied	1	33.33%
HUMIRA(CF) PEN CRHN-UC-HS 80MG	Approved	5	55.56%
HUMIRA(CF) PEN CRHN-UC-HS 80MG	Denied	4	44.44%
HUMIRA(CF) PEN PS-UV-AHS 80-40	Denied	6	100.00%
HUMULIN 70/30 KWIKPEN	Approved	1	100.00%
HUMULIN N 100 UNIT/ML KWIKPEN	Denied	1	100.00%



HUMULIN N 100 UNIT/ML VIAL	Approved	1	16.67%
HUMULIN N 100 UNIT/ML VIAL	Denied	5	83.33%
HUMULIN R 500 UNIT/ML VIAL	Approved	1	100.00%
HYALUR 0.5%-NIA4%-TRETINO.025%	Denied	1	100.00%
HYDROCODONE-ACETAMIN 10-325 MG	Approved	18	81.82%
HYDROCODONE-ACETAMIN 10-325 MG	Denied	4	18.18%
HYDROCODONE-ACETAMIN 5-300 MG	Denied	1	100.00%
HYDROCODONE-ACETAMIN 5-325 MG	Approved	18	66.67%
HYDROCODONE-ACETAMIN 5-325 MG	Denied	9	33.33%
HYDROCODONE-ACETAMIN 7.5-300	Denied	1	100.00%
HYDROCODONE-ACETAMIN 7.5-325	Approved	10	71.43%
HYDROCODONE-ACETAMIN 7.5-325	Denied	4	28.57%
HYDROCODONE-CHLORPHEN ER SUSP	Denied	2	100.00%
HYDROCORTISON-ACETIC ACID SOLN	Denied	1	100.00%
HYDROCORTISONE AC 25 MG SUPP	Denied	3	100.00%
HYDROCORTISONE AC 30 MG SUPP	Approved	1	50.00%
HYDROCORTISONE AC 30 MG SUPP	Denied	1	50.00%
HYDROCORT-PRAMOXINE 2.5-1% CRM	Denied	1	100.00%
HYDROMORPHONE 2 MG TABLET	Approved	5	55.56%
HYDROMORPHONE 2 MG TABLET	Denied	4	44.44%
HYDROMORPHONE 4 MG TABLET	Approved	4	100.00%
HYDROQUINONE 4% CREAM	Denied	1	100.00%
HYDROXYPROGEST 250 MG/ML VIAL	Approved	1	100.00%
HYOSCYAMINE ER 0.375 MG TAB	Denied	1	100.00%
IBANDRONATE SODIUM 150 MG TAB	Denied	15	100.00%
IBRANCE 100 MG TABLET	Approved	2	66.67%
IBRANCE 100 MG TABLET	Denied	1	33.33%
IBRANCE 125 MG TABLET	Approved	6	85.71%
IBRANCE 125 MG TABLET	Denied	1	14.29%
IBRANCE 75 MG TABLET	Approved	1	100.00%
IBUPROFEN-FAMOTIDIN 800-26.6MG	Denied	2	100.00%
ICLUSIG 30 MG TABLET	Approved	1	100.00%
ICOSAPENT ETHYL 1 GRAM CAPSULE	Approved	2	25.00%
ICOSAPENT ETHYL 1 GRAM CAPSULE	Denied	6	75.00%
ILUMYA 100 MG/ML SYRINGE	Denied	1	100.00%
IMATINIB MESYLATE 100 MG TAB	Approved	1	50.00%
IMATINIB MESYLATE 100 MG TAB	Denied	1	50.00%
IMATINIB MESYLATE 400 MG TAB	Approved	1	100.00%
IMBRUVICA 420 MG TABLET	Approved	2	100.00%
IMIQUIMOD 5% CREAM PACKET	Denied	2	100.00%
IMURAN 50 MG TABLET	Denied	1	100.00%
IMVEXXY 10 MCG MAINTENANCE PAK	Approved	1	14.29%
IMVEXXY 10 MCG MAINTENANCE PAK	Denied	6	85.71%
IMVEXXY 10 MCG STARTER PACK	Denied	2	100.00%
IMVEXXY 4 MCG MAINTENANCE PACK	Denied	2	100.00%
IMVEXXY 4 MCG STARTER PACK	Denied	1	100.00%
INCRUSE ELLIPTA 62.5 MCG INH	Denied	2	100.00%

INDOMETHACIN ER 75 MG CAPSULE	Denied	2	100.00%
INFED 100 MG/2 ML VIAL	Approved	1	100.00%
INGREZZA 40 MG CAPSULE	Approved	1	100.00%
INGREZZA 80 MG CAPSULE	Approved	1	100.00%
INQOVI 35 MG-100 MG TABLET	Approved	1	100.00%
INSULIN ASPART PROT-INSULN ASP	Denied	1	100.00%
INSULIN LISPRO 100 UNIT/ML PEN	Approved	2	33.33%
INSULIN LISPRO 100 UNIT/ML PEN	Denied	4	66.67%
INSULIN LISPRO 100 UNIT/ML VL	Denied	3	100.00%
INTRAROSA 6.5 MG VAG INSERT	Denied	1	100.00%
INTUNIV ER 2 MG TABLET	Denied	2	100.00%
INVEGA SUSTENNA 234 MG/1.5 ML	Approved	1	100.00%
INVEGA TRINZA 819 MG/2.625 ML	Approved	1	100.00%
INVOKANA 100 MG TABLET	Approved	2	33.33%
INVOKANA 100 MG TABLET	Denied	4	66.67%
INVOKANA 300 MG TABLET	Approved	4	80.00%
INVOKANA 300 MG TABLET	Denied	1	20.00%
IPRATROPIUM 0.06% SPRAY	Denied	1	100.00%
ISOTRETINOIN 20 MG CAPSULE	Approved	1	33.33%
ISOTRETINOIN 20 MG CAPSULE	Denied	2	66.67%
ISOTRETINOIN 30 MG CAPSULE	Approved	4	50.00%
ISOTRETINOIN 30 MG CAPSULE	Denied	4	50.00%
ISOTRETINOIN 40 MG CAPSULE	Approved	14	63.64%
ISOTRETINOIN 40 MG CAPSULE	Denied	8	36.36%
ITRACONAZOLE 10 MG/ML SOLUTION	Approved	1	100.00%
ITRACONAZOLE 100 MG CAPSULE	Denied	6	100.00%
IVERMECTIN 1% CREAM	Approved	1	50.00%
IVERMECTIN 1% CREAM	Denied	1	50.00%
IVERMECTIN 3 MG TABLET	Denied	8	100.00%
JAKAFI 10 MG TABLET	Approved	2	100.00%
JANSSEN COVID-19 VACCINE (EUA)	Denied	1	100.00%
JANUMET 50-1,000 MG TABLET	Denied	1	100.00%
JANUMET XR 100-1,000 MG TABLET	Approved	1	100.00%
JANUMET XR 50-1,000 MG TABLET	Approved	6	66.67%
JANUMET XR 50-1,000 MG TABLET	Denied	3	33.33%
JANUVIA 50 MG TABLET	Denied	2	100.00%
JARDIANCE 10 MG TABLET	Approved	6	75.00%
JARDIANCE 10 MG TABLET	Denied	2	25.00%
JARDIANCE 25 MG TABLET	Approved	4	66.67%
JARDIANCE 25 MG TABLET	Denied	2	33.33%
JUBLIA 10% TOPICAL SOLUTION	Denied	4	100.00%
JULUCA 50-25 MG TABLET	Denied	1	100.00%
KAPSPARGO SPRINKLE 50 MG CAP	Approved	1	100.00%
KATERZIA 1 MG/ML SUSPENSION	Approved	2	100.00%
KESIMPTA 20 MG/0.4 ML PEN	Denied	3	100.00%
KETOCONAZOLE 2% FOAM	Denied	1	100.00%
KETOCONAZOLE 200 MG TABLET	Denied	3	100.00%

KETOPROFEN 25 MG CAPSULE	Approved	1	100.00%
KEVZARA 200 MG/1.14 ML PEN INJ	Approved	2	66.67%
KEVZARA 200 MG/1.14 ML PEN INJ	Denied	1	33.33%
KLISYRI 1% OINTMENT PACKET	Denied	7	100.00%
KRINTAFEL 150 MG TABLET	Denied	4	100.00%
KRO PEN NEEDLE 4MM X 33G	Approved	1	100.00%
LAMICTAL 100 MG TABLET	Approved	1	100.00%
LAMICTAL 200 MG TABLET	Denied	1	100.00%
LAMOTRIGINE ODT 50 MG TABLET	Denied	2	100.00%
LAMOTRIGINE TAB START KT-ORANG	Approved	1	50.00%
LAMOTRIGINE TAB START KT-ORANG	Denied	1	50.00%
LANSOPRAZOL-AMOXICIL-CLARITHRO	Denied	3	100.00%
LANSOPRAZOLE DR 15 MG CAPSULE	Denied	3	100.00%
LANSOPRAZOLE DR 30 MG CAPSULE	Approved	2	100.00%
LANSOPRAZOLE ODT 15 MG TABLET	Denied	2	100.00%
LANSOPRAZOLE SUS 3MG/ML	Denied	1	100.00%
LANTHANUM CARB 500 MG TAB CHEW	Approved	1	100.00%
LATUDA 20 MG TABLET	Approved	7	23.33%
LATUDA 20 MG TABLET	Denied	23	76.67%
LATUDA 40 MG TABLET	Approved	3	21.43%
LATUDA 40 MG TABLET	Denied	11	78.57%
LATUDA 60 MG TABLET	Approved	3	50.00%
LATUDA 60 MG TABLET	Denied	3	50.00%
LATUDA 80 MG TABLET	Approved	1	14.29%
LATUDA 80 MG TABLET	Denied	6	85.71%
LETROZOLE 2.5 MG TABLET	Denied	1	100.00%
LEUPROLIDE 2WK 1 MG/0.2 ML KIT	Approved	1	100.00%
LEUPROLIDE 2WK 14 MG/2.8 ML KT	Denied	4	100.00%
LEVALBUTEROL 1.25 MG/3 ML SOL	Approved	2	50.00%
LEVALBUTEROL 1.25 MG/3 ML SOL	Denied	2	50.00%
LEVALBUTEROL TAR HFA 45MCG INH	Approved	3	16.67%
LEVALBUTEROL TAR HFA 45MCG INH	Denied	15	83.33%
LEVOCARNITINE 330 MG TABLET	Approved	1	100.00%
LEVOTHYROXINE 150 MCG CAPSULE	Approved	1	100.00%
LEVOTHYROXINE 25 MCG CAPSULE	Denied	1	100.00%
LEVOTHYROXINE 75 MCG CAPSULE	Denied	1	100.00%
LIDOCAINE 5% PATCH	Approved	20	20.20%
LIDOCAINE 5% PATCH	Denied	79	79.80%
LIDOCAINE-HC 2.8-0.55% GEL	Denied	1	100.00%
LIDOCAINE-HC 3-0.5% CREAM	Denied	1	100.00%
LINZESS 145 MCG CAPSULE	Approved	9	42.86%
LINZESS 145 MCG CAPSULE	Denied	12	57.14%
LINZESS 290 MCG CAPSULE	Approved	4	30.77%
LINZESS 290 MCG CAPSULE	Denied	9	69.23%
LINZESS 72 MCG CAPSULE	Approved	3	25.00%
LINZESS 72 MCG CAPSULE	Denied	9	75.00%
LITHIUM CARBONATE 300 MG CAP	Denied	1	100.00%

LIVALO 2 MG TABLET	Approved	3	50.00%
LIVALO 2 MG TABLET	Denied	3	50.00%
LIVALO 4 MG TABLET	Denied	4	100.00%
LO LOESTRIN FE 1-10 TABLET	Approved	7	33.33%
LO LOESTRIN FE 1-10 TABLET	Denied	14	66.67%
LOKELMA 10 GRAM POWDER PACKET	Approved	1	50.00%
LOKELMA 10 GRAM POWDER PACKET	Denied	1	50.00%
LOPROX 1% SHAMPOO	Denied	1	100.00%
LOSARTAN POTASSIUM 100 MG TAB	Approved	1	100.00%
LOSARTAN POTASSIUM 25 MG TAB	Denied	1	100.00%
LOTEMAX 0.5% EYE DROPS	Denied	4	100.00%
LOTEMAX 0.5% OPHTHALMIC GEL	Approved	1	33.33%
LOTEMAX 0.5% OPHTHALMIC GEL	Denied	2	66.67%
LOTEPREDNOL ETABONATE 0.5% DRP	Approved	1	16.67%
LOTEPREDNOL ETABONATE 0.5% DRP	Denied	5	83.33%
LUBIPROSTONE 24 MCG CAPSULE	Approved	2	25.00%
LUBIPROSTONE 24 MCG CAPSULE	Denied	6	75.00%
LUBIPROSTONE 24MCG CAPSULE	Approved	1	100.00%
LUBIPROSTONE 8 MCG CAPSULE	Approved	1	33.33%
LUBIPROSTONE 8 MCG CAPSULE	Denied	2	66.67%
LUMIGAN 0.01% EYE DROPS	Approved	2	28.57%
LUMIGAN 0.01% EYE DROPS	Denied	5	71.43%
LUNESTA 3 MG TABLET	Denied	1	100.00%
LUPRON DEPOT 3.75 MG KIT	Approved	2	33.33%
LUPRON DEPOT 3.75 MG KIT	Denied	4	66.67%
LUPRON DEPOT-PED 11.25 MG 3MO	Denied	1	100.00%
LUPRON DEPOT-PED 30 MG 3MO KIT	Approved	1	100.00%
LYNPARZA 100 MG TABLET	Approved	1	100.00%
LYRICA 100 MG CAPSULE	Denied	1	100.00%
LYRICA 50 MG CAPSULE	Denied	2	100.00%
LYRICA 75 MG CAPSULE	Denied	1	100.00%
LYUMJEV 100 UNIT/ML KWIKPEN	Approved	1	33.33%
LYUMJEV 100 UNIT/ML KWIKPEN	Denied	2	66.67%
LYUMJEV 100 UNIT/ML VIAL	Approved	1	50.00%
LYUMJEV 100 UNIT/ML VIAL	Denied	1	50.00%
MAKENA 275 MG/1.1 ML AUTOINJCT	Approved	1	50.00%
MAKENA 275 MG/1.1 ML AUTOINJCT	Denied	1	50.00%
MATULANE 50 MG CAPSULE	Approved	1	100.00%
MAVYRET 100-40 MG TABLET	Approved	3	75.00%
MAVYRET 100-40 MG TABLET	Denied	1	25.00%
MAXALT MLT 10 MG TABLET	Approved	1	100.00%
MAXZIDE 75 MG-50 MG TABLET	Approved	1	100.00%
MAYZENT 2 MG TABLET	Denied	1	100.00%
M-DRYL 12.5 MG/5 ML SOLUTION	Denied	1	100.00%
MECLOFENAMATE 100 MG CAPSULE	Denied	3	100.00%
MEDROXYPROGESTERONE 10 MG TAB	Denied	4	100.00%
MEDROXYPROGESTERONE 150 MG/ML	Denied	2	100.00%

MEDROXYPROGESTERONE 2.5 MG TAB	Approved	1	12.50%
MEDROXYPROGESTERONE 2.5 MG TAB	Denied	7	87.50%
MEDROXYPROGESTERONE 5 MG TAB	Approved	1	20.00%
MEDROXYPROGESTERONE 5 MG TAB	Denied	4	80.00%
MEGESTROL 625 MG/5 ML SUSP	Approved	2	66.67%
MEGESTROL 625 MG/5 ML SUSP	Denied	1	33.33%
MEKTOVI 15 MG TABLET	Approved	1	100.00%
MEMANTINE HCL 10 MG TABLET	Approved	1	100.00%
MESALAMINE 1,000 MG SUPP	Approved	1	12.50%
MESALAMINE 1,000 MG SUPP	Denied	7	87.50%
MESALAMINE 4 GM/60 ML KIT	Denied	2	100.00%
MESALAMINE 800 MG DR TABLET	Denied	1	100.00%
MESALAMINE DR 1.2 GM TABLET	Denied	1	100.00%
METAXALONE 800 MG TABLET	Approved	2	33.33%
METAXALONE 800 MG TABLET	Denied	4	66.67%
METFORMIN ER 1,000 MG OSM-TAB	Approved	1	33.33%
METFORMIN ER 1,000 MG OSM-TAB	Denied	2	66.67%
METHADONE HCL 10 MG TABLET	Approved	2	50.00%
METHADONE HCL 10 MG TABLET	Denied	2	50.00%
METHADONE HCL 5 MG TABLET	Approved	2	40.00%
METHADONE HCL 5 MG TABLET	Denied	3	60.00%
METHOTREXATE 250 MG/10 ML VIAL	Denied	1	100.00%
METHYLPHENIDATE ER 10 MG TAB	Approved	1	100.00%
METHYLPHENIDATE ER 15 MG CAP	Approved	1	33.33%
METHYLPHENIDATE ER 15 MG CAP	Denied	2	66.67%
METHYLPHENIDATE ER 18 MG TAB	Approved	2	100.00%
METHYLPHENIDATE ER 20 MG TAB	Approved	1	100.00%
METHYLPHENIDATE ER 30 MG CAP	Denied	1	100.00%
METHYLPHENIDATE ER 36 MG TAB	Approved	7	58.33%
METHYLPHENIDATE ER 36 MG TAB	Denied	5	41.67%
METHYLPHENIDATE ER 50 MG CAP	Denied	1	100.00%
METHYLPHENIDATE ER 72 MG TAB	Denied	2	100.00%
METHYLPHENIDATE ER(LA) 10MG CP	Denied	1	100.00%
METHYLPHENIDATE LA 10 MG CAP	Approved	2	22.22%
METHYLPHENIDATE LA 10 MG CAP	Denied	7	77.78%
METHYLTESTOSTERONE 10 MG CAP	Denied	1	100.00%
METOLAZONE 2.5 MG TABLET	Approved	1	100.00%
METOPROLOL TARTRATE 37.5 MG TB	Denied	1	100.00%
METRONIDAZOLE TOP 1% GEL PUMP	Denied	2	100.00%
METRONIDAZOLE TOPICAL 1% GEL	Denied	13	100.00%
MIDAZOLAM HCL 10 MG/2 ML VIAL	Approved	1	50.00%
MIDAZOLAM HCL 10 MG/2 ML VIAL	Denied	1	50.00%
MIGRANAL NASAL SPRAY	Approved	1	50.00%
MIGRANAL NASAL SPRAY	Denied	1	50.00%
MINIMED SILHOUETTE INF SET 43"	Denied	1	100.00%
MINIVELLE 0.0375 MG PATCH	Denied	1	100.00%
MINOCYCLINE ER 45 MG CAPSULE	Denied	1	100.00%

MINOCYCLINE ER 65 MG TABLET	Denied	4	100.00%
MINOCYCLINE ER 90 MG CAPSULE	Denied	1	100.00%
MINOCYCLINE HCL 50 MG TABLET	Denied	2	100.00%
MIRENA 52 MG SYSTEM	Approved	1	9.09%
MIRENA 52 MG SYSTEM	Denied	10	90.91%
MIRVASO 0.33% GEL PUMP	Approved	1	33.33%
MIRVASO 0.33% GEL PUMP	Denied	2	66.67%
MODAFINIL 100 MG TABLET	Approved	6	50.00%
MODAFINIL 100 MG TABLET	Denied	6	50.00%
MODAFINIL 200 MG TABLET	Approved	11	28.95%
MODAFINIL 200 MG TABLET	Denied	27	71.05%
MODERNA COVID-19 VACCINE (EUA)	Denied	2	100.00%
MOMETASONE FUROATE 50 MCG SPRY	Denied	2	100.00%
MONOJECT SYRINGE 3 ML 20GX1	Denied	1	100.00%
MORPHINE SULF ER 15 MG TABLET	Approved	12	80.00%
MORPHINE SULF ER 15 MG TABLET	Denied	3	20.00%
MORPHINE SULF ER 30 MG TABLET	Approved	9	81.82%
MORPHINE SULF ER 30 MG TABLET	Denied	2	18.18%
MORPHINE SULF ER 60 MG TABLET	Approved	2	100.00%
MORPHINE SULFATE IR 15 MG TAB	Approved	4	66.67%
MORPHINE SULFATE IR 15 MG TAB	Denied	2	33.33%
MOTEGRITY 2 MG TABLET	Approved	2	50.00%
MOTEGRITY 2 MG TABLET	Denied	2	50.00%
MOVANTIK 12.5 MG TABLET	Approved	1	33.33%
MOVANTIK 12.5 MG TABLET	Denied	2	66.67%
MOVANTIK 25 MG TABLET	Approved	6	60.00%
MOVANTIK 25 MG TABLET	Denied	4	40.00%
MS CONTIN ER 15 MG TABLET	Approved	1	100.00%
MUCUS RELIEF 400 MG TABLET	Approved	1	50.00%
MUCUS RELIEF 400 MG TABLET	Denied	1	50.00%
MULTAQ 400 MG TABLET	Denied	1	100.00%
MUPIROCIN 2% CREAM	Denied	1	100.00%
MYCOPHENOLIC ACID DR 180 MG TB	Approved	1	100.00%
MYCOPHENOLIC ACID DR 360 MG TB	Approved	5	50.00%
MYCOPHENOLIC ACID DR 360 MG TB	Denied	5	50.00%
MYDAYIS ER 50 MG CAPSULE	Approved	1	50.00%
MYDAYIS ER 50 MG CAPSULE	Denied	1	50.00%
MYFEMBREE 40 MG-1 MG-0.5 MG TB	Denied	1	100.00%
MYFORTIC 360 MG TABLET	Approved	2	100.00%
MYORISAN 20 MG CAPSULE	Denied	1	100.00%
MYORISAN 30 MG CAPSULE	Denied	1	100.00%
MYORISAN 40 MG CAPSULE	Approved	5	41.67%
MYORISAN 40 MG CAPSULE	Denied	7	58.33%
MYRBETRIQ ER 25 MG TABLET	Approved	2	11.11%
MYRBETRIQ ER 25 MG TABLET	Denied	16	88.89%
MYRBETRIQ ER 50 MG TABLET	Approved	1	16.67%
MYRBETRIQ ER 50 MG TABLET	Denied	5	83.33%

NALTREXONE HCL POWDER	Denied	1	100.00%
NAPROXEN 125 MG/5 ML SUSPEN	Approved	1	25.00%
NAPROXEN 125 MG/5 ML SUSPEN	Denied	3	75.00%
NARATRIPTAN HCL 2.5 MG TABLET	Denied	2	100.00%
NASONEX 50 MCG NASAL SPRAY	Denied	1	100.00%
NATAZIA 28 TABLET	Approved	1	50.00%
NATAZIA 28 TABLET	Denied	1	50.00%
NEBIVOLOL 10 MG TABLET	Approved	1	50.00%
NEBIVOLOL 10 MG TABLET	Denied	1	50.00%
NEBIVOLOL 2.5 MG TABLET	Denied	1	100.00%
NEBIVOLOL 20 MG TABLET	Approved	1	100.00%
NEBIVOLOL 5 MG TABLET	Denied	3	100.00%
NEULASTA 6 MG/0.6 ML SYRINGE	Denied	1	100.00%
NEUPRO 6 MG/24 HR PATCH	Approved	1	100.00%
NEURONTIN 800 MG TABLET	Denied	1	100.00%
NEXIUM DR 2.5 MG PACKET	Approved	1	100.00%
NEXIUM DR 20 MG CAPSULE	Denied	1	100.00%
NEXIUM DR 40 MG CAPSULE	Approved	1	100.00%
NEXLETOL 180 MG TABLET	Approved	1	20.00%
NEXLETOL 180 MG TABLET	Denied	4	80.00%
NEXLIZET 180-10 MG TABLET	Denied	1	100.00%
NEXTSTELLIS 3-14.2 MG TABLET	Approved	1	100.00%
NIACIN ER 500 MG TABLET	Approved	1	33.33%
NIACIN ER 500 MG TABLET	Denied	2	66.67%
NICOTINE 21 MG/24HR PATCH	Denied	1	100.00%
NIFEDIPINE 10 MG CAPSULE	Approved	1	100.00%
NITAZOXANIDE 500 MG TABLET	Approved	1	50.00%
NITAZOXANIDE 500 MG TABLET	Denied	1	50.00%
NITROFURANTOIN MONO-MCR 100 MG	Approved	1	50.00%
NITROFURANTOIN MONO-MCR 100 MG	Denied	1	50.00%
NIZATIDINE 15 MG/ML SOLUTION	Approved	1	100.00%
NORDITROPIN FLEXPRO 10 MG/1.5	Approved	1	100.00%
NORETH-ESTRAD-FE 1-0.02(24)-75	Approved	1	50.00%
NORETH-ESTRAD-FE 1-0.02(24)-75	Denied	1	50.00%
NORG-EE 0.18-0.215-0.25/0.025	Approved	1	33.33%
NORG-EE 0.18-0.215-0.25/0.025	Denied	2	66.67%
NORITATE 1% CREAM	Denied	4	100.00%
NP THYROID 120 MG TABLET	Denied	6	100.00%
NP THYROID 90 MG TABLET	Approved	2	33.33%
NP THYROID 90 MG TABLET	Denied	4	66.67%
NUCALA 100 MG/ML AUTO-INJECTOR	Approved	2	100.00%
NUCYNTA 100 MG TABLET	Approved	6	46.15%
NUCYNTA 100 MG TABLET	Denied	7	53.85%
NUCYNTA 50 MG TABLET	Approved	2	28.57%
NUCYNTA 50 MG TABLET	Denied	5	71.43%
NUEDEXTA 20-10 MG CAPSULE	Approved	2	100.00%
NURTEC ODT 75 MG TABLET	Approved	37	66.07%

NURTEC ODT 75 MG TABLET	Denied	19	33.93%
NUVARING VAGINAL RING	Approved	5	41.67%
NUVARING VAGINAL RING	Denied	7	58.33%
NUVIGIL 250 MG TABLET	Denied	1	100.00%
OICALIVA 5 MG TABLET	Approved	1	25.00%
OICALIVA 5 MG TABLET	Denied	3	75.00%
OCREVUS 300 MG/10 ML VIAL	Approved	1	14.29%
OCREVUS 300 MG/10 ML VIAL	Denied	6	85.71%
OCTAGAM 10% VIAL	Denied	1	100.00%
OCTREOTIDE ACET 100 MCG/ML SYR	Approved	1	100.00%
OCTREOTIDE ACET 100 MCG/ML VL	Approved	1	100.00%
ODEFSEY TABLET	Approved	1	100.00%
OLOPATADINE HCL 0.1% EYE DROPS	Approved	1	14.29%
OLOPATADINE HCL 0.1% EYE DROPS	Denied	6	85.71%
OLOPATADINE HCL 0.2% EYE DROP	Approved	1	16.67%
OLOPATADINE HCL 0.2% EYE DROP	Denied	5	83.33%
OMEGA-3 ETHYL ESTERS 1 GM CAP	Denied	2	100.00%
OMEPRAZOLE DR 20 MG CAPSULE	Approved	1	33.33%
OMEPRAZOLE DR 20 MG CAPSULE	Denied	2	66.67%
OMEPRAZOLE DR 40 MG CAPSULE	Denied	1	100.00%
OMEPRAZOLE-BICARB 20-1,100 CAP	Denied	1	100.00%
OMEPRAZOLE-BICARB 40-1,100 CAP	Denied	1	100.00%
OMNIPOD DASH 5 PACK POD	Approved	4	100.00%
OMNITROPE 10 MG/1.5 ML CRTG	Approved	3	60.00%
OMNITROPE 10 MG/1.5 ML CRTG	Denied	2	40.00%
OMNITROPE 5 MG/1.5 ML CRTG	Approved	2	100.00%
OMNITROPE PEN 10 INJECTIO DEVICE	Approved	1	100.00%
ONDANSETRON HCL 4 MG TABLET	Denied	3	100.00%
ONDANSETRON HCL 4 MG/2 ML VIAL	Denied	2	100.00%
ONDANSETRON HCL 8 MG TABLET	Approved	4	57.14%
ONDANSETRON HCL 8 MG TABLET	Denied	3	42.86%
ONDANSETRON ODT 4 MG TABLET	Approved	4	22.22%
ONDANSETRON ODT 4 MG TABLET	Denied	14	77.78%
ONDANSETRON ODT 8 MG TABLET	Approved	2	22.22%
ONDANSETRON ODT 8 MG TABLET	Denied	7	77.78%
ONETOUCH ULTRA BLUE TEST STRP	Approved	3	50.00%
ONETOUCH ULTRA BLUE TEST STRP	Denied	3	50.00%
ONETOUCH VERIO REFLECT METER	Denied	1	100.00%
ONETOUCH VERIO TEST STRIP	Approved	3	30.00%
ONETOUCH VERIO TEST STRIP	Denied	7	70.00%
ONEXTON GEL PUMP	Approved	1	11.11%
ONEXTON GEL PUMP	Denied	8	88.89%
ONGLYZA 5 MG TABLET	Denied	1	100.00%
OPZELURA 1.5% CREAM	Approved	1	25.00%
OPZELURA 1.5% CREAM	Denied	3	75.00%
ORACEA 40 MG CAPSULE	Approved	1	5.26%
ORACEA 40 MG CAPSULE	Denied	18	94.74%



ORENCIA 125 MG/ML SYRINGE	Denied	2	100.00%
ORENCIA CLICKJECT 125 MG/ML	Approved	1	50.00%
ORENCIA CLICKJECT 125 MG/ML	Denied	1	50.00%
ORENITRAM ER 0.125 MG TABLET	Denied	1	100.00%
ORENITRAM ER 0.25 MG TABLET	Approved	1	50.00%
ORENITRAM ER 0.25 MG TABLET	Denied	1	50.00%
ORENITRAM ER 1 MG TABLET	Approved	1	50.00%
ORENITRAM ER 1 MG TABLET	Denied	1	50.00%
ORENITRAM ER 2.5 MG TABLET	Approved	1	50.00%
ORENITRAM ER 2.5 MG TABLET	Denied	1	50.00%
ORENITRAM ER 5 MG TABLET	Approved	1	100.00%
ORGOVYX 120 MG TABLET	Approved	1	50.00%
ORGOVYX 120 MG TABLET	Denied	1	50.00%
ORIAHNN 300-1-0.5MG/300MG CAPS	Approved	2	100.00%
ORILISSA 150 MG TABLET	Approved	2	66.67%
ORILISSA 150 MG TABLET	Denied	1	33.33%
ORILISSA 200 MG TABLET	Denied	2	100.00%
ORKAMBI 100-125 MG GRANULE PKT	Approved	1	33.33%
ORKAMBI 100-125 MG GRANULE PKT	Denied	2	66.67%
ORLADEYO 150 MG CAPSULE	Approved	1	50.00%
ORLADEYO 150 MG CAPSULE	Denied	1	50.00%
ORTHOVISC 15 MG/ML SYRINGE	Denied	6	100.00%
OSPHENA 60 MG TABLET	Denied	3	100.00%
OTEZLA 28 DAY STARTER PACK	Approved	1	100.00%
OTEZLA 30 MG TABLET	Approved	9	45.00%
OTEZLA 30 MG TABLET	Denied	11	55.00%
OXAPROZIN 600 MG TABLET	Denied	1	100.00%
OXERVATE 0.002% EYE DROP	Approved	1	100.00%
OXTELLAR XR 150 MG TABLET	Denied	1	100.00%
OXYCODON-ACETAMINOPHEN 2.5-300	Denied	1	100.00%
OXYCODON-ACETAMINOPHEN 7.5-325	Approved	1	100.00%
OXYCODONE HCL (IR) 10 MG TAB	Approved	2	100.00%
OXYCODONE HCL (IR) 15 MG TAB	Denied	1	100.00%
OXYCODONE HCL (IR) 30 MG TAB	Approved	1	100.00%
OXYCODONE HCL (IR) 5 MG TABLET	Approved	3	50.00%
OXYCODONE HCL (IR) 5 MG TABLET	Denied	3	50.00%
OXYCODONE HCL 10 MG TABLET	Approved	15	71.43%
OXYCODONE HCL 10 MG TABLET	Denied	6	28.57%
OXYCODONE HCL 15 MG TABLET	Approved	3	60.00%
OXYCODONE HCL 15 MG TABLET	Denied	2	40.00%
OXYCODONE HCL 30 MG TABLET	Approved	1	25.00%
OXYCODONE HCL 30 MG TABLET	Denied	3	75.00%
OXYCODONE HCL 5 MG TABLET	Approved	24	52.17%
OXYCODONE HCL 5 MG TABLET	Denied	22	47.83%
OXYCODONE HCL ER 40 MG TABLET	Approved	1	50.00%
OXYCODONE HCL ER 40 MG TABLET	Denied	1	50.00%
OXYCODONE-ACETAMINOPHEN 10-325	Approved	14	58.33%

OXYCODONE-ACETAMINOPHEN 10-325	Denied	10	41.67%
OXYCODONE-ACETAMINOPHEN 5-325	Approved	21	87.50%
OXYCODONE-ACETAMINOPHEN 5-325	Denied	3	12.50%
OXYCODONE-ACETAMINOPHN 7.5-325	Approved	5	83.33%
OXYCODONE-ACETAMINOPHN 7.5-325	Denied	1	16.67%
OXYCONTIN ER 10 MG TABLET	Approved	2	50.00%
OXYCONTIN ER 10 MG TABLET	Denied	2	50.00%
OXYCONTIN ER 20 MG TABLET	Denied	1	100.00%
OXYCONTIN ER 30 MG TABLET	Approved	1	100.00%
OXYCONTIN ER 40 MG TABLET	Approved	4	66.67%
OXYCONTIN ER 40 MG TABLET	Denied	2	33.33%
OXYTROL 3.9 MG/24HR PATCH	Denied	1	100.00%
OZEMPIC 0.25-0.5 MG DOSE PEN	Approved	1	100.00%
OZEMPIC 0.25-0.5 MG/DOSE PEN	Denied	4	100.00%
OZEMPIC 1 MG DOSE PEN (3 ML)	Denied	1	100.00%
OZEMPIC 1 MG/DOSE (2 MG/1.5ML)	Denied	1	100.00%
PALIPERIDONE ER 3 MG TABLET	Approved	1	100.00%
PALIPERIDONE ER 6 MG TABLET	Denied	1	100.00%
PALIPERIDONE ER 9 MG TABLET	Approved	1	100.00%
PALYNZIQ 10 MG/0.5 ML SYRINGE	Approved	1	100.00%
PANDEL 0.1% CREAM	Denied	1	100.00%
PENICILLAMINE 250 MG CAPSULE	Denied	1	100.00%
PENNSAID 2% PUMP	Approved	3	42.86%
PENNSAID 2% PUMP	Denied	4	57.14%
PEPTIDE 1.5 LIQUID	Denied	2	100.00%
PERTZYE DR 16,000 UNIT CAPSULE	Denied	1	100.00%
PHENTERMINE 30 MG CAPSULE	Denied	2	100.00%
PHEXXI 1.8-1-0.4% VAGINAL GEL	Approved	1	8.33%
PHEXXI 1.8-1-0.4% VAGINAL GEL	Denied	11	91.67%
PIMECROLIMUS 1% CREAM	Approved	6	20.00%
PIMECROLIMUS 1% CREAM	Denied	24	80.00%
PIROXICAM 10 MG CAPSULE	Denied	2	100.00%
PIROXICAM 20 MG CAPSULE	Approved	1	100.00%
PLENVU POWDER PACKETS	Denied	1	100.00%
POLYETHYLENE GLYCOL 3350 POWD	Denied	1	100.00%
POSACONAZOLE DR 100 MG TABLET	Denied	1	100.00%
PRADAXA 150 MG CAPSULE	Approved	2	50.00%
PRADAXA 150 MG CAPSULE	Denied	2	50.00%
PRALUENT 150 MG/ML PEN	Approved	3	37.50%
PRALUENT 150 MG/ML PEN	Denied	5	62.50%
PRALUENT 75 MG/ML PEN	Approved	7	53.85%
PRALUENT 75 MG/ML PEN	Denied	6	46.15%
PRAMIPEXOLE ER 3 MG TABLET	Approved	1	100.00%
PRECISION XTR B-KETONE STRIP	Approved	2	66.67%
PRECISION XTR B-KETONE STRIP	Denied	1	33.33%
PREGABALIN 100 MG CAPSULE	Approved	5	20.00%
PREGABALIN 100 MG CAPSULE	Denied	20	80.00%

PREGABALIN 150 MG CAPSULE	Approved	3	13.64%
PREGABALIN 150 MG CAPSULE	Denied	19	86.36%
PREGABALIN 20 MG/ML SOLUTION	Approved	1	100.00%
PREGABALIN 200 MG CAPSULE	Denied	3	100.00%
PREGABALIN 225 MG CAPSULE	Approved	3	50.00%
PREGABALIN 225 MG CAPSULE	Denied	3	50.00%
PREGABALIN 25 MG CAPSULE	Denied	13	100.00%
PREGABALIN 300 MG CAPSULE	Approved	1	8.33%
PREGABALIN 300 MG CAPSULE	Denied	11	91.67%
PREGABALIN 50 MG CAPSULE	Approved	6	18.18%
PREGABALIN 50 MG CAPSULE	Denied	27	81.82%
PREGABALIN 75 MG CAPSULE	Approved	10	15.15%
PREGABALIN 75 MG CAPSULE	Denied	56	84.85%
PREMARIN VAGINAL CREAM-APPL	Approved	2	7.14%
PREMARIN VAGINAL CREAM-APPL	Denied	26	92.86%
PREMPRO 0.3 MG-1.5 MG TABLET	Denied	4	100.00%
PREMPRO 0.625-2.5 MG TABLET	Denied	1	100.00%
PREVALITE PACKET	Approved	2	66.67%
PREVALITE PACKET	Denied	1	33.33%
PREVIDENT 5000 BOOSTER PLUS	Denied	2	100.00%
PRILOSEC DR 2.5 MG SUSPENSION	Approved	1	100.00%
PRISTIQ ER 100 MG TABLET	Approved	2	100.00%
PRISTIQ ER 25 MG TABLET	Denied	3	100.00%
PRIVIGEN 10% VIAL	Approved	1	100.00%
PROAIR HFA 90 MCG INHALER	Approved	1	100.00%
PROAIR RESPICLICK 90 MCG INHLR	Approved	1	16.67%
PROAIR RESPICLICK 90 MCG INHLR	Denied	5	83.33%
PROCTOFOAM-HC 1%-1% FOAM	Denied	3	100.00%
PROCTO-MED HC 2.5% CREAM	Denied	1	100.00%
PROGESTERONE 500 MG/10 ML VIAL	Denied	3	100.00%
PROLENSA 0.07% EYE DROPS	Denied	2	100.00%
PROLIA 60 MG/ML SYRINGE	Approved	12	34.29%
PROLIA 60 MG/ML SYRINGE	Denied	23	65.71%
PROMETHEGAN 25 MG SUPPOSITORY	Denied	2	100.00%
PROZAC 20 MG PULVULE	Approved	1	50.00%
PROZAC 20 MG PULVULE	Denied	1	50.00%
PULMICORT 180 MCG FLEXHALER	Approved	2	50.00%
PULMICORT 180 MCG FLEXHALER	Denied	2	50.00%
PULMICORT 90 MCG FLEXHALER	Approved	1	14.29%
PULMICORT 90 MCG FLEXHALER	Denied	6	85.71%
PULMOZYME 1 MG/ML AMPUL	Approved	4	57.14%
PULMOZYME 1 MG/ML AMPUL	Denied	3	42.86%
PYLERA CAPSULE	Approved	1	100.00%
QBRELIS 1MG/ML SOLUTION	Approved	1	50.00%
QBRELIS 1MG/ML SOLUTION	Denied	1	50.00%
QBREXZA 2.4% CLOTH	Approved	6	75.00%
QBREXZA 2.4% CLOTH	Denied	2	25.00%

QELBREE ER 100 MG CAPSULE	Denied	1	100.00%
QELBREE ER 200 MG CAPSULE	Denied	2	100.00%
QNASL 80 MCG NASAL SPRAY	Approved	1	25.00%
QNASL 80 MCG NASAL SPRAY	Denied	3	75.00%
QUETIAPINE ER 150 MG TABLET	Approved	1	50.00%
QUETIAPINE ER 150 MG TABLET	Denied	1	50.00%
QUETIAPINE ER 200 MG TABLET	Approved	2	100.00%
QUETIAPINE ER 400 MG TABLET	Denied	1	100.00%
QUETIAPINE ER 50 MG TABLET	Denied	6	100.00%
QUILLIVANT XR 25 MG/5 ML SUSP	Denied	1	100.00%
QUTENZA 8% KIT (2 PATCH)	Denied	1	100.00%
RABEPRAZOLE SOD DR 20 MG TAB	Denied	8	100.00%
RADICAVA 30 MG/100 ML BAG	Approved	1	100.00%
RALOXIFENE HCL 60 MG TABLET	Approved	7	77.78%
RALOXIFENE HCL 60 MG TABLET	Denied	2	22.22%
RAMELTEON 8 MG TABLET	Approved	2	40.00%
RAMELTEON 8 MG TABLET	Denied	3	60.00%
RANOLAZINE ER 500 MG TABLET	Approved	2	66.67%
RANOLAZINE ER 500 MG TABLET	Denied	1	33.33%
REBIF 44 MCG/0.5 ML SYRINGE	Approved	3	75.00%
REBIF 44 MCG/0.5 ML SYRINGE	Denied	1	25.00%
RECLAST 5 MG/100 ML SOLUTION	Approved	1	33.33%
RECLAST 5 MG/100 ML SOLUTION	Denied	2	66.67%
RECTIV 0.4% OINTMENT	Approved	1	25.00%
RECTIV 0.4% OINTMENT	Denied	3	75.00%
RELISTOR 150 MG TABLET	Denied	5	100.00%
RELPAK 40 MG TABLET	Denied	2	100.00%
REMICADE 100 MG VIAL	Denied	3	100.00%
REMODULIN 2.5 MG/ML VIAL	Approved	1	50.00%
REMODULIN 2.5 MG/ML VIAL	Denied	1	50.00%
RENFLXIS 100 MG VIAL	Approved	2	100.00%
REPATHA 140 MG/ML SURECLICK	Approved	9	33.33%
REPATHA 140 MG/ML SURECLICK	Denied	18	66.67%
REPATHA 420 MG/3.5ML PUSHTRONX	Denied	2	100.00%
REPLESTA 50,000 UNITS WAFER	Denied	1	100.00%
RESTASIS 0.05% EYE EMULSION	Approved	20	35.71%
RESTASIS 0.05% EYE EMULSION	Denied	36	64.29%
RESTASIS MULTIDOSE 0.05% EYE	Approved	1	50.00%
RESTASIS MULTIDOSE 0.05% EYE	Denied	1	50.00%
RETIN-A MICRO PUMP 0.08% GEL	Denied	1	100.00%
REVLIMID 10 MG CAPSULE	Approved	1	50.00%
REVLIMID 10 MG CAPSULE	Denied	1	50.00%
REVLIMID 25 MG CAPSULE	Approved	1	50.00%
REVLIMID 25 MG CAPSULE	Denied	1	50.00%
REVLIMID 5 MG CAPSULE	Approved	1	25.00%
REVLIMID 5 MG CAPSULE	Denied	3	75.00%
REXULTI 0.25 MG TABLET	Approved	1	33.33%

REXULTI 0.25 MG TABLET	Denied	2	66.67%
REXULTI 0.5 MG TABLET	Approved	1	100.00%
REXULTI 1 MG TABLET	Approved	2	28.57%
REXULTI 1 MG TABLET	Denied	5	71.43%
REXULTI 2 MG TABLET	Approved	5	62.50%
REXULTI 2 MG TABLET	Denied	3	37.50%
REXULTI 3 MG TABLET	Approved	1	100.00%
REYVOW 100 MG TABLET	Approved	2	66.67%
REYVOW 100 MG TABLET	Denied	1	33.33%
R-GENE 10 VIAL	Approved	1	100.00%
RHOFADE 1% CREAM	Approved	2	66.67%
RHOFADE 1% CREAM	Denied	1	33.33%
RHOPRESSA 0.02% OPHTH SOLUTION	Approved	2	100.00%
RIFABUTIN 150 MG CAPSULE	Approved	1	33.33%
RIFABUTIN 150 MG CAPSULE	Denied	2	66.67%
RINVOQ ER 15 MG TABLET	Approved	12	50.00%
RINVOQ ER 15 MG TABLET	Denied	12	50.00%
RITUXAN 100 MG/10 ML VIAL	Denied	1	100.00%
RIZATRIPTAN 10 MG ODT	Denied	2	100.00%
RIZATRIPTAN 10 MG TABLET	Denied	1	100.00%
ROCKLATAN 0.02%-0.005% EYE DRP	Approved	1	100.00%
RUCONEST 2,100 UNIT VIAL	Approved	1	50.00%
RUCONEST 2,100 UNIT VIAL	Denied	1	50.00%
RYTHMOL SR 325 MG CAPSULE	Denied	1	100.00%
SANTYL OINTMENT	Approved	1	33.33%
SANTYL OINTMENT	Denied	2	66.67%
SAPHRIS 2.5 MG TAB SUBLINGUAL	Approved	1	100.00%
SAPHRIS 5 MG TAB SUBLINGUAL	Approved	1	100.00%
SAVAYSA 60 MG TABLET	Denied	1	100.00%
SAVELLA 100 MG TABLET	Denied	3	100.00%
SAVELLA 25 MG TABLET	Denied	1	100.00%
SAVELLA TITRATION PACK	Denied	2	100.00%
SAXENDA 18 MG/3 ML PEN	Denied	12	100.00%
SEASONIQUE 0.15-0.03-0.01 TAB	Denied	2	100.00%
SELENIUM SULFIDE 2.25% SHAMPOO	Denied	2	100.00%
SENNA 8.8 MG/5 ML SYRUP	Denied	1	100.00%
SEREVENT DISKUS 50 MCG	Denied	3	100.00%
SEVELAMER CARBONATE 800 MG TAB	Approved	6	66.67%
SEVELAMER CARBONATE 800 MG TAB	Denied	3	33.33%
SEYSARA 100 MG TABLET	Denied	5	100.00%
SEYSARA 150 MG TABLET	Denied	3	100.00%
SEYSARA 60 MG TABLET	Denied	2	100.00%
SIGNIFOR LAR 40 MG KIT	Approved	1	100.00%
SIKLOS 100 MG TABLET	Approved	1	100.00%
SILDENAFIL 100 MG TABLET	Denied	3	100.00%
SILDENAFIL 20 MG TABLET	Approved	1	2.63%
SILDENAFIL 20 MG TABLET	Denied	37	97.37%

SILDENAFIL 25 MG TABLET	Denied	4	100.00%
SILDENAFIL 50 MG TABLET	Denied	5	100.00%
SILODOSIN 4 MG CAPSULE	Approved	1	100.00%
SILODOSIN 8 MG CAPSULE	Approved	1	100.00%
SIMETHICONE 125 MG SOFTGEL	Approved	1	100.00%
SIROLIMUS 0.5 MG TABLET	Approved	2	100.00%
SIROLIMUS 1 MG TABLET	Approved	2	100.00%
SKYLA 13.5 MG SYSTEM	Denied	1	100.00%
SKYRIZI 150 MG DOSE KIT-2 SYRN	Approved	9	40.91%
SKYRIZI 150 MG DOSE KIT-2 SYRN	Denied	13	59.09%
SKYRIZI 150 MG/ML PEN	Approved	2	50.00%
SKYRIZI 150 MG/ML PEN	Denied	2	50.00%
SKYRIZI 150 MG/ML SYRINGE	Approved	5	71.43%
SKYRIZI 150 MG/ML SYRINGE	Denied	2	28.57%
SLYND 4 MG TABLET	Approved	3	30.00%
SLYND 4 MG TABLET	Denied	7	70.00%
SOD SULFACE-SULF 9.8-4.8% CLSR	Denied	1	100.00%
SOD SULFACET-SULFUR 10-5% CLSR	Denied	1	100.00%
SODIUM BICARB 650 MG TABLET	Approved	1	100.00%
SODIUM SULFACETAMIDE 10% LOTN	Denied	1	100.00%
SODIUM SULFACETAMIDE 10% WASH	Denied	1	100.00%
SOFOSBUVIR-VELPATASVIR 400-100	Approved	1	50.00%
SOFOSBUVIR-VELPATASVIR 400-100	Denied	1	50.00%
SOLIFENACIN 10 MG TABLET	Denied	4	100.00%
SOLIFENACIN 5 MG TABLET	Denied	6	100.00%
SOLIQUA 100 UNIT-33 MCG/ML PEN	Approved	2	28.57%
SOLIQUA 100 UNIT-33 MCG/ML PEN	Denied	5	71.43%
SOLIRIS 300 MG/30 ML VIAL	Denied	2	100.00%
SOLOSEC 2 GM GRANULE PACKET	Denied	1	100.00%
SOLU-CORTEF 100 MG ACT-O-VIAL	Approved	2	40.00%
SOLU-CORTEF 100 MG ACT-O-VIAL	Denied	3	60.00%
SOLU-CORTEF 100 MG VIAL	Denied	3	100.00%
SOOLANTRA 1% CREAM	Denied	10	100.00%
SPRAVATO 56 MG DOSE PACK	Approved	1	100.00%
SPRAVATO 84 MG DOSE PACK	Approved	1	100.00%
SPRYCEL 100 MG TABLET	Approved	1	100.00%
SPRYCEL 140 MG TABLET	Approved	1	100.00%
STEGLATRO 15 MG TABLET	Approved	2	33.33%
STEGLATRO 15 MG TABLET	Denied	4	66.67%
STELARA 130 MG/26 ML VIAL	Approved	1	100.00%
STELARA 45 MG/0.5 ML SYRINGE	Approved	7	70.00%
STELARA 45 MG/0.5 ML SYRINGE	Denied	3	30.00%
STELARA 90 MG/ML SYRINGE	Approved	6	54.55%
STELARA 90 MG/ML SYRINGE	Denied	5	45.45%
STIOLTO RESPIMAT INHAL SPRAY	Approved	2	50.00%
STIOLTO RESPIMAT INHAL SPRAY	Denied	2	50.00%
STRATTERA 18 MG CAPSULE	Denied	1	100.00%

STRATTERA 25 MG CAPSULE	Approved	1	100.00%
STRATTERA 40 MG CAPSULE	Approved	1	50.00%
STRATTERA 40 MG CAPSULE	Denied	1	50.00%
SUBLOCADE 100 MG/0.5 ML SYRING	Denied	2	100.00%
SUBLOCADE 300 MG/1.5 ML SYRING	Approved	1	33.33%
SUBLOCADE 300 MG/1.5 ML SYRING	Denied	2	66.67%
SUBOXONE 2 MG-0.5 MG SL FILM	Denied	2	100.00%
SUBOXONE 8 MG-2 MG SL FILM	Approved	2	50.00%
SUBOXONE 8 MG-2 MG SL FILM	Denied	2	50.00%
SUCRAID 8,500 UNITS/ML SOLN	Denied	2	100.00%
SUCRALFATE 1 GM/10 ML SUSP	Approved	9	32.14%
SUCRALFATE 1 GM/10 ML SUSP	Denied	19	67.86%
SULFACETAMIDE-SULFUR 8-4% SUSP	Denied	1	100.00%
SUMATRIPTAN 20 MG NASAL SPRAY	Approved	1	3.57%
SUMATRIPTAN 20 MG NASAL SPRAY	Denied	27	96.43%
SUMATRIPTAN 4 MG/0.5 ML INJECT	Denied	2	100.00%
SUMATRIPTAN 5 MG NASAL SPRAY	Denied	4	100.00%
SUMATRIPTAN 6 MG/0.5 ML INJECT	Approved	3	23.08%
SUMATRIPTAN 6 MG/0.5 ML INJECT	Denied	10	76.92%
SUMATRIPTAN SUCC 100 MG TABLET	Denied	2	100.00%
SUMATRIPTAN SUCC 50 MG TABLET	Approved	1	50.00%
SUMATRIPTAN SUCC 50 MG TABLET	Denied	1	50.00%
SUMATRIPTAN-NAPROXEN 85-500 MG	Denied	1	100.00%
SUNOSI 150 MG TABLET	Approved	1	100.00%
SUTAB 1.479-0.225-0.188 GM TAB	Denied	5	100.00%
SYMBICORT 160-4.5 MCG INHALER	Approved	3	21.43%
SYMBICORT 160-4.5 MCG INHALER	Denied	11	78.57%
SYMBICORT 80-4.5 MCG INHALER	Approved	2	40.00%
SYMBICORT 80-4.5 MCG INHALER	Denied	3	60.00%
SYMDEKO 50/75 MG-75 MG TABLETS	Approved	2	66.67%
SYMDEKO 50/75 MG-75 MG TABLETS	Denied	1	33.33%
SYMPROIC 0.2 MG TABLET	Approved	1	100.00%
SYMTUZA 800-150-200-10 MG TAB	Approved	1	100.00%
SYNAGIS 50 MG/0.5 ML VIAL	Approved	1	33.33%
SYNAGIS 50 MG/0.5 ML VIAL	Denied	2	66.67%
SYNJARDY XR 12.5-1,000 MG TAB	Approved	2	66.67%
SYNJARDY XR 12.5-1,000 MG TAB	Denied	1	33.33%
SYNJARDY XR 5-1,000 MG TABLET	Approved	1	50.00%
SYNJARDY XR 5-1,000 MG TABLET	Denied	1	50.00%
SYNVISC SYRINGE	Denied	1	100.00%
SYNVISC-ONE SYRINGE	Denied	1	100.00%
T:SLIM X2 3 ML CARTRIDGE	Denied	3	100.00%
T:SLIM X2 BASAL-IQ INSULIN PMP	Denied	1	100.00%
T:SLIM X2 CONTROL-IQ PUMP	Denied	1	100.00%
TACLONEX OINTMENT	Denied	1	100.00%
TADALAFIL 10 MG TABLET	Denied	3	100.00%
TADALAFIL 20 MG TABLET	Denied	1	100.00%

TADALAFIL 5 MG TABLET	Denied	3	100.00%
TAGRISSO 80 MG TABLET	Approved	1	100.00%
TALICIA DR 10-250-12.5 MG CAP	Approved	1	33.33%
TALICIA DR 10-250-12.5 MG CAP	Denied	2	66.67%
TALTZ 80 MG/ML AUTOINJ (2-PK)	Approved	1	100.00%
TALTZ 80 MG/ML AUTOINJ (3-PK)	Denied	1	100.00%
TALTZ 80 MG/ML AUTOINJECTOR	Approved	7	29.17%
TALTZ 80 MG/ML AUTOINJECTOR	Denied	17	70.83%
TAVABOROLE 5% TOPICAL SOLUTION	Denied	1	100.00%
TAYTULLA 1 MG-20 MCG CAPSULE	Approved	2	66.67%
TAYTULLA 1 MG-20 MCG CAPSULE	Denied	1	33.33%
TAZAROTENE 0.1% CREAM	Approved	1	33.33%
TAZAROTENE 0.1% CREAM	Denied	2	66.67%
TAZORAC 0.05% CREAM	Approved	2	100.00%
TECFIDERA DR 240 MG CAPSULE	Approved	2	28.57%
TECFIDERA DR 240 MG CAPSULE	Denied	5	71.43%
TECFIDERA STARTER PACK	Denied	1	100.00%
TELMISARTAN 80 MG TABLET	Denied	1	100.00%
TEMAZEPAM 15 MG CAPSULE	Approved	3	27.27%
TEMAZEPAM 15 MG CAPSULE	Denied	8	72.73%
TEMOVATE 0.05% CREAM	Approved	1	50.00%
TEMOVATE 0.05% CREAM	Denied	1	50.00%
TEMOZOLOMIDE 100 MG CAPSULE	Approved	1	50.00%
TEMOZOLOMIDE 100 MG CAPSULE	Denied	1	50.00%
TENIVAC VIAL	Denied	1	100.00%
TERIPARATIDE 620 MCG/2.48 ML	Approved	1	50.00%
TERIPARATIDE 620 MCG/2.48 ML	Denied	1	50.00%
TESTIM 1% (50MG) GEL	Denied	1	100.00%
TESTOPEL 75 MG PELLETS	Denied	2	100.00%
TESTOSTERON CYP 2,000 MG/10 ML	Approved	1	100.00%
TESTOSTERON ENAN 1,000 MG/5 ML	Approved	1	25.00%
TESTOSTERON ENAN 1,000 MG/5 ML	Denied	3	75.00%
TESTOSTERONE 1% (25MG/2.5G) PK	Approved	4	33.33%
TESTOSTERONE 1% (25MG/2.5G) PK	Denied	8	66.67%
TESTOSTERONE 1% (50 MG/5 G) PK	Denied	6	100.00%
TESTOSTERONE 1.62% (2.5 G) PKT	Approved	1	10.00%
TESTOSTERONE 1.62% (2.5 G) PKT	Denied	9	90.00%
TESTOSTERONE 1.62% GEL PUMP	Approved	4	18.18%
TESTOSTERONE 1.62% GEL PUMP	Denied	18	81.82%
TESTOSTERONE 1.62%(1.25 G) PKT	Approved	2	40.00%
TESTOSTERONE 1.62%(1.25 G) PKT	Denied	3	60.00%
TESTOSTERONE 10 MG GEL PUMP	Denied	3	100.00%
TESTOSTERONE 12.5 MG/1.25 GRAM	Approved	3	33.33%
TESTOSTERONE 12.5 MG/1.25 GRAM	Denied	6	66.67%
TESTOSTERONE 30 MG/1.5 ML PUMP	Denied	1	100.00%
TESTOSTERONE 50 MG/5 GRAM GEL	Denied	2	100.00%
TESTOSTERONE CYP 100 MG/ML	Approved	1	50.00%



TESTOSTERONE CYP 100 MG/ML	Denied	1	50.00%
TESTOSTERONE CYP 200 MG/ML	Approved	17	62.96%
TESTOSTERONE CYP 200 MG/ML	Denied	10	37.04%
TESTOSTERONE CYP 6,000 MG/30ML	Denied	1	100.00%
TETRABENAZINE 12.5 MG TABLET	Approved	1	50.00%
TETRABENAZINE 12.5 MG TABLET	Denied	1	50.00%
THEO-24 ER 200 MG CAPSULE	Denied	1	100.00%
THEOPHYLLINE ER 300 MG TAB	Denied	1	100.00%
TINIDAZOLE 500 MG TABLET	Denied	1	100.00%
TIROSINT 100 MCG CAPSULE	Denied	5	100.00%
TIROSINT 112 MCG CAPSULE	Denied	2	100.00%
TIROSINT 125 MCG CAPSULE	Approved	2	66.67%
TIROSINT 125 MCG CAPSULE	Denied	1	33.33%
TIROSINT 13 MCG CAPSULE	Approved	1	33.33%
TIROSINT 13 MCG CAPSULE	Denied	2	66.67%
TIROSINT 137 MCG CAPSULE	Approved	1	100.00%
TIROSINT 150 MCG CAPSULE	Approved	1	50.00%
TIROSINT 150 MCG CAPSULE	Denied	1	50.00%
TIROSINT 175 MCG CAPSULE	Denied	1	100.00%
TIROSINT 25 MCG CAPSULE	Approved	1	100.00%
TIROSINT 50 MCG CAPSULE	Approved	1	100.00%
TIROSINT 75 MCG CAPSULE	Approved	1	33.33%
TIROSINT 75 MCG CAPSULE	Denied	2	66.67%
TIROSINT 88 MCG CAPSULE	Approved	1	100.00%
TIROSINT-SOL 25 MCG/ML SOLN	Approved	1	100.00%
TIZANIDINE HCL 2 MG CAPSULE	Denied	4	100.00%
TIZANIDINE HCL 2 MG TABLET	Approved	1	50.00%
TIZANIDINE HCL 2 MG TABLET	Denied	1	50.00%
TIZANIDINE HCL 4 MG CAPSULE	Approved	1	14.29%
TIZANIDINE HCL 4 MG CAPSULE	Denied	6	85.71%
TIZANIDINE HCL 4 MG TABLET	Approved	6	85.71%
TIZANIDINE HCL 4 MG TABLET	Denied	1	14.29%
TOBRAMYCIN 300 MG/5 ML AMPULE	Denied	1	100.00%
TOLTERODINE TART ER 2 MG CAP	Approved	1	33.33%
TOLTERODINE TART ER 2 MG CAP	Denied	2	66.67%
TOLTERODINE TART ER 4 MG CAP	Denied	5	100.00%
TOLTERODINE TARTRATE 2 MG TAB	Denied	2	100.00%
TOPROL XL 25 MG TABLET	Approved	1	100.00%
TOSYMRA 10 MG NASAL SPRAY	Approved	1	100.00%
TOVIAZ ER 4 MG TABLET	Denied	2	100.00%
TRADJENTA 5 MG TABLET	Approved	3	25.00%
TRADJENTA 5 MG TABLET	Denied	9	75.00%
TRAMADOL HCL 50 MG TABLET	Approved	47	81.03%
TRAMADOL HCL 50 MG TABLET	Denied	11	18.97%
TRAMADOL HCL ER 100 MG TABLET	Denied	1	100.00%
TRAMADOL HCL ER 200 MG TABLET	Denied	1	100.00%
TRAZODONE 300 MG TABLET	Denied	6	100.00%

TRELEGY ELLIPTA 200-62.5-25	Denied	1	100.00%
TREMFYA 100 MG/ML INJECTOR	Denied	9	100.00%
TREMFYA 100 MG/ML SYRINGE	Approved	2	50.00%
TREMFYA 100 MG/ML SYRINGE	Denied	2	50.00%
TRETINOIN 0.01% GEL	Denied	1	100.00%
TRETINOIN 0.025% CREAM	Approved	20	38.46%
TRETINOIN 0.025% CREAM	Denied	32	61.54%
TRETINOIN 0.025% GEL	Approved	2	66.67%
TRETINOIN 0.025% GEL	Denied	1	33.33%
TRETINOIN 0.05% CREAM	Approved	14	77.78%
TRETINOIN 0.05% CREAM	Denied	4	22.22%
TRETINOIN 0.05% GEL	Approved	1	33.33%
TRETINOIN 0.05% GEL	Denied	2	66.67%
TRETINOIN 0.1% CREAM	Approved	6	75.00%
TRETINOIN 0.1% CREAM	Denied	2	25.00%
TRETINOIN GEL MICRO 0.04% TUBE	Denied	1	100.00%
TRETINOIN GEL MICRO 0.1% TUBE	Denied	1	100.00%
TRIAMCINOLONE 0.05% OINTMENT	Denied	1	100.00%
TRIAZOLAM 0.25 MG TABLET	Denied	3	100.00%
TRIKAFTA 100/50/75 MG-150 MG	Approved	2	50.00%
TRIKAFTA 100/50/75 MG-150 MG	Denied	2	50.00%
TRIKAFTA 100-50-75 MG/150 MG	Approved	1	100.00%
TRIKAFTA 50-25-37.5 MG/75 MG	Approved	1	100.00%
TRI-LO-MARZIA TABLET	Denied	5	100.00%
TRI-LO-MILI TABLET	Denied	2	100.00%
TRI-LO-SPRINTEC TABLET	Approved	1	10.00%
TRI-LO-SPRINTEC TABLET	Denied	9	90.00%
TRINTELLIX TAB 5MG	Denied	1	100.00%
TRINTELLIX 10 MG TABLET	Approved	4	25.00%
TRINTELLIX 10 MG TABLET	Denied	12	75.00%
TRINTELLIX 20 MG TABLET	Approved	2	40.00%
TRINTELLIX 20 MG TABLET	Denied	3	60.00%
TRINTELLIX 5 MG TABLET	Approved	1	33.33%
TRINTELLIX 5 MG TABLET	Denied	2	66.67%
TRIUMEQ 600-50-300 MG TABLET	Approved	1	20.00%
TRIUMEQ 600-50-300 MG TABLET	Denied	4	80.00%
TROKENDI XR 100 MG CAPSULE	Approved	1	100.00%
TROKENDI XR 50 MG CAPSULE	Approved	1	100.00%
TROSPIUM CHLORIDE 20 MG TABLET	Approved	1	50.00%
TROSPIUM CHLORIDE 20 MG TABLET	Denied	1	50.00%
TROSPIUM CHLORIDE ER 60 MG CAP	Approved	2	40.00%
TROSPIUM CHLORIDE ER 60 MG CAP	Denied	3	60.00%
TRULANCE 3 MG TABLET	Approved	2	40.00%
TRULANCE 3 MG TABLET	Denied	3	60.00%
TRULICITY 0.75 MG/0.5 ML PEN	Denied	3	100.00%
TRULICITY 1.5 MG/0.5 ML PEN	Denied	6	100.00%
TRUVADA 100 MG-150 MG TABLET	Denied	1	100.00%

TRUVADA 200 MG-300 MG TABLET	Approved	1	4.35%
TRUVADA 200 MG-300 MG TABLET	Denied	22	95.65%
TUDORZA PRESSAIR 400 MCG INHAL	Approved	1	100.00%
TUKYSA 150 MG TABLET	Approved	1	100.00%
TYDEMY 3-0.03-0.451 MG TABLET	Denied	3	100.00%
TYMLOS 80 MCG DOSE PEN INJECTR	Approved	4	36.36%
TYMLOS 80 MCG DOSE PEN INJECTR	Denied	7	63.64%
TYSABRI 300 MG/15 ML VIAL	Approved	1	50.00%
TYSABRI 300 MG/15 ML VIAL	Denied	1	50.00%
UBRELVY 100 MG TABLET	Approved	18	78.26%
UBRELVY 100 MG TABLET	Denied	5	21.74%
UBRELVY 50 MG TABLET	Approved	20	64.52%
UBRELVY 50 MG TABLET	Denied	11	35.48%
ULORIC 40 MG TABLET	Approved	1	50.00%
ULORIC 40 MG TABLET	Denied	1	50.00%
UREA 10% CREAM	Denied	1	100.00%
UREA 45% CREAM	Denied	2	100.00%
URO-MP CAPSULE	Approved	1	20.00%
URO-MP CAPSULE	Denied	4	80.00%
URSO FORTE 500 MG TABLET	Denied	1	100.00%
UTIRA-C TABLET	Denied	2	100.00%
VAGIFEM 10 MCG VAGINAL TAB	Approved	2	40.00%
VAGIFEM 10 MCG VAGINAL TAB	Denied	3	60.00%
VALGANCICLOVIR 450 MG TABLET	Approved	1	25.00%
VALGANCICLOVIR 450 MG TABLET	Denied	3	75.00%
VALTOCO 10 MG NASAL SPRAY	Approved	1	50.00%
VALTOCO 10 MG NASAL SPRAY	Denied	1	50.00%
VANCOMYCIN HCL 125 MG CAPSULE	Approved	2	40.00%
VANCOMYCIN HCL 125 MG CAPSULE	Denied	3	60.00%
VANIQA 13.9% CREAM	Denied	2	100.00%
VASCEPA 1 GM CAPSULE	Approved	2	14.29%
VASCEPA 1 GM CAPSULE	Denied	12	85.71%
VELPHORO 500 MG CHEWABLE TAB	Approved	1	100.00%
VEMLIDY 25 MG TABLET	Approved	1	20.00%
VEMLIDY 25 MG TABLET	Denied	4	80.00%
VENCLEXTA 10 MG TABLET	Approved	1	100.00%
VENCLEXTA 100 MG TABLET	Approved	4	80.00%
VENCLEXTA 100 MG TABLET	Denied	1	20.00%
VENLAFAXINE HCL ER 150 MG TAB	Denied	4	100.00%
VENLAFAXINE HCL ER 225 MG TAB	Approved	2	66.67%
VENLAFAXINE HCL ER 225 MG TAB	Denied	1	33.33%
VENLAFAXINE HCL ER 37.5 MG TAB	Denied	1	100.00%
VENLAFAXINE HCL ER 75 MG TAB	Approved	1	50.00%
VENLAFAXINE HCL ER 75 MG TAB	Denied	1	50.00%
VERZENIO 150 MG TABLET	Approved	2	66.67%
VERZENIO 150 MG TABLET	Denied	1	33.33%
VIAGRA 100 MG TABLET	Denied	1	100.00%

VIBERZI 100 MG TABLET	Approved	2	50.00%
VIBERZI 100 MG TABLET	Denied	2	50.00%
VIIBRYD 10 MG TABLET	Approved	2	66.67%
VIIBRYD 10 MG TABLET	Denied	1	33.33%
VIIBRYD 10-20 MG STARTER PACK	Denied	1	100.00%
VIIBRYD 20 MG TABLET	Approved	2	13.33%
VIIBRYD 20 MG TABLET	Denied	13	86.67%
VIIBRYD 40 MG TABLET	Approved	7	41.18%
VIIBRYD 40 MG TABLET	Denied	10	58.82%
VIMPAT 10 MG/ML SOLUTION	Approved	1	100.00%
VIMPAT 100 MG TABLET	Approved	5	50.00%
VIMPAT 100 MG TABLET	Denied	5	50.00%
VIMPAT 150 MG TABLET	Approved	1	50.00%
VIMPAT 150 MG TABLET	Denied	1	50.00%
VIMPAT 200 MG TABLET	Approved	3	60.00%
VIMPAT 200 MG TABLET	Denied	2	40.00%
VIMPAT 50 MG TABLET	Approved	1	100.00%
VIOKACE 10,440-39,150 UNIT TAB	Denied	1	100.00%
VIVELLE-DOT 0.05 MG PATCH	Denied	2	100.00%
VIVELLE-DOT 0.075 MG PATCH	Denied	5	100.00%
VIVELLE-DOT 0.1 MG PATCH	Denied	3	100.00%
vivelle-dot dis 0.025mg	Denied	1	100.00%
VIVITROL 380 MG VIAL + DILUENT	Denied	1	100.00%
VIVITROL 380 MG VIAL-DILUENT	Approved	4	40.00%
VIVITROL 380 MG VIAL-DILUENT	Denied	6	60.00%
VOGELXO 50 MG/5 GRAM GEL PACKT	Denied	1	100.00%
VORICONAZOLE 200 MG TABLET	Approved	3	60.00%
VORICONAZOLE 200 MG TABLET	Denied	2	40.00%
VORICONAZOLE 50 MG TABLET	Denied	2	100.00%
VRAYLAR 1.5 MG CAPSULE	Approved	3	14.29%
VRAYLAR 1.5 MG CAPSULE	Denied	18	85.71%
VRAYLAR 1.5 MG-3 MG PACK	Denied	1	100.00%
VRAYLAR 3 MG CAPSULE	Approved	1	11.11%
VRAYLAR 3 MG CAPSULE	Denied	8	88.89%
VRAYLAR 4.5 MG CAPSULE	Approved	2	50.00%
VRAYLAR 4.5 MG CAPSULE	Denied	2	50.00%
VRAYLAR 6 MG CAPSULE	Approved	1	100.00%
VUMERITY DR 231 MG CAPSULE	Approved	3	42.86%
VUMERITY DR 231 MG CAPSULE	Denied	4	57.14%
VYLEESI 1.75 MG/0.3 ML AUTOINJ	Approved	1	100.00%
VYVANSE 10 MG CAPSULE	Approved	5	33.33%
VYVANSE 10 MG CAPSULE	Denied	10	66.67%
VYVANSE 20 MG CAPSULE	Approved	7	26.92%
VYVANSE 20 MG CAPSULE	Denied	19	73.08%
VYVANSE 20 MG CHEWABLE TABLET	Approved	1	100.00%
VYVANSE 30 MG CAPSULE	Approved	16	25.40%
VYVANSE 30 MG CAPSULE	Denied	47	74.60%

VYVANSE 30 MG CHEWABLE TABLET	Denied	2	100.00%
VYVANSE 40 MG CAPSULE	Approved	5	16.67%
VYVANSE 40 MG CAPSULE	Denied	25	83.33%
VYVANSE 50 MG CAPSULE	Approved	2	16.67%
VYVANSE 50 MG CAPSULE	Denied	10	83.33%
VYVANSE 60 MG CAPSULE	Approved	4	33.33%
VYVANSE 60 MG CAPSULE	Denied	8	66.67%
VYVANSE 70 MG CAPSULE	Approved	5	50.00%
VYVANSE 70 MG CAPSULE	Denied	5	50.00%
VYZULTA 0.024% OPTH SOLUTION	Approved	1	100.00%
WEGOVY 0.25 MG/0.5 ML PEN	Denied	3	100.00%
WEGOVY 0.5 MG/0.5 ML PEN	Denied	4	100.00%
WEGOVY 2.4 MG/0.75 ML PEN	Denied	2	100.00%
WELLBUTRIN XL 150 MG TABLET	Denied	2	100.00%
WELLBUTRIN XL 300 MG TABLET	Approved	1	100.00%
WINLEVI 1% CREAM	Denied	1	100.00%
WIXELA 100-50 INHUB	Denied	2	100.00%
WIXELA 250-50 INHUB	Approved	1	20.00%
WIXELA 250-50 INHUB	Denied	4	80.00%
WYMZYA FE CHEWABLE TABLET	Approved	1	100.00%
XELJANZ 10 MG TABLET	Denied	1	100.00%
XELJANZ 5 MG TABLET	Denied	8	100.00%
XELJANZ XR 11 MG TABLET	Approved	3	21.43%
XELJANZ XR 11 MG TABLET	Denied	11	78.57%
XENICAL 120 MG CAPSULE	Denied	1	100.00%
XERMELO 250 MG TABLET	Approved	1	100.00%
XHANCE 93 MCG NASAL SPRAY	Denied	1	100.00%
XIAFLEX 0.9 MG VIAL	Approved	2	50.00%
XIAFLEX 0.9 MG VIAL	Denied	2	50.00%
XIFAXAN 200 MG TABLET	Denied	1	100.00%
XIGDUO XR 10 MG-1,000 MG TAB	Approved	1	20.00%
XIGDUO XR 10 MG-1,000 MG TAB	Denied	4	80.00%
XIGDUO XR 5 MG-1,000 MG TABLET	Approved	1	50.00%
XIGDUO XR 5 MG-1,000 MG TABLET	Denied	1	50.00%
XIIDRA 5% EYE DROPS	Approved	36	67.92%
XIIDRA 5% EYE DROPS	Denied	17	32.08%
XOLAIR 150 MG/1.2 ML POWDER VL	Denied	6	100.00%
XOLAIR 150 MG/ML SYRINGE	Approved	6	54.55%
XOLAIR 150 MG/ML SYRINGE	Denied	5	45.45%
XOLEGEL 2% GEL	Denied	1	100.00%
XOPENEX HFA 45 MCG INHALER	Approved	1	33.33%
XOPENEX HFA 45 MCG INHALER	Denied	2	66.67%
XTAMPZA ER 13.5 MG CAPSULE	Approved	3	100.00%
XTAMPZA ER 9 MG CAPSULE	Approved	2	28.57%
XTAMPZA ER 9 MG CAPSULE	Denied	5	71.43%
XTANDI 40 MG CAPSULE	Denied	1	100.00%
XTANDI 40 MG TABLET	Approved	1	100.00%

XULANE PATCH	Approved	7	100.00%
XYOSTED 100 MG/0.5 ML AUTO-INJ	Denied	1	100.00%
XYOSTED 50 MG/0.5 ML AUTO-INJ	Approved	1	33.33%
XYOSTED 50 MG/0.5 ML AUTO-INJ	Denied	2	66.67%
XYOSTED 75 MG/0.5 ML AUTO-INJ	Denied	6	100.00%
XYREM 500 MG/ML ORAL SOLUTION	Approved	6	100.00%
YASMIN 28 TABLET	Approved	1	50.00%
YASMIN 28 TABLET	Denied	1	50.00%
YUPELRI 175 MCG/3 ML SOLUTION	Denied	2	100.00%
YUVAFEM 10 MCG VAGINAL INSERT	Denied	7	100.00%
ZALEPLON 10 MG CAPSULE	Approved	1	20.00%
ZALEPLON 10 MG CAPSULE	Denied	4	80.00%
ZALEPLON 5 MG CAPSULE	Denied	1	100.00%
ZELNORM 6 MG TABLET	Approved	1	100.00%
ZEMBRACE SYMTOUCH 3 MG/0.5 ML	Approved	1	100.00%
ZENATANE 20 MG CAPSULE	Approved	1	33.33%
ZENATANE 20 MG CAPSULE	Denied	2	66.67%
ZENATANE 30 MG CAPSULE	Approved	1	16.67%
ZENATANE 30 MG CAPSULE	Denied	5	83.33%
ZENATANE 40 MG CAPSULE	Approved	11	39.29%
ZENATANE 40 MG CAPSULE	Denied	17	60.71%
ZENZEDI 15 MG TABLET	Denied	1	100.00%
ZIANA GEL	Denied	1	100.00%
ZIOPTAN 0.0015% EYE DROPS	Approved	1	100.00%
ZIRGAN 0.15% OPHTHALMIC GEL	Approved	1	100.00%
ZOLEDRONIC ACID 5 MG/100 ML	Approved	1	50.00%
ZOLEDRONIC ACID 5 MG/100 ML	Denied	1	50.00%
ZOLOFT 100 MG TABLET	Approved	1	25.00%
ZOLOFT 100 MG TABLET	Denied	3	75.00%
ZOLPIDEM TART ER 12.5 MG TAB	Approved	1	10.00%
ZOLPIDEM TART ER 12.5 MG TAB	Denied	9	90.00%
ZOLPIDEM TART ER 6.25 MG TAB	Approved	1	33.33%
ZOLPIDEM TART ER 6.25 MG TAB	Denied	2	66.67%
ZOLPIDEM TARTRATE 10 MG TABLET	Approved	1	33.33%
ZOLPIDEM TARTRATE 10 MG TABLET	Denied	2	66.67%
ZOLPIDEM TARTRATE 5 MG TABLET	Approved	2	50.00%
ZOLPIDEM TARTRATE 5 MG TABLET	Denied	2	50.00%
ZOVIRAX 5% OINTMENT	Denied	4	100.00%
ZTLIDO 1.8% TOPICAL SYSTEM	Approved	3	60.00%
ZTLIDO 1.8% TOPICAL SYSTEM	Denied	2	40.00%
ZYTIGA 250 MG TABLET	Denied	1	100.00%

## Colorado Coverage Determinations

### by Provider Specialty

Provider Specialty	Outcome	EOC Count
Allergy/Immunology	Approved	21
Allergy/Immunology	Denied	31
Anesthesiology	Approved	7
Anesthesiology	Denied	14
Cardiology	Approved	45
Cardiology	Denied	56
Dermatology	Approved	150
Dermatology	Denied	297
Emergency Medicine	Denied	6
Endocrinology - Metabolism & Diabetes	Approved	40
Endocrinology - Metabolism & Diabetes	Denied	61
Endocrinology - Reproductive	Approved	1
Endocrinology - Reproductive	Denied	7
Family Practice	Approved	288
Family Practice	Denied	815
Family Practice - Nurse Practitioner	Approved	139
Family Practice - Nurse Practitioner	Denied	283
Gastroenterology	Approved	49
Gastroenterology	Denied	92
General Practice	Approved	1
General Practice	Denied	4
Gynecologic Oncology	Approved	2
Gynecologic Oncology	Denied	1
Hematology/Oncology (Blood Disease/Cancer)	Approved	52
Hematology/Oncology (Blood Disease/Cancer)	Denied	31
Hospice/Palliative Medicine	Approved	1
Hospitalist	Approved	3
Hospitalist	Denied	16
Infectious Disease	Approved	11
Infectious Disease	Denied	11
Internal Medicine	Approved	99
Internal Medicine	Denied	228
Maternal/Fetal Medicine	Denied	1
Midwifery	Approved	6
Midwifery	Denied	8
Nephrology (Kidney)	Approved	22
Nephrology (Kidney)	Denied	9
Neurology (Nervous System)	Approved	102
Neurology (Nervous System)	Denied	97
Neuromusculoskeletal Medicine & OMM	Approved	1
Nurse	Approved	1
Nurse	Denied	3

Nurse Practitioner	Approved	117
Nurse Practitioner	Denied	190
Obstetrics/Gynecology (OBGYN)	Approved	33
Obstetrics/Gynecology (OBGYN)	Denied	96
Oncology (Cancer)	Approved	4
Oncology (Cancer)	Denied	2
Ophthalmology	Approved	31
Ophthalmology	Denied	38
Optometry	Approved	15
Optometry	Denied	17
Other	Approved	6
Other	Denied	12
Otolaryngology ENT (Ear/Nose/Throat)	Approved	3
Otolaryngology ENT (Ear/Nose/Throat)	Denied	12
Pain Management	Approved	23
Pain Management	Denied	10
Pediatric Anesthesiology	Denied	1
Pediatric Dermatology	Approved	3
Pediatric Dermatology	Denied	1
Pediatric Emergency Medicine	Approved	2
Pediatric Emergency Medicine	Denied	4
Pediatric Endocrinology	Approved	19
Pediatric Endocrinology	Denied	25
Pediatric Gastroenterology	Approved	3
Pediatric Gastroenterology	Denied	7
Pediatric Medicine - Nurse Practitioner	Approved	13
Pediatric Medicine - Nurse Practitioner	Denied	22
Pediatric Medicine (Children)	Approved	26
Pediatric Medicine (Children)	Denied	87
Pediatric Nephrology (Kidney)	Approved	3
Pediatric Nephrology (Kidney)	Denied	1
Pediatric Neurology (Nervous System)	Approved	4
Pediatric Neurology (Nervous System)	Denied	4
Pediatric Psychiatry	Approved	5
Pediatric Psychiatry	Denied	8
Pediatric Pulmonology	Approved	10
Pediatric Pulmonology	Denied	9
Pediatric Rheumatology	Approved	1
Physical Medicine and Rehabilitation	Approved	18
Physical Medicine and Rehabilitation	Denied	19
Physician Assistant	Approved	324
Physician Assistant	Denied	586
Podiatry	Approved	3
Podiatry	Denied	11
Psychiatry	Approved	25
Psychiatry	Denied	38
Pulmonology	Approved	9



Pulmonology	Denied	10
Rheumatology	Approved	134
Rheumatology	Denied	84
Sleep Medicine	Approved	1
Sleep Medicine	Denied	1
Specialist	Approved	16
Specialist	Denied	37
Surgery - General	Approved	2
Surgery - General	Denied	10
Surgery - Hand	Approved	3
Surgery - Hand	Denied	3
Surgery - Neurological	Denied	1
Surgery - Orthopedic	Approved	7
Surgery - Orthopedic	Denied	37
Surgery - Plastic/Reconstructive	Denied	3
Surgical Oncology	Denied	1
Undefined	Approved	379
Undefined	Denied	740
Urogynecology	Approved	3
Urogynecology	Denied	11
Urology	Approved	14
Urology	Denied	28