

Provider Bulletin



News and Information

July 7, 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 September 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 September 1, 2021.

- Benlysta
- Caprelsa
- Cometriq
- Sofosbuvir-Velpatasvir
- Inlyta
- Lenvima
- Oriahnn
- Tepmetko

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