

Provider Bulletin

News and Information



September 13, 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 November 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 November 1, 2022.

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

- Braftovi
- Chenodal
- Inqovi
- Kadcyła
- Tafenlar
- Turalio
- Vonjo
- Xalkori
- Xuriden
- Zolinza

Please note: The criteria updates to GLP1 Agonists noted in the August Bulletin and Prior Authorization Criteria Updates document will **not** be implemented. The [Prior Authorization Criteria Updates \(effective October 1, 2022\)](#) document has been updated to reflect this change.