

Physician Specialty Overview by Prior Authorization Approval or Denial 4th Quarter 2021

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | UNSPECIFIED | Accutane 20MG OR CAPS | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3963 | UNSPECIFIED | Accutane 30MG OR CAPS | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3956 | UNSPECIFIED | Accutane 40MG OR CAPS | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3963 | UNSPECIFIED | Accutane 40MG OR CAPS | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3964 | UNSPECIFIED | Accutane 40MG OR CAPS | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3963 | UNSPECIFIED | Amitriptyline 25mg | Antidepressant | Approval | 1 |
| 3963 | UNSPECIFIED | Butorphanol Tartrate 10MG/ML NA SOLN | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Butorphanol Tartrate 10MG/ML NA SOLN | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | UNSPECIFIED | Cyclobenzaprine HCl 5MG OR TABS | MUSCLE RELAXANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Cyclobenzaprine HCl 5MG OR TABS | MUSCLE RELAXANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Cyclobenzaprine HCl 5MG OR TABS | MUSCLE RELAXANTS | Approval | 1 |
| 3963 | UNSPECIFIED | dapagliflozin (FARXIGA) 5 mg tablet | DIABETIC AGENT | Approval | 1 |
| 3963 | UNSPECIFIED | Derma-Smoothe/FS Scalp 0.01% EX OIL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Dimethyl Fumarate Starter Pack 120 & 240MG OR MISC | MULTIPLE SCLEROSIS | No Response | 1 |
| 3956 | UNSPECIFIED | Doxepin Cream | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | UNSPECIFIED | Drysol 20% | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3963 | UNSPECIFIED | Econazole Nitrate 1% EX CREA | ANTIFUNGALS | Approval | 1 |
| 3963 | UNSPECIFIED | Esomeprazole Magnesium 20MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Extavia | MULTIPLE SCLEROSIS | No Response | 1 |
| 3951 | UNSPECIFIED | Horizant 300MG OR TBCR | ANTICONVULSANTS | Approval | 1 |
| 3951 | UNSPECIFIED | hydrOXYzine HCl 25MG OR TABS | Antiemetic | No Response | 1 |
| 3951 | UNSPECIFIED | HYDROXYZINE HCL TAB 25MG | Antiemetic | Approval | 1 |
| 3951 | UNSPECIFIED | HYDROXYZINE HCL TAB 25MG | Antiemetic | No Response | 1 |
| 3963 | UNSPECIFIED | Marinol 5MG OR CAPS | Antiemetic | Approval | 1 |
| 3963 | UNSPECIFIED | Phexxi 1.8-1-0.4% VA GEL | Contraceptive | No Response | 1 |
| 3964 | UNSPECIFIED | Reyvow 100mg Tablets (lasmiditan) | ANTIMIGRAINE | Approval | 2 |
| 3951 | UNSPECIFIED | Spravato (84 MG Dose) 28MG/DEVICE NA SOPK | Antidepressant | Approval | 1 |
| 3965 | UNSPECIFIED | suvorexant 20 mg tablet (BELSOMRA) | SEDATIVES/HYPNOTICS | No Response | 1 |
| 3963 | UNSPECIFIED | Verquvo 2.5MG OR TABS | CARDIOVASCULAR AGENTS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3951 | UNSPECIFIED | Xhance (fluticasone nasal spray) | Nasal Corticosteroid | Denial | 1 |
| 3951 | UNSPECIFIED | Xhance 93MCG/ACT NA EXHU | Nasal Corticosteroid | Approval | 1 |
| 3951 | UNSPECIFIED | Xhance 93MCG/ACT NA EXHU | Nasal Corticosteroid | Denial | 1 |
| 3963 | UNSPECIFIED | Xhance 93MCG/ACT NA EXHU | Nasal Corticosteroid | Approval | 2 |
| 3964 | UNSPECIFIED | Xhance 93MCG/ACT NA EXHU | Nasal Corticosteroid | No Response | 1 |
| 3965 | UNSPECIFIED | Xhance 93MCG/ACT NA EXHU | Nasal Corticosteroid | Approval | 1 |
| 3963 | UNSPECIFIED | Zolpidem Tartrate 5MG OR TABS | Hypnotic | Approval | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | Xhance 93MCG/ACT NA EXHU | Nasal Corticosteroid | Approval | 1 |
| 3963 | ANESTHESIOLOGY | Horizant 300MG OR TBCR | ANTICONVULSANTS | Approval | 1 |
| 3956 | CARDIOLOGY | Ranexa 1000MG OR TB12 | CARDIOVASCULAR AGENTS | Approval | 1 |
| 3956 | CARDIOLOGY | Ranexa 1000MG OR TB12 | CARDIOVASCULAR AGENTS | No Response | 1 |
| 3963 | CARDIOLOGY | Verquvo 2.5MG OR TABS | CARDIOVASCULAR AGENTS | No Response | 1 |
| 3962 | CARDIOLOGY | Vyndamax | CARDIOVASCULAR AGENTS | Denial | 1 |
| 3962 | CARDIOLOGY | Vyndamax 61MG OR CAPS | CARDIOVASCULAR AGENTS | No Response | 2 |
| 3951 | CLINICAL NURSE SPECIALIST, ACUTE CARE | Levemir FlexTouch 100UNIT/ML SC SOPN | DIABETIC AGENT | No Response | 1 |
| 3963 | DERMATOLOGY | Accutane 40MG OR CAPS | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3964 | DERMATOLOGY | Clobex 0.05% EX SHAM | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3963 | DERMATOLOGY | Hydrocortisone 2.5% Ointment | ALL OTHER DERMATOLOGICALS | Denial | 1 |
| 3963 | DERMATOLOGY | Sernivo 0.05 % topical spray with pump | ALL OTHER DERMATOLOGICALS | No Response | 1 |
| 3963 | DERMATOLOGY | Sernivo 0.05% EX EMUL | ALL OTHER DERMATOLOGICALS | No Response | 1 |
| 3964 | DERMATOLOGY | Stromectol 3 mg tablet | Anthelmintic | No Response | 1 |
| 3963 | DERMATOLOGY | Ximino 90MG OR CP24 | Antibiotic | No Response | 1 |
| 3956 | FAMILY PRACTICE | Advair Diskus 500-50MCG/DOSE IN AEPB | RESPIRATORY AGENTS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Albuterol Sulfate (5 MG/ML)0.5% IN NEBU | RESPIRATORY AGENTS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Albuterol Sulfate Nebulization Suspension 0.5%(5mg/mL) | RESPIRATORY AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | ALPRAZOLAM 1MG TAB | Antianxiety | Approval | 1 |
| 3963 | FAMILY PRACTICE | Amitriptyline 100mg | Antidepressant | Denial | 1 |
| 3963 | FAMILY PRACTICE | Amitriptyline 75mg | Antidepressant | No Response | 1 |
| 3963 | FAMILY PRACTICE | bosentan 125 mg | Vasodilator | Approval | 1 |
| 3956 | FAMILY PRACTICE | clomiPHENE Citrate 50MG OR TABS | Ovulation Stimulator | No Response | 1 |
| 3961 | FAMILY PRACTICE | Dextroamphetamine 15mg ER Capsule | CNS STIMULANTS | Approval | 1 |
| 3961 | FAMILY PRACTICE | Dextroamphetamine 15mg ER Capsule | CNS STIMULANTS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Edarbyclor 40-12.5MG OR TABS | CARDIOVASCULAR AGENTS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Eszopiclone 3MG OR TABS | Hypnotic | Approval | 1 |
| 3956 | FAMILY PRACTICE | Finasteride 1MG OR TABS | GENITOURINARY AGENTS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Lidoderm 5 % topical patch | ALL OTHER DERMATOLOGICALS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | FAMILY PRACTICE | Movantik 25MG OR TABS | GASTROINTESTINAL AGENTS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Percocet 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Qulipta 60MG OR TABS | ANTIMIGRAINE | Approval | 1 |
| 3956 | FAMILY PRACTICE | Zioptan (tafluprost) | Antiglaucoma | Approval | 1 |
| 3963 | FAMILY PRACTICE | Zolpidem Tartrate 10MG OR TABS | Hypnotic | Approval | 1 |
| 3963 | GENERAL PRACTICE | bosentan 125 mg | Vasodilator | Approval | 1 |
| 3963 | GENERAL PRACTICE | Estradiol 0.025MG/24HR TD PTTW | ESTROGENS | Approval | 1 |
| 3956 | GENERAL PRACTICE | Zioptan (tafluprost) | Antiglaucoma | Approval | 1 |
| 3964 | HEMATOLOGY & ONCOLOGY | Jakafi 15MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Rozlytrek | ANTINEOPLASTICS | No Response | 1 |
| 3963 | INTERNAL MEDICINE | D3-50 (Cholecalciferol) 1.25 MG (50000 UT) Oral Capsule | Vitamins | No Response | 1 |
| 3964 | INTERNAL MEDICINE | Daraprim (pyrimethamine) | Antimalarial Agent | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Edluar (Zolpidem Tartrate) 10 MG Sublingual Tablet | Hypnotic | No Response | 1 |
| 3964 | INTERNAL MEDICINE | Pyrimethamine 25MG OR TABS | Antimalarial Agent | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Spravato | Antidepressant | Denial | 1 |
| 3964 | INTERNAL MEDICINE | Spravato | Antidepressant | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Syringe (Syringe/Needle (Disp) 3 ML) 21G X 1 " 3 ML Each | Diabetic supplies | No Response | 1 |
| 3951 | INTERNAL MEDICINE | Tresiba FlexTouch 100UNIT/ML SC SOPN | DIABETIC AGENT | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Xhance (fluticasone nasal spray) | Nasal Corticosteroid | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Zomig 5MG OR TABS | ANTIMIGRAINE | Approval | 1 |
| 3951 | NEUROLOGY | pentazocine-naloxone 50-0.5 mg tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3965 | NEUROLOGY | Ponvory Starter Pack 2-3-4-5-6-7-8-9& 10 MG OR TBPK | MULTIPLE SCLEROSIS | No Response | 1 |
| 3963 | NEUROLOGY | Qulipta 60MG OR TABS | ANTIMIGRAINE | Approval | 1 |
| 3963 | NEUROLOGY | Reyvow 100mg Tablets (lasmiditan) | ANTIMIGRAINE | Approval | 1 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Eliquis 2.5MG OR TABS | Anticoagulant | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | AeroChamber Plus Flo-Vu XX MISC | RESPIRATORY AGENTS | No Response | 1 |
| 3967 | NURSE PRACTITIONER, FAMILY HEALTH | Fosamax Plus D (alendronate/cholecalciferol) | OSTEOPOROSIS AGENTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | FreeStyle Libre 2 Sensor XX MISC | Diabetic supplies | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Pristiq 50 mg tablet,extended release | Antidepressant | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Rena-Vite Rx 1MG OR TABS | Vitamins | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Tresiba FlexTouch 200UNIT/ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Xhance (fluticasone nasal spray) | Nasal Corticosteroid | Denial | 1 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | xhance 93 mcg/actuation aerosol breath activated | Nasal Corticosteroid | No Response | 1 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Xhance 93MCG/ACT NA EXHU | Nasal Corticosteroid | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Zolpidem Tartrate 5MG OR TABS | Hypnotic | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Betamethasone Dipropionate (Augmented) 0.05% Cream | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Eliquis 5mg | Anticoagulant | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Pulmicort Flexhaler 180MCG/ACT IN AEPB | RESPIRATORY AGENTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Wegovy 1MG/0.5ML SC SOAJ | Obesity Agent | No Response | 1 |
| 3964 | OBSTETRICS & GYNECOLOGY | Chorionic Gonadotropin 10000UNIT IM SOLR | Ovulation Stimulator | No Response | 1 |
| 3951 | OBSTETRICS & GYNECOLOGY | Myfembree 40-1-0.5MG OR TABS | ESTROGENS | Approval | 1 |
| 3963 | OPHTHALMOLOGY | Rocklatan 0.02-0.005% OP SOLN | Antiglaucoma | Approval | 1 |
| 3963 | OPTOMETRIST, UNSPECIFIED | Combigan 0.2-0.5% Ophthalmic Solution | Antiglaucoma | No Response | 1 |
| 3962 | OPTOMETRIST, UNSPECIFIED | Rocklatan (netarsudil-latanoprost) | Antiglaucoma | Denial | 1 |
| 3964 | OPTOMETRIST, UNSPECIFIED | Vyzulta (latanoprostene) | Antiglaucoma | Approval | 1 |
| 3956 | OPTOMETRIST, UNSPECIFIED | zioptan (pf) 0.0015% dropperette | Antiglaucoma | No Response | 1 |
| 3963 | OTOLARYNGOLOGY | Xhance (fluticasone nasal spray) | Nasal Corticosteroid | Denial | 1 |
| 3967 | OTOLARYNGOLOGY | Xhance (fluticasone nasal spray) | Nasal Corticosteroid | Denial | 1 |
| 3963 | OTOLARYNGOLOGY | Xhance 93MCG/ACT NA EXHU | Nasal Corticosteroid | Approval | 1 |
| 3963 | OTOLARYNGOLOGY | Xhance 93MCG/ACT NA EXHU | Nasal Corticosteroid | Denial | 1 |
| 3963 | OTOLARYNGOLOGY | Xhance 93MCG/ACT NA EXHU | Nasal Corticosteroid | No Response | 1 |
| 3956 | PEDIATRICS | Accu-Chek Guide VI STRP | Diabetic supplies | Approval | 1 |
| 3963 | PEDIATRICS | bosentan 125 mg | Vasodilator | Approval | 1 |
| 3956 | PEDIATRICS | Esomeprazole Magnesium 10MG OR PACK | GENITOURINARY AGENTS | No Response | 1 |
| 3956 | PEDIATRICS | Zioptan (tafluprost) | Antiglaucoma | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Accutane 30MG OR CAPS | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Accutane 40MG OR CAPS | ALL OTHER DERMATOLOGICALS | Approval | 3 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | busPIRone 5 mg tablet (BUSPAR) | Antidepressant | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Pracasil TM-Plus gel | ALL OTHER DERMATOLOGICALS | No Response | 1 |
| 3963 | PODIATRIST, UNSPECIFIED | Diprolene (augmented) 0.05 % topical ointment | ALL OTHER DERMATOLOGICALS | No Response | 1 |
| 3963 | PSYCHIATRY | bosentan 125 mg | Vasodilator | Approval | 1 |
| 3963 | PSYCHIATRY | Emsam (selegiline patch) | AntiParkinson Agent | Approval | 2 |
| 3951 | PSYCHIATRY | Spravato | Antidepressant | Denial | 2 |
| 3962 | PSYCHIATRY | Spravato | Antidepressant | Approval | 1 |
| 3962 | PSYCHIATRY | Spravato | Antidepressant | Denial | 1 |
| 3963 | PSYCHIATRY | Spravato | Antidepressant | Denial | 1 |
| 3956 | PSYCHIATRY | Zioptan (tafluprost) | Antiglaucoma | Approval | 1 |
| 3963 | PULMONARY DISEASES | Fasenra Pen 30MG/ML SC SOAJ | RESPIRATORY AGENTS | No Response | 1 |
| 3956 | PULMONARY DISEASES | Tobi 300MG/5ML IN NEBU | Antibiotic | No Response | 1 |
| 3963 | RHEUMATOLOGY | Cimzia Prefilled 2 X 200MG/ML SC KIT | ANTIARTHRITICS | No Response | 1 |
| 3961 | RHEUMATOLOGY | Ilaris 150MG/ML SC SOLN | ANTIARTHRITICS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--------------|---------------------------|-------------|-------|
| 3956 | UROLOGY | Eligard 30mg | ANTINEOPLASTICS | Approval | 1 |
| 3951 | UNSPECIFIED | Acitretin | ALL OTHER DERMATOLOGICALS | Denial | 1 |
| 3963 | UNSPECIFIED | Acitretin | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3951 | UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 6 |
| 3956 | UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 8 |
| 3956 | UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | Denial | 8 |
| 3956 | UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | No Response | 6 |
| 3962 | UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | No Response | 2 |
| 3963 | UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 10 |
| 3963 | UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3963 | UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | No Response | 2 |
| 3951 | UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3951 | UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3951 | UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | No Response | 2 |
| 3956 | UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | Approval | 32 |
| 3956 | UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | Denial | 4 |
| 3956 | UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | No Response | 14 |
| 3963 | UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | Approval | 4 |
| 3963 | UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | Denial | 6 |
| 3963 | UNSPECIFIED | Tretinoin | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3964 | UNSPECIFIED | Tretinoin | ALL OTHER DERMATOLOGICALS | Denial | 1 |
| 3963 | DERMATOLOGY | Adapalene | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3951 | DERMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3951 | DERMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3951 | DERMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | No Response | 2 |
| 3956 | DERMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3962 | DERMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | No Response | 2 |
| 3963 | DERMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3963 | DERMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | Denial | 4 |
| 3964 | DERMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | No Response | 4 |
| 3951 | DERMATOLOGY | Taltz | ALL OTHER DERMATOLOGICALS | Approval | 4 |
| 3956 | DERMATOLOGY | Taltz | ALL OTHER DERMATOLOGICALS | Approval | 14 |
| 3956 | DERMATOLOGY | Taltz | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3963 | DERMATOLOGY | Taltz | ALL OTHER DERMATOLOGICALS | Approval | 6 |
| 3963 | DERMATOLOGY | Taltz | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3951 | DERMATOLOGY | Tretinoin | ALL OTHER DERMATOLOGICALS | Denial | 1 |
| 3951 | DERMATOLOGY | Tretinoin | ALL OTHER DERMATOLOGICALS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-----------|---------------------------|-------------|-------|
| 3963 | DERMATOLOGY | Tretinoin | ALL OTHER DERMATOLOGICALS | Denial | 1 |
| 3965 | DERMATOLOGY | Tretinoin | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3961 | FAMILY PRACTICE | Cosentyx | ALL OTHER DERMATOLOGICALS | Denial | 4 |
| 3963 | FAMILY PRACTICE | Cosentyx | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3956 | FAMILY PRACTICE | Taltz | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3951 | FAMILY PRACTICE | Tretinoin | ALL OTHER DERMATOLOGICALS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Cosentyx | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3961 | INTERNAL MEDICINE | Taltz | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3961 | INTERNAL MEDICINE | Taltz | ALL OTHER DERMATOLOGICALS | No Response | 2 |
| 3964 | INTERNAL MEDICINE | Tretinoin | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Cosentyx | ALL OTHER DERMATOLOGICALS | No Response | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Finacea | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Taltz | ALL OTHER DERMATOLOGICALS | Denial | 6 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Taltz | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Tretinoin | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Tretinoin | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Tretinoin | ALL OTHER DERMATOLOGICALS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | No Response | 2 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Tretinoin | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Acitretin | ALL OTHER DERMATOLOGICALS | Denial | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 4 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | Denial | 4 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | No Response | 2 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | Approval | 6 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | Denial | 4 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | No Response | 2 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | Approval | 18 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | No Response | 14 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---------------------------------------|-------------------------------|-------------|-------|
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | No Response | 4 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Taltz | ALL OTHER DERMATOLOGICALS | Approval | 4 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin | ALL OTHER DERMATOLOGICALS | Denial | 1 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin | ALL OTHER DERMATOLOGICALS | Denial | 1 |
| 3965 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin | ALL OTHER DERMATOLOGICALS | Denial | 1 |
| 3967 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin | ALL OTHER DERMATOLOGICALS | Approval | 1 |
| 3951 | RHEUMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 4 |
| 3951 | RHEUMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | No Response | 6 |
| 3956 | RHEUMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3956 | RHEUMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3956 | RHEUMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | No Response | 4 |
| 3961 | RHEUMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3963 | RHEUMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3963 | RHEUMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | Denial | 2 |
| 3965 | RHEUMATOLOGY | Cosentyx | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3956 | RHEUMATOLOGY | Taltz | ALL OTHER DERMATOLOGICALS | Denial | 4 |
| 3956 | RHEUMATOLOGY | Taltz | ALL OTHER DERMATOLOGICALS | No Response | 2 |
| 3963 | RHEUMATOLOGY | Taltz | ALL OTHER DERMATOLOGICALS | Approval | 2 |
| 3956 | UNSPECIFIED | Epinephrine 0.3mg Injection (1:1000) | Alpha/Beta Adrenergic Agonist | Approval | 1 |
| 3956 | UNSPECIFIED | EPINEPHrine 0.3MG/0.3ML IJ SOAJ | Alpha/Beta Adrenergic Agonist | Denial | 2 |
| 3956 | ALLERGY & IMMUNOLOGY | Epinephrine 0.3mg Injection (1:1000) | Alpha/Beta Adrenergic Agonist | Denial | 1 |
| 3956 | ALLERGY & IMMUNOLOGY | EPINEPHrine 0.3MG/0.3ML IJ SOAJ | Alpha/Beta Adrenergic Agonist | No Response | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | EPINEPHrine 0.3MG/0.3ML IJ SOAJ | Alpha/Beta Adrenergic Agonist | No Response | 2 |
| 3961 | FAMILY PRACTICE | EPINEPHrine 0.15MG/0.3ML IJ SOAJ | Alpha/Beta Adrenergic Agonist | Denial | 1 |
| 3956 | FAMILY PRACTICE | Epinephrine 0.3mg Injection (1:1000) | Alpha/Beta Adrenergic Agonist | Approval | 1 |
| 3956 | FAMILY PRACTICE | Epinephrine 0.3mg Injection (1:1000) | Alpha/Beta Adrenergic Agonist | Denial | 2 |
| 3961 | FAMILY PRACTICE | Epinephrine 0.3mg Injection (1:1000) | Alpha/Beta Adrenergic Agonist | Denial | 1 |
| 3963 | FAMILY PRACTICE | Epinephrine 0.3mg Injection (1:1000) | Alpha/Beta Adrenergic Agonist | Denial | 1 |
| 3956 | FAMILY PRACTICE | EPINEPHrine 0.3MG/0.3ML IJ SOAJ | Alpha/Beta Adrenergic Agonist | Denial | 1 |
| 3961 | INTERNAL MEDICINE | Epinephrine 0.3mg Injection (1:1000) | Alpha/Beta Adrenergic Agonist | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Epinephrine 0.15mg Injection (1:2000) | Alpha/Beta Adrenergic Agonist | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Epinephrine 0.3mg Injection (1:1000) | Alpha/Beta Adrenergic Agonist | Denial | 1 |
| 3956 | OTOLARYNGOLOGY | EPINEPHrine 0.3MG/0.3ML IJ SOAJ | Alpha/Beta Adrenergic Agonist | Denial | 1 |
| 3963 | UNSPECIFIED | Vyvanse | AMPHETAMINE PREPARATIONS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Vyvanse 50mg | AMPHETAMINE PREPARATIONS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Vyvanse 50MG OR CAPS | AMPHETAMINE PREPARATIONS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | INTERNAL MEDICINE | Vyvanse 40mg Capsules | AMPHETAMINE PREPARATIONS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Vyvanse | AMPHETAMINE PREPARATIONS | Denial | 1 |
| 3963 | PEDIATRICS | VYVANSE CAP 10MG | AMPHETAMINE PREPARATIONS | Approval | 1 |
| 3965 | PSYCHIATRY | Vyvanse 60MG OR CAPS | AMPHETAMINE PREPARATIONS | Denial | 1 |
| 3956 | RADIATION ONCOLOGY | Vyvanse 50MG OR CAPS | AMPHETAMINE PREPARATIONS | No Response | 1 |
| 3956 | UNSPECIFIED | Savella 50MG OR TABS | Analgesic | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Savella 25MG OR TABS | Analgesic | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Savella 50MG OR TABS | Analgesic | Approval | 1 |
| 3956 | FAMILY PRACTICE | Savella (milnacipran) | Analgesic | Approval | 1 |
| 3956 | FAMILY PRACTICE | Savella (milnacipran) | Analgesic | Denial | 1 |
| 3956 | FAMILY PRACTICE | Savella 25MG OR TABS | Analgesic | Approval | 1 |
| 3956 | NEUROLOGICAL SURGERY | Savella (milnacipran) | Analgesic | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Savella 100MG OR TABS | Analgesic | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Savella 25MG OR TABS | Analgesic | Approval | 1 |
| 3963 | UNSPECIFIED | Xyosted (testosterone enanthate) | ANDROGENS | Approval | 1 |
| 3963 | UNSPECIFIED | Xyosted (testosterone enanthate) | ANDROGENS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Xyosted (testosterone enanthate) | ANDROGENS | Denial | 1 |
| 3965 | FAMILY PRACTICE | Xyosted (testosterone enanthate) | ANDROGENS | Denial | 1 |
| 3963 | UNSPECIFIED | Androderm 4MG/24HR TD PT24 | ANDROGENS | Approval | 1 |
| 3964 | UNSPECIFIED | Androderm 4MG/24HR TD PT24 | ANDROGENS | Approval | 1 |
| 3963 | UNSPECIFIED | Depo-Testosterone 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3951 | UNSPECIFIED | Testosterone 1.62% TD GEL | ANDROGENS | Approval | 1 |
| 3963 | UNSPECIFIED | Testosterone 1.62% TD GEL | ANDROGENS | Approval | 2 |
| 3963 | UNSPECIFIED | Testosterone 10 MG/ACT (2%) Transdermal Gram | ANDROGENS | No Response | 2 |
| 3963 | UNSPECIFIED | Testosterone 20.25 MG/1.25GM(1.62%) TD GEL | ANDROGENS | Approval | 1 |
| 3951 | UNSPECIFIED | Testosterone 20.25 MG/ACT(1.62%) TD GEL | ANDROGENS | Approval | 1 |
| 3964 | UNSPECIFIED | Testosterone 20.25 MG/ACT(1.62%) TD GEL | ANDROGENS | Approval | 1 |
| 3963 | UNSPECIFIED | Testosterone 25 MG/2.5GM(1%) TD GEL | ANDROGENS | Approval | 1 |
| 3963 | UNSPECIFIED | Testosterone 50 MG/5GM(1%) TD GEL | ANDROGENS | Denial | 1 |
| 3951 | UNSPECIFIED | Testosterone Cypionate 100 MG/ML Intramuscular Each | ANDROGENS | No Response | 1 |
| 3956 | UNSPECIFIED | Testosterone Cypionate 100mg/mL | ANDROGENS | Denial | 1 |
| 3951 | UNSPECIFIED | Testosterone Cypionate 100MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3956 | UNSPECIFIED | Testosterone Cypionate 100MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3956 | UNSPECIFIED | Testosterone Cypionate 100MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3963 | UNSPECIFIED | Testosterone Cypionate 200 MG/ML Intramuscular Each | ANDROGENS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3956 | UNSPECIFIED | Testosterone Cypionate 200 MG/ML Intramuscular Milliliter | ANDROGENS | No Response | 1 |
| 3963 | UNSPECIFIED | Testosterone Cypionate 200 MG/ML Intramuscular Milliliter | ANDROGENS | Denial | 1 |
| 3963 | UNSPECIFIED | Testosterone Cypionate 200 MG/ML Intramuscular Milliliter | ANDROGENS | No Response | 5 |
| 3956 | UNSPECIFIED | testosterone cypionate 200 mg/mL intramuscular oil | ANDROGENS | No Response | 1 |
| 3951 | UNSPECIFIED | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 3 |
| 3956 | UNSPECIFIED | Testosterone Cypionate 200mg/mL | ANDROGENS | Approval | 2 |
| 3956 | UNSPECIFIED | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 9 |
| 3961 | UNSPECIFIED | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 1 |
| 3963 | UNSPECIFIED | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 1 |
| 3951 | UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 9 |
| 3951 | UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 3 |
| 3951 | UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 3 |
| 3956 | UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 11 |
| 3956 | UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 11 |
| 3956 | UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 3 |
| 3961 | UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 2 |
| 3963 | UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 9 |
| 3963 | UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 7 |
| 3963 | UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3964 | UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3965 | UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 2 |
| 3951 | UNSPECIFIED | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 2 |
| 3963 | UNSPECIFIED | Testosterone Cypionate IM Injection | ANDROGENS | Approval | 5 |
| 3963 | UNSPECIFIED | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 13 |
| 3964 | UNSPECIFIED | Testosterone Cypionate IM Injection | ANDROGENS | Approval | 1 |
| 3964 | UNSPECIFIED | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 1 |
| 3965 | UNSPECIFIED | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 1 |
| 3963 | UNSPECIFIED | Testosterone Enanthate 200 MG/ML Intramuscular Milliliter | ANDROGENS | No Response | 1 |
| 3963 | UNSPECIFIED | Testosterone Enanthate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3956 | UNSPECIFIED | Testosterone Gel 10mg/Act | ANDROGENS | Denial | 1 |
| 3951 | UNSPECIFIED | Testosterone Transdermal Gel | ANDROGENS | Approval | 1 |
| 3951 | UNSPECIFIED | Testosterone Transdermal Gel | ANDROGENS | Denial | 1 |
| 3964 | UNSPECIFIED | Testosterone Transdermal Gel | ANDROGENS | Approval | 1 |
| 3964 | UNSPECIFIED | Testosterone Transdermal Gel | ANDROGENS | Denial | 1 |
| 3965 | UNSPECIFIED | Testosterone Transdermal Gel | ANDROGENS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3965 | UNSPECIFIED | Testosterone Transdermal Gel | ANDROGENS | Denial | 1 |
| 3951 | UNSPECIFIED | Testosterone transdermal solution | ANDROGENS | Denial | 1 |
| 3951 | ALLERGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3951 | ALLERGY | Testosterone Cypionate IM Injection | ANDROGENS | Approval | 1 |
| 3951 | CHIROPRACTOR, UNSPECIFIED | Testosterone Cypionate 200mg/mL | ANDROGENS | No Response | 1 |
| 3963 | CHIROPRACTOR, UNSPECIFIED | Testosterone Cypionate 200mg/mL | ANDROGENS | Approval | 1 |
| 3956 | CHIROPRACTOR, UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | CHIROPRACTOR, UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3951 | CHIROPRACTOR, UNSPECIFIED | Testosterone Cypionate IM Injection | ANDROGENS | Approval | 1 |
| 3963 | CHIROPRACTOR, UNSPECIFIED | Testosterone Cypionate IM Injection | ANDROGENS | Approval | 1 |
| 3964 | CHIROPRACTOR, UNSPECIFIED | Testosterone Cypionate IM Injection | ANDROGENS | Approval | 1 |
| 3951 | EMERGENCY MEDICINE | Testosterone 10 MG/ACT(2%) TD GEL | ANDROGENS | Approval | 1 |
| 3961 | EMERGENCY MEDICINE | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 1 |
| 3956 | EMERGENCY MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | EMERGENCY MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 5 |
| 3963 | EMERGENCY MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3964 | EMERGENCY MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 2 |
| 3964 | EMERGENCY MEDICINE | Testosterone Cypionate IM Injection | ANDROGENS | Approval | 1 |
| 3963 | ENDOCRINOLOGY, DIABETES & METABOLISM | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 2 |
| 3963 | ENDOCRINOLOGY, DIABETES & METABOLISM | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 2 |
| 3951 | FAMILY PRACTICE | Androderm 2MG/24HR TD PT24 | ANDROGENS | Approval | 1 |
| 3964 | FAMILY PRACTICE | Androderm 4MG/24HR TD PT24 | ANDROGENS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Depo-Testosterone 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Depo-Testosterone 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Depo-Testosterone 200MG/ML IM SOLN | ANDROGENS | Denial | 3 |
| 3951 | FAMILY PRACTICE | Testosterone 1.62% TD GEL | ANDROGENS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Testosterone 10 MG/ACT(2%) TD GEL | ANDROGENS | Approval | 2 |
| 3963 | FAMILY PRACTICE | Testosterone 10 MG/ACT(2%) TD GEL | ANDROGENS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Testosterone 20.25 MG/1.25GM(1.62%) TD GEL | ANDROGENS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Testosterone 20.25 MG/ACT(1.62%) TD GEL | ANDROGENS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Testosterone 20.25 MG/ACT(1.62%) TD GEL | ANDROGENS | Denial | 2 |
| 3951 | FAMILY PRACTICE | Testosterone 30MG/ACT TD SOLN | ANDROGENS | Approval | 3 |
| 3962 | FAMILY PRACTICE | Testosterone 30MG/ACT TD SOLN | ANDROGENS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Testosterone 30MG/ACT TD SOLN | ANDROGENS | Approval | 2 |
| 3951 | FAMILY PRACTICE | Testosterone 40.5 MG/2.5GM(1.62%) TD GEL | ANDROGENS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Testosterone 50 MG/5GM(1%) TD GEL | ANDROGENS | Approval | 2 |
| 3963 | FAMILY PRACTICE | Testosterone 50 MG/5GM(1%) TD GEL | ANDROGENS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3951 | FAMILY PRACTICE | Testosterone Cypionate 100 MG/ML Intramuscular Milliliter | ANDROGENS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Testosterone Cypionate 100 MG/ML Intramuscular Milliliter | ANDROGENS | No Response | 1 |
| 3956 | FAMILY PRACTICE | testosterone cypionate 100 mg/mL intramuscular oil | ANDROGENS | No Response | 1 |
| 3951 | FAMILY PRACTICE | Testosterone Cypionate 100mg/mL | ANDROGENS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Testosterone Cypionate 100MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Testosterone Cypionate 100MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3961 | FAMILY PRACTICE | Testosterone Cypionate 100MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Testosterone Cypionate 100MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Testosterone Cypionate 100MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Testosterone Cypionate 200 MG/ML Intramuscular Milliliter | ANDROGENS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Testosterone Cypionate 200 MG/ML Intramuscular Milliliter | ANDROGENS | Denial | 1 |
| 3956 | FAMILY PRACTICE | testosterone cypionate 200 mg/mLmg/ml oil | ANDROGENS | Approval | 1 |
| 3956 | FAMILY PRACTICE | testosterone cypionate 200 mg/mLmg/ml oil | ANDROGENS | No Response | 1 |
| 3963 | FAMILY PRACTICE | testosterone cypionate 200 mg/mLmg/ml oil | ANDROGENS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Testosterone Cypionate 200mg/mL | ANDROGENS | Approval | 6 |
| 3956 | FAMILY PRACTICE | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 8 |
| 3956 | FAMILY PRACTICE | Testosterone Cypionate 200mg/mL | ANDROGENS | No Response | 1 |
| 3961 | FAMILY PRACTICE | Testosterone Cypionate 200mg/mL | ANDROGENS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Testosterone Cypionate 200mg/mL | ANDROGENS | Approval | 4 |
| 3963 | FAMILY PRACTICE | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 4 |
| 3951 | FAMILY PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 11 |
| 3951 | FAMILY PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 6 |
| 3951 | FAMILY PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 18 |
| 3956 | FAMILY PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 15 |
| 3961 | FAMILY PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3961 | FAMILY PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 24 |
| 3963 | FAMILY PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 14 |
| 3964 | FAMILY PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 5 |
| 3964 | FAMILY PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 2 |
| 3964 | FAMILY PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 2 |
| 3965 | FAMILY PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 3 |
| 3951 | FAMILY PRACTICE | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 6 |
| 3951 | FAMILY PRACTICE | Testosterone Cypionate IM Injection | ANDROGENS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | FAMILY PRACTICE | Testosterone Cypionate IM Injection | ANDROGENS | Approval | 8 |
| 3963 | FAMILY PRACTICE | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 10 |
| 3963 | FAMILY PRACTICE | Testosterone Cypionate IM Injection | ANDROGENS | No Response | 1 |
| 3964 | FAMILY PRACTICE | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 12 |
| 3951 | FAMILY PRACTICE | Testosterone Enanthate 200mg/mL | ANDROGENS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Testosterone Enanthate 200mg/mL | ANDROGENS | Denial | 2 |
| 3951 | FAMILY PRACTICE | Testosterone Enanthate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Testosterone Enanthate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Testosterone Enanthate IM Injection | ANDROGENS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Testosterone Gel 1% (25mg) | ANDROGENS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Testosterone Transdermal Gel | ANDROGENS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Testosterone Transdermal Gel | ANDROGENS | Denial | 2 |
| 3951 | FAMILY PRACTICE | Testosterone Transdermal Gel | ANDROGENS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Testosterone Transdermal Gel | ANDROGENS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Testosterone Transdermal Gel | ANDROGENS | No Response | 1 |
| 3967 | FAMILY PRACTICE | Testosterone Transdermal Gel | ANDROGENS | Denial | 1 |
| 3956 | GENERAL PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3964 | GENERAL PRACTICE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3964 | GENERAL PRACTICE | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Androderm 4MG/24HR TD PT24 | ANDROGENS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Testosterone 20.25 MG/ACT(1.62%) TD GEL | ANDROGENS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Testosterone 20.25 MG/ACT(1.62%) TD GEL | ANDROGENS | Denial | 1 |
| 3964 | INTERNAL MEDICINE | Testosterone 20.25 MG/ACT(1.62%) TD GEL | ANDROGENS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Testosterone 30MG/ACT TD SOLN | ANDROGENS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Testosterone 40.5 MG/2.5GM(1.62%) TD GEL | ANDROGENS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Testosterone 40.5 MG/2.5GM(1.62%) TD GEL | ANDROGENS | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Testosterone Cypionate 100MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Testosterone Cypionate 100MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Testosterone Cypionate 100MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Testosterone Cypionate 200 MG/ML Intramuscular Each | ANDROGENS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Testosterone Cypionate 200 MG/ML Intramuscular Milliliter | ANDROGENS | No Response | 3 |
| 3963 | INTERNAL MEDICINE | Testosterone Cypionate 200 MG/ML Intramuscular Milliliter | ANDROGENS | No Response | 6 |
| 3965 | INTERNAL MEDICINE | Testosterone Cypionate 200 MG/ML Intramuscular Milliliter | ANDROGENS | No Response | 1 |
| 3951 | INTERNAL MEDICINE | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Testosterone Cypionate 200mg/mL | ANDROGENS | Approval | 4 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3956 | INTERNAL MEDICINE | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 2 |
| 3961 | INTERNAL MEDICINE | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 2 |
| 3963 | INTERNAL MEDICINE | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Testosterone Cypionate 200mg/mL | ANDROGENS | No Response | 1 |
| 3951 | INTERNAL MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 3 |
| 3956 | INTERNAL MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 5 |
| 3956 | INTERNAL MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3961 | INTERNAL MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 6 |
| 3963 | INTERNAL MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 2 |
| 3963 | INTERNAL MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3964 | INTERNAL MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Testosterone Cypionate IM Injection | ANDROGENS | Approval | 2 |
| 3951 | INTERNAL MEDICINE | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 2 |
| 3963 | INTERNAL MEDICINE | Testosterone Cypionate IM Injection | ANDROGENS | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 3 |
| 3964 | INTERNAL MEDICINE | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 3 |
| 3963 | INTERNAL MEDICINE | Testosterone Enanthate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Testosterone Transdermal Gel | ANDROGENS | Denial | 1 |
| 3963 | NEPHROLOGY / RENAL MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | NEUROLOGY | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, ACUTE CARE | Testosterone Cypionate 200 MG/ML Intramuscular Milliliter | ANDROGENS | No Response | 2 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, ADULT HEALTH | Androderm 4MG/24HR TD PT24 | ANDROGENS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | AndroGel 20.25 MG/1.25GM(1.62%) TD GEL | ANDROGENS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Depo-Testosterone 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone 1.62% TD GEL | ANDROGENS | No Response | 1 |
| 3962 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone 30MG/ACT TD SOLN | ANDROGENS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 100 MG/ML Intramuscular Milliliter | ANDROGENS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 100mg/mL | ANDROGENS | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 200 MG/ML Intramuscular Milliliter | ANDROGENS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | testosterone cypionate 200 mg/mLmg/ml oil | ANDROGENS | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 3 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 3 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 7 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 5 |
| 3961 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 4 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 2 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 3 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Depo-Testosterone 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Depo-Testosterone 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Testosterone Cypionate 100 MG/ML Intramuscular Milliliter | ANDROGENS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Testosterone Cypionate 200mg/mL | ANDROGENS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 2 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Testosterone Transdermal Gel | ANDROGENS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Testosterone Transdermal Gel | ANDROGENS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, WOMEN'S HEALTH | Androderm 2MG/24HR TD PT24 | ANDROGENS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, WOMEN'S HEALTH | Testosterone 10 MG/ACT(2%) TD GEL | ANDROGENS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, WOMEN'S HEALTH | Testosterone Cypionate 200mg/mL | ANDROGENS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, WOMEN'S HEALTH | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 2 |
| 3951 | NURSE PRACTITIONER, WOMEN'S HEALTH | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, WOMEN'S HEALTH | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 4 |
| 3963 | NURSE PRACTITIONER, WOMEN'S HEALTH | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | TESTOST CYP 200MG/ML INJ | ANDROGENS | Denial | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Testosterone Cypionate 100MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Testosterone Cypionate 100MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3964 | OBSTETRICS & GYNECOLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3964 | OBSTETRICS & GYNECOLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3964 | OBSTETRICS & GYNECOLOGY | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 3 |
| 3963 | PEDIATRICS | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Testosterone Cypionate 100mg/mL | ANDROGENS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | testosterone cypionate 200 mg/mL intramuscular oil | ANDROGENS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | testosterone cypionate 200 mg/mL intramuscular oil | ANDROGENS | No Response | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Testosterone Cypionate 200mg/mL | ANDROGENS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Testosterone Cypionate 200mg/mL | ANDROGENS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 2 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 3 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 2 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 1 |
| 3964 | PHYSICIAN, ENDOCRINOLOGY | Androderm 4MG/24HR TD PT24 | ANDROGENS | Approval | 1 |
| 3956 | PHYSICIAN, ENDOCRINOLOGY | Testosterone Cypionate 200mg/mL | ANDROGENS | Approval | 1 |
| 3951 | PHYSICIAN, ENDOCRINOLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3956 | PHYSICIAN, ENDOCRINOLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 2 |
| 3963 | PHYSICIAN, ENDOCRINOLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | PHYSICIAN, ENDOCRINOLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3964 | PHYSICIAN, ENDOCRINOLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3964 | PHYSICIAN, ENDOCRINOLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3964 | PHYSICIAN, ENDOCRINOLOGY | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 1 |
| 3951 | PHYSICIAN, GERIATRIC MEDICINE | Depo-Testosterone 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3963 | PHYSICIAN, GERIATRIC MEDICINE | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3965 | PHYSICIAN, GERIATRIC MEDICINE | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 1 |
| 3951 | PSYCHIATRY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3956 | UROLOGY | Depo-Testosterone 200MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3956 | UROLOGY | Testosterone Cypionate 200mg/mL | ANDROGENS | Denial | 1 |
| 3961 | UROLOGY | Testosterone Cypionate 200mg/mL | ANDROGENS | No Response | 1 |
| 3951 | UROLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3956 | UROLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 3 |
| 3956 | UROLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3956 | UROLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3961 | UROLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|------------------------------|-------------|-------|
| 3963 | UROLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 2 |
| 3963 | UROLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Denial | 1 |
| 3963 | UROLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3964 | UROLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3964 | UROLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | No Response | 1 |
| 3965 | UROLOGY | Testosterone Cypionate 200MG/ML IM SOLN | ANDROGENS | Approval | 1 |
| 3951 | UROLOGY | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 1 |
| 3963 | UROLOGY | Testosterone Cypionate IM Injection | ANDROGENS | Denial | 1 |
| 3963 | UROLOGY | Testosterone transdermal solution | ANDROGENS | Approval | 1 |
| 3951 | UNSPECIFIED | Edarbi (azilsartan) | Angiotensin Receptor Blocker | Approval | 1 |
| 3963 | UNSPECIFIED | Edarbi (azilsartan) | Angiotensin Receptor Blocker | Denial | 1 |
| 3951 | FAMILY PRACTICE | Edarbi (azilsartan) | Angiotensin Receptor Blocker | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Edarbi 80MG OR TABS | Angiotensin Receptor Blocker | Approval | 1 |
| 3956 | UNSPECIFIED | Ranolazine ER | Antianginal | Approval | 1 |
| 3956 | UNSPECIFIED | Ranolazine ER 1000MG OR TB12 | Antianginal | Approval | 1 |
| 3956 | UNSPECIFIED | Ranolazine ER 500MG OR TB12 | Antianginal | Approval | 1 |
| 3963 | UNSPECIFIED | Ranolazine ER 500MG OR TB12 | Antianginal | Denial | 1 |
| 3956 | CARDIOLOGY | Ranolazine ER | Antianginal | Approval | 1 |
| 3956 | CARDIOLOGY | Ranolazine ER | Antianginal | Denial | 3 |
| 3956 | CARDIOLOGY | Ranolazine ER 1000MG OR TB12 | Antianginal | Approval | 1 |
| 3956 | CARDIOLOGY | Ranolazine ER 500MG OR TB12 | Antianginal | Approval | 3 |
| 3956 | CARDIOLOGY | Ranolazine ER 500MG OR TB12 | Antianginal | No Response | 1 |
| 3956 | CARDIOLOGY, INTERVENTIONAL | Ranolazine ER | Antianginal | Denial | 1 |
| 3963 | CARDIOLOGY, INTERVENTIONAL | Ranolazine ER | Antianginal | Approval | 1 |
| 3956 | CARDIOLOGY, INTERVENTIONAL | Ranolazine ER 1000MG OR TB12 | Antianginal | Approval | 1 |
| 3956 | CARDIOLOGY, INTERVENTIONAL | Ranolazine ER 500MG OR TB12 | Antianginal | Approval | 1 |
| 3963 | CARDIOLOGY, INTERVENTIONAL | Ranolazine ER 500MG OR TB12 | Antianginal | Denial | 1 |
| 3956 | FAMILY PRACTICE | Ranolazine ER | Antianginal | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Ranolazine ER | Antianginal | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Ranolazine ER 500MG OR TB12 | Antianginal | Approval | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ranolazine ER | Antianginal | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ranolazine ER | Antianginal | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ranolazine ER 500MG OR TB12 | Antianginal | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ranolazine ER 500MG OR TB12 | Antianginal | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ranolazine ER 500MG OR TB12 | Antianginal | Approval | 1 |
| 3951 | UNSPECIFIED | Humira | ANTIARTHRITICS | Denial | 2 |
| 3956 | UNSPECIFIED | Humira | ANTIARTHRITICS | Approval | 4 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | UNSPECIFIED | Humira | ANTIARTHRITICS | Denial | 2 |
| 3956 | UNSPECIFIED | Humira 20 mg | ANTIARTHRITICS | Denial | 1 |
| 3962 | UNSPECIFIED | Humira 20 mg | ANTIARTHRITICS | Denial | 1 |
| 3951 | UNSPECIFIED | Otrexup | ANTIARTHRITICS | Denial | 2 |
| 3963 | UNSPECIFIED | Otrexup | ANTIARTHRITICS | No Response | 2 |
| 3951 | UNSPECIFIED | Otrexup 15MG/0.4ML SC SOAJ | ANTIARTHRITICS | Denial | 1 |
| 3951 | UNSPECIFIED | Otrexup 15MG/0.4ML SC SOAJ | ANTIARTHRITICS | No Response | 1 |
| 3956 | UNSPECIFIED | Simponi 50mg | ANTIARTHRITICS | Denial | 2 |
| 3963 | DERMATOLOGY | Humira | ANTIARTHRITICS | Approval | 2 |
| 3963 | FAMILY PRACTICE | Humira (Adalimumab) 40 MG/0.8ML Subcutaneous Kit | ANTIARTHRITICS | No Response | 2 |
| 3956 | GASTROENTEROLOGY | Humira | ANTIARTHRITICS | Approval | 2 |
| 3956 | GASTROENTEROLOGY | Humira | ANTIARTHRITICS | Denial | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Simponi 50MG/0.5ML SC SOAJ | ANTIARTHRITICS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Otrexup 10MG/0.4ML SC SOAJ | ANTIARTHRITICS | Denial | 1 |
| 3964 | NURSE PRACTITIONER, UNSPECIFIED | Rasuvo 25MG/0.5ML SC SOAJ | ANTIARTHRITICS | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Humira | ANTIARTHRITICS | No Response | 2 |
| 3956 | RHEUMATOLOGY | Humira | ANTIARTHRITICS | Approval | 2 |
| 3962 | RHEUMATOLOGY | Humira 20 mg | ANTIARTHRITICS | Approval | 1 |
| 3963 | RHEUMATOLOGY | Humira 20 mg | ANTIARTHRITICS | Approval | 1 |
| 3963 | RHEUMATOLOGY | Humira 20 mg | ANTIARTHRITICS | Denial | 1 |
| 3951 | RHEUMATOLOGY | Otrexup | ANTIARTHRITICS | Denial | 4 |
| 3951 | RHEUMATOLOGY | Rasuvo | ANTIARTHRITICS | Denial | 2 |
| 3964 | RHEUMATOLOGY | Rasuvo | ANTIARTHRITICS | Denial | 2 |
| 3964 | RHEUMATOLOGY | Rasuvo | ANTIARTHRITICS | No Response | 2 |
| 3963 | RHEUMATOLOGY | Simponi 50mg | ANTIARTHRITICS | Denial | 2 |
| 3963 | RHEUMATOLOGY | Simponi 50MG/0.5ML SC SOAJ | ANTIARTHRITICS | No Response | 1 |
| 3963 | UROLOGY | Toviaz 8MG OR TB24 | Anticholinergic | Approval | 1 |
| 3963 | UNSPECIFIED | Briviact (brivaracetam) | ANTICONVULSANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Briviact 50MG OR TABS | ANTICONVULSANTS | Approval | 2 |
| 3963 | UNSPECIFIED | Epidiolex | ANTICONVULSANTS | Approval | 2 |
| 3963 | UNSPECIFIED | Epidiolex | ANTICONVULSANTS | Denial | 2 |
| 3965 | UNSPECIFIED | Epidiolex | ANTICONVULSANTS | Denial | 2 |
| 3963 | UNSPECIFIED | Lyrica (pregabalin) | ANTICONVULSANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Lyrica (pregabalin) | ANTICONVULSANTS | No Response | 1 |
| 3965 | UNSPECIFIED | Lyrica (pregabalin) | ANTICONVULSANTS | No Response | 1 |
| 3963 | UNSPECIFIED | Lyrica (Pregabalin) 75 MG Oral Capsule | ANTICONVULSANTS | No Response | 1 |
| 3956 | UNSPECIFIED | Lyrica 150MG OR CAPS | ANTICONVULSANTS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3962 | UNSPECIFIED | Lyrica 50MG OR CAPS | ANTICONVULSANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Lyrica 50MG OR CAPS | ANTICONVULSANTS | Approval | 1 |
| 3964 | ANESTHESIOLOGY | lyrica 150 mg capsule | ANTICONVULSANTS | No Response | 1 |
| 3956 | ANESTHESIOLOGY | Lyrica 75MG OR CAPS | ANTICONVULSANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Lyrica 100MG OR CAPS | ANTICONVULSANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Lyrica 300MG OR CAPS | ANTICONVULSANTS | Approval | 1 |
| 3963 | NEUROLOGICAL SURGERY | lyrica 75 mg capsule | ANTICONVULSANTS | No Response | 1 |
| 3956 | NEUROLOGY | Aptiom 800MG OR TABS | ANTICONVULSANTS | Approval | 2 |
| 3956 | NEUROLOGY | Briviact (brivaracetam) | ANTICONVULSANTS | Approval | 1 |
| 3956 | NEUROLOGY | Briviact (Brivaracetam) 100 MG Oral Tablet | ANTICONVULSANTS | No Response | 1 |
| 3956 | NEUROLOGY | Briviact 25MG OR TABS | ANTICONVULSANTS | Approval | 1 |
| 3951 | NEUROLOGY | cloBAZam 10MG OR TABS | ANTICONVULSANTS | Approval | 1 |
| 3956 | NEUROLOGY | cloBAZam 10MG OR TABS | ANTICONVULSANTS | Approval | 1 |
| 3956 | NEUROLOGY | Clobazam Tablets | ANTICONVULSANTS | Denial | 1 |
| 3963 | NEUROLOGY, PEDIATRIC | Epidiolex | ANTICONVULSANTS | Denial | 2 |
| 3963 | NEUROLOGY, PEDIATRIC | vigabatrin powder | ANTICONVULSANTS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Lyrica 50MG OR CAPS | ANTICONVULSANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, PRIMARY CARE | Briviact 50MG OR TABS | ANTICONVULSANTS | Approval | 1 |
| 3951 | UNSPECIFIED | Trintellix (vortioxetine) | Antidepressant | Approval | 2 |
| 3951 | UNSPECIFIED | Trintellix (vortioxetine) | Antidepressant | Denial | 1 |
| 3956 | UNSPECIFIED | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3956 | UNSPECIFIED | Trintellix (vortioxetine) | Antidepressant | Denial | 1 |
| 3963 | UNSPECIFIED | Trintellix (vortioxetine) | Antidepressant | Approval | 3 |
| 3963 | UNSPECIFIED | Trintellix (vortioxetine) | Antidepressant | Denial | 1 |
| 3964 | UNSPECIFIED | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3965 | UNSPECIFIED | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3963 | UNSPECIFIED | trintellix 10 mg tablet | Antidepressant | Approval | 1 |
| 3963 | UNSPECIFIED | trintellix 10 mg tablet | Antidepressant | No Response | 1 |
| 3951 | UNSPECIFIED | Trintellix 10MG OR TABS | Antidepressant | Approval | 2 |
| 3956 | UNSPECIFIED | Trintellix 10MG OR TABS | Antidepressant | Approval | 2 |
| 3963 | UNSPECIFIED | Trintellix 10MG OR TABS | Antidepressant | Approval | 7 |
| 3963 | UNSPECIFIED | Trintellix 10MG OR TABS | Antidepressant | Denial | 2 |
| 3965 | UNSPECIFIED | Trintellix 10MG OR TABS | Antidepressant | Denial | 1 |
| 3956 | UNSPECIFIED | Trintellix 20MG OR TABS | Antidepressant | Approval | 1 |
| 3963 | UNSPECIFIED | Trintellix 20MG OR TABS | Antidepressant | Approval | 3 |
| 3964 | UNSPECIFIED | Trintellix 20MG OR TABS | Antidepressant | Approval | 1 |
| 3951 | UNSPECIFIED | Trintellix 5MG OR TABS | Antidepressant | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3967 | UNSPECIFIED | Trintellix 5MG OR TABS | Antidepressant | Approval | 1 |
| 3951 | FAMILY PRACTICE | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3951 | FAMILY PRACTICE | Trintellix (vortioxetine) | Antidepressant | Denial | 1 |
| 3962 | FAMILY PRACTICE | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3963 | FAMILY PRACTICE | Trintellix (vortioxetine) | Antidepressant | Approval | 3 |
| 3964 | FAMILY PRACTICE | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3951 | FAMILY PRACTICE | Trintellix 10MG OR TABS | Antidepressant | Approval | 2 |
| 3956 | FAMILY PRACTICE | Trintellix 10MG OR TABS | Antidepressant | Approval | 6 |
| 3961 | FAMILY PRACTICE | Trintellix 10MG OR TABS | Antidepressant | Approval | 1 |
| 3962 | FAMILY PRACTICE | Trintellix 10MG OR TABS | Antidepressant | Approval | 1 |
| 3963 | FAMILY PRACTICE | Trintellix 10MG OR TABS | Antidepressant | Approval | 4 |
| 3963 | FAMILY PRACTICE | Trintellix 10MG OR TABS | Antidepressant | Denial | 1 |
| 3964 | FAMILY PRACTICE | Trintellix 10MG OR TABS | Antidepressant | Approval | 1 |
| 3951 | FAMILY PRACTICE | Trintellix 20MG OR TABS | Antidepressant | Approval | 1 |
| 3956 | FAMILY PRACTICE | Trintellix 20MG OR TABS | Antidepressant | Approval | 1 |
| 3956 | FAMILY PRACTICE | Trintellix 20MG OR TABS | Antidepressant | Denial | 1 |
| 3962 | FAMILY PRACTICE | Trintellix 20MG OR TABS | Antidepressant | Approval | 1 |
| 3963 | FAMILY PRACTICE | Trintellix 20MG OR TABS | Antidepressant | Approval | 3 |
| 3956 | FAMILY PRACTICE | Trintellix 5MG OR TABS | Antidepressant | Approval | 1 |
| 3963 | FAMILY PRACTICE | Trintellix 5MG OR TABS | Antidepressant | Approval | 1 |
| 3956 | GENERAL PRACTICE | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3956 | GENERAL PRACTICE | Trintellix 10MG OR TABS | Antidepressant | Approval | 1 |
| 3961 | INTERNAL MEDICINE | Trintellix 10MG OR TABS | Antidepressant | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Trintellix 10MG OR TABS | Antidepressant | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Trintellix 10MG OR TABS | Antidepressant | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Trintellix 20MG OR TABS | Antidepressant | Approval | 2 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Trintellix (Vortioxetine HBr) 10 MG Oral Tablet | Antidepressant | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Trintellix 10MG OR TABS | Antidepressant | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Trintellix 10MG OR TABS | Antidepressant | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Trintellix 10MG OR TABS | Antidepressant | Approval | 6 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Trintellix 10MG OR TABS | Antidepressant | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Trintellix 20MG OR TABS | Antidepressant | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Trintellix 20MG OR TABS | Antidepressant | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Trintellix 20MG OR TABS | Antidepressant | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Trintellix 5MG OR TABS | Antidepressant | Approval | 2 |
| 3951 | NURSE PRACTITIONER, PSYCHIATRIC | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | NURSE PRACTITIONER, PSYCHIATRIC | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3964 | NURSE PRACTITIONER, PSYCHIATRIC | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Trintellix (vortioxetine) | Antidepressant | No Response | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Trintellix 10MG OR TABS | Antidepressant | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Trintellix 20MG OR TABS | Antidepressant | Approval | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Trintellix 10MG OR TABS | Antidepressant | Approval | 2 |
| 3951 | PEDIATRICS | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3963 | PEDIATRICS | Trintellix 10MG OR TABS | Antidepressant | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Trintellix 5MG OR TABS | Antidepressant | Approval | 1 |
| 3956 | PSYCHIATRY | Trintellix (vortioxetine HBr) 10 MG Oral Tablet | Antidepressant | No Response | 1 |
| 3951 | PSYCHIATRY | Trintellix (vortioxetine) | Antidepressant | Approval | 2 |
| 3956 | PSYCHIATRY | Trintellix (vortioxetine) | Antidepressant | Approval | 3 |
| 3963 | PSYCHIATRY | Trintellix (vortioxetine) | Antidepressant | Denial | 1 |
| 3964 | PSYCHIATRY | Trintellix (vortioxetine) | Antidepressant | Approval | 2 |
| 3951 | PSYCHIATRY | Trintellix 10MG OR TABS | Antidepressant | Approval | 1 |
| 3956 | PSYCHIATRY | Trintellix 10MG OR TABS | Antidepressant | Approval | 1 |
| 3956 | PSYCHIATRY | Trintellix 20MG OR TABS | Antidepressant | Approval | 3 |
| 3963 | PSYCHIATRY | Trintellix 20MG OR TABS | Antidepressant | Approval | 3 |
| 3963 | RADIATION ONCOLOGY | Trintellix (vortioxetine) | Antidepressant | Approval | 1 |
| 3963 | SPORTS MEDICINE, FAMILY PRACTICE | Trintellix 10MG OR TABS | Antidepressant | Approval | 1 |
| 3956 | UNSPECIFIED | Soliqua 100-33UNT-MCG/ML SC SOPN | Antidiabetic | Approval | 1 |
| 3956 | UNSPECIFIED | Synjardy 12.5-1000MG OR TABS | Antidiabetic | Approval | 1 |
| 3956 | UNSPECIFIED | Synjardy XR (empagliflozin-metformin SR) | Antidiabetic | Approval | 1 |
| 3956 | UNSPECIFIED | Synjardy XR 12.5-1000MG OR TB24 | Antidiabetic | Approval | 2 |
| 3956 | UNSPECIFIED | Xigduo XR 10-1000MG OR TB24 | Antidiabetic | Approval | 2 |
| 3956 | UNSPECIFIED | Xigduo XR 5-1000MG OR TB24 | Antidiabetic | Approval | 1 |
| 3956 | CLINICAL NURSE SPECIALIST, FAMILY HEALTH | Synjardy 12.5-500MG OR TABS | Antidiabetic | Approval | 1 |
| 3956 | FAMILY PRACTICE | Soliqua 100-33UNT-MCG/ML SC SOPN | Antidiabetic | Approval | 3 |
| 3956 | FAMILY PRACTICE | Soliqua 100-33UNT-MCG/ML SC SOPN | Antidiabetic | No Response | 1 |
| 3956 | FAMILY PRACTICE | Synjardy XR 12.5-1000MG OR TB24 | Antidiabetic | Approval | 1 |
| 3956 | FAMILY PRACTICE | Synjardy XR 25-1000MG OR TB24 | Antidiabetic | Approval | 1 |
| 3956 | FAMILY PRACTICE | Xigduo XR 10-500MG OR TB24 | Antidiabetic | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Soliqua 100-33UNT-MCG/ML SC SOPN | Antidiabetic | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Synjardy 12.5-1000MG OR TABS | Antidiabetic | Approval | 1 |
| 3961 | INTERNAL MEDICINE | Synjardy 12.5-1000MG OR TABS | Antidiabetic | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | INTERNAL MEDICINE | Synjardy XR (Empagliflozin-Metformin HCl) 12.5-1000 MG Oral Tablet | Antidiabetic | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Synjardy XR 10-1000MG OR TB24 | Antidiabetic | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Synjardy XR 10-1000MG OR TB24 | Antidiabetic | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Synjardy XR 5-1000MG OR TB24 | Antidiabetic | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Xigduo XR (dapagliflozin-metformin) | Antidiabetic | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Xigduo XR (dapagliflozin-metformin) | Antidiabetic | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Xigduo XR 10-1000MG OR TB24 | Antidiabetic | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Soliqua 100-33UNT-MCG/ML SC SOPN | Antidiabetic | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Synjardy XR 12.5-1000MG OR TB24 | Antidiabetic | Approval | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Xigduo XR 10-1000MG OR TB24 | Antidiabetic | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Xigduo XR 5-1000MG OR TB24 | Antidiabetic | Approval | 2 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Synjardy (Empagliflozin-Metformin HCl) 12.5-500 MG Oral Tablet | Antidiabetic | No Response | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Synjardy 12.5-500MG OR TABS | Antidiabetic | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Synjardy 5-1000MG OR TABS | Antidiabetic | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Synjardy XR 12.5-1000MG OR TB24 | Antidiabetic | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Synjardy XR 25-1000MG OR TB24 | Antidiabetic | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Xigduo XR 5-1000MG OR TB24 | Antidiabetic | Approval | 1 |
| 3956 | PHYSICIAN, ENDOCRINOLOGY | Xigduo XR 5-1000MG OR TB24 | Antidiabetic | Denial | 1 |
| 3956 | UNSPECIFIED | Janumet (sitagliptin-metformin) | ANTIDIABETICS | Denial | 1 |
| 3956 | UNSPECIFIED | Janumet 50-1000MG OR TABS | ANTIDIABETICS | Approval | 3 |
| 3963 | UNSPECIFIED | Janumet XR 100-1000MG OR TB24 | ANTIDIABETICS | Approval | 1 |
| 3956 | UNSPECIFIED | Janumet XR 50-1000MG OR TB24 | ANTIDIABETICS | Approval | 1 |
| 3951 | UNSPECIFIED | Trulicity 0.75MG/0.5ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3956 | UNSPECIFIED | Trulicity 0.75MG/0.5ML SC SOPN | ANTIDIABETICS | Approval | 14 |
| 3956 | UNSPECIFIED | Trulicity 0.75MG/0.5ML SC SOPN | ANTIDIABETICS | No Response | 1 |
| 3963 | UNSPECIFIED | Trulicity 0.75MG/0.5ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3951 | UNSPECIFIED | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3956 | UNSPECIFIED | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | Approval | 10 |
| 3956 | UNSPECIFIED | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | Denial | 1 |
| 3963 | EMERGENCY MEDICINE | Janumet 50-1000MG OR TABS | ANTIDIABETICS | Approval | 1 |
| 3963 | EMERGENCY MEDICINE | Trulicity 0.75MG/0.5ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Janumet (sitagliptin-metformin) | ANTIDIABETICS | Approval | 2 |
| 3956 | FAMILY PRACTICE | Janumet (sitagliptin-metformin) | ANTIDIABETICS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Janumet 50-1000MG OR TABS | ANTIDIABETICS | Approval | 3 |
| 3963 | FAMILY PRACTICE | Janumet 50-1000MG OR TABS | ANTIDIABETICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | janumet 50-500 mg tablet | ANTIDIABETICS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3951 | FAMILY PRACTICE | Janumet 50-500MG OR TABS | ANTIDIABETICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Janumet 50-500MG OR TABS | ANTIDIABETICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Janumet XR (sitagliptin-metformin ER) | ANTIDIABETICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Janumet XR (sitagliptin-metformin ER) | ANTIDIABETICS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Janumet XR 100-1000MG OR TB24 | ANTIDIABETICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Jardiance 10 mg tablet | ANTIDIABETICS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Trulicity 0.75MG/0.5ML SC SOPN | ANTIDIABETICS | Approval | 5 |
| 3963 | FAMILY PRACTICE | Trulicity 0.75MG/0.5ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | Approval | 7 |
| 3956 | FAMILY PRACTICE | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Janumet (Sitagliptin-Metformin HCl) 50-1000 MG Oral Tablet | ANTIDIABETICS | No Response | 2 |
| 3956 | INTERNAL MEDICINE | Janumet (sitagliptin-metformin) | ANTIDIABETICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Janumet 50-1000MG OR TABS | ANTIDIABETICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Janumet 50-500MG OR TABS | ANTIDIABETICS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Janumet XR (sitagliptin-metformin ER) | ANTIDIABETICS | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Janumet XR 100-1000MG OR TB24 | ANTIDIABETICS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Janumet XR 50-500MG OR TB24 | ANTIDIABETICS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Trulicity 0.75MG/0.5ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Trulicity 0.75MG/0.5ML SC SOPN | ANTIDIABETICS | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Trulicity 0.75MG/0.5ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | Denial | 2 |
| 3963 | NURSE PRACTITIONER, ADULT HEALTH | Janumet 50-500MG OR TABS | ANTIDIABETICS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Janumet XR (sitagliptin-metformin ER) | ANTIDIABETICS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Trulicity 0.75MG/0.5ML SC SOPN | ANTIDIABETICS | Approval | 5 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Trulicity 0.75MG/0.5ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3956 | PHYSICIAN, ENDOCRINOLOGY | Trulicity 0.75MG/0.5ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3956 | REGISTERED NURSE, UNSPECIFIED | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | Approval | 1 |
| 3956 | REGISTERED NURSE, UNSPECIFIED | Victoza 18MG/3ML SC SOPN | ANTIDIABETICS | No Response | 1 |
| 3964 | UNSPECIFIED | Ciclopirox (topical solution 8%) | ANTIFUNGALS | Approval | 1 |
| 3964 | UNSPECIFIED | Ciclopirox (topical solution 8%) | ANTIFUNGALS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|----------------------------------|---------------------------|-------------|-------|
| 3963 | UNSPECIFIED | Ciclopirox 8% EX SOLN | ANTIFUNGALS | Denial | 1 |
| 3963 | UNSPECIFIED | Ciclopirox 8% EX SOLN | ANTIFUNGALS | No Response | 1 |
| 3964 | UNSPECIFIED | Ciclopirox 8% EX SOLN | ANTIFUNGALS | No Response | 1 |
| 3951 | UNSPECIFIED | Itraconazole 100MG OR CAPS | ANTIFUNGALS | Approval | 2 |
| 3956 | UNSPECIFIED | Itraconazole 100MG OR CAPS | ANTIFUNGALS | Approval | 1 |
| 3956 | UNSPECIFIED | Itraconazole 100MG OR CAPS | ANTIFUNGALS | No Response | 1 |
| 3956 | UNSPECIFIED | Itraconazole Capsules | ANTIFUNGALS | Approval | 1 |
| 3956 | UNSPECIFIED | Itraconazole Capsules | ANTIFUNGALS | Denial | 2 |
| 3964 | UNSPECIFIED | Itraconazole Capsules | ANTIFUNGALS | Denial | 1 |
| 3967 | UNSPECIFIED | Itraconazole Capsules | ANTIFUNGALS | Denial | 1 |
| 3956 | UNSPECIFIED | Jublia (efinaconazole) | ANTIFUNGALS | Denial | 1 |
| 3956 | UNSPECIFIED | Jublia 10% EX SOLN | ANTIFUNGALS | Approval | 1 |
| 3963 | UNSPECIFIED | Jublia 10% EX SOLN | ANTIFUNGALS | Approval | 1 |
| 3956 | UNSPECIFIED | Posaconazole 100MG OR TBEC | ANTIFUNGALS | Approval | 2 |
| 3961 | UNSPECIFIED | Posaconazole 100MG OR TBEC | ANTIFUNGALS | Approval | 1 |
| 3956 | UNSPECIFIED | Voriconazole 200MG OR TABS | ANTIFUNGALS | Approval | 2 |
| 3963 | UNSPECIFIED | Voriconazole 200MG OR TABS | ANTIFUNGALS | Approval | 1 |
| 3963 | CLINICAL NURSE SPECIALIST, ADULT HEALTH | Itraconazole 100MG OR CAPS | ANTIFUNGALS | No Response | 1 |
| 3951 | DERMATOLOGY | Ciclopirox (topical solution 8%) | ANTIFUNGALS | Approval | 1 |
| 3963 | DERMATOLOGY | Ciclopirox 8% EX SOLN | ANTIFUNGALS | Approval | 1 |
| 3963 | DERMATOLOGY | Naftin 1% EX GEL | ANTIFUNGALS | Approval | 1 |
| 3964 | EMERGENCY MEDICINE | Itraconazole 100MG OR CAPS | ANTIFUNGALS | Approval | 1 |
| 3962 | FAMILY PRACTICE | Ciclopirox (topical solution 8%) | ANTIFUNGALS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Ciclopirox (topical solution 8%) | ANTIFUNGALS | Denial | 1 |
| 3962 | FAMILY PRACTICE | Ciclopirox 8% EX SOLN | ANTIFUNGALS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Itraconazole 100MG OR CAPS | ANTIFUNGALS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Itraconazole 100MG OR CAPS | ANTIFUNGALS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Itraconazole Capsules | ANTIFUNGALS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Itraconazole Capsules | ANTIFUNGALS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Itraconazole Capsules | ANTIFUNGALS | Denial | 2 |
| 3963 | FAMILY PRACTICE | Jublia (efinaconazole) | ANTIFUNGALS | Denial | 1 |
| 3964 | GENERAL PRACTICE | itraconazole 100 mg capsule | ANTIFUNGALS | No Response | 1 |
| 3964 | GENERAL PRACTICE | Itraconazole 100MG OR CAPS | ANTIFUNGALS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Itraconazole 100MG OR CAPS | ANTIFUNGALS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Itraconazole 100MG OR CAPS | ANTIFUNGALS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Itraconazole Capsules | ANTIFUNGALS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Voriconazole | ANTIFUNGALS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|----------------------------------|---------------------------|-------------|-------|
| 3963 | NURSE PRACTITIONER, COMMUNITY HEALTH | Ciclopirox 8% EX SOLN | ANTIFUNGALS | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | ciclopirox 8 % topical solution | ANTIFUNGALS | No Response | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ciclopirox 8% EX SOLN | ANTIFUNGALS | Denial | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Itraconazole 100MG OR CAPS | ANTIFUNGALS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Itraconazole Capsules | ANTIFUNGALS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Jublia 10% EX SOLN | ANTIFUNGALS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Jublia 10% EX SOLN | ANTIFUNGALS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Itraconazole 100MG OR CAPS | ANTIFUNGALS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Itraconazole 100MG OR CAPS | ANTIFUNGALS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Voriconazole | ANTIFUNGALS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Voriconazole | ANTIFUNGALS | No Response | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Voriconazole 200MG OR TABS | ANTIFUNGALS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Voriconazole 200MG OR TABS | ANTIFUNGALS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | ciclopirox 8 % topical solution | ANTIFUNGALS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ciclopirox 8% EX SOLN | ANTIFUNGALS | No Response | 1 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Exelderm 1 % topical solution | ANTIFUNGALS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Exelderm 1% EX SOLN | ANTIFUNGALS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Jublia 10% EX SOLN | ANTIFUNGALS | Approval | 3 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Jublia 10% EX SOLN | ANTIFUNGALS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Jublia 10% EX SOLN | ANTIFUNGALS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Naftin 2% EX GEL | ANTIFUNGALS | Approval | 1 |
| 3963 | PODIATRIST, SURGERY, FOOT & ANKLE | Jublia 10% EX SOLN | ANTIFUNGALS | Denial | 1 |
| 3956 | PULMONARY DISEASES | Itraconazole 100MG OR CAPS | ANTIFUNGALS | Approval | 1 |
| 3963 | PULMONARY DISEASES | Itraconazole 100MG OR CAPS | ANTIFUNGALS | Approval | 1 |
| 3963 | REGISTERED NURSE, UNSPECIFIED | Itraconazole Capsules | ANTIFUNGALS | Denial | 1 |
| 3962 | RHEUMATOLOGY | Ciclopirox (topical solution 8%) | ANTIFUNGALS | No Response | 1 |
| 3963 | UNSPECIFIED | Lumigan (bimatoprost) | Antiglaucoma | Approval | 1 |
| 3956 | UNSPECIFIED | Lumigan 0.01% OP SOLN | Antiglaucoma | Approval | 3 |
| 3963 | UNSPECIFIED | Lumigan 0.01% OP SOLN | Antiglaucoma | No Response | 1 |
| 3965 | OPHTHALMOLOGY | Lumigan (bimatoprost) | Antiglaucoma | Denial | 1 |
| 3956 | OPHTHALMOLOGY | Lumigan 0.01% OP SOLN | Antiglaucoma | Approval | 1 |
| 3956 | OPTOMETRIST, UNSPECIFIED | Lumigan (bimatoprost) | Antiglaucoma | Denial | 1 |
| 3963 | OPTOMETRIST, UNSPECIFIED | Lumigan 0.01 % eye drops | Antiglaucoma | No Response | 1 |
| 3963 | OPTOMETRIST, UNSPECIFIED | Lumigan 0.01% | Antiglaucoma | Denial | 1 |
| 3963 | OPTOMETRIST, UNSPECIFIED | Lumigan 0.01% OP SOLN | Antiglaucoma | Approval | 1 |
| 3963 | OPTOMETRIST, UNSPECIFIED | Lumigan 0.01% OP SOLN | Antiglaucoma | Denial | 1 |
| 3956 | UNSPECIFIED | Febuxostat 40MG OR TABS | Antigout | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-----------------------------------|---------------------------|-------------|-------|
| 3956 | FAMILY PRACTICE | Febuxostat | Antigout | Approval | 1 |
| 3956 | FAMILY PRACTICE | Febuxostat 40MG OR TABS | Antigout | Approval | 2 |
| 3951 | FAMILY PRACTICE | Febuxostat 80MG OR TABS | Antigout | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Febuxostat | Antigout | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Febuxostat 40MG OR TABS | Antigout | Approval | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Febuxostat 40MG OR TABS | Antigout | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Febuxostat 40MG OR TABS | Antigout | Approval | 1 |
| 3961 | NURSE PRACTITIONER, UNSPECIFIED | Febuxostat 80MG OR TABS | Antigout | Approval | 1 |
| 3956 | PHYSICIAN, GERIATRIC MEDICINE | Febuxostat | Antigout | Approval | 1 |
| 3956 | RHEUMATOLOGY | Febuxostat 40MG OR TABS | Antigout | Approval | 1 |
| 3956 | UNSPECIFIED | Difcid 200MG OR TABS | ANTI-INFECTIVES | Approval | 2 |
| 3951 | UNSPECIFIED | Doxycycline Hyclate 150MG OR TBEC | ANTI-INFECTIVES | Approval | 1 |
| 3963 | UNSPECIFIED | Doxycycline Hyclate 150MG OR TBEC | ANTI-INFECTIVES | Approval | 1 |
| 3963 | UNSPECIFIED | Linezolid 600MG OR TABS | ANTI-INFECTIVES | Approval | 2 |
| 3951 | UNSPECIFIED | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Approval | 1 |
| 3951 | UNSPECIFIED | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Denial | 1 |
| 3956 | UNSPECIFIED | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Approval | 2 |
| 3956 | UNSPECIFIED | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Denial | 1 |
| 3963 | UNSPECIFIED | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Approval | 2 |
| 3963 | UNSPECIFIED | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Denial | 3 |
| 3964 | UNSPECIFIED | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Approval | 1 |
| 3951 | UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 6 |
| 3951 | UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Denial | 1 |
| 3956 | UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 14 |
| 3956 | UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Denial | 1 |
| 3956 | UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | No Response | 1 |
| 3961 | UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3963 | UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 9 |
| 3963 | UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Denial | 1 |
| 3963 | UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | No Response | 1 |
| 3963 | FAMILY PRACTICE | Difcid (fidaxomicin) | ANTI-INFECTIVES | Approval | 1 |
| 3963 | FAMILY PRACTICE | Difcid 200MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3956 | FAMILY PRACTICE | Xifaxan 200mg Tablet (rifaximin) | ANTI-INFECTIVES | Denial | 1 |
| 3956 | FAMILY PRACTICE | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Approval | 1 |
| 3956 | FAMILY PRACTICE | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Denial | 1 |
| 3967 | FAMILY PRACTICE | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Approval | 1 |
| 3951 | FAMILY PRACTICE | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|----------------------------------|---------------------------|-------------|-------|
| 3956 | FAMILY PRACTICE | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 3 |
| 3956 | FAMILY PRACTICE | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Denial | 1 |
| 3963 | FAMILY PRACTICE | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 5 |
| 3963 | FAMILY PRACTICE | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Denial | 1 |
| 3956 | GASTROENTEROLOGY | Difcid 200MG OR TABS | ANTI-INFECTIVES | Approval | 2 |
| 3963 | GASTROENTEROLOGY | Xifaxan 200mg Tablet (rifaximin) | ANTI-INFECTIVES | Denial | 1 |
| 3951 | GASTROENTEROLOGY | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Approval | 1 |
| 3951 | GASTROENTEROLOGY | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Denial | 1 |
| 3956 | GASTROENTEROLOGY | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Approval | 1 |
| 3956 | GASTROENTEROLOGY | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Denial | 2 |
| 3963 | GASTROENTEROLOGY | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Approval | 2 |
| 3963 | GASTROENTEROLOGY | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Denial | 1 |
| 3963 | GASTROENTEROLOGY | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | No Response | 1 |
| 3951 | GASTROENTEROLOGY | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 4 |
| 3951 | GASTROENTEROLOGY | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Denial | 1 |
| 3956 | GASTROENTEROLOGY | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 20 |
| 3956 | GASTROENTEROLOGY | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Denial | 3 |
| 3961 | GASTROENTEROLOGY | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3962 | GASTROENTEROLOGY | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3963 | GASTROENTEROLOGY | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 9 |
| 3963 | GASTROENTEROLOGY | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Denial | 3 |
| 3964 | GASTROENTEROLOGY | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3965 | GASTROENTEROLOGY | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 2 |
| 3956 | INFECTIOUS DISEASES | Difcid 200MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Difcid 200MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Linezolid 600MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 4 |
| 3951 | INTERNAL MEDICINE | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 3 |
| 3964 | NURSE PRACTITIONER, ACUTE CARE | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Difcid 200MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Denial | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Approval | 1 |
| 3965 | NURSE PRACTITIONER, FAMILY HEALTH | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|------------------------------|---------------------------|-------------|-------|
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 3 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | No Response | 1 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Difcid (fidaxomicin) | ANTI-INFECTIVES | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | No Response | 4 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Denial | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Xifaxan 550MG OR TABS | ANTI-INFECTIVES | Approval | 2 |
| 3956 | PHYSICIAN, GERIATRIC MEDICINE | Difcid 200MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3951 | PHYSICIAN, SURGERY, GENERAL | Xifaxan 200mg (rifaximin) | ANTI-INFECTIVES | Denial | 1 |
| 3964 | PODIATRIST, SURGERY, FOOT & ANKLE | Linezolid 600MG OR TABS | ANTI-INFECTIVES | Approval | 1 |
| 3956 | RADIOLOGY, DIAGNOSTIC | Xifaxan 550mg (rifaximin) | ANTI-INFECTIVES | Denial | 1 |
| 3963 | UNSPECIFIED | Nurtec 75mg | ANTIMIGRAINE | No Response | 1 |
| 3951 | UNSPECIFIED | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 1 |
| 3962 | UNSPECIFIED | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 1 |
| 3962 | UNSPECIFIED | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Denial | 1 |
| 3963 | UNSPECIFIED | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 7 |
| 3963 | UNSPECIFIED | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Denial | 1 |
| 3963 | UNSPECIFIED | Nurtec 75MG OR TBDP | ANTIMIGRAINE | No Response | 1 |
| 3964 | UNSPECIFIED | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 1 |
| 3963 | UNSPECIFIED | Nurtec ODT | ANTIMIGRAINE | No Response | 1 |
| 3964 | UNSPECIFIED | Nurtec ODT | ANTIMIGRAINE | No Response | 1 |
| 3951 | UNSPECIFIED | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 1 |
| 3951 | UNSPECIFIED | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Denial | 1 |
| 3963 | UNSPECIFIED | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 2 |
| 3963 | UNSPECIFIED | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Denial | 2 |
| 3963 | UNSPECIFIED | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | No Response | 1 |
| 3964 | UNSPECIFIED | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 1 |
| 3965 | UNSPECIFIED | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Denial | 1 |
| 3963 | UNSPECIFIED | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | No Response | 1 |
| 3964 | UNSPECIFIED | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|------------------------------|---------------------------|-------------|-------|
| 3964 | UNSPECIFIED | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | Denial | 1 |
| 3964 | UNSPECIFIED | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | No Response | 1 |
| 3965 | UNSPECIFIED | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | Approval | 1 |
| 3965 | UNSPECIFIED | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | No Response | 2 |
| 3963 | EMERGENCY MEDICINE | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Denial | 1 |
| 3951 | EMERGENCY MEDICINE | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 1 |
| 3951 | FAMILY PRACTICE | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 3 |
| 3951 | FAMILY PRACTICE | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Denial | 2 |
| 3962 | FAMILY PRACTICE | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 1 |
| 3962 | FAMILY PRACTICE | Nurtec 75MG OR TBDP | ANTIMIGRAINE | No Response | 1 |
| 3963 | FAMILY PRACTICE | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 10 |
| 3963 | FAMILY PRACTICE | Nurtec 75MG OR TBDP | ANTIMIGRAINE | No Response | 1 |
| 3965 | FAMILY PRACTICE | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 1 |
| 3951 | FAMILY PRACTICE | NURTEC ODT 75 MG TAB RAPDIS | ANTIMIGRAINE | No Response | 1 |
| 3951 | FAMILY PRACTICE | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Denial | 1 |
| 3962 | FAMILY PRACTICE | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Denial | 1 |
| 3963 | FAMILY PRACTICE | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 2 |
| 3963 | FAMILY PRACTICE | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | No Response | 1 |
| 3964 | FAMILY PRACTICE | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 2 |
| 3951 | FAMILY PRACTICE | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | Approval | 1 |
| 3951 | FAMILY PRACTICE | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | Denial | 1 |
| 3956 | FAMILY PRACTICE | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | No Response | 1 |
| 3963 | FAMILY PRACTICE | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | Approval | 2 |
| 3963 | FAMILY PRACTICE | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | No Response | 1 |
| 3964 | FAMILY PRACTICE | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | Approval | 1 |
| 3964 | FAMILY PRACTICE | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 1 |
| 3951 | NEUROLOGY | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 1 |
| 3965 | NEUROLOGY | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 4 |
| 3967 | NEUROLOGY | Nurtec 75MG OR TBDP | ANTIMIGRAINE | No Response | 1 |
| 3963 | NEUROLOGY | Nurtec ODT | ANTIMIGRAINE | Denial | 1 |
| 3951 | NEUROLOGY | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 1 |
| 3951 | NEUROLOGY | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Denial | 1 |
| 3962 | NEUROLOGY | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Denial | 1 |
| 3963 | NEUROLOGY | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | No Response | 2 |
| 3967 | NEUROLOGY | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3965 | NEUROLOGY | Zembrace SymTouch 3mg/0.5mL Inj. (sumatriptan) | Antimigraine | Approval | 1 |
| 3963 | NEUROLOGY | Zembrace SymTouch 3MG/0.5ML SC SOAJ | Antimigraine | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 4 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 1 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | No Response | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 2 |
| 3964 | NURSE PRACTITIONER, UNSPECIFIED | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 1 |
| 3962 | NURSE PRACTITIONER, UNSPECIFIED | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Denial | 1 |
| 3962 | NURSE PRACTITIONER, UNSPECIFIED | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | No Response | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | Approval | 1 |
| 3964 | ORTHOPEDIC SURGERY | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | No Response | 1 |
| 3964 | PEDIATRICS | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 1 |
| 3964 | PEDIATRICS | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Denial | 1 |
| 3962 | PHYSICIAN ASSISTANT, UNSPECIFIED | Nurtec 75MG OR TBDP | ANTIMIGRAINE | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Denial | 2 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | NURTEC TBDP 75MG 8EA x 1 BOX | ANTIMIGRAINE | No Response | 1 |
| 3964 | REGISTERED NURSE, UNSPECIFIED | Nurtec ODT 75mg (rimegepant) | ANTIMIGRAINE | Approval | 1 |
| 3963 | UNSPECIFIED | Aimovig 140mg/mL Auto-Inj (erenumab-aooe) | Antimigraine agent | Denial | 1 |
| 3951 | UNSPECIFIED | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3956 | UNSPECIFIED | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 6 |
| 3956 | UNSPECIFIED | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Denial | 1 |
| 3963 | UNSPECIFIED | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 6 |
| 3956 | UNSPECIFIED | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 4 |
| 3956 | UNSPECIFIED | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | No Response | 1 |
| 3963 | UNSPECIFIED | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3956 | UNSPECIFIED | Aimovig Inj 140mg/mL (erenumab-aooe) | Antimigraine agent | Approval | 3 |
| 3963 | UNSPECIFIED | Ajovy 225mg/1.5mL Pref Syr Inj (fremanezumab-vfrm) | Antimigraine agent | Approval | 1 |
| 3956 | UNSPECIFIED | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3963 | UNSPECIFIED | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3965 | UNSPECIFIED | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3951 | UNSPECIFIED | Ajovy 225MG/1.5ML SC SOSY | Antimigraine agent | Approval | 2 |
| 3956 | UNSPECIFIED | Ajovy 225MG/1.5ML SC SOSY | Antimigraine agent | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | UNSPECIFIED | Ajovy 225MG/1.5ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3956 | UNSPECIFIED | Ajovy Inj 225mg/1.5mL (fremanezumab-vfrm) | Antimigraine agent | Approval | 2 |
| 3956 | UNSPECIFIED | Ajovy Inj 225mg/1.5mL Pen (fremanezumab-vfrm) | Antimigraine agent | Approval | 2 |
| 3956 | UNSPECIFIED | Ajovy Inj 225mg/1.5mL Pen (fremanezumab-vfrm) | Antimigraine agent | No Response | 1 |
| 3956 | UNSPECIFIED | Emgality (Galcanezumab-gnlm) 120 MG/ML Subcutaneous Each | Antimigraine agent | No Response | 2 |
| 3964 | UNSPECIFIED | Emgality (Galcanezumab-gnlm) 120 MG/ML Subcutaneous Each | Antimigraine agent | Approval | 1 |
| 3951 | UNSPECIFIED | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3963 | UNSPECIFIED | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3963 | UNSPECIFIED | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | Denial | 1 |
| 3963 | UNSPECIFIED | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | No Response | 1 |
| 3951 | UNSPECIFIED | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | Denial | 1 |
| 3956 | UNSPECIFIED | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | Approval | 2 |
| 3956 | UNSPECIFIED | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | Denial | 1 |
| 3963 | UNSPECIFIED | Emgality 120mg/mL Pref Syr Inj (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3951 | UNSPECIFIED | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 6 |
| 3956 | UNSPECIFIED | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 7 |
| 3956 | UNSPECIFIED | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Denial | 1 |
| 3963 | UNSPECIFIED | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 7 |
| 3963 | UNSPECIFIED | Emgality 120MG/ML SC SOAJ | Antimigraine agent | No Response | 3 |
| 3964 | UNSPECIFIED | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 3 |
| 3951 | UNSPECIFIED | Emgality 120MG/ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3956 | UNSPECIFIED | Emgality 120MG/ML SC SOSY | Antimigraine agent | Approval | 3 |
| 3962 | UNSPECIFIED | Emgality 120MG/ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3963 | UNSPECIFIED | Emgality 120MG/ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3951 | UNSPECIFIED | Emgality Inj 100mg/mL PFS (galcanezumab-gnlm) | Antimigraine agent | No Response | 1 |
| 3956 | UNSPECIFIED | Emgality Inj 120mg/mL PFS (galcanez-gnlm) | Antimigraine agent | No Response | 1 |
| 3956 | ANESTHESIOLOGY | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3965 | ANESTHESIOLOGY | Ajovy 225MG/1.5ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3951 | ANESTHESIOLOGY | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3956 | FAMILY PRACTICE | Aimovig (Erenumab-aooe) 140 MG/ML Subcutaneous Each | Antimigraine agent | No Response | 1 |
| 3963 | FAMILY PRACTICE | Aimovig 140mg/mL Auto-Inj (erenumab-aooe) | Antimigraine agent | Denial | 2 |
| 3956 | FAMILY PRACTICE | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3963 | FAMILY PRACTICE | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 3 |
| 3963 | FAMILY PRACTICE | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | No Response | 1 |
| 3963 | FAMILY PRACTICE | Aimovig 70mg/mL Auto-Inj (erenumab-aooe) | Antimigraine agent | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | FAMILY PRACTICE | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3956 | FAMILY PRACTICE | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Denial | 1 |
| 3963 | FAMILY PRACTICE | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 4 |
| 3956 | FAMILY PRACTICE | Aimovig Inj 140mg/mL (erenumab-aooe) | Antimigraine agent | Approval | 4 |
| 3951 | FAMILY PRACTICE | Aimovig Inj 70mg/mL (erenumab-aooe) | Antimigraine agent | Approval | 1 |
| 3956 | FAMILY PRACTICE | Aimovig Inj 70mg/mL (erenumab-aooe) | Antimigraine agent | Approval | 1 |
| 3961 | FAMILY PRACTICE | Aimovig Inj 70mg/mL (erenumab-aooe) | Antimigraine agent | No Response | 1 |
| 3963 | FAMILY PRACTICE | Ajovy 225mg/1.5mL Auto-Inj (fremanezumab-vfrm) | Antimigraine agent | Approval | 1 |
| 3963 | FAMILY PRACTICE | Ajovy 225mg/1.5mL Pref Syr Inj (fremanezumab-vfrm) | Antimigraine agent | Approval | 1 |
| 3951 | FAMILY PRACTICE | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | No Response | 1 |
| 3956 | FAMILY PRACTICE | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3961 | FAMILY PRACTICE | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3963 | FAMILY PRACTICE | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3964 | FAMILY PRACTICE | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3967 | FAMILY PRACTICE | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3951 | FAMILY PRACTICE | Ajovy 225MG/1.5ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3956 | FAMILY PRACTICE | Ajovy 225MG/1.5ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3963 | FAMILY PRACTICE | Ajovy 225MG/1.5ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3956 | FAMILY PRACTICE | Ajovy Inj 225mg/1.5mL (fremanezumab-vfrm) | Antimigraine agent | Approval | 1 |
| 3956 | FAMILY PRACTICE | Ajovy Inj 225mg/1.5mL (fremanezumab-vfrm) | Antimigraine agent | No Response | 1 |
| 3963 | FAMILY PRACTICE | Emgality 120 mg/mL subcutaneous syringe | Antimigraine agent | No Response | 1 |
| 3963 | FAMILY PRACTICE | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3956 | FAMILY PRACTICE | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | Approval | 2 |
| 3956 | FAMILY PRACTICE | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | Denial | 1 |
| 3956 | FAMILY PRACTICE | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | No Response | 1 |
| 3963 | FAMILY PRACTICE | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3964 | FAMILY PRACTICE | Emgality 120mg/mL Pref Syr Inj (galcanezumab-gnlm) | Antimigraine agent | Denial | 1 |
| 3951 | FAMILY PRACTICE | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3956 | FAMILY PRACTICE | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 5 |
| 3956 | FAMILY PRACTICE | Emgality 120MG/ML SC SOAJ | Antimigraine agent | No Response | 1 |
| 3961 | FAMILY PRACTICE | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3963 | FAMILY PRACTICE | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 4 |
| 3963 | FAMILY PRACTICE | Emgality 120MG/ML SC SOAJ | Antimigraine agent | No Response | 2 |
| 3956 | FAMILY PRACTICE | Emgality 120MG/ML SC SOSY | Antimigraine agent | Approval | 4 |
| 3963 | FAMILY PRACTICE | Emgality 120MG/ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3956 | FAMILY PRACTICE | Emgality Inj 120mg/mL PFS (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Aimovig 140mg/mL Auto-Inj (erenumab-aooe) | Antimigraine agent | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | INTERNAL MEDICINE | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3967 | INTERNAL MEDICINE | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3965 | INTERNAL MEDICINE | Aimovig 70mg/mL Auto-Inj (erenumab-aooe) | Antimigraine agent | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Aimovig Inj 140mg/mL (erenumab-aooe) | Antimigraine agent | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Aimovig Inj 70mg/mL (erenumab-aooe) | Antimigraine agent | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Emgality (Galcanezumab-gnlm) 120 MG/ML Subcutaneous Milliliter | Antimigraine agent | No Response | 1 |
| 3964 | INTERNAL MEDICINE | Emgality 100mg/mL Pref Syr Inj (galcanezumab-gnlm) | Antimigraine agent | Denial | 1 |
| 3964 | INTERNAL MEDICINE | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3956 | NEUROLOGICAL SURGERY | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3956 | NEUROLOGY | Aimovig (Erenumab-aooe) 140 MG/ML Subcutaneous Each | Antimigraine agent | No Response | 1 |
| 3963 | NEUROLOGY | Aimovig (Erenumab-aooe) 140 MG/ML Subcutaneous Each | Antimigraine agent | No Response | 2 |
| 3951 | NEUROLOGY | Aimovig (Erenumab-aooe) 70 MG/ML Subcutaneous Each | Antimigraine agent | No Response | 1 |
| 3956 | NEUROLOGY | Aimovig (Erenumab-aooe) 70 MG/ML Subcutaneous Each | Antimigraine agent | No Response | 1 |
| 3965 | NEUROLOGY | Aimovig 140 MG/ML Subcutaneous Solution Auto-injector (Erenumab-aooe) | Antimigraine agent | Approval | 1 |
| 3963 | NEUROLOGY | Aimovig 140mg/mL Auto-Inj (erenumab-aooe) | Antimigraine agent | Approval | 3 |
| 3967 | NEUROLOGY | Aimovig 140mg/mL Auto-Inj (erenumab-aooe) | Antimigraine agent | Approval | 1 |
| 3963 | NEUROLOGY | AIMOVIG 140MG/ML PEN | Antimigraine agent | No Response | 1 |
| 3951 | NEUROLOGY | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 3 |
| 3956 | NEUROLOGY | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 7 |
| 3956 | NEUROLOGY | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | No Response | 2 |
| 3963 | NEUROLOGY | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 11 |
| 3964 | NEUROLOGY | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3965 | NEUROLOGY | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3967 | NEUROLOGY | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | No Response | 1 |
| 3951 | NEUROLOGY | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3956 | NEUROLOGY | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3961 | NEUROLOGY | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3962 | NEUROLOGY | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3963 | NEUROLOGY | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | NEUROLOGY | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Denial | 2 |
| 3956 | NEUROLOGY | Aimovig Inj 140mg/mL (erenumab-aooe) | Antimigraine agent | Approval | 4 |
| 3956 | NEUROLOGY | Aimovig Inj 140mg/mL (erenumab-aooe) | Antimigraine agent | No Response | 3 |
| 3963 | NEUROLOGY | Aimovig Inj 140mg/mL (erenumab-aooe) | Antimigraine agent | Approval | 1 |
| 3956 | NEUROLOGY | Aimovig Inj 70mg/mL (erenumab-aooe) | Antimigraine agent | Approval | 2 |
| 3956 | NEUROLOGY | Aimovig Inj 70mg/mL (erenumab-aooe) | Antimigraine agent | Denial | 1 |
| 3956 | NEUROLOGY | Aimovig Inj 70mg/mL (erenumab-aooe) | Antimigraine agent | No Response | 1 |
| 3963 | NEUROLOGY | Ajovy 225 mg/1.5mL auto injector | Antimigraine agent | Denial | 1 |
| 3951 | NEUROLOGY | Ajovy 225mg/1.5mL Auto-Inj (fremanezumab-vfrm) | Antimigraine agent | Denial | 1 |
| 3963 | NEUROLOGY | Ajovy 225mg/1.5mL Auto-Inj (fremanezumab-vfrm) | Antimigraine agent | Approval | 1 |
| 3951 | NEUROLOGY | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3956 | NEUROLOGY | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3962 | NEUROLOGY | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3963 | NEUROLOGY | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3964 | NEUROLOGY | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3956 | NEUROLOGY | Ajovy 225MG/1.5ML SC SOSY | Antimigraine agent | Approval | 2 |
| 3961 | NEUROLOGY | Ajovy 225MG/1.5ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3963 | NEUROLOGY | Ajovy 225MG/1.5ML SC SOSY | Antimigraine agent | Approval | 2 |
| 3956 | NEUROLOGY | Ajovy Inj 225mg/1.5mL (fremanezumab-vfrm) | Antimigraine agent | Approval | 1 |
| 3956 | NEUROLOGY | Ajovy Inj 225mg/1.5mL (fremanezumab-vfrm) | Antimigraine agent | Denial | 1 |
| 3951 | NEUROLOGY | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3963 | NEUROLOGY | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | Approval | 2 |
| 3963 | NEUROLOGY | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | No Response | 1 |
| 3965 | NEUROLOGY | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3967 | NEUROLOGY | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3956 | NEUROLOGY | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | Approval | 3 |
| 3956 | NEUROLOGY | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | No Response | 1 |
| 3951 | NEUROLOGY | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3956 | NEUROLOGY | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 6 |
| 3956 | NEUROLOGY | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Denial | 1 |
| 3961 | NEUROLOGY | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3963 | NEUROLOGY | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 3 |
| 3964 | NEUROLOGY | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3951 | NEUROLOGY | Emgality 120MG/ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3956 | NEUROLOGY | Emgality 120MG/ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3964 | NEUROLOGY | Emgality 120MG/ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3956 | NEUROLOGY | Emgality Inj 120mg/mL PFS (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | NURSE PRACTITIONER, ACUTE CARE | Aimovig (Erenumab-aooe) 140 MG/ML Subcutaneous Each | Antimigraine agent | No Response | 1 |
| 3963 | NURSE PRACTITIONER, ACUTE CARE | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 3 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 3 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Aimovig Inj 70mg/mL (erenumab-aooe) | Antimigraine agent | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ajovy Inj 225mg/1.5mL Pen (fremanezumab-vfrm) | Antimigraine agent | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | Denial | 2 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Emgality 120MG/ML SC SOSY | Antimigraine agent | Approval | 2 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Emgality 120MG/ML SC SOSY | Antimigraine agent | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Emgality Inj 120mg/mL PFS (galcanez-gnlm) | Antimigraine agent | Approval | 1 |
| 3951 | NURSE PRACTITIONER, PRIMARY CARE | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3964 | NURSE PRACTITIONER, UNSPECIFIED | Aimovig 140mg/mL Auto-Inj (erenumab-aooe) | Antimigraine agent | No Response | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Aimovig 140MG/ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3961 | NURSE PRACTITIONER, UNSPECIFIED | Aimovig Inj 70mg/mL (erenumab-aooe) | Antimigraine agent | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Ajovy 225MG/1.5ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Ajovy 225MG/1.5ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3964 | NURSE PRACTITIONER, UNSPECIFIED | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | No Response | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | No Response | 1 |
| 3961 | NURSE PRACTITIONER, UNSPECIFIED | Emgality 120mg/mL PF Pen (galcanezumab-gnlm) | Antimigraine agent | Approval | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Emgality 120MG/ML SC SOSY | Antimigraine agent | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | PEDIATRICS | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3963 | PEDIATRICS | Aimovig 70MG/ML SC SOAJ | Antimigraine agent | Approval | 1 |
| 3963 | PEDIATRICS | Emgality 120mg/mL Pref Syr Inj (galcanezumab-gnlm) | Antimigraine agent | No Response | 1 |
| 3963 | PEDIATRICS | Emgality 120MG/ML SC SOSY | Antimigraine agent | No Response | 1 |
| 3956 | PEDIATRICS & NEUROLOGY | Aimovig Inj 140mg/mL (erenumab-aooe) | Antimigraine agent | Approval | 1 |
| 3956 | PEDIATRICS & NEUROLOGY | Aimovig Inj 70mg/mL (erenumab-aooe) | Antimigraine agent | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ajovy Inj 225mg/1.5mL Pen (fremanezumab-vfrm) | Antimigraine agent | Approval | 1 |
| 3962 | PHYSICIAN ASSISTANT, UNSPECIFIED | Emgality 120mg/mL Pen Auto-Inj (galcanezumab-gnlm) | Antimigraine agent | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Emgality 120MG/ML SC SOAJ | Antimigraine agent | Approval | 2 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Emgality 120MG/ML SC SOSY | Antimigraine agent | Approval | 1 |
| 3963 | UNSPECIFIED | Dronabinol | ANTINAUSEANTS | Approval | 1 |
| 3951 | UNSPECIFIED | Dronabinol Capsules | ANTINAUSEANTS | Denial | 1 |
| 3963 | UNSPECIFIED | GRANISETRON | ANTINAUSEANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Granisetron HCl 1MG OR TABS | ANTINAUSEANTS | Denial | 1 |
| 3956 | UNSPECIFIED | Ondansetron 4MG OR TBDP | ANTINAUSEANTS | No Response | 1 |
| 3963 | UNSPECIFIED | Ondansetron 4MG OR TBDP | ANTINAUSEANTS | Denial | 1 |
| 3963 | UNSPECIFIED | Ondansetron 8 MG Oral Tablet | ANTINAUSEANTS | Denial | 1 |
| 3951 | UNSPECIFIED | Ondansetron HCl 4MG OR TABS | ANTINAUSEANTS | Approval | 1 |
| 3951 | UNSPECIFIED | Ondansetron HCl 4MG OR TABS | ANTINAUSEANTS | No Response | 1 |
| 3961 | UNSPECIFIED | Ondansetron HCl 4MG OR TABS | ANTINAUSEANTS | Denial | 1 |
| 3963 | UNSPECIFIED | Ondansetron HCl 4MG OR TABS | ANTINAUSEANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Ondansetron HCl 8MG OR TABS | ANTINAUSEANTS | Approval | 1 |
| 3951 | UNSPECIFIED | ONDANSETRON HYDROCHLORIDE 8MG TAB | ANTINAUSEANTS | Denial | 1 |
| 3951 | UNSPECIFIED | ONDANSETRON ODT | ANTINAUSEANTS | Denial | 1 |
| 3951 | UNSPECIFIED | Ondansetron ODT Tablet | ANTINAUSEANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Ondansetron ODT Tablet | ANTINAUSEANTS | Denial | 1 |
| 3963 | UNSPECIFIED | Ondansetron ODT Tablet | ANTINAUSEANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Ondansetron Tablet | ANTINAUSEANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Ondansetron Tablet | ANTINAUSEANTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Ondansetron HCl 4MG OR TABS | ANTINAUSEANTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Ondansetron Tablet | ANTINAUSEANTS | No Response | 2 |
| 3956 | GASTROENTEROLOGY | Ondansetron HCl 4MG OR TABS | ANTINAUSEANTS | Denial | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Dronabinol 2.5MG OR CAPS | ANTINAUSEANTS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Dronabinol 5MG OR CAPS | ANTINAUSEANTS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Dronabinol 5MG OR CAPS | ANTINAUSEANTS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | ONDANSETRON 8MG TAB | ANTINAUSEANTS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Ondansetron HCl 8MG OR TABS | ANTINAUSEANTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-----------------------------------|---------------------------|-------------|-------|
| 3956 | HEMATOLOGY & ONCOLOGY | Ondansetron ODT Tablet | ANTINAUSEANTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Ondansetron 4MG OR TBDP | ANTINAUSEANTS | Denial | 2 |
| 3956 | INTERNAL MEDICINE | Ondansetron 8MG OR TBDP | ANTINAUSEANTS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Ondansetron 8MG OR TBDP | ANTINAUSEANTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Ondansetron ODT Tablet | ANTINAUSEANTS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Ondansetron Tablet | ANTINAUSEANTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Sancuso 3.1MG/24HR TD PTCH | ANTINAUSEANTS | Approval | 1 |
| 3956 | MEDICAL ONCOLOGY | Ondansetron HCl 8MG OR TABS | ANTINAUSEANTS | Approval | 1 |
| 3951 | NEUROLOGY | Ondansetron 8MG OR TBDP | ANTINAUSEANTS | Denial | 1 |
| 3956 | NEUROLOGY | Ondansetron HCl 4MG OR TABS | ANTINAUSEANTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ondansetron 4MG OR TBDP | ANTINAUSEANTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ondansetron 8MG OR TBDP | ANTINAUSEANTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ondansetron Tablet | ANTINAUSEANTS | Denial | 2 |
| 3963 | OBSTETRICS & GYNECOLOGY | Ondansetron 8MG OR TBDP | ANTINAUSEANTS | Denial | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Ondansetron Tablet | ANTINAUSEANTS | Denial | 1 |
| 3956 | ORTHOPEDIC SURGERY | Ondansetron HCl 4MG OR TABS | ANTINAUSEANTS | Denial | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ondansetron ODT Tablet | ANTINAUSEANTS | Denial | 1 |
| 3956 | PHYSICIAN, SURGERY, GENERAL | Ondansetron 8MG OR TBDP | ANTINAUSEANTS | Denial | 2 |
| 3963 | UNSPECIFIED | abiraterone 250 mg | ANTINEOPLASTICS | Denial | 1 |
| 3951 | UNSPECIFIED | abiraterone 500 mg | ANTINEOPLASTICS | Approval | 1 |
| 3963 | UNSPECIFIED | abiraterone 500 mg | ANTINEOPLASTICS | Approval | 1 |
| 3963 | UNSPECIFIED | Abiraterone Acetate 500MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | Afinitor 10 mg | ANTINEOPLASTICS | Approval | 1 |
| 3963 | UNSPECIFIED | Afinitor 10 mg | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | bexarotene | ANTINEOPLASTICS | No Response | 1 |
| 3956 | UNSPECIFIED | Cabometyx | ANTINEOPLASTICS | Approval | 2 |
| 3963 | UNSPECIFIED | Cabometyx 40MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | capecitabine | ANTINEOPLASTICS | Approval | 2 |
| 3963 | UNSPECIFIED | capecitabine | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | Capecitabine 500MG OR TABS | ANTINEOPLASTICS | Approval | 2 |
| 3963 | UNSPECIFIED | Capecitabine 500MG OR TABS | ANTINEOPLASTICS | Approval | 4 |
| 3963 | UNSPECIFIED | Capecitabine 500MG OR TABS | ANTINEOPLASTICS | No Response | 1 |
| 3965 | UNSPECIFIED | Capecitabine 500MG OR TABS | ANTINEOPLASTICS | Approval | 2 |
| 3956 | UNSPECIFIED | Erleada | ANTINEOPLASTICS | Approval | 1 |
| 3951 | UNSPECIFIED | everolimus 5 mg | ANTINEOPLASTICS | Approval | 1 |
| 3962 | UNSPECIFIED | everolimus 5 mg | ANTINEOPLASTICS | Approval | 1 |
| 3962 | UNSPECIFIED | everolimus 7.5 mg | ANTINEOPLASTICS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---------------------------------|---------------------------|-------------|-------|
| 3956 | UNSPECIFIED | Ibrance | ANTINEOPLASTICS | Approval | 2 |
| 3963 | UNSPECIFIED | Ibrance | ANTINEOPLASTICS | Approval | 1 |
| 3965 | UNSPECIFIED | Ibrance | ANTINEOPLASTICS | Approval | 1 |
| 3951 | UNSPECIFIED | imatinib mesylate | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | imatinib mesylate | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | Imatinib Mesylate 400MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | Imbruvica | ANTINEOPLASTICS | No Response | 1 |
| 3963 | UNSPECIFIED | Imbruvica | ANTINEOPLASTICS | No Response | 1 |
| 3965 | UNSPECIFIED | Imbruvica | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | Imbruvica 420MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | Imbruvica 420MG OR TABS | ANTINEOPLASTICS | No Response | 1 |
| 3956 | UNSPECIFIED | Jakafi | ANTINEOPLASTICS | Approval | 1 |
| 3963 | UNSPECIFIED | Jakafi | ANTINEOPLASTICS | No Response | 1 |
| 3956 | UNSPECIFIED | Lynparza | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | Lynparza | ANTINEOPLASTICS | Denial | 1 |
| 3963 | UNSPECIFIED | Lynparza | ANTINEOPLASTICS | No Response | 1 |
| 3965 | UNSPECIFIED | Lynparza | ANTINEOPLASTICS | Approval | 1 |
| 3965 | UNSPECIFIED | Lynparza | ANTINEOPLASTICS | Denial | 1 |
| 3965 | UNSPECIFIED | Lynparza 100MG OR TABS | ANTINEOPLASTICS | Denial | 1 |
| 3963 | UNSPECIFIED | Mekinist | ANTINEOPLASTICS | Approval | 1 |
| 3964 | UNSPECIFIED | Revlimid | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | Sprycel | ANTINEOPLASTICS | No Response | 1 |
| 3963 | UNSPECIFIED | Sprycel | ANTINEOPLASTICS | Approval | 2 |
| 3963 | UNSPECIFIED | Sprycel | ANTINEOPLASTICS | No Response | 1 |
| 3956 | UNSPECIFIED | Sprycel 70MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | UNSPECIFIED | Tafinlar | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | temozolomide | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | temozolomide | ANTINEOPLASTICS | No Response | 1 |
| 3963 | UNSPECIFIED | temozolomide | ANTINEOPLASTICS | Approval | 2 |
| 3956 | UNSPECIFIED | Temozolomide 5MG OR CAPS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | UNSPECIFIED | Thalomid 100MG OR CAPS | ANTINEOPLASTICS | Approval | 1 |
| 3951 | UNSPECIFIED | Venclexta | ANTINEOPLASTICS | Approval | 1 |
| 3956 | UNSPECIFIED | Venclexta | ANTINEOPLASTICS | Denial | 1 |
| 3963 | UNSPECIFIED | Venclexta | ANTINEOPLASTICS | Approval | 1 |
| 3963 | UNSPECIFIED | Venclexta 100MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | UNSPECIFIED | Votrient | ANTINEOPLASTICS | Approval | 1 |
| 3965 | UNSPECIFIED | Xtandi 40MG OR CAPS | ANTINEOPLASTICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|----------------------------|---------------------------|-------------|-------|
| 3956 | DERMATOLOGY | bexarotene | ANTINEOPLASTICS | Approval | 1 |
| 3963 | DERMATOLOGY | bexarotene | ANTINEOPLASTICS | Approval | 1 |
| 3956 | HEMATOLOGY | Capecitabine 150MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY | Capecitabine 500MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3956 | HEMATOLOGY | Ibrance | ANTINEOPLASTICS | No Response | 1 |
| 3951 | HEMATOLOGY | imatinib mesylate | ANTINEOPLASTICS | No Response | 2 |
| 3951 | HEMATOLOGY | Lynparza | ANTINEOPLASTICS | Denial | 1 |
| 3956 | HEMATOLOGY | Mekinist | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY | Revlimid | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY | Revlimid | ANTINEOPLASTICS | No Response | 1 |
| 3963 | HEMATOLOGY | Revlimid 10MG OR CAPS | ANTINEOPLASTICS | Approval | 1 |
| 3956 | HEMATOLOGY | Tafinlar | ANTINEOPLASTICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | abiraterone 250 mg | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | abiraterone 250 mg | ANTINEOPLASTICS | Approval | 1 |
| 3964 | HEMATOLOGY & ONCOLOGY | abiraterone 250 mg | ANTINEOPLASTICS | Denial | 1 |
| 3961 | HEMATOLOGY & ONCOLOGY | Bosulif | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Cabometyx | ANTINEOPLASTICS | Approval | 1 |
| 3961 | HEMATOLOGY & ONCOLOGY | Calquence | ANTINEOPLASTICS | Denial | 2 |
| 3951 | HEMATOLOGY & ONCOLOGY | capecitabine | ANTINEOPLASTICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | capecitabine | ANTINEOPLASTICS | No Response | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | capecitabine | ANTINEOPLASTICS | Approval | 5 |
| 3956 | HEMATOLOGY & ONCOLOGY | capecitabine | ANTINEOPLASTICS | No Response | 2 |
| 3962 | HEMATOLOGY & ONCOLOGY | capecitabine | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | capecitabine | ANTINEOPLASTICS | Approval | 2 |
| 3963 | HEMATOLOGY & ONCOLOGY | Capecitabine 150MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Capecitabine 500MG OR TABS | ANTINEOPLASTICS | Approval | 2 |
| 3956 | HEMATOLOGY & ONCOLOGY | Capecitabine 500MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Capecitabine 500MG OR TABS | ANTINEOPLASTICS | Approval | 4 |
| 3964 | HEMATOLOGY & ONCOLOGY | Capecitabine 500MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Gilotrif | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Ibrance | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Ibrance 100MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | imatinib mesylate | ANTINEOPLASTICS | Approval | 2 |
| 3951 | HEMATOLOGY & ONCOLOGY | imatinib mesylate | ANTINEOPLASTICS | Denial | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | imatinib mesylate | ANTINEOPLASTICS | Approval | 1 |
| 3961 | HEMATOLOGY & ONCOLOGY | imatinib mesylate | ANTINEOPLASTICS | Approval | 1 |
| 3965 | HEMATOLOGY & ONCOLOGY | imatinib mesylate | ANTINEOPLASTICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---------------------------------|---------------------------|-------------|-------|
| 3965 | HEMATOLOGY & ONCOLOGY | imatinib mesylate | ANTINEOPLASTICS | No Response | 1 |
| 3961 | HEMATOLOGY & ONCOLOGY | Imatinib Mesylate 400MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Imbruvica | ANTINEOPLASTICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Imbruvica | ANTINEOPLASTICS | No Response | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Imbruvica 420MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3961 | HEMATOLOGY & ONCOLOGY | Imbruvica 560MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Inlyta | ANTINEOPLASTICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Inlyta 5MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3964 | HEMATOLOGY & ONCOLOGY | Inlyta 5MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Lenvima | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Lenvima | ANTINEOPLASTICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Lonsurf | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Lonsurf | ANTINEOPLASTICS | Approval | 2 |
| 3956 | HEMATOLOGY & ONCOLOGY | Lynparza | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Lynparza | ANTINEOPLASTICS | Denial | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Nerlynx 40MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Nexavar | ANTINEOPLASTICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Nexavar | ANTINEOPLASTICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Revlimid | ANTINEOPLASTICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Revlimid | ANTINEOPLASTICS | Approval | 1 |
| 3961 | HEMATOLOGY & ONCOLOGY | Revlimid | ANTINEOPLASTICS | No Response | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Revlimid | ANTINEOPLASTICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Revlimid 10MG OR CAPS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Revlimid 25MG OR CAPS | ANTINEOPLASTICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Rydapt 25MG OR CAPS | ANTINEOPLASTICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Sprycel | ANTINEOPLASTICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Sprycel | ANTINEOPLASTICS | No Response | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Sprycel | ANTINEOPLASTICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Sprycel | ANTINEOPLASTICS | No Response | 1 |
| 3961 | HEMATOLOGY & ONCOLOGY | Sprycel | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Sprycel | ANTINEOPLASTICS | Approval | 3 |
| 3963 | HEMATOLOGY & ONCOLOGY | Sprycel | ANTINEOPLASTICS | No Response | 1 |
| 3965 | HEMATOLOGY & ONCOLOGY | Stivarga | ANTINEOPLASTICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Stivarga 40MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | temozolomide | ANTINEOPLASTICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | temozolomide | ANTINEOPLASTICS | Approval | 3 |
| 3956 | HEMATOLOGY & ONCOLOGY | temozolomide | ANTINEOPLASTICS | No Response | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | HEMATOLOGY & ONCOLOGY | temozolomide | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | temozolomide | ANTINEOPLASTICS | No Response | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Thalomid 100MG OR CAPS | ANTINEOPLASTICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Tukysa | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Tykerb | ANTINEOPLASTICS | No Response | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Venclexta | ANTINEOPLASTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Venclexta | ANTINEOPLASTICS | No Response | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Verzenio | ANTINEOPLASTICS | No Response | 1 |
| 3965 | HEMATOLOGY & ONCOLOGY | Verzenio | ANTINEOPLASTICS | Approval | 1 |
| 3965 | HEMATOLOGY & ONCOLOGY | Verzenio | ANTINEOPLASTICS | No Response | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Xeloda 500MG OR TABS | ANTINEOPLASTICS | No Response | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Xtandi 80MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | abiraterone 250 mg | ANTINEOPLASTICS | Approval | 1 |
| 3961 | INTERNAL MEDICINE | Afinitor 7.5 mg | ANTINEOPLASTICS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Cabometyx | ANTINEOPLASTICS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | capecitabine | ANTINEOPLASTICS | Approval | 2 |
| 3951 | INTERNAL MEDICINE | capecitabine | ANTINEOPLASTICS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | capecitabine | ANTINEOPLASTICS | Approval | 2 |
| 3963 | INTERNAL MEDICINE | capecitabine | ANTINEOPLASTICS | Approval | 2 |
| 3964 | INTERNAL MEDICINE | capecitabine | ANTINEOPLASTICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Capecitabine 500MG OR TABS | ANTINEOPLASTICS | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Capecitabine 500MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Erleada 60MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | everolimus 5 mg | ANTINEOPLASTICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Iclusig | ANTINEOPLASTICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Iclusig 30MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Jakafi | ANTINEOPLASTICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Jakafi | ANTINEOPLASTICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Lenvima (18 MG Daily Dose) 10 MG & 2 x 4 MG OR CPPK | ANTINEOPLASTICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Lynparza | ANTINEOPLASTICS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Mekinist | ANTINEOPLASTICS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Nexavar | ANTINEOPLASTICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Tafinlar | ANTINEOPLASTICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | temozolomide | ANTINEOPLASTICS | Approval | 1 |
| 3964 | INTERNAL MEDICINE | temozolomide | ANTINEOPLASTICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Venclexta | ANTINEOPLASTICS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-----------------------------------|---------------------------|-------------|-------|
| 3951 | INTERNAL MEDICINE | Verzenio | ANTINEOPLASTICS | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Verzenio 150MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | MEDICAL ONCOLOGY | Braftovi | ANTINEOPLASTICS | Approval | 1 |
| 3963 | MEDICAL ONCOLOGY | Erleada 60MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | MEDICAL ONCOLOGY | imatinib mesylate | ANTINEOPLASTICS | Approval | 1 |
| 3956 | MEDICAL ONCOLOGY | Imbruvica | ANTINEOPLASTICS | Approval | 1 |
| 3963 | MEDICAL ONCOLOGY | Inlyta | ANTINEOPLASTICS | Approval | 1 |
| 3956 | MEDICAL ONCOLOGY | Inlyta 5MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3956 | MEDICAL ONCOLOGY | Lynparza | ANTINEOPLASTICS | Approval | 1 |
| 3956 | MEDICAL ONCOLOGY | Lynparza | ANTINEOPLASTICS | Denial | 2 |
| 3963 | MEDICAL ONCOLOGY | Mektovi | ANTINEOPLASTICS | Approval | 1 |
| 3956 | MEDICAL ONCOLOGY | Rydapt | ANTINEOPLASTICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, ACUTE CARE | Revlimid | ANTINEOPLASTICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Imbruvica | ANTINEOPLASTICS | No Response | 2 |
| 3963 | PHYSICIAN, ONCOLOGY, MEDICAL | Abiraterone Acetate 250MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | PHYSICIAN, ONCOLOGY, MEDICAL | Abiraterone Acetate 250MG OR TABS | ANTINEOPLASTICS | No Response | 1 |
| 3956 | PHYSICIAN, ONCOLOGY, MEDICAL | Alecensa | ANTINEOPLASTICS | Approval | 1 |
| 3963 | PHYSICIAN, ONCOLOGY, MEDICAL | Braftovi | ANTINEOPLASTICS | Approval | 1 |
| 3963 | PHYSICIAN, ONCOLOGY, MEDICAL | Braftovi | ANTINEOPLASTICS | No Response | 1 |
| 3963 | PHYSICIAN, ONCOLOGY, MEDICAL | capecitabine | ANTINEOPLASTICS | No Response | 1 |
| 3951 | PHYSICIAN, ONCOLOGY, MEDICAL | Capecitabine 500MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3964 | PHYSICIAN, ONCOLOGY, MEDICAL | Ibrance | ANTINEOPLASTICS | Approval | 1 |
| 3964 | PHYSICIAN, ONCOLOGY, MEDICAL | Ibrance 125MG OR TABS | ANTINEOPLASTICS | No Response | 1 |
| 3956 | PHYSICIAN, ONCOLOGY, MEDICAL | Imatinib Mesylate 400MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | PHYSICIAN, ONCOLOGY, MEDICAL | Jakafi | ANTINEOPLASTICS | Approval | 1 |
| 3963 | PHYSICIAN, ONCOLOGY, MEDICAL | Lynparza 150MG OR TABS | ANTINEOPLASTICS | Approval | 1 |
| 3963 | PHYSICIAN, ONCOLOGY, MEDICAL | Mektovi | ANTINEOPLASTICS | Approval | 1 |
| 3963 | PHYSICIAN, ONCOLOGY, MEDICAL | Mektovi | ANTINEOPLASTICS | No Response | 1 |
| 3963 | PHYSICIAN, ONCOLOGY, MEDICAL | Revlimid | ANTINEOPLASTICS | Approval | 2 |
| 3961 | PHYSICIAN, ONCOLOGY, MEDICAL | Sprycel | ANTINEOPLASTICS | Approval | 1 |
| 3963 | PHYSICIAN, ONCOLOGY, MEDICAL | Venclexta | ANTINEOPLASTICS | Approval | 1 |
| 3961 | UROLOGY | Erleada | ANTINEOPLASTICS | Approval | 1 |
| 3963 | UROLOGY | Xtandi | ANTINEOPLASTICS | Approval | 1 |
| 3963 | UROLOGY | Xtandi | ANTINEOPLASTICS | No Response | 1 |
| 3963 | UROLOGY | Xtandi 40MG OR CAPS | ANTINEOPLASTICS | Approval | 1 |
| 3951 | UNSPECIFIED | Ivermectin 1% EX CREA | ANTIPARASITIC | Approval | 2 |
| 3951 | UNSPECIFIED | Ivermectin 1% EX CREA | ANTIPARASITIC | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-----------------------------|---------------------------|-------------|-------|
| 3951 | UNSPECIFIED | Ivermectin 1% EX CREA | ANTIPARASITIC | No Response | 1 |
| 3964 | UNSPECIFIED | Ivermectin 1% EX CREA | ANTIPARASITIC | Approval | 1 |
| 3963 | UNSPECIFIED | Ivermectin 3 MG Oral Tablet | ANTIPARASITIC | No Response | 2 |
| 3956 | UNSPECIFIED | Ivermectin 3MG OR TABS | ANTIPARASITIC | Approval | 1 |
| 3956 | UNSPECIFIED | Ivermectin 3MG OR TABS | ANTIPARASITIC | Denial | 1 |
| 3961 | UNSPECIFIED | Ivermectin 3MG OR TABS | ANTIPARASITIC | No Response | 1 |
| 3963 | UNSPECIFIED | Ivermectin 3MG OR TABS | ANTIPARASITIC | Denial | 5 |
| 3963 | DERMATOLOGY | ivermectin 1% cream | ANTIPARASITIC | Approval | 1 |
| 3951 | DERMATOLOGY | Ivermectin 1% EX CREA | ANTIPARASITIC | Approval | 2 |
| 3963 | DERMATOLOGY | Ivermectin 1% EX CREA | ANTIPARASITIC | Approval | 3 |
| 3956 | DERMATOLOGY | Ivermectin 3MG OR TABS | ANTIPARASITIC | Denial | 1 |
| 3951 | DERMATOLOGY | Ivermectin Cream | ANTIPARASITIC | Approval | 1 |
| 3963 | DERMATOLOGY | Ivermectin Cream | ANTIPARASITIC | Approval | 1 |
| 3963 | DERMATOLOGY | Ivermectin Cream | ANTIPARASITIC | Denial | 1 |
| 3964 | EMERGENCY MEDICINE | Ivermectin 1% EX CREA | ANTIPARASITIC | Denial | 1 |
| 3956 | EMERGENCY MEDICINE | Ivermectin 3MG OR TABS | ANTIPARASITIC | No Response | 2 |
| 3963 | EMERGENCY MEDICINE | Ivermectin 3MG OR TABS | ANTIPARASITIC | Denial | 1 |
| 3963 | EMERGENCY MEDICINE | Ivermectin 3MG OR TABS | ANTIPARASITIC | No Response | 1 |
| 3964 | EMERGENCY MEDICINE | Ivermectin Cream | ANTIPARASITIC | Approval | 1 |
| 3956 | FAMILY PRACTICE | Ivermectin 3 MG Oral Tablet | ANTIPARASITIC | No Response | 2 |
| 3963 | FAMILY PRACTICE | Ivermectin 3 MG Oral Tablet | ANTIPARASITIC | No Response | 3 |
| 3964 | FAMILY PRACTICE | Ivermectin 3 MG Oral Tablet | ANTIPARASITIC | No Response | 1 |
| 3956 | FAMILY PRACTICE | Ivermectin 3MG OR TABS | ANTIPARASITIC | Approval | 2 |
| 3956 | FAMILY PRACTICE | Ivermectin 3MG OR TABS | ANTIPARASITIC | Denial | 2 |
| 3963 | FAMILY PRACTICE | Ivermectin 3MG OR TABS | ANTIPARASITIC | Denial | 3 |
| 3963 | FAMILY PRACTICE | Ivermectin 3MG OR TABS | ANTIPARASITIC | No Response | 2 |
| 3963 | INTERNAL MEDICINE | Ivermectin 1% EX CREA | ANTIPARASITIC | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Ivermectin 3MG OR TABS | ANTIPARASITIC | Denial | 1 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Ivermectin 3MG OR TABS | ANTIPARASITIC | Approval | 1 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Ivermectin 3MG OR TABS | ANTIPARASITIC | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Ivermectin 3 MG Oral Tablet | ANTIPARASITIC | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ivermectin 3 MG Oral Tablet | ANTIPARASITIC | No Response | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ivermectin 3 MG Oral Tablet | ANTIPARASITIC | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Ivermectin 3MG OR TABS | ANTIPARASITIC | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ivermectin 3MG OR TABS | ANTIPARASITIC | Approval | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ivermectin 3MG OR TABS | ANTIPARASITIC | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ivermectin 3MG OR TABS | ANTIPARASITIC | No Response | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|----------------------------------|---------------------------|-------------|-------|
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ivermectin 3MG OR TABS | ANTIPARASITIC | Denial | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Ivermectin Cream | ANTIPARASITIC | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | ivermectin 1% cream | ANTIPARASITIC | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ivermectin 3MG OR TABS | ANTIPARASITIC | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ivermectin 3MG OR TABS | ANTIPARASITIC | Approval | 1 |
| 3962 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ivermectin 3MG OR TABS | ANTIPARASITIC | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ivermectin 3MG OR TABS | ANTIPARASITIC | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ivermectin Cream | ANTIPARASITIC | Denial | 1 |
| 3951 | UNSPECIFIED | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3956 | UNSPECIFIED | Ivermectin | ANTIPARASITICS | Denial | 3 |
| 3963 | UNSPECIFIED | Ivermectin | ANTIPARASITICS | Denial | 5 |
| 3964 | UNSPECIFIED | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3961 | DERMATOLOGY | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3963 | DERMATOLOGY | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3964 | DERMATOLOGY | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3956 | EMERGENCY MEDICINE | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3963 | EMERGENCY MEDICINE | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Ivermectin | ANTIPARASITICS | Denial | 3 |
| 3956 | FAMILY PRACTICE | Ivermectin | ANTIPARASITICS | Denial | 4 |
| 3962 | FAMILY PRACTICE | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Ivermectin | ANTIPARASITICS | Denial | 12 |
| 3964 | FAMILY PRACTICE | Ivermectin | ANTIPARASITICS | Denial | 3 |
| 3965 | FAMILY PRACTICE | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Ivermectin 3 MG Oral Tablet | ANTIPARASITICS | No Response | 2 |
| 3951 | FAMILY PRACTICE | Ivermectin 3MG OR TABS | ANTIPARASITICS | Denial | 3 |
| 3956 | INTERNAL MEDICINE | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ivermectin | ANTIPARASITICS | Denial | 4 |
| 3965 | NURSE PRACTITIONER, FAMILY HEALTH | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3962 | NURSE PRACTITIONER, UNSPECIFIED | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3963 | OPHTHALMOLOGY | Ivermectin | ANTIPARASITICS | Denial | 2 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ivermectin | ANTIPARASITICS | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ivermectin | ANTIPARASITICS | Denial | 2 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3951 | PSYCHIATRY | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3956 | PSYCHIATRY | Ivermectin | ANTIPARASITICS | Denial | 1 |
| 3965 | UNSPECIFIED | Protopic 0.1% (tacrolimus) | Antipsoriatic | Approval | 1 |
| 3963 | UNSPECIFIED | Protopic 0.03 % topical ointment | Antipsoriatic | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | UNSPECIFIED | Protopic 0.1 % topical ointment | Antipsoriatic | Approval | 1 |
| 3963 | UNSPECIFIED | Protopic 0.1% EX OINT | Antipsoriatic | Approval | 2 |
| 3956 | UNSPECIFIED | Rexulti (brexpiprazole) | Antipsychotic | Approval | 2 |
| 3964 | UNSPECIFIED | Rexulti (brexpiprazole) | Antipsychotic | Approval | 1 |
| 3965 | UNSPECIFIED | Rexulti (brexpiprazole) | Antipsychotic | Approval | 1 |
| 3956 | UNSPECIFIED | Rexulti (Brexiprazole) 3 MG Oral Tablet | Antipsychotic | Approval | 1 |
| 3956 | UNSPECIFIED | Rexulti 0.5MG OR TABS | Antipsychotic | Approval | 4 |
| 3956 | UNSPECIFIED | Rexulti 0.5MG OR TABS | Antipsychotic | No Response | 1 |
| 3951 | UNSPECIFIED | Rexulti 1MG OR TABS | Antipsychotic | Denial | 1 |
| 3956 | UNSPECIFIED | Rexulti 1MG OR TABS | Antipsychotic | Approval | 4 |
| 3963 | UNSPECIFIED | Rexulti 1MG OR TABS | Antipsychotic | Approval | 4 |
| 3964 | UNSPECIFIED | Rexulti 1MG OR TABS | Antipsychotic | Approval | 1 |
| 3951 | UNSPECIFIED | Rexulti 2MG OR TABS | Antipsychotic | Approval | 1 |
| 3956 | UNSPECIFIED | Rexulti 2MG OR TABS | Antipsychotic | Approval | 4 |
| 3951 | UNSPECIFIED | Rexulti 3MG OR TABS | Antipsychotic | Approval | 1 |
| 3956 | UNSPECIFIED | Rexulti 3MG OR TABS | Antipsychotic | Approval | 4 |
| 3956 | UNSPECIFIED | Rexulti 4MG OR TABS | Antipsychotic | Approval | 1 |
| 3951 | FAMILY PRACTICE | Rexulti (brexpiprazole) | Antipsychotic | Denial | 1 |
| 3963 | FAMILY PRACTICE | Rexulti (brexpiprazole) | Antipsychotic | Denial | 1 |
| 3964 | FAMILY PRACTICE | Rexulti (brexpiprazole) | Antipsychotic | Approval | 1 |
| 3956 | FAMILY PRACTICE | Rexulti 0.5MG OR TABS | Antipsychotic | Approval | 2 |
| 3951 | FAMILY PRACTICE | Rexulti 1MG OR TABS | Antipsychotic | No Response | 1 |
| 3956 | FAMILY PRACTICE | Rexulti 1MG OR TABS | Antipsychotic | Approval | 2 |
| 3962 | FAMILY PRACTICE | Rexulti 1MG OR TABS | Antipsychotic | Approval | 1 |
| 3963 | FAMILY PRACTICE | Rexulti 1MG OR TABS | Antipsychotic | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Rexulti 1MG OR TABS | Antipsychotic | Approval | 1 |
| 3956 | NURSE PRACTITIONER, ADULT HEALTH | Rexulti (brexpiprazole) | Antipsychotic | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | rexulti 0.25 mg tablet | Antipsychotic | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Rexulti 0.25MG OR TABS | Antipsychotic | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Rexulti 0.25MG OR TABS | Antipsychotic | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | rexulti 0.5 mg tablet | Antipsychotic | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Rexulti 1MG OR TABS | Antipsychotic | Approval | 2 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Rexulti (brexpiprazole) | Antipsychotic | No Response | 1 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Rexulti 0.25MG OR TABS | Antipsychotic | Approval | 1 |
| 3951 | NURSE PRACTITIONER, PSYCHIATRIC | Rexulti 0.5MG OR TABS | Antipsychotic | Approval | 1 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Rexulti 1MG OR TABS | Antipsychotic | Approval | 2 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Rexulti 2MG OR TABS | Antipsychotic | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Rexulti (brexpiprazole) | Antipsychotic | Approval | 1 |
| 3956 | PSYCHIATRY | Rexulti (brexpiprazole) | Antipsychotic | Approval | 2 |
| 3961 | PSYCHIATRY | Rexulti (brexpiprazole) | Antipsychotic | Approval | 1 |
| 3963 | PSYCHIATRY | Rexulti (brexpiprazole) | Antipsychotic | Approval | 2 |
| 3956 | PSYCHIATRY | Rexulti (Brexiprazole) 0.5 MG Oral Tablet | Antipsychotic | Approval | 1 |
| 3961 | PSYCHIATRY | Rexulti 0.5MG OR TABS | Antipsychotic | Approval | 1 |
| 3951 | PSYCHIATRY | Rexulti 1MG OR TABS | Antipsychotic | Approval | 1 |
| 3956 | PSYCHIATRY | Rexulti 1MG OR TABS | Antipsychotic | Approval | 8 |
| 3963 | PSYCHIATRY | Rexulti 1MG OR TABS | Antipsychotic | Approval | 2 |
| 3951 | PSYCHIATRY | Rexulti 2MG OR TABS | Antipsychotic | No Response | 1 |
| 3956 | PSYCHIATRY | Rexulti 2MG OR TABS | Antipsychotic | Approval | 1 |
| 3951 | PSYCHIATRY | Rexulti 3MG OR TABS | Antipsychotic | Approval | 1 |
| 3956 | PSYCHIATRY | Rexulti 4MG OR TABS | Antipsychotic | Approval | 1 |
| 3956 | PSYCHIATRY, CHILD & ADOLESCENT | Rexulti 0.5MG OR TABS | Antipsychotic | Approval | 1 |
| 3961 | REGISTERED NURSE, PSYCHIATRIC, ADULT | Rexulti 3MG OR TABS | Antipsychotic | Approval | 1 |
| 3951 | UNSPECIFIED | Latuda (lurasidone) | ANTIPSYCHOTICS | No Response | 1 |
| 3956 | UNSPECIFIED | Latuda (lurasidone) | ANTIPSYCHOTICS | Approval | 1 |
| 3963 | UNSPECIFIED | Latuda (lurasidone) | ANTIPSYCHOTICS | Approval | 1 |
| 3964 | UNSPECIFIED | Latuda (lurasidone) | ANTIPSYCHOTICS | Approval | 1 |
| 3963 | UNSPECIFIED | latuda 20 mg tablet | ANTIPSYCHOTICS | Approval | 1 |
| 3963 | UNSPECIFIED | latuda 20 mg tablet | ANTIPSYCHOTICS | No Response | 1 |
| 3956 | UNSPECIFIED | Latuda 20MG OR TABS | ANTIPSYCHOTICS | Approval | 11 |
| 3956 | UNSPECIFIED | Latuda 20MG OR TABS | ANTIPSYCHOTICS | Denial | 1 |
| 3963 | UNSPECIFIED | Latuda 20MG OR TABS | ANTIPSYCHOTICS | Approval | 5 |
| 3963 | UNSPECIFIED | Latuda 20MG OR TABS | ANTIPSYCHOTICS | Denial | 2 |
| 3963 | UNSPECIFIED | Latuda 20MG OR TABS | ANTIPSYCHOTICS | No Response | 2 |
| 3951 | UNSPECIFIED | Latuda 40MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3956 | UNSPECIFIED | Latuda 40MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3963 | UNSPECIFIED | Latuda 40MG OR TABS | ANTIPSYCHOTICS | Denial | 1 |
| 3951 | UNSPECIFIED | Latuda 60MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3956 | UNSPECIFIED | Latuda 80MG OR TABS | ANTIPSYCHOTICS | Approval | 4 |
| 3956 | FAMILY PRACTICE | Latuda (lurasidone) | ANTIPSYCHOTICS | Approval | 3 |
| 3963 | FAMILY PRACTICE | Latuda (lurasidone) | ANTIPSYCHOTICS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Latuda 20MG OR TABS | ANTIPSYCHOTICS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Latuda 60MG OR TABS | ANTIPSYCHOTICS | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Latuda (lurasidone) | ANTIPSYCHOTICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Latuda 20MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | INTERNAL MEDICINE | Latuda 20MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Latuda 40MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Latuda (lurasidone) | ANTIPSYCHOTICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Latuda 20MG OR TABS | ANTIPSYCHOTICS | Approval | 3 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Latuda (lurasidone) | ANTIPSYCHOTICS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Latuda 120MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Latuda 20MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, PSYCHIATRIC | Latuda 20MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, PSYCHIATRIC | Latuda 40MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Latuda 40MG OR TABS | ANTIPSYCHOTICS | Approval | 3 |
| 3951 | NURSE PRACTITIONER, PSYCHIATRIC | Latuda 80MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Latuda 40MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Latuda 80MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Latuda (lurasidone) | ANTIPSYCHOTICS | No Response | 1 |
| 3956 | PSYCHIATRY | Latuda (lurasidone) | ANTIPSYCHOTICS | Approval | 2 |
| 3956 | PSYCHIATRY | Latuda (lurasidone) | ANTIPSYCHOTICS | Denial | 1 |
| 3961 | PSYCHIATRY | Latuda (lurasidone) | ANTIPSYCHOTICS | Approval | 1 |
| 3961 | PSYCHIATRY | Latuda (lurasidone) | ANTIPSYCHOTICS | No Response | 1 |
| 3951 | PSYCHIATRY | Latuda 120MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3956 | PSYCHIATRY | Latuda 20MG OR TABS | ANTIPSYCHOTICS | Approval | 2 |
| 3951 | PSYCHIATRY | Latuda 40MG OR TABS | ANTIPSYCHOTICS | Denial | 1 |
| 3961 | PSYCHIATRY | Latuda 40MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3956 | PSYCHOLOGIST, SCHOOL | Latuda 20MG OR TABS | ANTIPSYCHOTICS | Approval | 1 |
| 3951 | UNSPECIFIED | Acyclovir 5% EX OINT | ANTIVIRALS | Approval | 1 |
| 3951 | UNSPECIFIED | Acyclovir 5% EX OINT | ANTIVIRALS | Denial | 1 |
| 3956 | UNSPECIFIED | valGANciclovir 450 mg tablet (VALCYTE) | ANTIVIRALS | No Response | 1 |
| 3956 | UNSPECIFIED | valGANciclovir HCl 450MG OR TABS | ANTIVIRALS | Approval | 1 |
| 3963 | DENTIST, UNSPECIFIED | Acyclovir Oint | ANTIVIRALS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Acyclovir 5% EX OINT | ANTIVIRALS | Approval | 2 |
| 3963 | FAMILY PRACTICE | Acyclovir 5% EX OINT | ANTIVIRALS | Denial | 2 |
| 3964 | FAMILY PRACTICE | Acyclovir 5% EX OINT | ANTIVIRALS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Acyclovir Cream | ANTIVIRALS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Acyclovir Oint | ANTIVIRALS | Denial | 1 |
| 3964 | FAMILY PRACTICE | Acyclovir Oint | ANTIVIRALS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Acyclovir Ointment | ANTIVIRALS | Denial | 1 |
| 3951 | FAMILY PRACTICE | valGANciclovir HCl 450MG OR TABS | ANTIVIRALS | Approval | 1 |
| 3965 | INTERNAL MEDICINE | Acyclovir Ointment | ANTIVIRALS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|----------------------------------|---------------------------|-------------|-------|
| 3956 | INTERNAL MEDICINE | valganciclovir | ANTIVIRALS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | valGANciclovir HCl 450MG OR TABS | ANTIVIRALS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Vemlidy | Antivirals | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Acyclovir Ointment | ANTIVIRALS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Vemlidy | Antivirals | Denial | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Denavir 1% EX CREA | ANTIVIRALS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Acyclovir 5% EX OINT | ANTIVIRALS | Approval | 1 |
| 3965 | UNSPECIFIED | Vraylar (cariprazine) | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3967 | UNSPECIFIED | Vraylar (cariprazine) | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3963 | UNSPECIFIED | Vraylar 1.5MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 2 |
| 3963 | UNSPECIFIED | Vraylar 1.5MG OR CAPS | ATARACTICS-TRANQUILIZERS | No Response | 1 |
| 3964 | UNSPECIFIED | Vraylar 1.5MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3963 | UNSPECIFIED | Vraylar 3MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3963 | UNSPECIFIED | Vraylar 3MG OR CAPS | ATARACTICS-TRANQUILIZERS | No Response | 2 |
| 3964 | UNSPECIFIED | Vraylar 3MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Vraylar 1.5MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Vraylar 1.5MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3964 | FAMILY PRACTICE | Vraylar 4.5MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Vraylar 1.5MG OR CAPS | ATARACTICS-TRANQUILIZERS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Vraylar 3MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Vraylar 1.5MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Vraylar 3MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Vraylar 3MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3962 | PSYCHIATRY | Vraylar 1.5MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3962 | PSYCHIATRY | Vraylar 3MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3963 | PSYCHIATRY | Vraylar 3MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3963 | PSYCHIATRY, CHILD & ADOLESCENT | Vraylar 1.5MG OR CAPS | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3964 | REGISTERED NURSE, UNSPECIFIED | Vraylar (cariprazine) | ATARACTICS-TRANQUILIZERS | Approval | 1 |
| 3963 | UNSPECIFIED | HyQvia | BIOLOGICALS | Approval | 2 |
| 3964 | UNSPECIFIED | HyQvia | BIOLOGICALS | Approval | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | Hizentra | BIOLOGICALS | Approval | 1 |
| 3956 | ALLERGY & IMMUNOLOGY | HyQvia | BIOLOGICALS | Approval | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | HyQvia | BIOLOGICALS | Approval | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | HyQvia | BIOLOGICALS | No Response | 1 |
| 3964 | ALLERGY & IMMUNOLOGY | HyQvia | BIOLOGICALS | Approval | 2 |
| 3963 | PEDIATRICS | HyQvia | BIOLOGICALS | Approval | 2 |
| 3956 | UNSPECIFIED | Dofetilide 500MCG OR CAPS | CARDIOVASCULAR AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | CARDIOLOGY | Multaq (dronedarone) | CARDIOVASCULAR AGENTS | Approval | 2 |
| 3961 | CARDIOLOGY | Multaq (dronedarone) | CARDIOVASCULAR AGENTS | Approval | 2 |
| 3956 | CARDIOLOGY | Multaq 400MG OR TABS | CARDIOVASCULAR AGENTS | Approval | 1 |
| 3956 | CARDIOLOGY | Multaq 400MG OR TABS | CARDIOVASCULAR AGENTS | No Response | 1 |
| 3963 | CARDIOLOGY | Multaq 400MG OR TABS | CARDIOVASCULAR AGENTS | Approval | 2 |
| 3956 | CARDIOLOGY, INTERVENTIONAL | Multaq 400MG OR TABS | CARDIOVASCULAR AGENTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Dofetilide 250MCG OR CAPS | CARDIOVASCULAR AGENTS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Multaq 400MG OR TABS | CARDIOVASCULAR AGENTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Multaq 400MG OR TABS | CARDIOVASCULAR AGENTS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Multaq 400MG OR TABS | CARDIOVASCULAR AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dofetilide 250MCG OR CAPS | CARDIOVASCULAR AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | deferasirox | CHELATING AGENT | Approval | 1 |
| 3963 | UNSPECIFIED | Nuedexta (dextromethorphan-quinidine) | CNS AGENT | Approval | 1 |
| 3956 | UNSPECIFIED | Adderall 30MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Adderall 30MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Adderall XR 20MG OR CP24 | CNS STIMULANTS | No Response | 1 |
| 3956 | UNSPECIFIED | Amphetamine-Dextroamphet ER 20MG OR CP24 | CNS STIMULANTS | Approval | 1 |
| 3967 | UNSPECIFIED | Amphetamine-Dextroamphet ER 20MG OR CP24 | CNS STIMULANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Amphetamine-Dextroamphet ER 30MG OR CP24 | CNS STIMULANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Amphetamine-Dextroamphetamine 15mg Tab | CNS STIMULANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Amphetamine-Dextroamphetamine 20MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Amphetamine-Dextroamphetamine 20MG OR TABS | CNS STIMULANTS | Approval | 3 |
| 3956 | UNSPECIFIED | Amphetamine-Dextroamphetamine 20mg Tab | CNS STIMULANTS | Approval | 2 |
| 3963 | UNSPECIFIED | Amphetamine-Dextroamphetamine 20mg Tab | CNS STIMULANTS | Approval | 1 |
| 3951 | UNSPECIFIED | Amphetamine-Dextroamphetamine 25mg ER | CNS STIMULANTS | Approval | 1 |
| 3961 | UNSPECIFIED | Amphetamine-Dextroamphetamine 25mg ER | CNS STIMULANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Amphetamine-Dextroamphetamine 30mg | CNS STIMULANTS | Denial | 1 |
| 3965 | UNSPECIFIED | Amphetamine-Dextroamphetamine 30mg | CNS STIMULANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 3 |
| 3963 | UNSPECIFIED | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3964 | UNSPECIFIED | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Amphetamine-Dextroamphetamine 5MG OR TABS | CNS STIMULANTS | No Response | 1 |
| 3963 | UNSPECIFIED | Amphetamine-Dextroamphetamine ER 30mg | CNS STIMULANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Armodafinil 150MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Armodafinil 150MG OR TABS | CNS STIMULANTS | Denial | 1 |
| 3963 | UNSPECIFIED | Armodafinil 150MG OR TABS | CNS STIMULANTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | UNSPECIFIED | Armodafinil 250MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Dexmethylphenidate HCl 10MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3964 | UNSPECIFIED | modafinil 100 MG tablet | CNS STIMULANTS | No Response | 2 |
| 3963 | UNSPECIFIED | Modafinil 100mg | CNS STIMULANTS | Denial | 1 |
| 3963 | UNSPECIFIED | Modafinil 100mg | CNS STIMULANTS | No Response | 1 |
| 3951 | UNSPECIFIED | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3956 | UNSPECIFIED | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 4 |
| 3963 | UNSPECIFIED | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3964 | UNSPECIFIED | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3964 | UNSPECIFIED | Modafinil 100MG OR TABS | CNS STIMULANTS | No Response | 1 |
| 3956 | UNSPECIFIED | modafinil 200 mg tablet | CNS STIMULANTS | No Response | 1 |
| 3951 | UNSPECIFIED | Modafinil 200mg | CNS STIMULANTS | Denial | 1 |
| 3962 | UNSPECIFIED | Modafinil 200mg | CNS STIMULANTS | Approval | 1 |
| 3962 | UNSPECIFIED | Modafinil 200mg | CNS STIMULANTS | Denial | 1 |
| 3963 | UNSPECIFIED | Modafinil 200mg | CNS STIMULANTS | Denial | 1 |
| 3963 | UNSPECIFIED | Modafinil 200mg | CNS STIMULANTS | No Response | 1 |
| 3964 | UNSPECIFIED | Modafinil 200mg | CNS STIMULANTS | Approval | 1 |
| 3951 | UNSPECIFIED | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 4 |
| 3956 | UNSPECIFIED | Modafinil 200MG OR TABS | CNS STIMULANTS | Denial | 1 |
| 3963 | UNSPECIFIED | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Modafinil 200MG OR TABS | CNS STIMULANTS | Denial | 1 |
| 3956 | CHIROPRACTOR, UNSPECIFIED | Modafinil 200mg | CNS STIMULANTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Adderall 30MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Adderall 30MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3956 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine ER 30MG OR CP24 | CNS STIMULANTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 10mg Tab | CNS STIMULANTS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 15mg Ext-Rel mixture | CNS STIMULANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 15mg Tablets | CNS STIMULANTS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 20mg | CNS STIMULANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 20mg | CNS STIMULANTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 20mg ER | CNS STIMULANTS | Approval | 2 |
| 3963 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 20mg ER | CNS STIMULANTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 20MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 20MG OR TABS | CNS STIMULANTS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 20MG OR TABS | CNS STIMULANTS | Approval | 3 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 20MG OR TABS | CNS STIMULANTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 20mg Tab | CNS STIMULANTS | Approval | 4 |
| 3956 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 20mg Tab | CNS STIMULANTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 25mg ER | CNS STIMULANTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30mg | CNS STIMULANTS | Approval | 1 |
| 3962 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30mg | CNS STIMULANTS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30mg | CNS STIMULANTS | Approval | 1 |
| 3965 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30mg | CNS STIMULANTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30mg ER | CNS STIMULANTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30mg ER | CNS STIMULANTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3956 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 16 |
| 3963 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 8 |
| 3963 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | No Response | 1 |
| 3951 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Approval | 2 |
| 3956 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Approval | 22 |
| 3956 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Denial | 2 |
| 3956 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Approval | 2 |
| 3967 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine ER 20mg | CNS STIMULANTS | Approval | 2 |
| 3951 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine ER 25mg | CNS STIMULANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Amphetamine-Dextroamphetamine ER 30mg | CNS STIMULANTS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Armodafinil 200MG OR TABS | CNS STIMULANTS | No Response | 1 |
| 3964 | FAMILY PRACTICE | Armodafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Armodafinil 250MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3956 | FAMILY PRACTICE | Armodafinil 250MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Armodafinil 250MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Dexmethylphenidate HCl 10MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Modafinil 100mg | CNS STIMULANTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Modafinil 100mg | CNS STIMULANTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Modafinil 100mg | CNS STIMULANTS | No Response | 1 |
| 3961 | FAMILY PRACTICE | Modafinil 100mg | CNS STIMULANTS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Modafinil 100mg | CNS STIMULANTS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Modafinil 100MG OR TABS | CNS STIMULANTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 3 |
| 3956 | FAMILY PRACTICE | Modafinil 100MG OR TABS | CNS STIMULANTS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | FAMILY PRACTICE | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Modafinil 100MG OR TABS | CNS STIMULANTS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Modafinil 200 MG Oral Tablet | CNS STIMULANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Modafinil 200 MG Oral Tablet | CNS STIMULANTS | No Response | 1 |
| 3951 | FAMILY PRACTICE | Modafinil 200mg | CNS STIMULANTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Modafinil 200mg | CNS STIMULANTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Modafinil 200mg | CNS STIMULANTS | Denial | 2 |
| 3962 | FAMILY PRACTICE | Modafinil 200mg | CNS STIMULANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Modafinil 200mg | CNS STIMULANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Modafinil 200mg | CNS STIMULANTS | Denial | 2 |
| 3951 | FAMILY PRACTICE | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 4 |
| 3956 | FAMILY PRACTICE | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 11 |
| 3956 | FAMILY PRACTICE | Modafinil 200MG OR TABS | CNS STIMULANTS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 6 |
| 3964 | FAMILY PRACTICE | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3965 | FAMILY PRACTICE | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | VYVANSE 50MG CAP | CNS STIMULANTS | No Response | 1 |
| 3956 | GENERAL PRACTICE | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Amphetamine-Dextroamphet ER 20MG OR CP24 | CNS STIMULANTS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Amphetamine-Dextroamphetamine 10mg Tab | CNS STIMULANTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Amphetamine-Dextroamphetamine 20MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Amphetamine-Dextroamphetamine 20mg Tab | CNS STIMULANTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Amphetamine-Dextroamphetamine 30mg ER | CNS STIMULANTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 3 |
| 3956 | INTERNAL MEDICINE | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Amphetamine-Dextroamphetamine ER 25mg | CNS STIMULANTS | Approval | 1 |
| 3965 | INTERNAL MEDICINE | Amphetamine-Dextroamphetamine ER 25mg | CNS STIMULANTS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Amphetamine-Dextroamphetamine ER 30mg | CNS STIMULANTS | Approval | 1 |
| 3964 | INTERNAL MEDICINE | Armodafinil 50mg | CNS STIMULANTS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Modafinil 100mg | CNS STIMULANTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Modafinil 100mg | CNS STIMULANTS | Denial | 2 |
| 3956 | INTERNAL MEDICINE | Modafinil 200mg | CNS STIMULANTS | Denial | 1 |
| 3965 | INTERNAL MEDICINE | Modafinil 200mg | CNS STIMULANTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | INTERNAL MEDICINE | Modafinil 200MG OR TABS | CNS STIMULANTS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3963 | NEUROLOGY | Amphetamine-Dextroamphet ER 15MG OR CP24 | CNS STIMULANTS | Denial | 1 |
| 3963 | NEUROLOGY | Amphetamine-Dextroamphetamine 20mg | CNS STIMULANTS | Denial | 1 |
| 3961 | NEUROLOGY | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Approval | 1 |
| 3963 | NEUROLOGY | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Approval | 1 |
| 3956 | NEUROLOGY | Armodafinil 150MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | NEUROLOGY | Armodafinil 250MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3956 | NEUROLOGY | Modafinil 100mg | CNS STIMULANTS | Approval | 1 |
| 3963 | NEUROLOGY | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3963 | NEUROLOGY | Modafinil 100MG OR TABS | CNS STIMULANTS | No Response | 1 |
| 3964 | NEUROLOGY | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3965 | NEUROLOGY | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3965 | NEUROLOGY | modafinil 200 mg tablet | CNS STIMULANTS | No Response | 1 |
| 3961 | NEUROLOGY | Modafinil 200mg | CNS STIMULANTS | Approval | 1 |
| 3951 | NEUROLOGY | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 3 |
| 3956 | NEUROLOGY | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | NEUROLOGY | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3965 | NEUROLOGY | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3962 | NURSE PRACTITIONER, ACUTE CARE | Armodafinil 250MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3964 | NURSE PRACTITIONER, ACUTE CARE | Armodafinil 250MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3962 | NURSE PRACTITIONER, ACUTE CARE | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3961 | NURSE PRACTITIONER, ADULT HEALTH | Armodafinil 150MG OR TABS | CNS STIMULANTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, ADULT HEALTH | Modafinil 200mg | CNS STIMULANTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Armodafinil 150MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Armodafinil 150MG OR TABS | CNS STIMULANTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Armodafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Armodafinil 250MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Modafinil 100mg | CNS STIMULANTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Modafinil 100mg | CNS STIMULANTS | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Modafinil 200 mg tablet | CNS STIMULANTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Modafinil 200mg | CNS STIMULANTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Modafinil 200mg | CNS STIMULANTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Modafinil 200mg | CNS STIMULANTS | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 3 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 4 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Modafinil 200MG OR TABS | CNS STIMULANTS | Denial | 2 |
| 3963 | NURSE PRACTITIONER, PSYCHIATRIC | Armodafinil 250MG OR TABS | CNS STIMULANTS | Denial | 1 |
| 3951 | NURSE PRACTITIONER, PSYCHIATRIC | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Amphetamine-Dextroamphetamine 20mg ER | CNS STIMULANTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Amphetamine-Dextroamphetamine 20MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Amphetamine-Dextroamphetamine 30mg | CNS STIMULANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Armodafinil 150MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Armodafinil 150MG OR TABS | CNS STIMULANTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Armodafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Armodafinil 250MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Armodafinil 250MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Modafinil 100mg | CNS STIMULANTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3962 | NURSE PRACTITIONER, WOMEN'S HEALTH | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | OTOLARYNGOLOGY | Armodafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | PEDIATRICS | Amphetamine-Dextroamphet ER 20MG OR CP24 | CNS STIMULANTS | Approval | 1 |
| 3964 | PEDIATRICS | Amphetamine-Dextroamphet ER 20MG OR CP24 | CNS STIMULANTS | Approval | 1 |
| 3956 | PEDIATRICS | Amphetamine-Dextroamphet ER 30MG OR CP24 | CNS STIMULANTS | Approval | 1 |
| 3956 | PEDIATRICS | Amphetamine-Dextroamphetamine 20mg ER | CNS STIMULANTS | Approval | 1 |
| 3951 | PEDIATRICS | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | PEDIATRICS | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | No Response | 1 |
| 3956 | PEDIATRICS | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Approval | 1 |
| 3963 | PEDIATRICS | Vyvanse 20MG OR CAPS | CNS STIMULANTS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Armodafinil 250MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | PHYSICIAN, SURGERY, GENERAL | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3961 | PSYCHIATRY | Adderall 20MG OR TABS | CNS STIMULANTS | No Response | 1 |
| 3956 | PSYCHIATRY | Amphetamine-Dextroamphet ER 15MG OR CP24 | CNS STIMULANTS | Approval | 1 |
| 3962 | PSYCHIATRY | Amphetamine-Dextroamphet ER 15MG OR CP24 | CNS STIMULANTS | Approval | 1 |
| 3963 | PSYCHIATRY | Amphetamine-Dextroamphet ER 20MG OR CP24 | CNS STIMULANTS | Approval | 1 |
| 3956 | PSYCHIATRY | Amphetamine-Dextroamphet ER 30MG OR CP24 | CNS STIMULANTS | Approval | 2 |
| 3962 | PSYCHIATRY | Amphetamine-Dextroamphetamine 15mg Ext-Rel mixture | CNS STIMULANTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | PSYCHIATRY | Amphetamine-Dextroamphetamine 15mg Tab | CNS STIMULANTS | Approval | 1 |
| 3951 | PSYCHIATRY | Amphetamine-Dextroamphetamine 20mg | CNS STIMULANTS | Approval | 1 |
| 3956 | PSYCHIATRY | Amphetamine-Dextroamphetamine 20mg ER | CNS STIMULANTS | Approval | 1 |
| 3961 | PSYCHIATRY | Amphetamine-Dextroamphetamine 20mg ER | CNS STIMULANTS | Approval | 1 |
| 3951 | PSYCHIATRY | Amphetamine-Dextroamphetamine 20MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | PSYCHIATRY | Amphetamine-Dextroamphetamine 20mg Tab | CNS STIMULANTS | Approval | 5 |
| 3956 | PSYCHIATRY | Amphetamine-Dextroamphetamine 20mg Tab | CNS STIMULANTS | Denial | 1 |
| 3951 | PSYCHIATRY | Amphetamine-Dextroamphetamine 30mg | CNS STIMULANTS | Denial | 1 |
| 3963 | PSYCHIATRY | Amphetamine-Dextroamphetamine 30mg | CNS STIMULANTS | Approval | 2 |
| 3963 | PSYCHIATRY | Amphetamine-Dextroamphetamine 30mg | CNS STIMULANTS | Denial | 1 |
| 3956 | PSYCHIATRY | Amphetamine-Dextroamphetamine 30mg ER | CNS STIMULANTS | Approval | 4 |
| 3951 | PSYCHIATRY | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | PSYCHIATRY | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 4 |
| 3963 | PSYCHIATRY | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3951 | PSYCHIATRY | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Approval | 1 |
| 3951 | PSYCHIATRY | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Denial | 1 |
| 3956 | PSYCHIATRY | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Approval | 8 |
| 3956 | PSYCHIATRY | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Denial | 2 |
| 3956 | PSYCHIATRY | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | No Response | 1 |
| 3963 | PSYCHIATRY | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | No Response | 1 |
| 3964 | PSYCHIATRY | Amphetamine-Dextroamphetamine ER 20mg | CNS STIMULANTS | Approval | 1 |
| 3963 | PSYCHIATRY | Amphetamine-Dextroamphetamine ER 30mg | CNS STIMULANTS | Approval | 2 |
| 3951 | PSYCHIATRY | Armodafinil 150MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | PSYCHIATRY | Armodafinil 150MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | PSYCHIATRY | Armodafinil 250MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3963 | PSYCHIATRY | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3964 | PSYCHIATRY | Modafinil 100MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | PSYCHIATRY | Modafinil 200mg | CNS STIMULANTS | Denial | 1 |
| 3951 | PSYCHIATRY | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | PSYCHIATRY | Modafinil 200MG OR TABS | CNS STIMULANTS | Denial | 2 |
| 3963 | PSYCHIATRY | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3964 | PSYCHIATRY | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 2 |
| 3965 | PSYCHIATRY | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3961 | PSYCHIATRY | Vyvanse 40MG OR CAPS | CNS STIMULANTS | No Response | 1 |
| 3956 | PSYCHIATRY, CHILD & ADOLESCENT | Amphetamine-Dextroamphet ER 25MG OR CP24 | CNS STIMULANTS | Approval | 1 |
| 3956 | PSYCHIATRY, CHILD & ADOLESCENT | Amphetamine-Dextroamphet ER 30MG OR CP24 | CNS STIMULANTS | No Response | 1 |
| 3963 | PSYCHIATRY, CHILD & ADOLESCENT | Amphetamine-Dextroamphetamine 20mg | CNS STIMULANTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|----------------------------|-------------|-------|
| 3963 | PSYCHIATRY, CHILD & ADOLESCENT | Amphetamine-Dextroamphetamine 20MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | PSYCHIATRY, CHILD & ADOLESCENT | Amphetamine-Dextroamphetamine 30mg ER | CNS STIMULANTS | Approval | 1 |
| 3956 | PSYCHIATRY, CHILD & ADOLESCENT | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | PSYCHIATRY, CHILD & ADOLESCENT | Amphetamine-Dextroamphetamine 5mg Tablets | CNS STIMULANTS | Denial | 1 |
| 3961 | PSYCHIATRY, CHILD & ADOLESCENT | Methylphenidate 20mg Tablet | CNS STIMULANTS | Approval | 1 |
| 3951 | PSYCHOLOGIST, SCHOOL | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | PULMONARY DISEASES | Amphetamine-Dextroamphetamine 20mg ER | CNS STIMULANTS | Approval | 1 |
| 3963 | PULMONARY DISEASES | Armodafinil 150MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | PULMONARY DISEASES | Armodafinil 50MG OR TABS | CNS STIMULANTS | No Response | 1 |
| 3963 | PULMONARY DISEASES | Modafinil 200mg | CNS STIMULANTS | Approval | 1 |
| 3956 | PULMONARY DISEASES | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 3 |
| 3961 | PULMONARY DISEASES | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3963 | PULMONARY DISEASES | Modafinil 200MG OR TABS | CNS STIMULANTS | No Response | 1 |
| 3956 | REGISTERED NURSE, UNSPECIFIED | Amphetamine-Dextroamphetamine 15mg ER | CNS STIMULANTS | Approval | 1 |
| 3956 | REGISTERED NURSE, UNSPECIFIED | Amphetamine-Dextroamphetamine 15mg ER | CNS STIMULANTS | Denial | 1 |
| 3951 | REGISTERED NURSE, UNSPECIFIED | Amphetamine-Dextroamphetamine 30mg | CNS STIMULANTS | Approval | 1 |
| 3956 | REGISTERED NURSE, UNSPECIFIED | Amphetamine-Dextroamphetamine 30mg ER | CNS STIMULANTS | No Response | 1 |
| 3956 | REGISTERED NURSE, UNSPECIFIED | Amphetamine-Dextroamphetamine 30MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3956 | REGISTERED NURSE, UNSPECIFIED | Amphetamine-Dextroamphetamine 30mg Tab | CNS STIMULANTS | Approval | 1 |
| 3963 | SLEEP MEDICINE | Modafinil 200MG OR TABS | CNS STIMULANTS | Approval | 1 |
| 3964 | UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FELLOW, UNSPECIFIED | Amphetamine-Dextroamphet ER 20MG OR CP24 | CNS STIMULANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Nivestym | COLONY STIMULATING FACTORS | Approval | 1 |
| 3956 | GASTROENTEROLOGY | Nivestym | COLONY STIMULATING FACTORS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Nivestym | COLONY STIMULATING FACTORS | Approval | 1 |
| 3956 | UNSPECIFIED | Trikafta | CYSTIC FIBROSIS AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Trikafta | CYSTIC FIBROSIS AGENTS | Approval | 1 |
| 3965 | UNSPECIFIED | Trikafta | CYSTIC FIBROSIS AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Trikafta 100-50-75 & 150MG OR TBPK | CYSTIC FIBROSIS AGENTS | No Response | 1 |
| 3963 | PEDIATRICS | Trikafta | CYSTIC FIBROSIS AGENTS | No Response | 1 |
| 3962 | PEDIATRICS | Trikafta 100-50-75 & 150MG OR TBPK | CYSTIC FIBROSIS AGENTS | Approval | 1 |
| 3962 | PEDIATRICS | Trikafta 50-25-37.5 & 75MG OR TBPK | CYSTIC FIBROSIS AGENTS | Approval | 1 |
| 3956 | PULMONARY DISEASES | Trikafta | CYSTIC FIBROSIS AGENTS | Approval | 3 |
| 3963 | PULMONARY DISEASES | Trikafta | CYSTIC FIBROSIS AGENTS | Approval | 2 |
| 3951 | PULMONARY DISEASES | Trikafta 100-50-75 & 150MG OR TBPK | CYSTIC FIBROSIS AGENTS | Approval | 1 |
| 3963 | PULMONARY DISEASES | Trikafta 100-50-75 & 150MG OR TBPK | CYSTIC FIBROSIS AGENTS | Approval | 1 |
| 3963 | PULMONARY DISEASES | Trikafta 100-50-75 & 150MG OR TBPK | CYSTIC FIBROSIS AGENTS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | UNSPECIFIED | ambrisentan | DERMATOLOGICAL AGENTS | No Response | 2 |
| 3963 | UNSPECIFIED | Amnesteem (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3967 | UNSPECIFIED | Amnesteem 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Arazlo (tazarotene) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Arazlo 0.045 % lotion | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Arazlo 0.045% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 5 |
| 3963 | UNSPECIFIED | Arazlo 0.045% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 4 |
| 3964 | UNSPECIFIED | Arazlo 0.045% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Azelaic Acid | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3964 | UNSPECIFIED | Azelaic Acid | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | UNSPECIFIED | Azelaic Acid | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3965 | UNSPECIFIED | Azelaic Acid | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3967 | UNSPECIFIED | Azelaic Acid | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | UNSPECIFIED | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3964 | UNSPECIFIED | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Bryhali (Brand Only) (halobetasol) Lotion | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Claravis (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | UNSPECIFIED | Claravis (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Claravis 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Claravis 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3961 | UNSPECIFIED | Claravis 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Claravis 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 4 |
| 3964 | UNSPECIFIED | Claravis 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Claravis 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Claravis 40MG OR CAPS | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3963 | UNSPECIFIED | Claravis 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 3 |
| 3963 | UNSPECIFIED | Clindamycin-Tretinoin 1.2-0.025% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Clobetasol Propionate 0.05% EX LIQD | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | UNSPECIFIED | Cloderm (Brand Only) (clocortolone pivalate) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Duobrii 0.01-0.045% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Elidel 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Eucrisa (crisaborole) | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3965 | UNSPECIFIED | Eucrisa (crisaborole) | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | UNSPECIFIED | Eucrisa 2 % topical ointment | DERMATOLOGICAL AGENTS | No Response | 2 |
| 3963 | UNSPECIFIED | Eucrisa 2 % topical ointment | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | UNSPECIFIED | Eucrisa 2 % topical ointment | DERMATOLOGICAL AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|----------------------------|---------------------------|-------------|-------|
| 3951 | UNSPECIFIED | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 3 |
| 3956 | UNSPECIFIED | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3961 | UNSPECIFIED | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 4 |
| 3963 | UNSPECIFIED | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3964 | UNSPECIFIED | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3964 | UNSPECIFIED | eucrisa 2% ointment | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Finacea 15 % topical foam | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | FINACEA 15% AER | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | UNSPECIFIED | Finacea 15% EX FOAM | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | finacea 15% foam | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3962 | UNSPECIFIED | Isotretinoin | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | UNSPECIFIED | Isotretinoin | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3965 | UNSPECIFIED | Isotretinoin | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | UNSPECIFIED | isotretinoin 20 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | ISOtretinoin 20MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | ISOtretinoin 20MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | ISOtretinoin 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | ISOtretinoin 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | UNSPECIFIED | ISOtretinoin 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | isotretinoin 40 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | ISOtretinoin 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | ISOtretinoin 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3961 | UNSPECIFIED | Myorisan 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Myorisan 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Myorisan 30MG OR CAPS | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3964 | UNSPECIFIED | Myorisan 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | UNSPECIFIED | Myorisan 30MG OR CAPS | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3961 | UNSPECIFIED | myorisan 40 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | myorisan 40 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Myorisan 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Myorisan 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | UNSPECIFIED | Myorisan 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3962 | UNSPECIFIED | Pimecrolimus | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Pimecrolimus | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Pimecrolimus | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | UNSPECIFIED | Pimecrolimus | DERMATOLOGICAL AGENTS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-----------------------------------|---------------------------|-------------|-------|
| 3964 | UNSPECIFIED | Pimecrolimus | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | pimecrolimus 1 % topical cream | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3964 | UNSPECIFIED | pimecrolimus 1 % topical cream | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3964 | UNSPECIFIED | pimecrolimus 1% cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | UNSPECIFIED | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 6 |
| 3963 | UNSPECIFIED | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3963 | UNSPECIFIED | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3964 | UNSPECIFIED | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3965 | UNSPECIFIED | Prevmis (Ietermovir) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | RETIN-A MICRO 0.06% GEL | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3951 | UNSPECIFIED | Retin-A Micro Pump 0.06% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Retin-A Micro Pump 0.06% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Retin-A Micro Pump 0.08% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Rhofade 1 % topical cream | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | UNSPECIFIED | Rhofade 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | UNSPECIFIED | Rhofade 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | UNSPECIFIED | Rhofade 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Soolantra 1 % topical cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Soolantra 1 % topical cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Soolantra 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | UNSPECIFIED | Soolantra 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 4 |
| 3963 | UNSPECIFIED | Soolantra 1% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | UNSPECIFIED | Tacrolimus 0.03% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Tacrolimus 0.03% Ointment | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | tacrolimus 0.1 % topical ointment | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3964 | UNSPECIFIED | tacrolimus 0.1 % topical ointment | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 4 |
| 3951 | UNSPECIFIED | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3962 | UNSPECIFIED | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 8 |
| 3963 | UNSPECIFIED | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Denial | 4 |
| 3964 | UNSPECIFIED | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | UNSPECIFIED | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | UNSPECIFIED | Tacrolimus 0.1% Ointment | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Tacrolimus 0.1% Ointment | DERMATOLOGICAL AGENTS | Denial | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--------------------------------------|---------------------------|-------------|-------|
| 3962 | UNSPECIFIED | Tacrolimus 0.1% Ointment | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Tacrolimus 0.1% Ointment | DERMATOLOGICAL AGENTS | Denial | 4 |
| 3964 | UNSPECIFIED | Tacrolimus 0.1% Ointment | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3964 | UNSPECIFIED | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Tazorac 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Tretinoin 0.01% EX GEL | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | UNSPECIFIED | tretinoin 0.025% cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 4 |
| 3951 | UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 5 |
| 3956 | UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3961 | UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 3 |
| 3963 | UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3964 | UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | UNSPECIFIED | Tretinoin 0.025% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | tretinoin 0.05 % topical cream | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | UNSPECIFIED | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 4 |
| 3956 | UNSPECIFIED | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 3 |
| 3963 | UNSPECIFIED | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | UNSPECIFIED | Tretinoin 0.05% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Tretinoin 0.05% EX GEL | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3951 | UNSPECIFIED | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | UNSPECIFIED | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | UNSPECIFIED | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | UNSPECIFIED | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Tretinoin Cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Triamcinolone 0.025% Cream | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | UNSPECIFIED | Triamcinolone 0.1% Cream | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3951 | UNSPECIFIED | Triamcinolone Acetonide 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Triamcinolone Acetonide 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Zenatane (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--------------------------------------|---------------------------|-------------|-------|
| 3964 | UNSPECIFIED | Zenatane (isotretinoin) | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3951 | UNSPECIFIED | Zenatane 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | UNSPECIFIED | Zenatane 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Zenatane 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 5 |
| 3951 | UNSPECIFIED | Zenatane 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Zenatane 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Zenatane 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 4 |
| 3963 | UNSPECIFIED | Zenatane 40MG OR CAPS | DERMATOLOGICAL AGENTS | No Response | 2 |
| 3965 | UNSPECIFIED | Zenatane 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | ALLERGY | Azelaic Acid | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | ALLERGY | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | ALLERGY & IMMUNOLOGY | Elidel (pimecrolimus) | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3962 | ALLERGY & IMMUNOLOGY | Eucrisa (crisaborole) | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3951 | ALLERGY & IMMUNOLOGY | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | eucrisa 2% ointment | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3965 | ALLERGY & IMMUNOLOGY | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | ALLERGY & IMMUNOLOGY | Tacrolimus 0.03% Ointment | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | ALLERGY & IMMUNOLOGY | Tacrolimus 0.03% Ointment | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | Tacrolimus 0.03% Ointment | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | Tacrolimus 0.03% Ointment | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | ALLERGY & IMMUNOLOGY | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | ALLERGY & IMMUNOLOGY | Triamcinolone Acetonide 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Adapalene 0.3% EX GEL | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | DERMATOLOGY | Amnesteem (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | DERMATOLOGY | Amnesteem (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | DERMATOLOGY | Arazlo (tazarotene) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Arazlo 0.045 % lotion | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Arazlo 0.045 % lotion | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Arazlo 0.045% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Arazlo 0.045% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 14 |
| 3963 | DERMATOLOGY | Arazlo 0.045% EX LOTN | DERMATOLOGICAL AGENTS | No Response | 2 |
| 3964 | DERMATOLOGY | Arazlo 0.045% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Azelaic Acid | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | DERMATOLOGY | Azelaic Acid | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | DERMATOLOGY | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | DERMATOLOGY | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3963 | DERMATOLOGY | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3965 | DERMATOLOGY | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Claravis (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | DERMATOLOGY | Claravis (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | DERMATOLOGY | Claravis 20MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Claravis 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | DERMATOLOGY | Claravis 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3961 | DERMATOLOGY | Claravis 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Claravis 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | DERMATOLOGY | Claravis 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | DERMATOLOGY | Claravis 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | DERMATOLOGY | Clobetasol Propionate 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | DERMATOLOGY | Duobrii (halobetasol propionate-tazarotene) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Elidel (pimecrolimus) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Elidel 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Eucrisa (crisaborole) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Eucrisa (crisaborole) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Eucrisa (crisaborole) | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | DERMATOLOGY | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | DERMATOLOGY | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 3 |
| 3956 | DERMATOLOGY | Eucrisa 2% ointment | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | DERMATOLOGY | Finacea 15% EX FOAM | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | DERMATOLOGY | Isotretinoin | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Isotretinoin | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | DERMATOLOGY | ISOtretinoin 20MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | DERMATOLOGY | ISOtretinoin 20MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | ISOtretinoin 30 MG Oral Capsule | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3963 | DERMATOLOGY | ISOtretinoin 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | DERMATOLOGY | isotretinoin 40 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | ISOtretinoin 40MG OR CAPS | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | DERMATOLOGY | ISOtretinoin 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | DERMATOLOGY | Ketoconazole 2% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Myorisan (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Myorisan 20MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | DERMATOLOGY | Myorisan 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-----------------------------------|---------------------------|-------------|-------|
| 3951 | DERMATOLOGY | Myorisan 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | DERMATOLOGY | Myorisan 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Pimecrolimus | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3964 | DERMATOLOGY | Pimecrolimus | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | DERMATOLOGY | pimecrolimus 1 % topical cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | DERMATOLOGY | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 5 |
| 3963 | DERMATOLOGY | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | DERMATOLOGY | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3964 | DERMATOLOGY | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | DERMATOLOGY | Retin-A Micro (tretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Retin-A Micro Pump 0.06% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Rhofade 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | DERMATOLOGY | Rhofade 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | soolantra 1% cream | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | DERMATOLOGY | Soolantra 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 3 |
| 3963 | DERMATOLOGY | Soolantra 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 5 |
| 3964 | DERMATOLOGY | Soolantra 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | DERMATOLOGY | Tacrolimus 0.03% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Tacrolimus 0.03% EX OINT | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3962 | DERMATOLOGY | Tacrolimus 0.03% Ointment | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3964 | DERMATOLOGY | Tacrolimus 0.03% Ointment | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | DERMATOLOGY | tacrolimus 0.1 % topical ointment | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | DERMATOLOGY | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | DERMATOLOGY | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 5 |
| 3965 | DERMATOLOGY | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | DERMATOLOGY | Tacrolimus 0.1% Ointment | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3962 | DERMATOLOGY | Tacrolimus 0.1% Ointment | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | DERMATOLOGY | Tacrolimus 0.1% Ointment | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | DERMATOLOGY | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 3 |
| 3956 | DERMATOLOGY | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3961 | DERMATOLOGY | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3956 | DERMATOLOGY | Tazarotene Cream 0.1% | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | DERMATOLOGY | Tazarotene Cream 0.1% | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3961 | DERMATOLOGY | Tazorac 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | DERMATOLOGY | Tazorac 0.1% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Tazorac 0.1% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | DERMATOLOGY | Tazorac Gel (tazarotene) | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | DERMATOLOGY | Tretinoin 0.01% EX GEL | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | DERMATOLOGY | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | DERMATOLOGY | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 6 |
| 3956 | DERMATOLOGY | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3961 | DERMATOLOGY | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | DERMATOLOGY | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3964 | DERMATOLOGY | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | DERMATOLOGY | Tretinoin 0.025% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | DERMATOLOGY | tretinoin 0.05% cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | DERMATOLOGY | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 3 |
| 3956 | DERMATOLOGY | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | DERMATOLOGY | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3964 | DERMATOLOGY | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | tretinoin 0.1% cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | DERMATOLOGY | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 4 |
| 3963 | DERMATOLOGY | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | DERMATOLOGY | Tretinoin Cream | DERMATOLOGICAL AGENTS | Approval | 3 |
| 3963 | DERMATOLOGY | Tretinoin Cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Tretinoin Microsphere Pump 0.04% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | DERMATOLOGY | Triamcinolone 0.1% Cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | DERMATOLOGY | Triamcinolone 0.1% Cream | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3963 | DERMATOLOGY | Triamcinolone 0.1% Cream | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3956 | DERMATOLOGY | Triamcinolone 0.1% Ointment | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3963 | DERMATOLOGY | Triamcinolone 0.1% Ointment | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3956 | DERMATOLOGY | Triamcinolone Acetonide 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | triamcinolone acetonide 0.1 % topical cream | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | DERMATOLOGY | Triamcinolone Acetonide 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3956 | DERMATOLOGY | Triamcinolone Acetonide 0.1% EX OINT | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3961 | DERMATOLOGY | Zenatane (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Zenatane 20MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3961 | DERMATOLOGY | Zenatane 30MG OR CAPS | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | DERMATOLOGY | Zenatane 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | DERMATOLOGY | Zenatane 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | DERMATOLOGY | Zenatane 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | DERMATOLOGY | Zenatane 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3962 | DERMATOLOGY | Zenatane 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Zenatane 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 3 |
| 3963 | EMERGENCY MEDICINE | Amnesteem 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | EMERGENCY MEDICINE | Tacrolimus 0.1% Ointment | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Amnesteem (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Amnesteem 10MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Clindamycin-Tretinoin 1.2-0.025% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Clobetasol 0.05% Solution | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Eucrisa (crisaborole) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Eucrisa (crisaborole) | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | FAMILY PRACTICE | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Pimecrolimus | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3962 | FAMILY PRACTICE | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3962 | FAMILY PRACTICE | Tacrolimus 0.1% Ointment | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3961 | FAMILY PRACTICE | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | FAMILY PRACTICE | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | FAMILY PRACTICE | Triamcinolone Acetonide 0.1% EX CREA | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | GENERAL PRACTICE | Amnesteem (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | GENERAL PRACTICE | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3962 | INTERNAL MEDICINE | Arazlo 0.045% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3962 | INTERNAL MEDICINE | Claravis 20MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Duobrii 0.01-0.045% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|----------|-------|
| 3951 | INTERNAL MEDICINE | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | INTERNAL MEDICINE | Myorisan 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Rhofade 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3964 | INTERNAL MEDICINE | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Tazarotene Cream | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Triamcinolone Acetonide 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Zenatane (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Zenatane (isotretinoin) | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Zenatane 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Zenatane 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Zenatane 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Claravis 40 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, ACUTE CARE | Pimecrolimus | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Arazlo 0.045% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Azelaic Acid | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Claravis 20MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Claravis 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Claravis 30MG OR CAPS | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Claravis 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--------------------------------------|---------------------------|-------------|-------|
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Eucrisa (crisaborole) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Eucrisa (crisaborole) | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | isotretinoin 20 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | isotretinoin 20 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3961 | NURSE PRACTITIONER, FAMILY HEALTH | ISOtretinoin 20MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | ISOtretinoin 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ketoconazole Cream 2% | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Myorisan 20MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | NURSE PRACTITIONER, FAMILY HEALTH | Soolantra 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 6 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Tretinoin 0.025% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 3 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Triamcinolone 0.1% Cream | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Triamcinolone Acetonide 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Triamcinolone Acetonide 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | NURSE PRACTITIONER, UNSPECIFIED | Claravis (isotretinoin) | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Claravis 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | NURSE PRACTITIONER, UNSPECIFIED | Claravis 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | NURSE PRACTITIONER, UNSPECIFIED | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | ISOtretinoin 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | NURSE PRACTITIONER, UNSPECIFIED | isotretinoin 40 mg capsule | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3964 | NURSE PRACTITIONER, UNSPECIFIED | Myorisan 40 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-------------------------------------|---------------------------|-------------|-------|
| 3965 | NURSE PRACTITIONER, UNSPECIFIED | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Tretinoin 0.01% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3961 | NURSE PRACTITIONER, UNSPECIFIED | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Tretinoin Cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | OPHTHALMOLOGY | Tacrolimus 0.03% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | OPHTHALMOLOGY | Tretinoin 0.05% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PEDIATRICS | Amnesteem (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PEDIATRICS | Eucrisa (crisaborole) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PEDIATRICS | EUCRISA 2% OIN | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | PEDIATRICS | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | PEDIATRICS | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Adapalene 0.3% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | Adapalene 0.3% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Adapalene 0.3% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Amnesteem (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Amnesteem 20MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Amnesteem 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Amnesteem 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Arazlo 0.045 % lotion | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Arazlo 0.045 % lotion | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Arazlo 0.045% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3962 | PHYSICIAN ASSISTANT, UNSPECIFIED | Arazlo 0.045% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Azelaic Acid | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3967 | PHYSICIAN ASSISTANT, UNSPECIFIED | Azelaic Acid | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | azelaic acid 15 % topical gel | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Azelaic Acid 15% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Bryhali 0.01% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Claravis (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Claravis 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | Claravis 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Clindamycin Phosphate 1% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | Clindamycin Phosphate 1% EX LOTN | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | Clobetasol Propionate 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Eucrisa (crisaborole) | DERMATOLOGICAL AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--------------------------------------|---------------------------|-------------|-------|
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Eucrisa 2 % topical ointment | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Eucrisa 2 % topical ointment | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 3 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3967 | PHYSICIAN ASSISTANT, UNSPECIFIED | Eucrisa 2% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Finacea 15% EX FOAM | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Isotretinoin | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Isotretinoin | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Isotretinoin | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3967 | PHYSICIAN ASSISTANT, UNSPECIFIED | Isotretinoin | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | isotretinoin 20 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | ISOtretinoin 20MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | isotretinoin 30 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | ISOtretinoin 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 6 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | ISOtretinoin 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 4 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | isotretinoin 40 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | isotretinoin 40 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | isotretinoin 40 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | ISOtretinoin 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | ISOtretinoin 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3967 | PHYSICIAN ASSISTANT, UNSPECIFIED | ISOtretinoin 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ketoconazole 2% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Mirvaso 0.33 % topical gel with pump | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Mirvaso 0.33% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Myorisan (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | myorisan 40 mg capsule | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Myorisan 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Myorisan 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Myorisan 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Myorisan 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3962 | PHYSICIAN ASSISTANT, UNSPECIFIED | Pimecrolimus | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Pimecrolimus | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Pimecrolimus 1% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Retin-A Micro Pump 0.08% EX GEL | DERMATOLOGICAL AGENTS | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-----------------------------------|---------------------------|-------------|-------|
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Rhofade 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Rhofade 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | soolantra 1% cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Soolantra 1% Cream | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Soolantra 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Soolantra 1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tacrolimus 0.03% Ointment | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | tacrolimus 0.1 % topical ointment | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tacrolimus 0.1% EX OINT | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tacrolimus 0.1% Ointment | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tazarotene 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tazorac 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tazorac 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tazorac 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | tretinoin 0.025% cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 5 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 7 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.025% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | tretinoin 0.05% cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | No Response | 1 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.05% EX GEL | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin 0.1% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin Cream | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tretinoin Cream | DERMATOLOGICAL AGENTS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Triamcinolone 0.1% Cream | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Triamcinolone 0.1% Ointment | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Triamcinolone Acetonide 0.1% EX CREA | DERMATOLOGICAL AGENTS | Denial | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Zenatane (isotretinoin) | DERMATOLOGICAL AGENTS | Denial | 2 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Zenatane (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Zenatane 30MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Zenatane 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 2 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Zenatane 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 4 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Zenatane 40MG OR CAPS | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PLASTIC SURGERY | Tretinoin 0.05% EX CREA | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PLASTIC SURGERY | Triamcinolone 0.1% Cream | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PSYCHIATRY | Amnesteem (isotretinoin) | DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Omnipod Dash 5 Pack | Diabetes pump | Denial | 1 |
| 3956 | UNSPECIFIED | Farxiga (Dapagliflozin Propanediol) 10 MG Oral Tablet | Diabetic Agent | No Response | 1 |
| 3956 | UNSPECIFIED | Farxiga (dapagliflozin) | Diabetic Agent | Approval | 2 |
| 3963 | UNSPECIFIED | Farxiga (dapagliflozin) | Diabetic Agent | Approval | 1 |
| 3951 | UNSPECIFIED | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 1 |
| 3956 | UNSPECIFIED | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 11 |
| 3956 | UNSPECIFIED | Farxiga 10MG OR TABS | Diabetic Agent | Denial | 1 |
| 3956 | UNSPECIFIED | Farxiga 10MG OR TABS | Diabetic Agent | No Response | 1 |
| 3963 | UNSPECIFIED | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 1 |
| 3956 | UNSPECIFIED | Farxiga 5MG OR TABS | Diabetic Agent | Approval | 5 |
| 3963 | UNSPECIFIED | Glyxambi (empagliflozin-linagliptin) | Diabetic Agent | Approval | 1 |
| 3951 | UNSPECIFIED | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | No Response | 1 |
| 3956 | UNSPECIFIED | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Approval | 3 |
| 3956 | CARDIOLOGY | Farxiga (dapagliflozin) | Diabetic Agent | Approval | 3 |
| 3963 | CARDIOLOGY | Farxiga (dapagliflozin) | Diabetic Agent | Denial | 2 |
| 3956 | CARDIOLOGY | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 2 |
| 3956 | CARDIOLOGY, INTERVENTIONAL | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 1 |
| 3951 | FAMILY PRACTICE | Farxiga (dapagliflozin) | Diabetic Agent | Approval | 1 |
| 3956 | FAMILY PRACTICE | Farxiga (dapagliflozin) | Diabetic Agent | Approval | 3 |
| 3961 | FAMILY PRACTICE | Farxiga (dapagliflozin) | Diabetic Agent | Approval | 1 |
| 3963 | FAMILY PRACTICE | Farxiga (dapagliflozin) | Diabetic Agent | Approval | 2 |
| 3951 | FAMILY PRACTICE | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 2 |
| 3951 | FAMILY PRACTICE | Farxiga 10MG OR TABS | Diabetic Agent | No Response | 1 |
| 3956 | FAMILY PRACTICE | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 6 |
| 3956 | FAMILY PRACTICE | Farxiga 10MG OR TABS | Diabetic Agent | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | FAMILY PRACTICE | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 1 |
| 3956 | FAMILY PRACTICE | Farxiga 5MG OR TABS | Diabetic Agent | Approval | 3 |
| 3956 | FAMILY PRACTICE | Glyxambi 25-5MG OR TABS | Diabetic Agent | Approval | 1 |
| 3956 | FAMILY PRACTICE | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Approval | 2 |
| 3956 | FAMILY PRACTICE | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Denial | 2 |
| 3963 | FAMILY PRACTICE | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Approval | 2 |
| 3964 | FAMILY PRACTICE | Ozempic (semaglutide) | DIABETIC AGENT | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Farxiga (dapagliflozin) | Diabetic Agent | Approval | 6 |
| 3951 | INTERNAL MEDICINE | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Farxiga 5MG OR TABS | Diabetic Agent | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Glyxambi (Empagliflozin-Linagliptin) 10-5 MG Oral Tablet | Diabetic Agent | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Denial | 2 |
| 3961 | INTERNAL MEDICINE | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3951 | INTERNAL MEDICINE | OZEMPIC 0.25/0.5 PEN | DIABETIC AGENT | No Response | 1 |
| 3951 | NURSE PRACTITIONER, ADULT HEALTH | Farxiga 5MG OR TABS | Diabetic Agent | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Farxiga (Dapagliflozin Propanediol) 10 MG Oral Tablet | Diabetic Agent | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Farxiga (dapagliflozin) | Diabetic Agent | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Farxiga (dapagliflozin) | Diabetic Agent | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 2 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Farxiga 10MG OR TABS | Diabetic Agent | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 3 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Farxiga 5MG OR TABS | Diabetic Agent | Approval | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Glyxambi (empagliflozin-linagliptin) | Diabetic Agent | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Glyxambi 25-5MG OR TABS | Diabetic Agent | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Glyxambi 25-5MG OR TABS | Diabetic Agent | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Trulicity 4.5MG/0.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Farxiga (dapagliflozin) | Diabetic Agent | Approval | 2 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Farxiga 10MG OR TABS | Diabetic Agent | No Response | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Farxiga 5MG OR TABS | Diabetic Agent | Denial | 2 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Jardiance (Empagliflozin) 10 MG Oral Tablet | DIABETIC AGENT | No Response | 1 |
| 3963 | PEDIATRICS | Farxiga 10MG OR TABS | Diabetic Agent | Approval | 1 |
| 3961 | PEDIATRICS | Farxiga 5MG OR TABS | Diabetic Agent | Approval | 1 |
| 3956 | PEDIATRICS | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | Farxiga (dapagliflozin) | Diabetic Agent | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3956 | PHYSICIAN, ENDOCRINOLOGY | Farxiga 10MG OR TABS | Diabetic Agent | No Response | 1 |
| 3956 | PHYSICIAN, ENDOCRINOLOGY | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Approval | 2 |
| 3956 | PHYSICIAN, SURGERY, GENERAL | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3956 | REGISTERED NURSE, UNSPECIFIED | Ozempic (1 MG/DOSE) 4MG/3ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3956 | UNSPECIFIED | Januvia (sitagliptin) | DIABETIC AGENT | Approval | 1 |
| 3956 | UNSPECIFIED | Januvia 100MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | UNSPECIFIED | Januvia 100MG OR TABS | DIABETIC AGENT | Denial | 1 |
| 3956 | UNSPECIFIED | Januvia 25MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | UNSPECIFIED | Januvia 50MG OR TABS | DIABETIC AGENT | Approval | 2 |
| 3956 | UNSPECIFIED | Jardiance (empagliflozin) | DIABETIC AGENT | Approval | 2 |
| 3961 | UNSPECIFIED | Jardiance (empagliflozin) | DIABETIC AGENT | Denial | 2 |
| 3963 | UNSPECIFIED | Jardiance (empagliflozin) | DIABETIC AGENT | Approval | 1 |
| 3951 | UNSPECIFIED | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | UNSPECIFIED | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 4 |
| 3963 | UNSPECIFIED | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 2 |
| 3951 | UNSPECIFIED | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 3 |
| 3956 | UNSPECIFIED | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 6 |
| 3956 | UNSPECIFIED | Jardiance 25MG OR TABS | DIABETIC AGENT | Denial | 1 |
| 3956 | UNSPECIFIED | Jardiance 25MG OR TABS | DIABETIC AGENT | No Response | 1 |
| 3961 | UNSPECIFIED | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3963 | UNSPECIFIED | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 2 |
| 3951 | UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 3 |
| 3951 | UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | No Response | 1 |
| 3956 | UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 13 |
| 3956 | UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 4 |
| 3956 | UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | No Response | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3961 | UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3961 | UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3963 | UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 4 |
| 3963 | UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3951 | UNSPECIFIED | Ozempic (1 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3956 | UNSPECIFIED | Ozempic (1 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 4 |
| 3956 | UNSPECIFIED | Ozempic (1 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 2 |
| 3956 | UNSPECIFIED | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 2 |
| 3956 | UNSPECIFIED | Ozempic Inj (semaglutide) | DIABETIC AGENT | Denial | 8 |
| 3956 | UNSPECIFIED | Ozempic Inj (semaglutide) | DIABETIC AGENT | No Response | 6 |
| 3963 | UNSPECIFIED | Ozempic Pen 2mg/1.5mL | DIABETIC AGENT | Denial | 1 |
| 3951 | UNSPECIFIED | Trulicity (dulaglutide) | DIABETIC AGENT | Approval | 1 |
| 3956 | UNSPECIFIED | Trulicity (dulaglutide) | DIABETIC AGENT | Approval | 5 |
| 3956 | UNSPECIFIED | Trulicity (dulaglutide) | DIABETIC AGENT | Denial | 2 |
| 3961 | UNSPECIFIED | Trulicity (dulaglutide) | DIABETIC AGENT | Denial | 1 |
| 3963 | UNSPECIFIED | Trulicity (dulaglutide) | DIABETIC AGENT | Denial | 1 |
| 3956 | UNSPECIFIED | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | Approval | 5 |
| 3956 | UNSPECIFIED | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | No Response | 2 |
| 3963 | UNSPECIFIED | TRULICITY 3/0.5 PEN | DIABETIC AGENT | Denial | 1 |
| 3963 | UNSPECIFIED | Trulicity 3MG/0.5ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3956 | UNSPECIFIED | Trulicity Pen 1.5mg/0.5mL | DIABETIC AGENT | Approval | 1 |
| 3956 | UNSPECIFIED | Victoza (liraglutide) | DIABETIC AGENT | Approval | 1 |
| 3956 | UNSPECIFIED | Victoza (liraglutide) | DIABETIC AGENT | Denial | 3 |
| 3956 | CARDIOLOGY | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | CLINICAL NURSE SPECIALIST, FAMILY HEALTH | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3956 | EMERGENCY MEDICINE | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | EMERGENCY MEDICINE | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3963 | EMERGENCY MEDICINE | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3956 | ENDOCRINOLOGY, DIABETES & METABOLISM | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3963 | ENDOCRINOLOGY, DIABETES & METABOLISM | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3956 | FAMILY MEDICINE | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | FAMILY PRACTICE | Januvia (sitagliptin) | DIABETIC AGENT | Approval | 4 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3951 | FAMILY PRACTICE | Januvia 100MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | FAMILY PRACTICE | Januvia 100MG OR TABS | DIABETIC AGENT | Approval | 9 |
| 3956 | FAMILY PRACTICE | Januvia 100MG OR TABS | DIABETIC AGENT | No Response | 1 |
| 3963 | FAMILY PRACTICE | Januvia 100MG OR TABS | DIABETIC AGENT | Approval | 3 |
| 3951 | FAMILY PRACTICE | Januvia 50MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | FAMILY PRACTICE | Januvia 50MG OR TABS | DIABETIC AGENT | No Response | 1 |
| 3951 | FAMILY PRACTICE | Jardiance (empagliflozin) | DIABETIC AGENT | Approval | 1 |
| 3956 | FAMILY PRACTICE | Jardiance (empagliflozin) | DIABETIC AGENT | Approval | 6 |
| 3956 | FAMILY PRACTICE | Jardiance (empagliflozin) | DIABETIC AGENT | Denial | 3 |
| 3956 | FAMILY PRACTICE | Jardiance (empagliflozin) | DIABETIC AGENT | No Response | 1 |
| 3963 | FAMILY PRACTICE | Jardiance (empagliflozin) | DIABETIC AGENT | Approval | 2 |
| 3951 | FAMILY PRACTICE | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 2 |
| 3956 | FAMILY PRACTICE | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 5 |
| 3956 | FAMILY PRACTICE | Jardiance 10MG OR TABS | DIABETIC AGENT | Denial | 1 |
| 3963 | FAMILY PRACTICE | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3951 | FAMILY PRACTICE | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 2 |
| 3956 | FAMILY PRACTICE | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 7 |
| 3956 | FAMILY PRACTICE | Jardiance 25MG OR TABS | DIABETIC AGENT | No Response | 1 |
| 3961 | FAMILY PRACTICE | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3963 | FAMILY PRACTICE | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3963 | FAMILY PRACTICE | Jardiance 25MG OR TABS | DIABETIC AGENT | Denial | 1 |
| 3956 | FAMILY PRACTICE | Ozempic | DIABETIC AGENT | Denial | 1 |
| 3951 | FAMILY PRACTICE | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3956 | FAMILY PRACTICE | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 15 |
| 3956 | FAMILY PRACTICE | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 3 |
| 3956 | FAMILY PRACTICE | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | No Response | 1 |
| 3963 | FAMILY PRACTICE | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 7 |
| 3956 | FAMILY PRACTICE | Ozempic (1 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 2 |
| 3961 | FAMILY PRACTICE | Ozempic (1 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3963 | FAMILY PRACTICE | Ozempic (1 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3951 | FAMILY PRACTICE | Ozempic Inj (semaglutide) | DIABETIC AGENT | Denial | 2 |
| 3956 | FAMILY PRACTICE | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 4 |
| 3956 | FAMILY PRACTICE | Ozempic Inj (semaglutide) | DIABETIC AGENT | Denial | 8 |
| 3956 | FAMILY PRACTICE | Ozempic Inj (semaglutide) | DIABETIC AGENT | No Response | 4 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3961 | FAMILY PRACTICE | Ozempic Inj (semaglutide) | DIABETIC AGENT | No Response | 1 |
| 3963 | FAMILY PRACTICE | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 1 |
| 3963 | FAMILY PRACTICE | Ozempic Inj (semaglutide) | DIABETIC AGENT | Denial | 1 |
| 3963 | FAMILY PRACTICE | Ozempic Inj (semaglutide) | DIABETIC AGENT | No Response | 1 |
| 3956 | FAMILY PRACTICE | Ozempic Pen 2mg/1.5mL | DIABETIC AGENT | Denial | 1 |
| 3951 | FAMILY PRACTICE | Trulicity (dulaglutide) | DIABETIC AGENT | Approval | 1 |
| 3956 | FAMILY PRACTICE | Trulicity (dulaglutide) | DIABETIC AGENT | Approval | 4 |
| 3956 | FAMILY PRACTICE | Trulicity (dulaglutide) | DIABETIC AGENT | Denial | 1 |
| 3956 | FAMILY PRACTICE | Trulicity (dulaglutide) | DIABETIC AGENT | No Response | 1 |
| 3956 | FAMILY PRACTICE | Trulicity 0.75 mg/0.5 mL subcutaneous pen injector | DIABETIC AGENT | No Response | 1 |
| 3951 | FAMILY PRACTICE | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3956 | FAMILY PRACTICE | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | Approval | 3 |
| 3956 | FAMILY PRACTICE | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | Denial | 2 |
| 3956 | FAMILY PRACTICE | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | No Response | 1 |
| 3956 | FAMILY PRACTICE | Trulicity Pen 0.75mg/0.5mL | DIABETIC AGENT | Approval | 1 |
| 3956 | FAMILY PRACTICE | Victoza (liraglutide) | DIABETIC AGENT | Denial | 1 |
| 3956 | GENERAL PRACTICE | Jardiance (empagliflozin) | DIABETIC AGENT | No Response | 1 |
| 3956 | GENERAL PRACTICE | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Januvia 100MG OR TABS | DIABETIC AGENT | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Januvia 100MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Januvia 50MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Jardiance (empagliflozin) | DIABETIC AGENT | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Jardiance (empagliflozin) | DIABETIC AGENT | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Jardiance (empagliflozin) | DIABETIC AGENT | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 5 |
| 3961 | INTERNAL MEDICINE | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 7 |
| 3963 | INTERNAL MEDICINE | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Ozempic (0.25 or 0.5 MG/DOSE) (Semaglutide) 2 MG/1.5ML Subcutaneous Milliliter | DIABETIC AGENT | No Response | 1 |
| 3951 | INTERNAL MEDICINE | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 13 |
| 3956 | INTERNAL MEDICINE | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | INTERNAL MEDICINE | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Ozempic (1 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 2 |
| 3961 | INTERNAL MEDICINE | Ozempic (1 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 2 |
| 3951 | INTERNAL MEDICINE | Ozempic Inj (semaglutide) | DIABETIC AGENT | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Ozempic Inj (semaglutide) | DIABETIC AGENT | Denial | 3 |
| 3961 | INTERNAL MEDICINE | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Ozempic Inj (semaglutide) | DIABETIC AGENT | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Trulicity (dulaglutide) | DIABETIC AGENT | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Trulicity (dulaglutide) | DIABETIC AGENT | Approval | 6 |
| 3956 | INTERNAL MEDICINE | Trulicity (dulaglutide) | DIABETIC AGENT | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Trulicity (dulaglutide) | DIABETIC AGENT | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Trulicity (dulaglutide) | DIABETIC AGENT | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Trulicity (dulaglutide) | DIABETIC AGENT | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | Approval | 5 |
| 3956 | INTERNAL MEDICINE | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | No Response | 1 |
| 3961 | INTERNAL MEDICINE | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Trulicity 3MG/0.5ML SC SOPN | DIABETIC AGENT | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Victoza (liraglutide) | DIABETIC AGENT | Approval | 2 |
| 3963 | NURSE PRACTITIONER, ADULT HEALTH | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | NURSE PRACTITIONER, ADULT HEALTH | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Januvia (sitagliptin) | DIABETIC AGENT | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Jardiance (empagliflozin) | DIABETIC AGENT | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Jardiance (empagliflozin) | DIABETIC AGENT | Approval | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Jardiance (empagliflozin) | DIABETIC AGENT | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Jardiance (empagliflozin) | DIABETIC AGENT | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 7 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Jardiance 10MG OR TABS | DIABETIC AGENT | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 3 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic (0.25 or 0.5 MG/DOSE) (Semaglutide) 2 MG/1.5ML Subcutaneous Each | DIABETIC AGENT | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic (0.25 or 0.5 MG/DOSE) (Semaglutide) 2 MG/1.5ML Subcutaneous Each | DIABETIC AGENT | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 8 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic (1 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic (1 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 4 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic Inj (semaglutide) | DIABETIC AGENT | Denial | 5 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic Inj (semaglutide) | DIABETIC AGENT | No Response | 1 |
| 3961 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic Inj (semaglutide) | DIABETIC AGENT | Denial | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ozempic Inj (semaglutide) | DIABETIC AGENT | Denial | 3 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Trulicity (dulaglutide) | DIABETIC AGENT | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Trulicity (dulaglutide) | DIABETIC AGENT | Approval | 4 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Trulicity (Dulaglutide) 0.75 MG/0.5ML Subcutaneous Each | DIABETIC AGENT | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | Approval | 3 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Trulicity 3MG/0.5ML SC SOPN | DIABETIC AGENT | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Victoza (liraglutide) | DIABETIC AGENT | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Victoza (liraglutide) | DIABETIC AGENT | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Januvia 100MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 3 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 2 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 2 |
| 3961 | NURSE PRACTITIONER, UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Ozempic (1 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 2 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Trulicity (dulaglutide) | DIABETIC AGENT | Approval | 1 |
| 3963 | NURSE PRACTITIONER, WOMEN'S HEALTH | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3961 | OBSTETRICS & GYNECOLOGY | Ozempic Inj (semaglutide) | DIABETIC AGENT | Denial | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Victoza (liraglutide) | DIABETIC AGENT | Approval | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Victoza (liraglutide) | DIABETIC AGENT | No Response | 1 |
| 3956 | PEDIATRICS | Jardiance (empagliflozin) | DIABETIC AGENT | No Response | 1 |
| 3956 | PEDIATRICS | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 1 |
| 3951 | PEDIATRICS | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3961 | PEDIATRICS | Trulicity 1.5MG/0.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3951 | PEDIATRICS | Victoza (liraglutide) | DIABETIC AGENT | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Januvia (sitagliptin) | DIABETIC AGENT | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Jardiance (empagliflozin) | DIABETIC AGENT | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Jardiance (empagliflozin) | DIABETIC AGENT | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Jardiance 10MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Jardiance 25MG OR TABS | DIABETIC AGENT | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ozempic Inj (semaglutide) | DIABETIC AGENT | Denial | 1 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Trulicity (dulaglutide) | DIABETIC AGENT | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Trulicity (dulaglutide) | DIABETIC AGENT | Approval | 1 |
| 3956 | PHYSICIAN, ENDOCRINOLOGY | Ozempic (0.25 or 0.5 MG/DOSE) 2MG/1.5ML SC SOPN | DIABETIC AGENT | Approval | 3 |
| 3963 | PHYSICIAN, ENDOCRINOLOGY | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 1 |
| 3956 | PHYSICIAN, SURGERY, GENERAL | Ozempic Inj (semaglutide) | DIABETIC AGENT | Denial | 2 |
| 3956 | PHYSICIAN, SURGERY, GENERAL | Trulicity (dulaglutide) | DIABETIC AGENT | Approval | 1 |
| 3956 | PSYCHIATRY | Jardiance (empagliflozin) | DIABETIC AGENT | No Response | 1 |
| 3956 | PSYCHIATRY | Ozempic Inj (semaglutide) | DIABETIC AGENT | Approval | 1 |
| 3963 | REGISTERED NURSE, UNSPECIFIED | Ozempic Inj (semaglutide) | DIABETIC AGENT | Denial | 1 |
| 3956 | UNSPECIFIED | Dexcom G5 Mis Transmit | DIABETIC DEVICES | Denial | 1 |
| 3964 | UNSPECIFIED | Dexcom G5 Mobile Transmitter XX MISC | DIABETIC DEVICES | No Response | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G4 Sensor XX MISC | DIABETIC DEVICES | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G5 Mis Transmit | DIABETIC DEVICES | Approval | 1 |
| 3956 | UNSPECIFIED | Dexcom G6 Continuous Glucose Monitor System | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | UNSPECIFIED | Dexcom G6 Continuous Glucose Monitor System | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | UNSPECIFIED | Dexcom G6 Mis Receiver | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | UNSPECIFIED | Dexcom G6 Mis Receiver | DIABETIC SUPPLIES | Denial | 3 |
| 3951 | UNSPECIFIED | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | UNSPECIFIED | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Approval | 3 |
| 3956 | UNSPECIFIED | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Denial | 2 |
| 3951 | UNSPECIFIED | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | UNSPECIFIED | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Approval | 2 |
| 3956 | UNSPECIFIED | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Denial | 5 |
| 3956 | UNSPECIFIED | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | No Response | 1 |
| 3951 | UNSPECIFIED | Dexcom G6 Receiver | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | UNSPECIFIED | Dexcom G6 Receiver | DIABETIC SUPPLIES | Denial | 3 |
| 3964 | UNSPECIFIED | Dexcom G6 Receiver | DIABETIC SUPPLIES | Approval | 1 |
| 3964 | UNSPECIFIED | Dexcom G6 Receiver | DIABETIC SUPPLIES | Denial | 2 |
| 3964 | UNSPECIFIED | Dexcom G6 Receiver | DIABETIC SUPPLIES | No Response | 1 |
| 3963 | UNSPECIFIED | Dexcom G6 Receiver misc (blood-glucose meter, continuous) | DIABETIC SUPPLIES | No Response | 1 |
| 3951 | UNSPECIFIED | Dexcom G6 Receiver XX DEVI | DIABETIC SUPPLIES | Denial | 2 |
| 3963 | UNSPECIFIED | Dexcom G6 Receiver XX DEVI | DIABETIC SUPPLIES | Approval | 1 |
| 3964 | UNSPECIFIED | Dexcom G6 Receiver XX DEVI | DIABETIC SUPPLIES | No Response | 1 |
| 3951 | UNSPECIFIED | Dexcom G6 Sensor | DIABETIC SUPPLIES | Approval | 1 |
| 3951 | UNSPECIFIED | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 2 |
| 3963 | UNSPECIFIED | Dexcom G6 Sensor | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | UNSPECIFIED | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 4 |
| 3964 | UNSPECIFIED | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 4 |
| 3964 | UNSPECIFIED | Dexcom G6 Sensor | DIABETIC SUPPLIES | No Response | 1 |
| 3965 | UNSPECIFIED | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 2 |
| 3965 | UNSPECIFIED | Dexcom G6 Sensor (Continuous Blood Glucose System Sensor) Each | DIABETIC SUPPLIES | No Response | 1 |
| 3963 | UNSPECIFIED | Dexcom G6 Sensor device (blood-glucose sensor) | DIABETIC SUPPLIES | No Response | 1 |
| 3951 | UNSPECIFIED | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 3 |
| 3956 | UNSPECIFIED | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 2 |
| 3956 | UNSPECIFIED | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Denial | 2 |
| 3956 | UNSPECIFIED | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | No Response | 1 |
| 3963 | UNSPECIFIED | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 5 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | UNSPECIFIED | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Denial | 1 |
| 3964 | UNSPECIFIED | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3964 | UNSPECIFIED | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | No Response | 2 |
| 3951 | UNSPECIFIED | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | UNSPECIFIED | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 5 |
| 3964 | UNSPECIFIED | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 2 |
| 3964 | UNSPECIFIED | Dexcom G6 Transmitter | DIABETIC SUPPLIES | No Response | 2 |
| 3965 | UNSPECIFIED | Dexcom G6 Transmitter (Continuous Blood Glucose System Transmitter) Each | DIABETIC SUPPLIES | No Response | 1 |
| 3963 | UNSPECIFIED | Dexcom G6 Transmitter device (blood-glucose transmitter) | DIABETIC SUPPLIES | No Response | 1 |
| 3951 | UNSPECIFIED | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Denial | 2 |
| 3956 | UNSPECIFIED | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | UNSPECIFIED | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Denial | 2 |
| 3963 | UNSPECIFIED | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | UNSPECIFIED | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Denial | 1 |
| 3965 | UNSPECIFIED | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3965 | UNSPECIFIED | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | CHIROPRACTOR, UNSPECIFIED | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | CHIROPRACTOR, UNSPECIFIED | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Approval | 1 |
| 3964 | EMERGENCY MEDICINE | Dexcom G6 Receiver | DIABETIC SUPPLIES | Denial | 1 |
| 3964 | EMERGENCY MEDICINE | Dexcom G6 Receiver XX DEVI | DIABETIC SUPPLIES | No Response | 1 |
| 3963 | EMERGENCY MEDICINE | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3962 | ENDOCRINOLOGY, DIABETES & METABOLISM | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | ENDOCRINOLOGY, DIABETES & METABOLISM | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3964 | ENDOCRINOLOGY, DIABETES & METABOLISM | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3962 | ENDOCRINOLOGY, DIABETES & METABOLISM | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Approval | 1 |
| 3951 | ENDOCRINOLOGY, DIABETES & METABOLISM | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3951 | ENDOCRINOLOGY, PEDIATRIC | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | ENDOCRINOLOGY, PEDIATRIC | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | ENDOCRINOLOGY, PEDIATRIC | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3965 | ENDOCRINOLOGY, PEDIATRIC | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3965 | ENDOCRINOLOGY, PEDIATRIC | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | ENDOCRINOLOGY, PEDIATRIC | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | FAMILY PRACTICE | Dexcom G6 Continuous Glucose Monitor System | DIABETIC SUPPLIES | Denial | 1 |
| 3951 | FAMILY PRACTICE | Dexcom G6 Mis Receiver | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | FAMILY PRACTICE | Dexcom G6 Mis Receiver | DIABETIC SUPPLIES | Denial | 7 |
| 3963 | FAMILY PRACTICE | Dexcom G6 Mis Receiver | DIABETIC SUPPLIES | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3951 | FAMILY PRACTICE | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Denial | 3 |
| 3956 | FAMILY PRACTICE | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Denial | 10 |
| 3963 | FAMILY PRACTICE | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Denial | 1 |
| 3951 | FAMILY PRACTICE | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Denial | 2 |
| 3956 | FAMILY PRACTICE | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | FAMILY PRACTICE | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Denial | 4 |
| 3951 | FAMILY PRACTICE | Dexcom G6 Receiver | DIABETIC SUPPLIES | Denial | 2 |
| 3963 | FAMILY PRACTICE | Dexcom G6 Receiver | DIABETIC SUPPLIES | Denial | 1 |
| 3964 | FAMILY PRACTICE | Dexcom G6 Receiver | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | FAMILY PRACTICE | Dexcom G6 Receiver XX DEVI | DIABETIC SUPPLIES | Denial | 1 |
| 3951 | FAMILY PRACTICE | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 2 |
| 3963 | FAMILY PRACTICE | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 5 |
| 3963 | FAMILY PRACTICE | Dexcom G6 Sensor | DIABETIC SUPPLIES | No Response | 1 |
| 3964 | FAMILY PRACTICE | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 3 |
| 3963 | FAMILY PRACTICE | Dexcom G6 Sensor device | DIABETIC SUPPLIES | No Response | 1 |
| 3951 | FAMILY PRACTICE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 2 |
| 3951 | FAMILY PRACTICE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | FAMILY PRACTICE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | FAMILY PRACTICE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Denial | 2 |
| 3962 | FAMILY PRACTICE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | FAMILY PRACTICE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 3 |
| 3963 | FAMILY PRACTICE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Denial | 2 |
| 3951 | FAMILY PRACTICE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 3 |
| 3962 | FAMILY PRACTICE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | FAMILY PRACTICE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | FAMILY PRACTICE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 3 |
| 3964 | FAMILY PRACTICE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 2 |
| 3965 | FAMILY PRACTICE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 1 |
| 3965 | FAMILY PRACTICE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | No Response | 1 |
| 3963 | FAMILY PRACTICE | Dexcom G6 Transmitter device | DIABETIC SUPPLIES | No Response | 1 |
| 3956 | FAMILY PRACTICE | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 2 |
| 3956 | FAMILY PRACTICE | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Denial | 4 |
| 3956 | GENERAL PRACTICE | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 CGM System | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Dexcom G6 Continuous Glucose Monitor System | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Dexcom G6 Mis Receiver | DIABETIC SUPPLIES | Denial | 2 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Mis Receiver | DIABETIC SUPPLIES | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|----------------------------|---------------------------|-------------|-------|
| 3951 | INTERNAL MEDICINE | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Denial | 5 |
| 3961 | INTERNAL MEDICINE | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Denial | 2 |
| 3951 | INTERNAL MEDICINE | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Denial | 3 |
| 3956 | INTERNAL MEDICINE | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Dexcom G6 Receiver | DIABETIC SUPPLIES | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Dexcom G6 Receiver | DIABETIC SUPPLIES | Denial | 3 |
| 3951 | INTERNAL MEDICINE | Dexcom G6 Receiver | DIABETIC SUPPLIES | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Receiver | DIABETIC SUPPLIES | No Response | 1 |
| 3965 | INTERNAL MEDICINE | Dexcom G6 Receiver | DIABETIC SUPPLIES | No Response | 1 |
| 3951 | INTERNAL MEDICINE | Dexcom G6 Receiver XX DEVI | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Dexcom G6 Receiver XX DEVI | DIABETIC SUPPLIES | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Receiver XX DEVI | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Receiver XX DEVI | DIABETIC SUPPLIES | No Response | 1 |
| 3951 | INTERNAL MEDICINE | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 6 |
| 3951 | INTERNAL MEDICINE | Dexcom G6 Sensor | DIABETIC SUPPLIES | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Sensor | DIABETIC SUPPLIES | Approval | 1 |
| 3964 | INTERNAL MEDICINE | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 1 |
| 3965 | INTERNAL MEDICINE | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 2 |
| 3965 | INTERNAL MEDICINE | Dexcom G6 Sensor | DIABETIC SUPPLIES | No Response | 1 |
| 3951 | INTERNAL MEDICINE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 6 |
| 3951 | INTERNAL MEDICINE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 9 |
| 3956 | INTERNAL MEDICINE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Denial | 1 |
| 3961 | INTERNAL MEDICINE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 5 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Denial | 3 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | No Response | 1 |
| 3964 | INTERNAL MEDICINE | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 2 |
| 3951 | INTERNAL MEDICINE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 5 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3951 | INTERNAL MEDICINE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | No Response | 2 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | No Response | 1 |
| 3964 | INTERNAL MEDICINE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 1 |
| 3965 | INTERNAL MEDICINE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 3 |
| 3951 | INTERNAL MEDICINE | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | No Response | 1 |
| 3956 | NURSE PRACTITIONER, ADULT HEALTH | Dexcom G6 Mis Receiver | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | NURSE PRACTITIONER, ADULT HEALTH | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | NURSE PRACTITIONER, ADULT HEALTH | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Continuous Glucose Monitor System | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Denial | 1 |
| 3961 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Denial | 1 |
| 3961 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Receiver XX DEVI | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Receiver XX DEVI | DIABETIC SUPPLIES | Denial | 2 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Sensor | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Sensor | DIABETIC SUPPLIES | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 3 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 4 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Approval | 1 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Denial | 3 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | NURSE PRACTITIONER, PEDIATRIC CARE | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Dexcom G5 Mob/G4 Plat Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Dexcom G6 Receiver | DIABETIC SUPPLIES | Denial | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 3 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Dexcom G6 Mis Receiver | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | PEDIATRICS | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | PEDIATRICS | Dexcom G6 Receiver | DIABETIC SUPPLIES | Denial | 1 |
| 3951 | PEDIATRICS | Dexcom G6 Sensor | DIABETIC SUPPLIES | Approval | 1 |
| 3951 | PEDIATRICS | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | PEDIATRICS | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 2 |
| 3964 | PEDIATRICS | Dexcom G6 Sensor | DIABETIC SUPPLIES | Approval | 1 |
| 3964 | PEDIATRICS | Dexcom G6 Sensor | DIABETIC SUPPLIES | No Response | 1 |
| 3951 | PEDIATRICS | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 3 |
| 3956 | PEDIATRICS | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 3 |
| 3963 | PEDIATRICS | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 3 |
| 3951 | PEDIATRICS | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | PEDIATRICS | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 2 |
| 3964 | PEDIATRICS | Dexcom G6 Transmitter | DIABETIC SUPPLIES | No Response | 2 |
| 3951 | PEDIATRICS | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | PEDIATRICS | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 2 |
| 3956 | PEDIATRICS | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | PEDIATRICS | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 2 |
| 3963 | PEDIATRICS | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | PEDIATRICS | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dexcom G6 Mis Receiver | DIABETIC SUPPLIES | Denial | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dexcom G6 Sensor | DIABETIC SUPPLIES | Approval | 1 |
| 3965 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3962 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3965 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | PHYSICIAN, ENDOCRINOLOGY | Dexcom G6 Receiver | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | PHYSICIAN, ENDOCRINOLOGY | Dexcom G6 Receiver (Continuous Blood Glucose System Receiver) Each | DIABETIC SUPPLIES | No Response | 1 |
| 3963 | PHYSICIAN, ENDOCRINOLOGY | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | PHYSICIAN, ENDOCRINOLOGY | Dexcom G6 Sensor (Continuous Blood Glucose System Sensor) Each | DIABETIC SUPPLIES | No Response | 1 |
| 3956 | PHYSICIAN, ENDOCRINOLOGY | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3963 | PHYSICIAN, ENDOCRINOLOGY | Dexcom G6 Sensor XX MISC | DIABETIC SUPPLIES | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|--|-------------|-------|
| 3963 | PHYSICIAN, ENDOCRINOLOGY | Dexcom G6 Transmitter | DIABETIC SUPPLIES | Denial | 1 |
| 3963 | PHYSICIAN, ENDOCRINOLOGY | Dexcom G6 Transmitter (Continuous Blood Glucose System Transmitter) Each | DIABETIC SUPPLIES | No Response | 1 |
| 3964 | PHYSICIAN, ENDOCRINOLOGY | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | PHYSICIAN, GERIATRIC MEDICINE | Dexcom G6 Mis Receiver | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | PHYSICIAN, GERIATRIC MEDICINE | Dexcom G6 Mis Sensor | DIABETIC SUPPLIES | Denial | 2 |
| 3956 | PHYSICIAN, GERIATRIC MEDICINE | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Denial | 2 |
| 3964 | PHYSICIAN, GERIATRIC MEDICINE | Dexcom G6 Sensor | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | PHYSICIAN, GERIATRIC MEDICINE | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | PHYSICIAN, GERIATRIC MEDICINE | Dexcom G6 Transmitter XX MISC | DIABETIC SUPPLIES | Denial | 1 |
| 3956 | PSYCHIATRY | Dexcom G6 Mis Transmit | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | REGISTERED NURSE, UNSPECIFIED | Dexcom G6 Receiver XX DEVI | DIABETIC SUPPLIES | Approval | 1 |
| 3956 | FAMILY PRACTICE | Alogliptin | DIABETIC THERAPY | Approval | 1 |
| 3956 | FAMILY PRACTICE | Alogliptin | DIABETIC THERAPY | No Response | 1 |
| 3956 | FAMILY PRACTICE | Alogliptin Benzoate 25MG OR TABS | DIABETIC THERAPY | Approval | 1 |
| 3956 | FAMILY PRACTICE | Alogliptin Benzoate 25MG OR TABS | DIABETIC THERAPY | No Response | 1 |
| 3963 | FAMILY PRACTICE | Novolog Flexpen | DIABETIC THERAPY | No Response | 1 |
| 3956 | FAMILY PRACTICE | Trulicity | DIABETIC THERAPY | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Trulicity | DIABETIC THERAPY | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Victoza | DIABETIC THERAPY | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Victoza | DIABETIC THERAPY | Denial | 1 |
| 3951 | NURSE PRACTITIONER, ADULT HEALTH | NovoLOG FlexPen 100UNIT/ML SC SOPN | DIABETIC THERAPY | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Alogliptin-metFORMIN HCl 12.5-1000MG OR TABS | DIABETIC THERAPY | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Alogliptin Benzoate 25MG OR TABS | DIABETIC THERAPY | Approval | 1 |
| 3951 | UNSPECIFIED | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | No Response | 1 |
| 3956 | UNSPECIFIED | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | Approval | 4 |
| 3956 | UNSPECIFIED | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | No Response | 2 |
| 3961 | UNSPECIFIED | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | Approval | 1 |
| 3956 | GENERAL PRACTICE | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, PSYCHIATRIC | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|--|-------------|-------|
| 3956 | PSYCHIATRY | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | Approval | 1 |
| 3951 | PSYCHIATRY, ADDICTION | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | Approval | 1 |
| 3956 | PSYCHIATRY, ADDICTION | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | Approval | 1 |
| 3961 | PSYCHIATRY, ADDICTION | Vivitrol | ELECTROLYTES & MISCELLANEOUS NUTRIENTS | Approval | 1 |
| 3956 | PHYSICIAN, ENDOCRINOLOGY | sapropterin | ENZYME COFACTOR | Approval | 1 |
| 3956 | PHYSICIAN, ENDOCRINOLOGY | sapropterin | ENZYME COFACTOR | Denial | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Premarin 0.625MG/GM VA CREA | ESTROGENS | No Response | 1 |
| 3963 | UNSPECIFIED | Creon 24000-76000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Creon 3000unit | GASTROINTESTINAL AGENTS | Denial | 1 |
| 3951 | UNSPECIFIED | Creon 36000-114000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Creon 36000unit | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Creon 6000-19000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Denial | 1 |
| 3956 | UNSPECIFIED | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | No Response | 2 |
| 3965 | UNSPECIFIED | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Dexilant 30MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Zenpep 40000-126000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Zenpep 40000unit | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Zenpep 40000unit | GASTROINTESTINAL AGENTS | Denial | 2 |
| 3956 | EMERGENCY MEDICINE | Creon 24000-76000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Creon 36000-114000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Creon 36000unit | GASTROINTESTINAL AGENTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Creon 36000unit | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Creon 36000unit | GASTROINTESTINAL AGENTS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3964 | FAMILY PRACTICE | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Denial | 1 |
| 3967 | FAMILY PRACTICE | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Dexilant 60mg DR Cap (dexlansoprazole) | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 4 |
| 3951 | FAMILY PRACTICE | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 10 |
| 3956 | FAMILY PRACTICE | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 9 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3964 | FAMILY PRACTICE | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Zenpep 40000-126000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3951 | GASTROENTEROLOGY | Alosetron HCl 0.5MG OR TABS | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | GASTROENTEROLOGY | Creon 36000-114000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3951 | GASTROENTEROLOGY | Creon 36000unit | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3951 | GASTROENTEROLOGY | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | GASTROENTEROLOGY | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Approval | 3 |
| 3964 | GASTROENTEROLOGY | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3964 | GASTROENTEROLOGY | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | No Response | 1 |
| 3951 | GASTROENTEROLOGY | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | GASTROENTEROLOGY | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | GASTROENTEROLOGY | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 2 |
| 3964 | GASTROENTEROLOGY | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3961 | GASTROENTEROLOGY | Zenpep 10000-32000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | GASTROENTEROLOGY | Zenpep 20000-63000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | GASTROENTEROLOGY | Zenpep 40000-126000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | HEMATOLOGY | Creon 24000-76000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Creon 12000-38000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Creon 12000-38000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Creon 24000-76000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3964 | INTERNAL MEDICINE | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Approval | 2 |
| 3951 | INTERNAL MEDICINE | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 5 |
| 3956 | INTERNAL MEDICINE | Zenpep 40000-126000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, ADULT HEALTH | Creon 6000-19000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, ADULT HEALTH | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3964 | NURSE PRACTITIONER, ADULT HEALTH | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, ADULT HEALTH | Zenpep 40000-126000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Creon 24000-76000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Creon 6000-19000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Denial | 1 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Dexilant (Dexlansoprazole) 60 MG Oral Capsule | GASTROINTESTINAL AGENTS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Dexilant 30MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 3 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Zenpep 40000unit | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3961 | NURSE PRACTITIONER, PEDIATRIC CARE | Zenpep 3000unit | GASTROINTESTINAL AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|---|---------------------------------|-------------------------------------|-------------|-------|
| 3951 | OPTOMETRIST, UNSPECIFIED | Dexilant 30MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | ORTHOPEDIC SURGERY | Dexilant (dexlansoprazole) | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | OTOLARYNGOLOGY | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC | Dexilant 60MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN, ONCOLOGY, MEDICAL | Dexilant 30MG OR CPDR | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | PULMONARY DISEASES | Zenpep 20000-63000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3956 | PULMONARY DISEASES | Zenpep 40000-126000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3961 | PULMONOLOGY, PEDIATRIC | Zenpep 3000-10000UNIT OR CPEP | GASTROINTESTINAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Myrbetriq (mirabegron) | GENITOURINARY AGENTS | Denial | 2 |
| 3965 | UNSPECIFIED | Myrbetriq (mirabegron) | GENITOURINARY AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Myrbetriq 25MG OR TB24 | GENITOURINARY AGENTS | Denial | 1 |
| 3963 | UNSPECIFIED | Myrbetriq 50MG OR TB24 | GENITOURINARY AGENTS | Approval | 3 |
| 3963 | FAMILY PRACTICE | Myrbetriq (mirabegron) | GENITOURINARY AGENTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Myrbetriq (mirabegron) | GENITOURINARY AGENTS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Myrbetriq 25MG OR TB24 | GENITOURINARY AGENTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Myrbetriq 25MG OR TB24 | GENITOURINARY AGENTS | Approval | 2 |
| 3963 | FAMILY PRACTICE | Myrbetriq 25MG OR TB24 | GENITOURINARY AGENTS | Denial | 1 |
| 3964 | FAMILY PRACTICE | Myrbetriq 50MG OR TB24 | GENITOURINARY AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, ADULT HEALTH | Myrbetriq (mirabegron) | GENITOURINARY AGENTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Myrbetriq 50MG OR TB24 | GENITOURINARY AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, OBSTETRICS & GYNECOLOGY | Myrbetriq (mirabegron) | GENITOURINARY AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, OBSTETRICS & GYNECOLOGY | Myrbetriq (mirabegron) | GENITOURINARY AGENTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, OBSTETRICS & GYNECOLOGY | Myrbetriq 25MG OR TB24 | GENITOURINARY AGENTS | Approval | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Myrbetriq 25MG OR TB24 | GENITOURINARY AGENTS | Approval | 2 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Myrbetriq (mirabegron) | GENITOURINARY AGENTS | Approval | 1 |
| 3951 | UROLOGY | Myrbetriq (mirabegron) | GENITOURINARY AGENTS | Denial | 1 |
| 3963 | UROLOGY | Myrbetriq 50MG OR TB24 | GENITOURINARY AGENTS | Approval | 1 |
| 3961 | UNSPECIFIED | Neulasta | HEMATINICS & BLOOD CELL STIMULATORS | Approval | 1 |
| 3961 | UNSPECIFIED | Neulasta | HEMATINICS & BLOOD CELL STIMULATORS | No Response | 1 |
| 3963 | UNSPECIFIED | Neulasta | HEMATINICS & BLOOD CELL STIMULATORS | Denial | 1 |
| 3963 | UNSPECIFIED | Ziextenzo | HEMATINICS & BLOOD CELL STIMULATORS | Approval | 1 |
| 3963 | UNSPECIFIED | Ziextenzo | HEMATINICS & BLOOD CELL STIMULATORS | Denial | 1 |
| 3964 | NEPHROLOGY / RENAL MEDICINE | Aranesp | HEMATINICS & BLOOD CELL STIMULATORS | Approval | 1 |
| 3964 | NEPHROLOGY / RENAL MEDICINE | Aranesp | HEMATINICS & BLOOD CELL STIMULATORS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|----------------------------|-------------|-------|
| 3963 | UNSPECIFIED | Retacrit | HEMATOPOIETIC AGENT | Approval | 1 |
| 3956 | NEPHROLOGY / RENAL MEDICINE | Retacrit | HEMATOPOIETIC AGENT | Approval | 1 |
| 3965 | NURSE PRACTITIONER, FAMILY HEALTH | Retacrit 10000UNIT/ML IJ SOLN | HEMATOPOIETIC AGENT | Approval | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Retacrit 4000UNIT/ML IJ SOLN | HEMATOPOIETIC AGENT | No Response | 1 |
| 3951 | UNSPECIFIED | Hemlibra | HEMOPHILIA AGENT | Approval | 1 |
| 3951 | UNSPECIFIED | Hemlibra | HEMOPHILIA AGENT | No Response | 1 |
| 3956 | UNSPECIFIED | Hemlibra | HEMOPHILIA AGENT | Approval | 1 |
| 3951 | UNSPECIFIED | Hemlibra 60MG/0.4ML SC SOLN | HEMOPHILIA AGENT | No Response | 1 |
| 3963 | UNSPECIFIED | Hemlibra 60MG/0.4ML SC SOLN | HEMOPHILIA AGENT | No Response | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY, PEDIATRIC | Hemlibra 60MG/0.4ML SC SOLN | HEMOPHILIA AGENT | Approval | 1 |
| 3951 | UNSPECIFIED | Promacta | HEMOSTATICS | Denial | 1 |
| 3956 | UNSPECIFIED | Promacta | HEMOSTATICS | Approval | 1 |
| 3961 | UNSPECIFIED | Promacta | HEMOSTATICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Promacta | HEMOSTATICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | Promacta | HEMOSTATICS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Promacta | HEMOSTATICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Promacta | HEMOSTATICS | Approval | 2 |
| 3963 | PLASTIC SURGERY | PROMACTA 12.5MG TAB | HEMOSTATICS | No Response | 1 |
| 3961 | UNSPECIFIED | Leuprolide Acetate 1MG/0.2ML IJ KIT | HORMONES | No Response | 1 |
| 3963 | UNSPECIFIED | Leuprolide Acetate 1MG/0.2ML IJ KIT | HORMONES | No Response | 1 |
| 3961 | OBSTETRICS & GYNECOLOGY | Leuprolide Acetate 1MG/0.2ML IJ KIT | HORMONES | No Response | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Leuprolide Acetate 1MG/0.2ML IJ KIT | HORMONES | No Response | 1 |
| 3961 | OBSTETRICS & GYNECOLOGY | leuprolide kit | HORMONES | No Response | 1 |
| 3951 | OBSTETRICS & GYNECOLOGY | Oriahnn (elagolix-estradiol-norethindrone acetate) | HORMONES | Denial | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Oriahnn (elagolix-estradiol-norethindrone acetate) | HORMONES | Approval | 1 |
| 3951 | OBSTETRICS & GYNECOLOGY | Oriahnn 300-1-0.5 & 300MG OR CPPK | HORMONES | Approval | 1 |
| 3964 | OBSTETRICS & GYNECOLOGY | Oriahnn 300-1-0.5 & 300MG OR CPPK | HORMONES | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Synarel | HORMONES | Denial | 1 |
| 3951 | UNSPECIFIED | Lupron Depot (1-Month) 3.75MG IM KIT | HORMONES/HORMONE MODIFIERS | No Response | 1 |
| 3956 | UNSPECIFIED | Lupron Depot-PED 30 mg | HORMONES/HORMONE MODIFIERS | Approval | 1 |
| 3956 | UNSPECIFIED | Orilissa 150MG OR TABS | HORMONES/HORMONE MODIFIERS | Approval | 1 |
| 3956 | UNSPECIFIED | Orilissa 150MG OR TABS | HORMONES/HORMONE MODIFIERS | No Response | 1 |
| 3963 | UNSPECIFIED | Orilissa 150MG OR TABS | HORMONES/HORMONE MODIFIERS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Orilissa 150MG OR TABS | HORMONES/HORMONE MODIFIERS | Approval | 1 |
| 3951 | OBSTETRICS & GYNECOLOGY | Lupron Depot (1-Month) 3.75MG IM KIT | HORMONES/HORMONE MODIFIERS | No Response | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Lupron Depot (3-Month) 11.25MG IM KIT | HORMONES/HORMONE MODIFIERS | No Response | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Lupron Depot 3.75 mg | HORMONES/HORMONE MODIFIERS | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-------------------------------------|---------------------------------------|-------------|-------|
| 3956 | OBSTETRICS & GYNECOLOGY | Lupron Depot-3 month 11.25 mg | HORMONES/HORMONE MODIFIERS | Approval | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Lupron Depot-3 month 11.25 mg | HORMONES/HORMONE MODIFIERS | Denial | 1 |
| 3951 | OBSTETRICS & GYNECOLOGY | Orilissa 150MG OR TABS | HORMONES/HORMONE MODIFIERS | Approval | 4 |
| 3951 | OBSTETRICS & GYNECOLOGY | Orilissa 150MG OR TABS | HORMONES/HORMONE MODIFIERS | No Response | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Orilissa 150MG OR TABS | HORMONES/HORMONE MODIFIERS | Approval | 5 |
| 3962 | OBSTETRICS & GYNECOLOGY | Orilissa 150MG OR TABS | HORMONES/HORMONE MODIFIERS | Approval | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Orilissa 150MG OR TABS | HORMONES/HORMONE MODIFIERS | Approval | 2 |
| 3956 | OBSTETRICS & GYNECOLOGY | Orilissa 200MG OR TABS | HORMONES/HORMONE MODIFIERS | Approval | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Orilissa 200MG OR TABS | HORMONES/HORMONE MODIFIERS | Approval | 3 |
| 3956 | UNSPECIFIED | Simvastatin 80MG OR TABS | Hypercholesterolemia | Approval | 1 |
| 3956 | FAMILY PRACTICE | Simvastatin 80MG OR TABS | Hypercholesterolemia | Denial | 2 |
| 3956 | INTERNAL MEDICINE | Simvastatin 80mg | Hypercholesterolemia | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Simvastatin 80MG OR TABS | Hypercholesterolemia | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Simvastatin 80mg | Hypercholesterolemia | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Simvastatin 80mg | Hypercholesterolemia | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Simvastatin 80MG OR TABS | Hypercholesterolemia | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Simvastatin 80MG OR TABS | Hypercholesterolemia | Denial | 2 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Simvastatin 80MG OR TABS | Hypercholesterolemia | No Response | 1 |
| 3963 | UNSPECIFIED | Qbrexza (glycopyrronium) | Hyperhidrosis | Denial | 1 |
| 3951 | UNSPECIFIED | Qbrexza 2.4% EX PADS | Hyperhidrosis | Approval | 1 |
| 3963 | UNSPECIFIED | Qbrexza 2.4% EX PADS | Hyperhidrosis | Approval | 2 |
| 3963 | FAMILY PRACTICE | Qbrexza (glycopyrronium) | Hyperhidrosis | Approval | 1 |
| 3963 | FAMILY PRACTICE | Qbrexza 2.4% EX PADS | Hyperhidrosis | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Qbrexza 2.4% EX PADS | Hyperhidrosis | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Qbrexza 2.4% Pads | Hyperhidrosis | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Qbrexza 2.4% EX PADS | Hyperhidrosis | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | qbrexza 2.4% towelette | Hyperhidrosis | Approval | 1 |
| 3963 | FAMILY PRACTICE | Velphoro (sucroferric oxyhydroxide) | Hyperphosphatemia | No Response | 1 |
| 3963 | GENERAL PRACTICE | Velphoro (sucroferric oxyhydroxide) | Hyperphosphatemia | No Response | 1 |
| 3963 | NEPHROLOGY / RENAL MEDICINE | Velphoro (sucroferric oxyhydroxide) | Hyperphosphatemia | Approval | 1 |
| 3964 | NEPHROLOGY / RENAL MEDICINE | Velphoro (sucroferric oxyhydroxide) | Hyperphosphatemia | Approval | 1 |
| 3963 | NEPHROLOGY / RENAL MEDICINE | Velphoro 500MG OR CHEW | Hyperphosphatemia | Approval | 1 |
| 3964 | NEPHROLOGY / RENAL MEDICINE | Velphoro 500MG OR CHEW | Hyperphosphatemia | No Response | 1 |
| 3963 | PEDIATRICS | Velphoro (sucroferric oxyhydroxide) | Hyperphosphatemia | No Response | 1 |
| 3963 | PSYCHIATRY | Velphoro (sucroferric oxyhydroxide) | Hyperphosphatemia | No Response | 1 |
| 3951 | UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 4 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------------------|-------------|-------|
| 3951 | UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 2 |
| 3956 | UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 6 |
| 3956 | UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 9 |
| 3956 | UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 5 |
| 3963 | UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 9 |
| 3963 | UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 5 |
| 3963 | UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 4 |
| 3965 | UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | UNSPECIFIED | DUPIXENT 300MG/2ML PEN 2X2ML | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | UNSPECIFIED | DUPIXENT 300MG/2ML PEN 2X2ML | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 2 |
| 3963 | UNSPECIFIED | DUPIXENT 300MG/2ML PEN 2X2ML | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | UNSPECIFIED | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | UNSPECIFIED | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 2 |
| 3963 | UNSPECIFIED | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | UNSPECIFIED | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 2 |
| 3951 | UNSPECIFIED | dupixent pen 300 mg/2 mLmg/ml pen injector | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | ALLERGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | ALLERGY & IMMUNOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | ALLERGY & IMMUNOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | ALLERGY & IMMUNOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 3 |
| 3962 | ALLERGY & IMMUNOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 2 |
| 3964 | ALLERGY & IMMUNOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | ALLERGY & IMMUNOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3964 | ALLERGY & IMMUNOLOGY | Dupixent 200MG/1.14ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | ALLERGY & IMMUNOLOGY | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | ALLERGY & IMMUNOLOGY | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 4 |
| 3963 | ALLERGY & IMMUNOLOGY | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | ALLERGY & IMMUNOLOGY | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | ALLERGY & IMMUNOLOGY | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | DERMATOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 5 |
| 3951 | DERMATOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 3 |
| 3956 | DERMATOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 5 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-------------------------------|---------------------------------------|-------------|-------|
| 3956 | DERMATOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 1 |
| 3956 | DERMATOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 2 |
| 3963 | DERMATOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 4 |
| 3963 | DERMATOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 2 |
| 3963 | DERMATOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 5 |
| 3963 | DERMATOLOGY | DUPIXENT 300MG/2ML PEN 2X2ML | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 2 |
| 3951 | DERMATOLOGY | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 2 |
| 3956 | DERMATOLOGY | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 2 |
| 3961 | DERMATOLOGY | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | DERMATOLOGY | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | DERMATOLOGY | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | DERMATOLOGY | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 1 |
| 3964 | INTERNAL MEDICINE | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, ACUTE CARE | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 2 |
| 3963 | NURSE PRACTITIONER, ACUTE CARE | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3963 | NURSE PRACTITIONER, ADULT HEALTH | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, ADULT HEALTH | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 1 |
| 3965 | NURSE PRACTITIONER, FAMILY HEALTH | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3965 | NURSE PRACTITIONER, FAMILY HEALTH | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3963 | NURSE PRACTITIONER, PEDIATRIC CARE | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, PEDIATRIC CARE | Dupixent 200MG/1.14ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | OTOLARYNGOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 3 |
| 3963 | OTOLARYNGOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 3 |
| 3963 | OTOLARYNGOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 2 |
| 3963 | OTOLARYNGOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3965 | OTOLARYNGOLOGY | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | OTOLARYNGOLOGY | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3965 | OTOLARYNGOLOGY | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | OTOLARYNGOLOGY | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | PEDIATRICS | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3951 | PEDIATRICS | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-------------------------------|---------------------------------------|-------------|-------|
| 3956 | PEDIATRICS | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PEDIATRICS | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | PEDIATRICS | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 2 |
| 3956 | PEDIATRICS | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3963 | PEDIATRICS | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | PEDIATRICS | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 5 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 2 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 4 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 6 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 6 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 2 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 1 |
| 3965 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3967 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | DUPIXENT 300MG/2ML PEN 2X2ML | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 3 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | DUPIXENT 300MG/2ML PEN 2X2ML | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 2 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 2 |
| 3951 | PHYSICIAN, ALLERGY & IMMUNOLOGY, PEDIATRIC | Dupixent 200MG/1.14ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3951 | PULMONARY DISEASES | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PULMONARY DISEASES | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3956 | PULMONARY DISEASES | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 2 |
| 3956 | PULMONARY DISEASES | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3961 | PULMONARY DISEASES | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3961 | PULMONARY DISEASES | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Denial | 1 |
| 3963 | PULMONARY DISEASES | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | Approval | 1 |
| 3963 | PULMONARY DISEASES | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3967 | PULMONARY DISEASES | Dupixent | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3963 | PULMONARY DISEASES | Dupixent 200MG/1.14ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------------------|-------------|-------|
| 3961 | PULMONARY DISEASES | Dupixent 300MG/2ML SC SOPN | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3963 | PULMONARY DISEASES | Dupixent 300MG/2ML SC SOSY | IMMUNOGLOBULINS/DERMATOLOGICAL AGENTS | No Response | 1 |
| 3956 | UNSPECIFIED | Cosentyx (300 MG Dose) 150MG/ML SC SOSY | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | UNSPECIFIED | COSENTYX 150MG/ML INJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | UNSPECIFIED | COSENTYX 300DOSE INJ | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | UNSPECIFIED | Cosentyx Sensoready (300 MG) 150MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | UNSPECIFIED | COSENTYX SENSOREADY PEN 150MG/ML INJ | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | UNSPECIFIED | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3951 | UNSPECIFIED | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | UNSPECIFIED | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3956 | UNSPECIFIED | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 4 |
| 3956 | UNSPECIFIED | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3956 | UNSPECIFIED | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3961 | UNSPECIFIED | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 7 |
| 3963 | UNSPECIFIED | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 11 |
| 3951 | UNSPECIFIED | Enbrel SureClick 50MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | UNSPECIFIED | Enbrel SureClick 50MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3963 | UNSPECIFIED | Enbrel SureClick 50MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3951 | UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 5 |
| 3951 | UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 6 |
| 3951 | UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 14 |
| 3956 | UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 13 |
| 3956 | UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 5 |
| 3961 | UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3961 | UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 12 |
| 3963 | UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 17 |
| 3963 | UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3964 | UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3965 | UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3964 | UNSPECIFIED | Humira 40MG/0.4ML SC PSKT | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | Humira 40MG/0.8ML SC PSKT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | UNSPECIFIED | Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3956 | UNSPECIFIED | Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3951 | UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3956 | UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3961 | UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3962 | UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3963 | UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3951 | UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3956 | UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3956 | UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3963 | UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3956 | UNSPECIFIED | Humira Ped. Crohns Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | Humira Ped. Crohns Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | UNSPECIFIED | Humira Ped. Crohn's Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3962 | UNSPECIFIED | Humira Ped. Crohn's Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3965 | UNSPECIFIED | Humira Ped. Crohn's Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3951 | UNSPECIFIED | HUMIRA PEN 40 MG/0.4ML NO CITR | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | HUMIRA PEN 40/0.4ML INJ | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | UNSPECIFIED | Humira Pen 40MG/0.4ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | UNSPECIFIED | Humira Pen 40MG/0.4ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | UNSPECIFIED | Humira Pen 40MG/0.4ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3961 | UNSPECIFIED | Humira Pen 40MG/0.8ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | UNSPECIFIED | Humira Pen-Ps/UV/Adol HS Start 40MG/0.8ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | UNSPECIFIED | Humira Pen-Ps/UV/Adol HS Start 40MG/0.8ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | UNSPECIFIED | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3956 | UNSPECIFIED | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 4 |
| 3963 | UNSPECIFIED | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | UNSPECIFIED | Kevzara | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | UNSPECIFIED | Otezla 10 & 20 & 30MG OR TBPK | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 4 |
| 3956 | UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3962 | UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3963 | UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3964 | UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3965 | UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3964 | UNSPECIFIED | Otezla 30MG OR TABS | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | Otezla Starter 10 mg (4)-20 mg (4)-30 mg(47) tablets in a dose pack | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | UNSPECIFIED | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | UNSPECIFIED | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | UNSPECIFIED | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | UNSPECIFIED | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3956 | UNSPECIFIED | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3963 | UNSPECIFIED | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | UNSPECIFIED | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3963 | UNSPECIFIED | STELARA 45MG/0.5 INJ | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | UNSPECIFIED | Stelara IV + Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | Stelara SQ | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | UNSPECIFIED | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | UNSPECIFIED | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | UNSPECIFIED | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | UNSPECIFIED | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 5 |
| 3956 | UNSPECIFIED | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | UNSPECIFIED | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3963 | UNSPECIFIED | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 5 |
| 3963 | UNSPECIFIED | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3963 | UNSPECIFIED | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3964 | UNSPECIFIED | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | UNSPECIFIED | TALTZ 80 MG/ML AUTO INJ 1ML | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | UNSPECIFIED | Taltz 80MG/ML SC SOSY | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3956 | UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3961 | UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3963 | UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | No Response | 4 |
| 3964 | UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3964 | UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | UNSPECIFIED | TREMFYA 100 MG/ML ONE-PRESS | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | UNSPECIFIED | Tremfya 100MG/ML SC SOPN | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3956 | UNSPECIFIED | Tremfya 100MG/ML SC SOPN | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | UNSPECIFIED | Tremfya 100MG/ML SC SOPN | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | UNSPECIFIED | Tremfya 100MG/ML SC SOPN | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | UNSPECIFIED | Tremfya 100MG/ML SC SOPN | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | UNSPECIFIED | Tremfya 100MG/ML SC SOSY | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | Xeljanz 10 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3963 | UNSPECIFIED | Xeljanz 5 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3964 | UNSPECIFIED | Xeljanz 5 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | UNSPECIFIED | Xeljanz 5MG OR TABS | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | UNSPECIFIED | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | UNSPECIFIED | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | UNSPECIFIED | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | UNSPECIFIED | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3962 | UNSPECIFIED | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | UNSPECIFIED | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | UNSPECIFIED | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | CLINICAL NURSE SPECIALIST, FAMILY HEALTH | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | CLINICAL NURSE SPECIALIST, FAMILY HEALTH | Humira Crohn?s/UC/HS Starter Pack + Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | DERMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | DERMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | DERMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3951 | DERMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | DERMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | DERMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 4 |
| 3956 | DERMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | DERMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3963 | DERMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3963 | DERMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | DERMATOLOGY | Humira Crohn?s/UC/HS Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | DERMATOLOGY | Humira Pen-Psor/Uveit Starter 80 MG/0.8ML &40MG/0.4ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | DERMATOLOGY | HUMIRA PS/UV/ADOL HS KIT CF | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | DERMATOLOGY | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | DERMATOLOGY | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | DERMATOLOGY | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3963 | DERMATOLOGY | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | DERMATOLOGY | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | DERMATOLOGY | Otezla 10 & 20 & 30MG OR TBPK | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | DERMATOLOGY | Otezla 10 & 20 & 30MG OR TBPK | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | DERMATOLOGY | OTEZLA 30 MG TABLET 60 | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | DERMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | DERMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3956 | DERMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | DERMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3961 | DERMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | DERMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 4 |
| 3963 | DERMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 4 |
| 3963 | DERMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3964 | DERMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3964 | DERMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | DERMATOLOGY | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | DERMATOLOGY | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3961 | DERMATOLOGY | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | DERMATOLOGY | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | DERMATOLOGY | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3964 | DERMATOLOGY | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3963 | DERMATOLOGY | Stelara 45MG/0.5ML SC SOSY | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | DERMATOLOGY | Stelara IV + Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | DERMATOLOGY | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | DERMATOLOGY | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | DERMATOLOGY | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | DERMATOLOGY | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3961 | DERMATOLOGY | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | DERMATOLOGY | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | DERMATOLOGY | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3964 | DERMATOLOGY | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3964 | DERMATOLOGY | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | DERMATOLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | DERMATOLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3963 | DERMATOLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | DERMATOLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3964 | DERMATOLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | DERMATOLOGY | Taltz 80MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | DERMATOLOGY | Taltz 80MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3956 | DERMATOLOGY | Taltz 80MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3951 | DERMATOLOGY | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3956 | DERMATOLOGY | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 7 |
| 3956 | DERMATOLOGY | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3956 | DERMATOLOGY | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3962 | DERMATOLOGY | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | DERMATOLOGY | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 7 |
| 3963 | DERMATOLOGY | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3964 | DERMATOLOGY | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3964 | DERMATOLOGY | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | DERMATOLOGY | TREMFYA 100MG/ML PEN INJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | DERMATOLOGY | Tremfya 100MG/ML SC SOPN | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | DERMATOLOGY | Tremfya 100MG/ML SC SOPN | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | DERMATOLOGY | Tremfya 100MG/ML SC SOPN | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3961 | DERMATOLOGY | Tremfya 100MG/ML SC SOSY | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | DERMATOLOGY | Xeljanz XR 22 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3961 | EMERGENCY MEDICINE | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3963 | FAMILY PRACTICE | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3963 | FAMILY PRACTICE | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3963 | FAMILY PRACTICE | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Enbrel 50MG/ML SC SOSY | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Enbrel 50MG/ML SC SOSY | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | FAMILY PRACTICE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3956 | FAMILY PRACTICE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3963 | FAMILY PRACTICE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3965 | FAMILY PRACTICE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3956 | FAMILY PRACTICE | Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Humira Crohn?s/UC/HS Starter Pack + Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3961 | FAMILY PRACTICE | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | FAMILY PRACTICE | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3951 | GASTROENTEROLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 4 |
| 3951 | GASTROENTEROLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3956 | GASTROENTEROLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 7 |
| 3956 | GASTROENTEROLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3956 | GASTROENTEROLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 4 |
| 3961 | GASTROENTEROLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3961 | GASTROENTEROLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3963 | GASTROENTEROLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 7 |
| 3963 | GASTROENTEROLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3963 | GASTROENTEROLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3964 | GASTROENTEROLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3965 | GASTROENTEROLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3965 | GASTROENTEROLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | GASTROENTEROLOGY | Humira 40MG/0.4ML SC PSKT | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | GASTROENTEROLOGY | Humira Crohn?s/UC/HS Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | GASTROENTEROLOGY | Humira Crohn?s/UC/HS Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3956 | GASTROENTEROLOGY | Humira Crohn?s/UC/HS Starter Pack + Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3963 | GASTROENTEROLOGY | Humira Crohn?s/UC/HS Starter Pack + Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | GASTROENTEROLOGY | Humira Pen-CD/UC/HS Starter 80MG/0.8ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | GASTROENTEROLOGY | Humira Pen-CD/UC/HS Starter 80MG/0.8ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | GASTROENTEROLOGY | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3956 | GASTROENTEROLOGY | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | GASTROENTEROLOGY | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3963 | GASTROENTEROLOGY | Stelara 90MG/ML SC SOSY | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | GASTROENTEROLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3951 | GASTROENTEROLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | GASTROENTEROLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 5 |
| 3956 | GASTROENTEROLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3956 | GASTROENTEROLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | GASTROENTEROLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 5 |
| 3963 | GASTROENTEROLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 3 |
| 3963 | GASTROENTEROLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3963 | GASTROENTEROLOGY | Xeljanz 10 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | GASTROENTEROLOGY | Xeljanz 5 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3964 | GASTROENTEROLOGY | Xeljanz 5 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | GASTROENTEROLOGY, PEDIATRIC | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | GENERAL PRACTICE | Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3956 | INTERNAL MEDICINE | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 5 |
| 3961 | INTERNAL MEDICINE | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Enbrel Mini (Etanercept) 50 MG/ML Subcutaneous Milliliter | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | INTERNAL MEDICINE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3956 | INTERNAL MEDICINE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3961 | INTERNAL MEDICINE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3961 | INTERNAL MEDICINE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3962 | INTERNAL MEDICINE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Humira 40MG/0.8ML SC PSKT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Humira Pen 40MG/0.4ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Humira Pen 80MG/0.8ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Kevzara | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Kevzara | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3961 | INTERNAL MEDICINE | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | TALTZ 80 MG/ML AUTO INJ 1ML | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Taltz 80MG/ML SC SOSY | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3961 | INTERNAL MEDICINE | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3961 | INTERNAL MEDICINE | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | INTERNAL MEDICINE | Xeljanz 5 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | NURSE PRACTITIONER, ACUTE CARE | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Enbrel 25mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Enbrel Mini 50 mg/mL (1 mL) subcutaneous cartridge | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Enbrel Mini 50MG/ML SC SOCT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Humira Crohn?s/UC/HS Starter Pack + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Humira Pediatric Crohns Start 80 MG/0.8ML &40MG/0.4ML SC PSKT | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Humira Pen-Psor/Uveit Starter 80 MG/0.8ML &40MG/0.4ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3962 | NURSE PRACTITIONER, FAMILY HEALTH | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3962 | NURSE PRACTITIONER, FAMILY HEALTH | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Otezla 30MG OR TABS | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Tremfya 100MG/ML SC SOPN | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Humira Pen-Psor/Uveit Starter 80 MG/0.8ML &40MG/0.4ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Humira Pen-Psor/Uveit Starter 80 MG/0.8ML &40MG/0.4ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Taltz 80MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Taltz 80MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Taltz 80MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 4 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Xeljanz 5 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3956 | PEDIATRICS | Humira 40MG/0.8ML SC PSKT | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | PEDIATRICS | Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Cosentyx 150 mg/mL subcutaneous syringe | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Humira Crohn?s/UC/HS Starter Pack + Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 4 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Stelara 90MG/ML SC SOSY | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Stelara SQ 45mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | TALTZ 80 MG/ML AUTO INJ 1ML | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | TALTZ 80 MG/ML AUTO INJ 1ML | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | TALTZ 80MG/ML INJ | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | TALTZ 80MG/ML INJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | TALTZ 80MG/ML INJ | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Taltz 80MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---------------------------------------|---------------------------|-------------|-------|
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Taltz 80MG/ML SC SOSY | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 5 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tremfya 100MG/ML SC SOPN | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3965 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tremfya 100MG/ML SC SOPN | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | PSYCHIATRY | Humira 80 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | RHEUMATOLOGY | Actemra ACTPen 162MG/0.9ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | RHEUMATOLOGY | Actemra IV 400 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | RHEUMATOLOGY | Actemra SQ 162mg syringe/autoinjector | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | RHEUMATOLOGY | Enbrel 25mg + Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | RHEUMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 5 |
| 3951 | RHEUMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 5 |
| 3951 | RHEUMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3956 | RHEUMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 17 |
| 3956 | RHEUMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 7 |
| 3956 | RHEUMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 4 |
| 3961 | RHEUMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3961 | RHEUMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | RHEUMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 15 |
| 3963 | RHEUMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 8 |
| 3963 | RHEUMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 4 |
| 3964 | RHEUMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 4 |
| 3964 | RHEUMATOLOGY | Enbrel 50mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | RHEUMATOLOGY | Enbrel Mini 50MG/ML SC SOCT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3964 | RHEUMATOLOGY | Enbrel Mini 50MG/ML SC SOCT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | RHEUMATOLOGY | Enbrel SureClick 50MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 3 |
| 3956 | RHEUMATOLOGY | Enbrel SureClick 50MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 7 |
| 3961 | RHEUMATOLOGY | Enbrel SureClick 50MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3963 | RHEUMATOLOGY | Enbrel SureClick 50MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3964 | RHEUMATOLOGY | Enbrel SureClick 50MG/ML SC SOAJ | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3951 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 9 |
| 3951 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3951 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 20 |
| 3956 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 9 |
| 3956 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 8 |
| 3961 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3961 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3962 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3962 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 16 |
| 3963 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 6 |
| 3963 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 9 |
| 3964 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 4 |
| 3964 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3965 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3965 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3965 | RHEUMATOLOGY | Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | RHEUMATOLOGY | Humira 40MG/0.4ML SC PSKT | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | RHEUMATOLOGY | Humira 40MG/0.4ML SC PSKT | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3956 | RHEUMATOLOGY | Humira 40MG/0.4ML SC PSKT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | RHEUMATOLOGY | Humira Pen (Adalimumab) 40 MG/0.8ML Subcutaneous Kit | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3964 | RHEUMATOLOGY | HUMIRA PEN 40 MG/0.4ML NO CITR | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | RHEUMATOLOGY | Humira Pen 40MG/0.4ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3956 | RHEUMATOLOGY | Humira Pen 40MG/0.4ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | RHEUMATOLOGY | Humira Pen 40MG/0.4ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | RHEUMATOLOGY | Humira Pen 40MG/0.4ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3951 | RHEUMATOLOGY | Humira Pen 40MG/0.8ML SC PNKT | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | RHEUMATOLOGY | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | RHEUMATOLOGY | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 4 |
| 3961 | RHEUMATOLOGY | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | RHEUMATOLOGY | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | RHEUMATOLOGY | Humira PsO/UV/Adolescent HS + Humira 40 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3951 | RHEUMATOLOGY | Kevzara | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | RHEUMATOLOGY | Kevzara | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | RHEUMATOLOGY | Kevzara | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-----------------------------------|---------------------------|-------------|-------|
| 3963 | RHEUMATOLOGY | Kevzara | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3963 | RHEUMATOLOGY | Kevzara | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | RHEUMATOLOGY | Kevzara | IMMUNOSUPPRESSIVES/DMARDS | No Response | 6 |
| 3964 | RHEUMATOLOGY | Kevzara | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3964 | RHEUMATOLOGY | Kevzara | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | RHEUMATOLOGY | Kevzara 200MG/1.14ML SC SOSY | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | RHEUMATOLOGY | Otezla 10 & 20 & 30MG OR TBPK | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | RHEUMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | RHEUMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | RHEUMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3963 | RHEUMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | RHEUMATOLOGY | Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | RHEUMATOLOGY | Otezla 30MG OR TABS | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | RHEUMATOLOGY | Otezla 30MG OR TABS | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | RHEUMATOLOGY | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | RHEUMATOLOGY | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3963 | RHEUMATOLOGY | Otezla Starter Pack + Otezla 30mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | RHEUMATOLOGY | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3956 | RHEUMATOLOGY | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | Denial | 3 |
| 3963 | RHEUMATOLOGY | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | Approval | 7 |
| 3963 | RHEUMATOLOGY | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | Denial | 5 |
| 3963 | RHEUMATOLOGY | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3964 | RHEUMATOLOGY | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3964 | RHEUMATOLOGY | Rinvoq | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | RHEUMATOLOGY | Stelara 90MG/ML SC SOSY | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | RHEUMATOLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3956 | RHEUMATOLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | RHEUMATOLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | RHEUMATOLOGY | Stelara SQ 90mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 2 |
| 3956 | RHEUMATOLOGY | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3964 | RHEUMATOLOGY | Tremfya | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3961 | RHEUMATOLOGY | Xeljanz 5 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3963 | RHEUMATOLOGY | Xeljanz 5 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 2 |
| 3964 | RHEUMATOLOGY | Xeljanz 5 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | RHEUMATOLOGY | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3951 | RHEUMATOLOGY | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3956 | RHEUMATOLOGY | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | RHEUMATOLOGY | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 4 |
| 3963 | RHEUMATOLOGY | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 3 |
| 3963 | RHEUMATOLOGY | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Denial | 1 |
| 3963 | RHEUMATOLOGY | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 2 |
| 3964 | RHEUMATOLOGY | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3964 | RHEUMATOLOGY | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3965 | RHEUMATOLOGY | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3965 | RHEUMATOLOGY | Xeljanz XR 11 mg | IMMUNOSUPPRESSIVES/DMARDS | No Response | 1 |
| 3956 | RHEUMATOLOGY | Xeljanz XR 11MG OR TB24 | IMMUNOSUPPRESSIVES/DMARDS | Approval | 1 |
| 3964 | NEPHROLOGY / RENAL MEDICINE | Jynarque | KIDNEY AGENT | Approval | 1 |
| 3964 | NEPHROLOGY / RENAL MEDICINE | Jynarque 45 mg (AM)/15 mg (PM) tablets | KIDNEY AGENT | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Jynarque | KIDNEY AGENT | Approval | 1 |
| 3963 | UNSPECIFIED | Icosapent Ethyl | LIPOTROPICS | Approval | 1 |
| 3963 | UNSPECIFIED | Icosapent Ethyl | LIPOTROPICS | Denial | 1 |
| 3963 | UNSPECIFIED | Icosapent Ethyl | LIPOTROPICS | No Response | 1 |
| 3965 | UNSPECIFIED | Icosapent Ethyl | LIPOTROPICS | Approval | 1 |
| 3963 | UNSPECIFIED | Icosapent Ethyl 1GM OR CAPS | LIPOTROPICS | Approval | 3 |
| 3963 | UNSPECIFIED | Icosapent Ethyl 1GM OR CAPS | LIPOTROPICS | No Response | 1 |
| 3964 | UNSPECIFIED | Icosapent Ethyl 1GM OR CAPS | LIPOTROPICS | No Response | 1 |
| 3963 | UNSPECIFIED | Nexletol (bempedoic acid) | LIPOTROPICS | Approval | 1 |
| 3963 | UNSPECIFIED | Nexletol (bempedoic acid) | LIPOTROPICS | Denial | 1 |
| 3963 | UNSPECIFIED | Nexlizet 180-10MG OR TABS | LIPOTROPICS | Approval | 1 |
| 3963 | UNSPECIFIED | Omega-3-Acid Cap | LIPOTROPICS | Denial | 1 |
| 3951 | UNSPECIFIED | Praluent | LIPOTROPICS | Denial | 1 |
| 3963 | UNSPECIFIED | Praluent | LIPOTROPICS | Approval | 2 |
| 3963 | UNSPECIFIED | Praluent | LIPOTROPICS | Denial | 6 |
| 3965 | UNSPECIFIED | Praluent | LIPOTROPICS | Denial | 1 |
| 3951 | UNSPECIFIED | Praluent 150MG/ML SC SOAJ | LIPOTROPICS | Denial | 1 |
| 3956 | UNSPECIFIED | Praluent 150MG/ML SC SOAJ | LIPOTROPICS | Denial | 1 |
| 3956 | UNSPECIFIED | Praluent 150MG/ML SC SOAJ | LIPOTROPICS | No Response | 1 |
| 3963 | UNSPECIFIED | Praluent 150MG/ML SC SOAJ | LIPOTROPICS | No Response | 1 |
| 3963 | UNSPECIFIED | Praluent 75MG/ML SC SOAJ | LIPOTROPICS | No Response | 1 |
| 3951 | UNSPECIFIED | Vascepa 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3951 | UNSPECIFIED | Vascepa 1GM OR CAPS | LIPOTROPICS | Denial | 1 |
| 3963 | UNSPECIFIED | Vascepa 1GM OR CAPS | LIPOTROPICS | Approval | 4 |
| 3963 | ALLERGY | Icosapent Ethyl 1GM OR CAPS | LIPOTROPICS | Denial | 2 |
| 3963 | ALLERGY | Omega-3-Acid Cap | LIPOTROPICS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---------------------------------------|---------------------------|-------------|-------|
| 3963 | ALLERGY | Omega-3-acid Ethyl Esters 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3963 | ANESTHESIOLOGY | Praluent | LIPOTROPICS | Approval | 1 |
| 3963 | ANESTHESIOLOGY | Praluent | LIPOTROPICS | Denial | 1 |
| 3962 | CARDIOLOGY | Icosapent Ethyl | LIPOTROPICS | Approval | 1 |
| 3964 | CARDIOLOGY | Icosapent Ethyl | LIPOTROPICS | Approval | 1 |
| 3963 | CARDIOLOGY | Icosapent Ethyl 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3963 | CARDIOLOGY | Nexletol (bempedoic acid) | LIPOTROPICS | Approval | 1 |
| 3963 | CARDIOLOGY | Nexletol (bempedoic acid) | LIPOTROPICS | Denial | 1 |
| 3967 | CARDIOLOGY | Nexletol (bempedoic acid) | LIPOTROPICS | Approval | 1 |
| 3963 | CARDIOLOGY | Nexletol 180MG OR TABS | LIPOTROPICS | Denial | 3 |
| 3964 | CARDIOLOGY | Nexletol 180MG OR TABS | LIPOTROPICS | Approval | 1 |
| 3963 | CARDIOLOGY | Nexlizet (bempedoic acid-ezetimibe) | LIPOTROPICS | Denial | 1 |
| 3967 | CARDIOLOGY | Nexlizet (bempedoic acid-ezetimibe) | LIPOTROPICS | Denial | 1 |
| 3951 | CARDIOLOGY | Nexlizet 180-10MG OR TABS | LIPOTROPICS | Approval | 1 |
| 3967 | CARDIOLOGY | Nexlizet 180-10MG OR TABS | LIPOTROPICS | Denial | 1 |
| 3951 | CARDIOLOGY | Omega-3-acid Ethyl Esters 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3951 | CARDIOLOGY | Praluent | LIPOTROPICS | Approval | 1 |
| 3951 | CARDIOLOGY | Praluent | LIPOTROPICS | Denial | 1 |
| 3951 | CARDIOLOGY | Praluent | LIPOTROPICS | No Response | 1 |
| 3956 | CARDIOLOGY | Praluent | LIPOTROPICS | Approval | 2 |
| 3956 | CARDIOLOGY | Praluent | LIPOTROPICS | Denial | 6 |
| 3956 | CARDIOLOGY | Praluent | LIPOTROPICS | No Response | 2 |
| 3961 | CARDIOLOGY | Praluent | LIPOTROPICS | Denial | 1 |
| 3963 | CARDIOLOGY | Praluent | LIPOTROPICS | Approval | 4 |
| 3963 | CARDIOLOGY | Praluent | LIPOTROPICS | Denial | 8 |
| 3964 | CARDIOLOGY | Praluent | LIPOTROPICS | Approval | 1 |
| 3964 | CARDIOLOGY | Praluent | LIPOTROPICS | No Response | 1 |
| 3956 | CARDIOLOGY | Praluent 75MG/ML SC SOAJ | LIPOTROPICS | No Response | 1 |
| 3951 | CARDIOLOGY | Vascepa 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3956 | CARDIOLOGY, INTERVENTIONAL | Praluent | LIPOTROPICS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Icosapent Ethyl | LIPOTROPICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Icosapent Ethyl 1GM OR CAPS | LIPOTROPICS | Approval | 4 |
| 3963 | FAMILY PRACTICE | Icosapent Ethyl 1GM OR CAPS | LIPOTROPICS | Approval | 3 |
| 3964 | FAMILY PRACTICE | Icosapent Ethyl 1GM OR CAPS | LIPOTROPICS | Approval | 3 |
| 3963 | FAMILY PRACTICE | Nexletol (bempedoic acid) | LIPOTROPICS | Denial | 5 |
| 3964 | FAMILY PRACTICE | Nexletol (bempedoic acid) | LIPOTROPICS | Approval | 1 |
| 3964 | FAMILY PRACTICE | Nexletol (bempedoic acid) | LIPOTROPICS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---------------------------------------|---------------------------|-------------|-------|
| 3951 | FAMILY PRACTICE | Nexletol 180MG OR TABS | LIPOTROPICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Nexletol 180MG OR TABS | LIPOTROPICS | Approval | 3 |
| 3963 | FAMILY PRACTICE | Nexletol 180MG OR TABS | LIPOTROPICS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Nexlizet (bempedoic acid-ezetimibe) | LIPOTROPICS | Denial | 3 |
| 3951 | FAMILY PRACTICE | Nexlizet 180-10MG OR TABS | LIPOTROPICS | Approval | 2 |
| 3963 | FAMILY PRACTICE | Nexlizet 180-10MG OR TABS | LIPOTROPICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Nexlizet 180-10MG OR TABS | LIPOTROPICS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Omega-3-acid Ethyl Esters 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Omega-3-acid Ethyl Esters 1GM OR CAPS | LIPOTROPICS | Approval | 2 |
| 3951 | FAMILY PRACTICE | Praluent | LIPOTROPICS | Denial | 2 |
| 3956 | FAMILY PRACTICE | Praluent | LIPOTROPICS | Denial | 4 |
| 3956 | FAMILY PRACTICE | Praluent | LIPOTROPICS | No Response | 2 |
| 3963 | FAMILY PRACTICE | Praluent | LIPOTROPICS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Praluent 75MG/ML SC SOAJ | LIPOTROPICS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Vascepa (icosapent ethyl) | LIPOTROPICS | No Response | 1 |
| 3951 | FAMILY PRACTICE | Vascepa 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Vascepa 1GM OR CAPS | LIPOTROPICS | Approval | 4 |
| 3964 | FAMILY PRACTICE | Vascepa 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3951 | HOSPITALIST | Praluent | LIPOTROPICS | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Icosapent Ethyl | LIPOTROPICS | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Icosapent Ethyl 1GM OR CAPS | LIPOTROPICS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Icosapent Ethyl 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3964 | INTERNAL MEDICINE | Icosapent Ethyl 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Livalo | LIPOTROPICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Livalo 1mg Tablets | LIPOTROPICS | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Lovaza (omega-3-acid ethyl esters) | LIPOTROPICS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Nexlizet (bempedoic acid-ezetimibe) | LIPOTROPICS | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Nexlizet 180-10MG OR TABS | LIPOTROPICS | Approval | 1 |
| 3964 | INTERNAL MEDICINE | Omega-3-Acid Cap | LIPOTROPICS | Denial | 2 |
| 3951 | INTERNAL MEDICINE | Omega-3-acid Ethyl Esters 1GM OR CAPS | LIPOTROPICS | No Response | 1 |
| 3962 | INTERNAL MEDICINE | Omega-3-acid Ethyl Esters 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3965 | INTERNAL MEDICINE | Omega-3-acid Ethyl Esters 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Praluent | LIPOTROPICS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Praluent | LIPOTROPICS | Denial | 2 |
| 3956 | INTERNAL MEDICINE | Praluent | LIPOTROPICS | No Response | 1 |
| 3961 | INTERNAL MEDICINE | Praluent | LIPOTROPICS | Denial | 2 |
| 3963 | INTERNAL MEDICINE | Praluent | LIPOTROPICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | INTERNAL MEDICINE | Praluent | LIPOTROPICS | Denial | 2 |
| 3964 | INTERNAL MEDICINE | Praluent | LIPOTROPICS | Denial | 3 |
| 3951 | INTERNAL MEDICINE | Praluent 150MG/ML SC SOAJ | LIPOTROPICS | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Praluent 150MG/ML SC SOAJ | LIPOTROPICS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Vascepa 1GM OR CAPS | LIPOTROPICS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Praluent 150MG/ML SC SOAJ | LIPOTROPICS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, ADULT HEALTH | Omega-3-acid Ethyl Esters 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Icosapent Ethyl | LIPOTROPICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Nexletol (bempedoic acid) | LIPOTROPICS | Denial | 2 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Nexlizet (bempedoic acid-ezetimibe) | LIPOTROPICS | Denial | 1 |
| 3965 | NURSE PRACTITIONER, FAMILY HEALTH | Omega-3-Acid Cap | LIPOTROPICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Praluent | LIPOTROPICS | Denial | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Praluent | LIPOTROPICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Praluent | LIPOTROPICS | Denial | 3 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | praluent pen 75 mg/mLmg/ml pen injector | LIPOTROPICS | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Vascepa 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Vascepa 1GM OR CAPS | LIPOTROPICS | Denial | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Icosapent Ethyl 1GM OR CAPS | LIPOTROPICS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Nexletol (bempedoic acid) | LIPOTROPICS | No Response | 1 |
| 3964 | NURSE PRACTITIONER, UNSPECIFIED | Nexletol (bempedoic acid) | LIPOTROPICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Nexletol (Bempedoic Acid) 180 MG Oral Tablet | LIPOTROPICS | No Response | 1 |
| 3964 | NURSE PRACTITIONER, UNSPECIFIED | Nexlizet 180-10MG OR TABS | LIPOTROPICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Omega-3-Acid Cap | LIPOTROPICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Praluent | LIPOTROPICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Praluent | LIPOTROPICS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Praluent 75MG/ML SC SOAJ | LIPOTROPICS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Vascepa (icosapent ethyl) | LIPOTROPICS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, WOMEN'S HEALTH | Vascepa 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, WOMEN'S HEALTH | Vascepa 1GM OR CAPS | LIPOTROPICS | No Response | 1 |
| 3963 | PEDIATRICS | Vascepa 0.5GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Icosapent Ethyl | LIPOTROPICS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Praluent | LIPOTROPICS | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Praluent | LIPOTROPICS | No Response | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Praluent 75MG/ML SC SOAJ | LIPOTROPICS | Denial | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Praluent 75MG/ML SC SOAJ | LIPOTROPICS | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Praluent 75MG/ML SC SOAJ | LIPOTROPICS | No Response | 1 |
| 3951 | PHYSICIAN, ENDOCRINOLOGY | Nexlizet (bempedoic acid-ezetimibe) | LIPOTROPICS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-----------------------------------|---------------------------|-------------|-------|
| 3951 | PHYSICIAN, ENDOCRINOLOGY | Vascepa (icosapent ethyl) | LIPOTROPICS | Approval | 1 |
| 3951 | PHYSICIAN, ENDOCRINOLOGY | Vascepa 1GM OR CAPS | LIPOTROPICS | Approval | 1 |
| 3963 | UNSPECIFIED | Sucraid 8500UNIT/ML OR SOLN | Metabolic Enzymes | Approval | 1 |
| 3951 | UNSPECIFIED | Ubrely 100MG OR TABS | MIGRAINE AGENT | Approval | 2 |
| 3951 | UNSPECIFIED | Ubrely 100MG OR TABS | MIGRAINE AGENT | Denial | 1 |
| 3962 | UNSPECIFIED | Ubrely 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3963 | UNSPECIFIED | Ubrely 100MG OR TABS | MIGRAINE AGENT | Approval | 8 |
| 3963 | UNSPECIFIED | Ubrely 100MG OR TABS | MIGRAINE AGENT | Denial | 3 |
| 3963 | UNSPECIFIED | Ubrely 100MG OR TABS | MIGRAINE AGENT | No Response | 3 |
| 3964 | UNSPECIFIED | Ubrely 100MG OR TABS | MIGRAINE AGENT | Approval | 2 |
| 3965 | UNSPECIFIED | Ubrely 100MG OR TABS | MIGRAINE AGENT | Denial | 1 |
| 3951 | UNSPECIFIED | Ubrely 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3951 | UNSPECIFIED | Ubrely 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 2 |
| 3963 | UNSPECIFIED | Ubrely 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 3 |
| 3963 | UNSPECIFIED | Ubrely 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 4 |
| 3963 | UNSPECIFIED | Ubrely 100mg Tablets (ubrogepant) | MIGRAINE AGENT | No Response | 1 |
| 3964 | UNSPECIFIED | Ubrely 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3967 | UNSPECIFIED | Ubrely 100mg Tablets (ubrogepant) | MIGRAINE AGENT | No Response | 1 |
| 3963 | UNSPECIFIED | Ubrely 50MG OR TABS | MIGRAINE AGENT | Approval | 6 |
| 3963 | UNSPECIFIED | Ubrely 50MG OR TABS | MIGRAINE AGENT | Denial | 2 |
| 3964 | UNSPECIFIED | Ubrely 50MG OR TABS | MIGRAINE AGENT | No Response | 1 |
| 3964 | UNSPECIFIED | Ubrely 50mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3964 | UNSPECIFIED | Ubrely 50mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 1 |
| 3956 | UNSPECIFIED | ZOLMitriptan 2.5MG NA SOLN | MIGRAINE AGENT | Approval | 1 |
| 3963 | UNSPECIFIED | ZOLMitriptan 5MG NA SOLN | MIGRAINE AGENT | Approval | 1 |
| 3951 | ALLERGY | Ubrely 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3962 | ALLERGY | Ubrely 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 1 |
| 3956 | FAMILY PRACTICE | Rizatriptan Benzoate 10MG OR TABS | MIGRAINE AGENT | Approval | 2 |
| 3951 | FAMILY PRACTICE | Ubrely 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3951 | FAMILY PRACTICE | Ubrely 100MG OR TABS | MIGRAINE AGENT | Denial | 1 |
| 3951 | FAMILY PRACTICE | Ubrely 100MG OR TABS | MIGRAINE AGENT | No Response | 1 |
| 3962 | FAMILY PRACTICE | Ubrely 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3963 | FAMILY PRACTICE | Ubrely 100MG OR TABS | MIGRAINE AGENT | Approval | 8 |
| 3963 | FAMILY PRACTICE | Ubrely 100MG OR TABS | MIGRAINE AGENT | Denial | 3 |
| 3963 | FAMILY PRACTICE | Ubrely 100MG OR TABS | MIGRAINE AGENT | No Response | 3 |
| 3964 | FAMILY PRACTICE | Ubrely 100MG OR TABS | MIGRAINE AGENT | Approval | 2 |
| 3963 | FAMILY PRACTICE | UBRELVY 100MG TAB | MIGRAINE AGENT | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3951 | FAMILY PRACTICE | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3951 | FAMILY PRACTICE | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 1 |
| 3963 | FAMILY PRACTICE | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3963 | FAMILY PRACTICE | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 4 |
| 3963 | FAMILY PRACTICE | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | No Response | 1 |
| 3964 | FAMILY PRACTICE | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 1 |
| 3963 | FAMILY PRACTICE | Ubrelyvy 50MG OR TABS | MIGRAINE AGENT | Approval | 7 |
| 3965 | FAMILY PRACTICE | Ubrelyvy 50MG OR TABS | MIGRAINE AGENT | No Response | 1 |
| 3963 | FAMILY PRACTICE | Ubrelyvy 50mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3965 | FAMILY PRACTICE | Ubrelyvy 50mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 1 |
| 3956 | FAMILY PRACTICE | ZOLMitriptan 5MG OR TABS | MIGRAINE AGENT | Denial | 2 |
| 3963 | INTERNAL MEDICINE | Rizatriptan Benzoate 5MG OR TBDP | MIGRAINE AGENT | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Ubrelyvy (Ubrogepant) 100 MG Oral Tablet | MIGRAINE AGENT | No Response | 1 |
| 3951 | INTERNAL MEDICINE | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 2 |
| 3964 | INTERNAL MEDICINE | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3962 | INTERNAL MEDICINE | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Ubrelyvy 50MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3964 | INTERNAL MEDICINE | Ubrelyvy 50MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3964 | INTERNAL MEDICINE | Ubrelyvy 50mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 1 |
| 3967 | INTERNAL MEDICINE | Ubrelyvy 50mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 1 |
| 3951 | NEUROLOGY | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3951 | NEUROLOGY | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | No Response | 1 |
| 3962 | NEUROLOGY | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3963 | NEUROLOGY | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 8 |
| 3964 | NEUROLOGY | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 3 |
| 3965 | NEUROLOGY | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3951 | NEUROLOGY | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 1 |
| 3963 | NEUROLOGY | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3963 | NEUROLOGY | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 1 |
| 3964 | NEUROLOGY | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | No Response | 1 |
| 3965 | NEUROLOGY | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3967 | NEUROLOGY | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 1 |
| 3963 | NEUROLOGY | Ubrelyvy 50MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3963 | NEUROLOGY | Ubrelyvy 50MG OR TABS | MIGRAINE AGENT | Denial | 1 |
| 3963 | NEUROLOGY | Ubrelyvy 50MG OR TABS | MIGRAINE AGENT | No Response | 1 |
| 3964 | NEUROLOGY | Ubrelyvy 50MG OR TABS | MIGRAINE AGENT | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-------------------------------------|---------------------------|-------------|-------|
| 3964 | NEUROLOGY | Ubrelyvy 50mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 1 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Rizatriptan Benzoate 10MG OR TABS | MIGRAINE AGENT | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Rizatriptan Benzoate 10MG OR TABS | MIGRAINE AGENT | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Denial | 3 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 2 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Ubrelyvy 50MG OR TABS | MIGRAINE AGENT | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | UBRELVY 50MG TAB | MIGRAINE AGENT | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Ubrelyvy 50mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3951 | NURSE PRACTITIONER, PRIMARY CARE | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | ubrelyvy 100 mg tablet | MIGRAINE AGENT | No Response | 1 |
| 3962 | NURSE PRACTITIONER, UNSPECIFIED | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 2 |
| 3965 | NURSE PRACTITIONER, UNSPECIFIED | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3964 | NURSE PRACTITIONER, UNSPECIFIED | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3965 | NURSE PRACTITIONER, UNSPECIFIED | Ubrelyvy 100mg Tablets (ubrogepant) | MIGRAINE AGENT | Approval | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Ubrelyvy 50MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3963 | PEDIATRICS | UBRELVY 50MG TAB | MIGRAINE AGENT | Denial | 1 |
| 3962 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Ubrelyvy 100MG OR TABS | MIGRAINE AGENT | Approval | 1 |
| 3951 | UNSPECIFIED | Benlysta | MISCELLANEOUS | Approval | 1 |
| 3963 | UNSPECIFIED | Benlysta | MISCELLANEOUS | Approval | 2 |
| 3963 | UNSPECIFIED | Betaseron | MISCELLANEOUS | Approval | 1 |
| 3961 | UNSPECIFIED | Gilenya | MISCELLANEOUS | Approval | 1 |
| 3956 | UNSPECIFIED | Nucala | MISCELLANEOUS | Approval | 6 |
| 3956 | UNSPECIFIED | Nucala | MISCELLANEOUS | Denial | 1 |
| 3956 | UNSPECIFIED | Nucala | MISCELLANEOUS | No Response | 7 |
| 3963 | UNSPECIFIED | Nucala | MISCELLANEOUS | Denial | 1 |
| 3963 | UNSPECIFIED | Nucala | MISCELLANEOUS | No Response | 1 |
| 3956 | UNSPECIFIED | Prolia | MISCELLANEOUS | No Response | 3 |
| 3961 | UNSPECIFIED | Prolia | MISCELLANEOUS | No Response | 1 |
| 3963 | UNSPECIFIED | Pulmozyme | MISCELLANEOUS | Approval | 2 |
| 3956 | UNSPECIFIED | Xolair | MISCELLANEOUS | Approval | 6 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|------------------------|---------------------------|-------------|-------|
| 3956 | UNSPECIFIED | Xolair | MISCELLANEOUS | No Response | 3 |
| 3961 | UNSPECIFIED | Xolair | MISCELLANEOUS | Approval | 1 |
| 3963 | UNSPECIFIED | Xolair | MISCELLANEOUS | No Response | 3 |
| 3965 | ALLERGY & IMMUNOLOGY | Benlysta 400MG IV SOLR | MISCELLANEOUS | Approval | 1 |
| 3951 | ALLERGY & IMMUNOLOGY | Nucala | MISCELLANEOUS | Approval | 1 |
| 3951 | ALLERGY & IMMUNOLOGY | Nucala | MISCELLANEOUS | Denial | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | Nucala | MISCELLANEOUS | Approval | 1 |
| 3951 | ALLERGY & IMMUNOLOGY | Xolair | MISCELLANEOUS | Denial | 1 |
| 3956 | ALLERGY & IMMUNOLOGY | Xolair | MISCELLANEOUS | Approval | 3 |
| 3956 | ALLERGY & IMMUNOLOGY | Xolair | MISCELLANEOUS | Denial | 3 |
| 3956 | ALLERGY & IMMUNOLOGY | Xolair | MISCELLANEOUS | No Response | 2 |
| 3963 | ALLERGY & IMMUNOLOGY | Xolair | MISCELLANEOUS | Approval | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | Xolair | MISCELLANEOUS | Denial | 2 |
| 3956 | DERMATOLOGY | Xolair | MISCELLANEOUS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Prolia | MISCELLANEOUS | Approval | 4 |
| 3956 | FAMILY PRACTICE | Prolia | MISCELLANEOUS | Denial | 3 |
| 3956 | FAMILY PRACTICE | Prolia | MISCELLANEOUS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Prolia | MISCELLANEOUS | Approval | 2 |
| 3963 | FAMILY PRACTICE | tetrabenazine | MISCELLANEOUS | Approval | 1 |
| 3963 | GENERAL PRACTICE | Prolia | MISCELLANEOUS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Benlysta | MISCELLANEOUS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Benlysta | MISCELLANEOUS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Nucala | MISCELLANEOUS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Nucala | MISCELLANEOUS | Denial | 3 |
| 3963 | INTERNAL MEDICINE | Prolia | MISCELLANEOUS | Denial | 1 |
| 3963 | NEPHROLOGY / RENAL MEDICINE | Sensipar | MISCELLANEOUS | Approval | 1 |
| 3956 | NEUROLOGY | Gilenya | MISCELLANEOUS | Approval | 1 |
| 3961 | NEUROLOGY | Gilenya | MISCELLANEOUS | Approval | 1 |
| 3961 | NEUROLOGY | Gilenya | MISCELLANEOUS | No Response | 1 |
| 3963 | NEUROLOGY | Gilenya | MISCELLANEOUS | Approval | 1 |
| 3965 | NEUROLOGY | Gilenya | MISCELLANEOUS | Approval | 1 |
| 3963 | NEUROLOGY | Glatopa | MISCELLANEOUS | No Response | 1 |
| 3951 | NEUROLOGY | Rebif | MISCELLANEOUS | No Response | 1 |
| 3961 | NEUROLOGY | Rebif | MISCELLANEOUS | No Response | 1 |
| 3963 | NEUROLOGY | Rebif | MISCELLANEOUS | Approval | 1 |
| 3963 | NEUROLOGY | Rebif | MISCELLANEOUS | No Response | 1 |
| 3956 | NEUROLOGY | tetrabenazine | MISCELLANEOUS | Approval | 3 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---------------|---------------------------|-------------|-------|
| 3956 | NEUROLOGY | tetrabenazine | MISCELLANEOUS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, ADULT HEALTH | Xolair | MISCELLANEOUS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, ADULT HEALTH | Xolair | MISCELLANEOUS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Xolair | MISCELLANEOUS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Xolair | MISCELLANEOUS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Xolair | MISCELLANEOUS | Denial | 2 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Benlysta | MISCELLANEOUS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Benlysta | MISCELLANEOUS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Esbriet | MISCELLANEOUS | Approval | 1 |
| 3956 | OTOLARYNGOLOGY | Nucala | MISCELLANEOUS | Denial | 1 |
| 3963 | OTOLARYNGOLOGY | Nucala | MISCELLANEOUS | Denial | 1 |
| 3956 | PEDIATRICS | Nucala | MISCELLANEOUS | No Response | 1 |
| 3963 | PEDIATRICS | Nucala | MISCELLANEOUS | Denial | 1 |
| 3963 | PEDIATRICS | Prolia | MISCELLANEOUS | Approval | 1 |
| 3962 | PEDIATRICS | Pulmozyme | MISCELLANEOUS | Approval | 1 |
| 3956 | PEDIATRICS | Xolair | MISCELLANEOUS | Approval | 1 |
| 3956 | PEDIATRICS | Xolair | MISCELLANEOUS | No Response | 1 |
| 3961 | PEDIATRICS | Xolair | MISCELLANEOUS | Approval | 1 |
| 3965 | PHYSICIAN ASSISTANT, UNSPECIFIED | Rebif | MISCELLANEOUS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Xolair | MISCELLANEOUS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Xolair | MISCELLANEOUS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Xolair | MISCELLANEOUS | Denial | 1 |
| 3963 | PSYCHIATRY | Prolia | MISCELLANEOUS | Approval | 1 |
| 3956 | PULMONARY DISEASES | Esbriet | MISCELLANEOUS | Denial | 1 |
| 3956 | PULMONARY DISEASES | Nucala | MISCELLANEOUS | Approval | 1 |
| 3963 | PULMONARY DISEASES | Nucala | MISCELLANEOUS | Approval | 1 |
| 3951 | PULMONARY DISEASES | Ofev | MISCELLANEOUS | Approval | 1 |
| 3963 | PULMONARY DISEASES | Ofev | MISCELLANEOUS | Approval | 1 |
| 3963 | PULMONARY DISEASES | Ofev | MISCELLANEOUS | Denial | 1 |
| 3963 | PULMONARY DISEASES | Pulmozyme | MISCELLANEOUS | Approval | 1 |
| 3956 | PULMONARY DISEASES | Xolair | MISCELLANEOUS | Denial | 2 |
| 3963 | PULMONARY DISEASES | Xolair | MISCELLANEOUS | Denial | 1 |
| 3951 | RHEUMATOLOGY | Benlysta | MISCELLANEOUS | Denial | 1 |
| 3963 | RHEUMATOLOGY | Benlysta | MISCELLANEOUS | Approval | 3 |
| 3963 | RHEUMATOLOGY | Benlysta | MISCELLANEOUS | Denial | 2 |
| 3956 | RHEUMATOLOGY | Prolia | MISCELLANEOUS | Approval | 1 |
| 3951 | UNSPECIFIED | Aubagio | MULTIPLE SCLEROSIS | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|------------------------------------|---------------------------|-------------|-------|
| 3963 | UNSPECIFIED | Aubagio | MULTIPLE SCLEROSIS | Approval | 2 |
| 3963 | UNSPECIFIED | Aubagio | MULTIPLE SCLEROSIS | No Response | 1 |
| 3963 | UNSPECIFIED | Aubagio 14MG OR TABS | MULTIPLE SCLEROSIS | Approval | 1 |
| 3956 | UNSPECIFIED | dalfampridine ER | MULTIPLE SCLEROSIS | Approval | 3 |
| 3964 | UNSPECIFIED | dalfampridine ER | MULTIPLE SCLEROSIS | Approval | 1 |
| 3964 | UNSPECIFIED | dalfampridine ER | MULTIPLE SCLEROSIS | No Response | 2 |
| 3956 | UNSPECIFIED | Dalfampridine ER 10MG OR TB12 | MULTIPLE SCLEROSIS | Approval | 2 |
| 3956 | UNSPECIFIED | Dalfampridine ER 10MG OR TB12 | MULTIPLE SCLEROSIS | No Response | 1 |
| 3961 | UNSPECIFIED | Dalfampridine ER 10MG OR TB12 | MULTIPLE SCLEROSIS | Approval | 1 |
| 3964 | UNSPECIFIED | Dalfampridine ER 10MG OR TB12 | MULTIPLE SCLEROSIS | No Response | 1 |
| 3963 | UNSPECIFIED | glatiramer acetate 20mg | MULTIPLE SCLEROSIS | No Response | 2 |
| 3951 | UNSPECIFIED | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | No Response | 1 |
| 3956 | UNSPECIFIED | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | Approval | 1 |
| 3963 | UNSPECIFIED | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | Approval | 3 |
| 3963 | UNSPECIFIED | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | No Response | 1 |
| 3965 | UNSPECIFIED | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | No Response | 1 |
| 3963 | UNSPECIFIED | Glatiramer Acetate 40MG/ML SC SOSY | MULTIPLE SCLEROSIS | Approval | 1 |
| 3963 | UNSPECIFIED | Tecfidera 240MG OR CPDR | MULTIPLE SCLEROSIS | No Response | 1 |
| 3963 | UNSPECIFIED | Vumerity | MULTIPLE SCLEROSIS | Approval | 1 |
| 3963 | UNSPECIFIED | Vumerity | MULTIPLE SCLEROSIS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Aubagio | MULTIPLE SCLEROSIS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Copaxone 40mg | MULTIPLE SCLEROSIS | Approval | 1 |
| 3956 | FAMILY PRACTICE | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | No Response | 1 |
| 3956 | NEUROLOGY | Ampyra 10MG OR TB12 | MULTIPLE SCLEROSIS | No Response | 1 |
| 3951 | NEUROLOGY | Aubagio | MULTIPLE SCLEROSIS | Approval | 1 |
| 3956 | NEUROLOGY | Aubagio | MULTIPLE SCLEROSIS | Approval | 3 |
| 3956 | NEUROLOGY | Aubagio | MULTIPLE SCLEROSIS | No Response | 1 |
| 3961 | NEUROLOGY | Aubagio | MULTIPLE SCLEROSIS | Approval | 1 |
| 3963 | NEUROLOGY | Aubagio | MULTIPLE SCLEROSIS | Approval | 2 |
| 3963 | NEUROLOGY | Aubagio | MULTIPLE SCLEROSIS | No Response | 2 |
| 3964 | NEUROLOGY | Aubagio | MULTIPLE SCLEROSIS | Approval | 1 |
| 3956 | NEUROLOGY | Aubagio 14MG OR TABS | MULTIPLE SCLEROSIS | Approval | 1 |
| 3951 | NEUROLOGY | Copaxone 40mg | MULTIPLE SCLEROSIS | Approval | 1 |
| 3963 | NEUROLOGY | Copaxone 40mg | MULTIPLE SCLEROSIS | Approval | 1 |
| 3964 | NEUROLOGY | Copaxone 40mg | MULTIPLE SCLEROSIS | Approval | 1 |
| 3951 | NEUROLOGY | dalfampridine ER | MULTIPLE SCLEROSIS | Approval | 2 |
| 3951 | NEUROLOGY | dalfampridine ER | MULTIPLE SCLEROSIS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|------------------------------------|---------------------------|-------------|-------|
| 3956 | NEUROLOGY | dalfampridine ER | MULTIPLE SCLEROSIS | Approval | 2 |
| 3956 | NEUROLOGY | dalfampridine ER | MULTIPLE SCLEROSIS | No Response | 2 |
| 3963 | NEUROLOGY | dalfampridine ER | MULTIPLE SCLEROSIS | Approval | 1 |
| 3956 | NEUROLOGY | glatiramer acetate 20mg | MULTIPLE SCLEROSIS | Approval | 1 |
| 3951 | NEUROLOGY | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | Approval | 1 |
| 3962 | NEUROLOGY | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | Approval | 1 |
| 3962 | NEUROLOGY | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | Denial | 1 |
| 3963 | NEUROLOGY | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | Approval | 2 |
| 3963 | NEUROLOGY | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | No Response | 2 |
| 3956 | NEUROLOGY | Glatiramer Acetate 40MG/ML SC SOSY | MULTIPLE SCLEROSIS | No Response | 1 |
| 3962 | NEUROLOGY | Glatiramer Acetate 40MG/ML SC SOSY | MULTIPLE SCLEROSIS | No Response | 1 |
| 3963 | NEUROLOGY | Vumerity | MULTIPLE SCLEROSIS | Approval | 1 |
| 3963 | NEUROLOGY | Vumerity | MULTIPLE SCLEROSIS | No Response | 1 |
| 3963 | NEUROLOGY | Vumerity 231MG OR CPDR | MULTIPLE SCLEROSIS | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Copaxone 40mg | MULTIPLE SCLEROSIS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | dalfampridine ER | MULTIPLE SCLEROSIS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | glatiramer acetate 40mg | MULTIPLE SCLEROSIS | No Response | 1 |
| 3951 | UNSPECIFIED | dimethyl fumarate | Multiple Sclerosis | Approval | 1 |
| 3956 | UNSPECIFIED | dimethyl fumarate | Multiple Sclerosis | Approval | 1 |
| 3956 | UNSPECIFIED | dimethyl fumarate | Multiple Sclerosis | No Response | 1 |
| 3963 | UNSPECIFIED | dimethyl fumarate | Multiple Sclerosis | Approval | 3 |
| 3963 | UNSPECIFIED | dimethyl fumarate | Multiple Sclerosis | No Response | 1 |
| 3964 | UNSPECIFIED | dimethyl fumarate | Multiple Sclerosis | Approval | 1 |
| 3964 | UNSPECIFIED | dimethyl fumarate | Multiple Sclerosis | No Response | 1 |
| 3956 | FAMILY PRACTICE | dimethyl fumarate | Multiple Sclerosis | Approval | 1 |
| 3951 | NEUROLOGY | dimethyl fumarate | Multiple Sclerosis | Approval | 3 |
| 3956 | NEUROLOGY | dimethyl fumarate | Multiple Sclerosis | Approval | 1 |
| 3961 | NEUROLOGY | dimethyl fumarate | Multiple Sclerosis | Approval | 1 |
| 3961 | NEUROLOGY | dimethyl fumarate | Multiple Sclerosis | Denial | 1 |
| 3963 | NEUROLOGY | dimethyl fumarate | Multiple Sclerosis | Approval | 1 |
| 3964 | NEUROLOGY | dimethyl fumarate | Multiple Sclerosis | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | dimethyl fumarate | Multiple Sclerosis | No Response | 2 |
| 3963 | UNSPECIFIED | Kesimpta | MULTIPLE SCLEROSIS AGENT | Approval | 1 |
| 3963 | UNSPECIFIED | Kesimpta | MULTIPLE SCLEROSIS AGENT | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-----------------------------|---------------------------|-------------|-------|
| 3965 | UNSPECIFIED | Kesimpta | MULTIPLE SCLEROSIS AGENT | Approval | 1 |
| 3963 | UNSPECIFIED | Kesimpta 20MG/0.4ML SC SOAJ | MULTIPLE SCLEROSIS AGENT | No Response | 1 |
| 3965 | UNSPECIFIED | Kesimpta 20MG/0.4ML SC SOAJ | MULTIPLE SCLEROSIS AGENT | No Response | 1 |
| 3956 | UNSPECIFIED | Zeposia | MULTIPLE SCLEROSIS AGENT | Denial | 1 |
| 3964 | UNSPECIFIED | Zeposia | MULTIPLE SCLEROSIS AGENT | Approval | 1 |
| 3964 | UNSPECIFIED | Zeposia | MULTIPLE SCLEROSIS AGENT | No Response | 1 |
| 3962 | UNSPECIFIED | Zeposia 0.92MG OR CAPS | MULTIPLE SCLEROSIS AGENT | Approval | 1 |
| 3965 | NEUROLOGY | Kesimpta | MULTIPLE SCLEROSIS AGENT | Approval | 1 |
| 3965 | NEUROLOGY | Kesimpta 20MG/0.4ML SC SOAJ | MULTIPLE SCLEROSIS AGENT | No Response | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Kesimpta | MULTIPLE SCLEROSIS AGENT | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Kesimpta | MULTIPLE SCLEROSIS AGENT | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Kesimpta 20MG/0.4ML SC SOAJ | MULTIPLE SCLEROSIS AGENT | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Kesimpta 20MG/0.4ML SC SOAJ | MULTIPLE SCLEROSIS AGENT | No Response | 1 |
| 3964 | UNSPECIFIED | Botox | MUSCLE RELAXANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Botox 200UNIT IJ SOLR | MUSCLE RELAXANTS | Approval | 1 |
| 3964 | UNSPECIFIED | Botox 200UNIT IJ SOLR | MUSCLE RELAXANTS | Denial | 1 |
| 3965 | UNSPECIFIED | Botox 200UNIT IJ SOLR | MUSCLE RELAXANTS | Approval | 1 |
| 3965 | DERMATOLOGY | Botox 100UNIT IJ SOLR | MUSCLE RELAXANTS | Approval | 1 |
| 3963 | NEUROLOGY | Botox | MUSCLE RELAXANTS | Approval | 2 |
| 3963 | NEUROLOGY | Botox | MUSCLE RELAXANTS | Denial | 1 |
| 3963 | NEUROLOGY | Botox | MUSCLE RELAXANTS | No Response | 1 |
| 3963 | NEUROLOGY | Botox 100UNIT IJ SOLR | MUSCLE RELAXANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Sunosi (solriamfetol) | NARCOLEPSY AGENTS | Denial | 1 |
| 3961 | UNSPECIFIED | Sunosi 75MG OR TABS | NARCOLEPSY AGENTS | Approval | 1 |
| 3965 | UNSPECIFIED | Xyrem 500MG/ML OR SOLN | NARCOLEPSY AGENTS | No Response | 1 |
| 3951 | FAMILY PRACTICE | Sunosi (solriamfetol) | NARCOLEPSY AGENTS | Denial | 1 |
| 3963 | NEUROLOGY | Sunosi 150MG OR TABS | NARCOLEPSY AGENTS | Approval | 1 |
| 3963 | NEUROLOGY | Xyrem 500MG/ML OR SOLN | NARCOLEPSY AGENTS | Approval | 2 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Sunosi 150MG OR TABS | NARCOLEPSY AGENTS | Approval | 1 |
| 3962 | NURSE PRACTITIONER, FAMILY HEALTH | Sunosi 75MG OR TABS | NARCOLEPSY AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Sunosi 150MG OR TABS | NARCOLEPSY AGENTS | Approval | 1 |
| 3963 | PSYCHIATRY | Xyrem 500MG/ML OR SOLN | NARCOLEPSY AGENTS | Approval | 1 |
| 3964 | PULMONARY DISEASES | Sunosi (solriamfetol) | NARCOLEPSY AGENTS | Approval | 1 |
| 3965 | PULMONARY DISEASES | Sunosi 150MG OR TABS | NARCOLEPSY AGENTS | Approval | 1 |
| 3963 | PULMONARY DISEASES | Xyrem 500MG/ML OR SOLN | NARCOLEPSY AGENTS | Approval | 1 |
| 3964 | PULMONARY DISEASES | Xyrem 500MG/ML OR SOLN | NARCOLEPSY AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | UNSPECIFIED | Acetaminophen-Codeine #3 (Acetaminophen w/ Codeine) 300-30 MG Oral Tablet | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | UNSPECIFIED | Acetaminophen-Codeine #3 300-30MG OR TABS | NARCOTIC ANALGESICS | Approval | 4 |
| 3963 | UNSPECIFIED | Acetaminophen-Codeine #3 300-30MG OR TABS | NARCOTIC ANALGESICS | Approval | 3 |
| 3956 | UNSPECIFIED | Acetaminophen-Codeine #4 300-60MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Acetaminophen-Codeine (Acetaminophen w/ Codeine) 120-12 MG/5ML Oral Milliliter | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | UNSPECIFIED | Acetaminophen-Codeine (Acetaminophen w/ Codeine) 300-30 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | UNSPECIFIED | APAP-Codeine Tab 300-30 mg | NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | UNSPECIFIED | APAP-Codeine Tab 300-30 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Belbuca 150MCG BU FILM | NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | UNSPECIFIED | Belbuca 150mcg Buccal Film (buprenorphine) | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | UNSPECIFIED | Belbuca 300MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Belbuca 450MCG BU FILM | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | UNSPECIFIED | Belbuca 600MCG BU FILM | NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | UNSPECIFIED | Belbuca 600MCG BU FILM | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | UNSPECIFIED | Belbuca 750MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Belbuca 900mcg Buccal Film (buprenorphine) | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Butalbital-APAP-Caffeine 50-325-40MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Butalbital-Aspirin-Caffeine 50-325-40MG OR CAPS | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | UNSPECIFIED | Butrans 10MCG/HR TD PTWK | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Butrans 10MCG/HR TD PTWK | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | UNSPECIFIED | fentaNYL 100MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | fentaNYL 100MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | fentaNYL 12MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | fentaNYL 25MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Fentanyl 50mcg/hr Transdermal Patch | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | FENTANYL 75MCG/HR DIS | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | UNSPECIFIED | fentaNYL 75MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | UNSPECIFIED | hydrocodone 10 mg-acetaminophen 325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | UNSPECIFIED | hydrocodone 5 mg-acetaminophen 325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | UNSPECIFIED | HYDROcodone-Acetaminophen 10-325 MG Oral Tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | HYDROcodone-Acetaminophen 10-325 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | UNSPECIFIED | HYDROcodone-Acetaminophen 10-325 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3964 | UNSPECIFIED | HYDROcodone-Acetaminophen 10-325 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 3 |
| 3951 | UNSPECIFIED | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | UNSPECIFIED | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 9 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | UNSPECIFIED | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 4 |
| 3951 | UNSPECIFIED | HYDROcodone-Acetaminophen 5-325 MG Oral Tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | hydrocodone-acetaminophen 5-325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3964 | UNSPECIFIED | hydrocodone-acetaminophen 5-325 mg tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | UNSPECIFIED | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 3 |
| 3956 | UNSPECIFIED | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 12 |
| 3956 | UNSPECIFIED | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3961 | UNSPECIFIED | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3962 | UNSPECIFIED | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 5 |
| 3965 | UNSPECIFIED | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | UNSPECIFIED | HYDROcodone-Acetaminophen 7.5-325 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 3 |
| 3951 | UNSPECIFIED | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 7 |
| 3956 | UNSPECIFIED | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | UNSPECIFIED | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 5 |
| 3951 | UNSPECIFIED | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | UNSPECIFIED | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | UNSPECIFIED | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 2 |
| 3965 | UNSPECIFIED | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | UNSPECIFIED | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | No Response | 1 |
| 3965 | UNSPECIFIED | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 2 |
| 3951 | UNSPECIFIED | Hydrocodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 3 |
| 3956 | UNSPECIFIED | Hydrocodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 5 |
| 3963 | UNSPECIFIED | Hydrocodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | HYDROcodone-Ibuprofen 10-200MG OR TABS | NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | UNSPECIFIED | Hydromorphone 1mg/mL Oral Liquid | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | HYDROmorphone HCl 2MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | HYDROmorphone HCl 2MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | UNSPECIFIED | HYDROmorphone HCl 4MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Methadone 10mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3964 | UNSPECIFIED | Methadone 10mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | UNSPECIFIED | Methadone HCl 10MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | UNSPECIFIED | Methadone HCl 5MG OR TABS | NARCOTIC ANALGESICS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3951 | UNSPECIFIED | Morphine Sulfate 15MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Morphine Sulfate ER 15MG OR TBCR | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Morphine Sulfate ER 15MG OR TBCR | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | UNSPECIFIED | Morphine Sulfate ER 15mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Morphine Sulfate ER 30MG OR TBCR | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Nucynta 100mg Tablets (tapentadol) | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | UNSPECIFIED | oxycodone 10 mg tablet | NARCOTIC ANALGESICS | No Response | 3 |
| 3951 | UNSPECIFIED | Oxycodone 10mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Oxycodone 10mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Oxycodone 10mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | UNSPECIFIED | Oxycodone 10mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Oxycodone 20mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Oxycodone 5mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | UNSPECIFIED | oxyCODONE HCl 10 MG Oral Tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | oxyCODONE HCl 10 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | UNSPECIFIED | oxyCODONE HCl 10MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | UNSPECIFIED | oxyCODONE HCl 10MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | oxyCODONE HCl 20 MG Oral Tablet (ROXICODONE) | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | oxyCODONE HCl 20MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3951 | UNSPECIFIED | oxyCODONE HCl 30 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 2 |
| 3951 | UNSPECIFIED | oxyCODONE HCl 30MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | oxyCODONE HCl 30MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | oxyCODONE HCl 5MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | UNSPECIFIED | oxyCODONE HCl 5MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | oxyCODONE HCl 5MG OR TABS | NARCOTIC ANALGESICS | Denial | 1 |
| 3964 | UNSPECIFIED | oxycodone-acetaminophen 5 mg-325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | UNSPECIFIED | oxyCODONE-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | oxyCODONE-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | oxyCODONE-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Oxycodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | UNSPECIFIED | Oxycodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Oxycodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Tramadol (U) ER 100mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | UNSPECIFIED | tramadol 50 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | UNSPECIFIED | tramadol 50 mg tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | tramadol 50 mg tablet | NARCOTIC ANALGESICS | No Response | 2 |
| 3951 | UNSPECIFIED | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3951 | UNSPECIFIED | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | UNSPECIFIED | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Denial | 3 |
| 3956 | UNSPECIFIED | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | No Response | 2 |
| 3963 | UNSPECIFIED | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | UNSPECIFIED | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | UNSPECIFIED | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | Approval | 3 |
| 3951 | UNSPECIFIED | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | UNSPECIFIED | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | UNSPECIFIED | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 5 |
| 3963 | UNSPECIFIED | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 3 |
| 3951 | UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 8 |
| 3956 | UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 18 |
| 3956 | UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | No Response | 2 |
| 3961 | UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3962 | UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 8 |
| 3963 | UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3964 | UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 3 |
| 3956 | UNSPECIFIED | traMADol HCl ER 100MG OR TB24 | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | UNSPECIFIED | traMADol HCl ER 200MG OR TB24 | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | traMADol-Acetaminophen 37.5-325MG OR TABS | NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | UNSPECIFIED | Xtampza ER 18MG OR C12A | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | UNSPECIFIED | Xtampza ER 27MG OR C12A | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | ANESTHESIOLOGY | Acetaminophen-Codeine #3 300-30MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Acetaminophen-Codeine #3 300-30MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | ANESTHESIOLOGY | APAP-Codeine Tab 300-30 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ANESTHESIOLOGY | APAP-Codeine Tab 300-30 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ANESTHESIOLOGY | Belbuca 150MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | ANESTHESIOLOGY | Belbuca 150MCG BU FILM | NARCOTIC ANALGESICS | Approval | 2 |
| 3965 | ANESTHESIOLOGY | Belbuca 150MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ANESTHESIOLOGY | Belbuca 300mcg Buccal Film (buprenorphine) | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Belbuca 450MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Belbuca 600MCG BU FILM | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | ANESTHESIOLOGY | Belbuca 75MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | ANESTHESIOLOGY | Belbuca 900MCG BU FILM | NARCOTIC ANALGESICS | Approval | 2 |
| 3964 | ANESTHESIOLOGY | Butrans 15MCG/HR TD PTWK | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | ANESTHESIOLOGY | Butrans 7.5MCG/HR TD PTWK | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | ANESTHESIOLOGY | fentaNYL 25MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3961 | ANESTHESIOLOGY | fentanyl 50 mcg/hrmcg/other patch 72 hour | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ANESTHESIOLOGY | fentaNYL 50MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ANESTHESIOLOGY | hydrocodone-acetaminophen 10-325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | ANESTHESIOLOGY | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 3 |
| 3963 | ANESTHESIOLOGY | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | ANESTHESIOLOGY | hydrocodone-acetaminophen 5-325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | ANESTHESIOLOGY | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 3 |
| 3956 | ANESTHESIOLOGY | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3951 | ANESTHESIOLOGY | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 4 |
| 3956 | ANESTHESIOLOGY | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 3 |
| 3956 | ANESTHESIOLOGY | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | ANESTHESIOLOGY | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 3 |
| 3956 | ANESTHESIOLOGY | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 3 |
| 3956 | ANESTHESIOLOGY | HYDROmorphine HCl 2MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Methadone 5mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ANESTHESIOLOGY | Methadone HCl 10MG OR TABS | NARCOTIC ANALGESICS | Approval | 3 |
| 3964 | ANESTHESIOLOGY | morphine 15 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | ANESTHESIOLOGY | Morphine Sulfate 15MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | ANESTHESIOLOGY | Morphine Sulfate ER 15MG OR TBCR | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ANESTHESIOLOGY | Morphine Sulfate ER 30MG OR TBCR | NARCOTIC ANALGESICS | Approval | 1 |
| 3965 | ANESTHESIOLOGY | Morphine Sulfate ER 60MG OR TBCR | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ANESTHESIOLOGY | Nucynta 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | ANESTHESIOLOGY | Nucynta 75MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | ANESTHESIOLOGY | Nucynta ER 50MG OR TB12 | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Oxycodone 15mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | ANESTHESIOLOGY | oxyCODONE HCl 10MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ANESTHESIOLOGY | oxyCODONE HCl 15MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ANESTHESIOLOGY | oxyCODONE HCl 20MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | oxyCODONE HCl 5MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | ANESTHESIOLOGY | oxyCODONE-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | oxyCODONE-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | ANESTHESIOLOGY | oxyCODONE-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | oxyCODONE-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Oxycodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | OxyCONTIN 20MG OR T12A | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Tramadol (U) ER 100mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3964 | ANESTHESIOLOGY | tramadol 50 mg oral tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3964 | ANESTHESIOLOGY | tramadol 50 mg tablet | NARCOTIC ANALGESICS | No Response | 2 |
| 3956 | ANESTHESIOLOGY | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | No Response | 2 |
| 3951 | ANESTHESIOLOGY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 4 |
| 3956 | ANESTHESIOLOGY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 5 |
| 3956 | ANESTHESIOLOGY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | ANESTHESIOLOGY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 4 |
| 3956 | ANESTHESIOLOGY | traMADol HCl ER 200MG OR TB24 | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | CHIROPRACTOR, UNSPECIFIED | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | CLINICAL NURSE SPECIALIST, ACUTE CARE | Morphine Sulfate 15MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | EMERGENCY MEDICINE | Acetaminophen-Codeine 300-15MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | EMERGENCY MEDICINE | Belbuca 600MCG BU FILM | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | EMERGENCY MEDICINE | Belbuca 600mcg Buccal Film (buprenorphine) | NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | EMERGENCY MEDICINE | Belbuca 900MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | EMERGENCY MEDICINE | Belbuca 900mcg Buccal Film (buprenorphine) | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | EMERGENCY MEDICINE | Belbuca 900mcg Buccal Film (buprenorphine) | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | EMERGENCY MEDICINE | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | EMERGENCY MEDICINE | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | EMERGENCY MEDICINE | Morphine Sulfate 15MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | EMERGENCY MEDICINE | oxyCODONE HCl 15MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | EMERGENCY MEDICINE | oxyCODONE-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | EMERGENCY MEDICINE | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 3 |
| 3963 | EMERGENCY MEDICINE | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 2 |
| 3951 | EMERGENCY MEDICINE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | EMERGENCY MEDICINE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | EMERGENCY MEDICINE | Xtampza ER 18MG OR C12A | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY MEDICINE | HYDROcodone-Acetaminophen 5-325 MG Oral Tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | acetaminophen 300 mg-codeine 60 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | FAMILY PRACTICE | Acetaminophen-Codeine #3 300-30MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Acetaminophen-Codeine #3 300-30MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | FAMILY PRACTICE | APAP-Codeine Tab 300-30 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | APAP-Codeine Tab 300-60 mg | NARCOTIC ANALGESICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | FAMILY PRACTICE | Belbuca 150MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Belbuca 75mcg Buccal Film (buprenorphine) | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Butalbital/Acetaminophen/Caffeine | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | FAMILY PRACTICE | Butalbital-Acetaminophen-Caffeine Capsule 325-50-40mg | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Butalbital-APAP-Caffeine 50-325-40MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | FAMILY PRACTICE | Butalbital-APAP-Caffeine 50-325-40MG OR TABS | NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Butalbital-Aspirin-Caffeine 50-325-40MG OR CAPS | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | FAMILY PRACTICE | fentaNYL 100MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Fentanyl 100mcg/hr Transdermal Patch | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | fentaNYL 12MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | fentaNYL 50MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | FAMILY PRACTICE | fentaNYL 50MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Fentanyl 50mcg/hr Transdermal Patch | NARCOTIC ANALGESICS | Approval | 2 |
| 3951 | FAMILY PRACTICE | Fentanyl 75mcg/hr Transdermal Patch | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Fentanyl 75mcg/hr Transdermal Patch | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | FAMILY PRACTICE | hydrocodone 10 mg-acetaminophen 325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | FAMILY PRACTICE | hydrocodone 5 mg-acetaminophen 325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | FAMILY PRACTICE | hydrocodone 7.5 mg-acetaminophen 325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | FAMILY PRACTICE | HYDROcodone-acetaminophen (NORCO) 10-325 MG tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 10-325 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 3 |
| 3951 | FAMILY PRACTICE | hydrocodone-acetaminophen 10-325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3961 | FAMILY PRACTICE | hydrocodone-acetaminophen 10-325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3965 | FAMILY PRACTICE | hydrocodone-acetaminophen 10-325 mg tablet | NARCOTIC ANALGESICS | No Response | 2 |
| 3951 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3951 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 7 |
| 3963 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 4 |
| 3964 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3951 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 3 |
| 3963 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Denial | 1 |
| 3964 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3965 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3967 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 7.5-325 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 4 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 7.5-325 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 4 |
| 3963 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 7.5-325 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 3 |
| 3951 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 4 |
| 3961 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3951 | FAMILY PRACTICE | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 3 |
| 3956 | FAMILY PRACTICE | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3962 | FAMILY PRACTICE | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | FAMILY PRACTICE | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 3 |
| 3956 | FAMILY PRACTICE | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | No Response | 2 |
| 3963 | FAMILY PRACTICE | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 2 |
| 3951 | FAMILY PRACTICE | Hydrocodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | FAMILY PRACTICE | Hydrocodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Hydrocodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | hydromorphone 2 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Hydromorphone 2mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | HYDROmorphone HCl 2MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | methadone 10 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Methadone 10mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Methadone 10mg Tablets | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Morphine Sulfate ER 15MG OR TBCR | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Morphine Sulfate ER 30MG OR TBCR | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Morphine Sulfate ER 60MG OR TBCR | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Morphine Sulfate ER Beads 120MG OR CP24 | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Nucynta 100MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3964 | FAMILY PRACTICE | Nucynta 100MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Nucynta 100mg Tablets (tapentadol) | NARCOTIC ANALGESICS | Approval | 1 |
| 3961 | FAMILY PRACTICE | Nucynta 75MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Nucynta ER 150MG OR TB12 | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Nucynta ER 150MG OR TB12 | NARCOTIC ANALGESICS | Approval | 1 |
| 3961 | FAMILY PRACTICE | Nucynta ER 50MG OR TB12 | NARCOTIC ANALGESICS | Approval | 1 |
| 3962 | FAMILY PRACTICE | Nucynta ER 50MG OR TB12 | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Oxycodone 10mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | FAMILY PRACTICE | Oxycodone 10mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Oxycodone 15mg Tablets | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Oxycodone 20mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Oxycodone 30mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | FAMILY PRACTICE | oxyCODONE HCl 10MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | oxyCODONE HCl 15MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | FAMILY PRACTICE | oxyCODONE HCl 30 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 2 |
| 3956 | FAMILY PRACTICE | oxyCODONE HCl 5MG OR CAPS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | oxyCODONE HCl 5MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | oxyCODONE HCl 5MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | oxyCODONE HCl 5MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3965 | FAMILY PRACTICE | oxyCODONE HCl 5MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | oxycodone-acetaminophen 10-325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | FAMILY PRACTICE | oxyCODONE-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Oxycodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Oxycodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Oxycodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | OxyCONTIN 40MG OR T12A | NARCOTIC ANALGESICS | Approval | 1 |
| 3965 | FAMILY PRACTICE | traMADol (ULTRAM) 50 MG tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | tramadol 50 mg tablet | NARCOTIC ANALGESICS | No Response | 2 |
| 3956 | FAMILY PRACTICE | tramadol 50 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | FAMILY PRACTICE | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 3 |
| 3956 | FAMILY PRACTICE | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Denial | 4 |
| 3956 | FAMILY PRACTICE | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | FAMILY PRACTICE | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | FAMILY PRACTICE | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | FAMILY PRACTICE | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 11 |
| 3956 | FAMILY PRACTICE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 27 |
| 3956 | FAMILY PRACTICE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | FAMILY PRACTICE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | No Response | 2 |
| 3961 | FAMILY PRACTICE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 3 |
| 3962 | FAMILY PRACTICE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 23 |
| 3963 | FAMILY PRACTICE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3964 | FAMILY PRACTICE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3965 | FAMILY PRACTICE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3967 | FAMILY PRACTICE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | traMADol HCl ER (Biphasic) 100MG OR TB24 | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | FAMILY PRACTICE | tramadol-acetaminophen 37.5-325 mg tablet | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | FAMILY PRACTICE | tramadol-acetaminophen 37.5-325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | FAMILY PRACTICE | traMADol-Acetaminophen 37.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Ultram 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Xtampza ER 13.5MG OR C12A | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Xtampza ER 27mg Cap (oxycodone ER) | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | GENERAL PRACTICE | Belbuca 300MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | GENERAL PRACTICE | hydrocodone 7.5 mg-acetaminophen 325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | GENERAL PRACTICE | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | GENERAL PRACTICE | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | GENERAL PRACTICE | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | GENERAL PRACTICE | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | GENERAL PRACTICE | Morphine Sulfate ER 15mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | GENERAL PRACTICE | oxyCODONE HCl 30MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | GENERAL PRACTICE | oxyCODONE-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | GENERAL PRACTICE | tramadol 50 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | GENERAL PRACTICE | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | fentaNYL 50MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Fentanyl 50mcg/hr Transdermal Patch | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | fentaNYL 75MCG/HR TD PT72 | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | fentaNYL 75MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | HEMATOLOGY & ONCOLOGY | Hydromorphone 2mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | HYDROmorphone HCl 4MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Morphine Sulfate ER 15MG OR TBCR | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | oxyCODONE HCl 10MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | oxyCODONE HCl 10MG OR TABS | NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | oxyCODONE HCl 10MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | oxyCODONE HCl 15MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | oxyCODONE-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Oxycodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | HEMATOLOGY & ONCOLOGY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | HEMATOLOGY & ONCOLOGY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | HEMATOLOGY & ONCOLOGY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3965 | INTERNAL MEDICINE | Acetaminophen-Codeine 300-60MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Belbuca 600mcg Buccal Film (buprenorphine) | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | fentaNYL 100MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | fentaNYL 12MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Fentanyl 12mcg/hr Transdermal Patch | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | fentaNYL 25MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | fentaNYL 25MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | HYDROcodone-Acetaminophen 10-325 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 5 |
| 3963 | INTERNAL MEDICINE | HYDROcodone-Acetaminophen 10-325 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 5 |
| 3963 | INTERNAL MEDICINE | hydrocodone-acetaminophen 10-325 mg tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | hydrocodone-acetaminophen 10-325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | HYDROcodone-Acetaminophen 5-325 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | INTERNAL MEDICINE | HYDROcodone-Acetaminophen 7.5-325 MG Oral Tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | HYDROcodone-Acetaminophen 7.5-325 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 3 |
| 3963 | INTERNAL MEDICINE | HYDROcodone-Acetaminophen 7.5-325 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 3 |
| 3964 | INTERNAL MEDICINE | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | INTERNAL MEDICINE | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | INTERNAL MEDICINE | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | INTERNAL MEDICINE | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 2 |
| 3965 | INTERNAL MEDICINE | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Hydrocodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | HYDROcodone-Ibuprofen 7.5-200 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 3 |
| 3956 | INTERNAL MEDICINE | Hydromorphone 4mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | INTERNAL MEDICINE | HYDROmorphone HCl ER 16MG OR TB24 | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Nucynta 100mg Tablets (tapentadol) | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Nucynta ER 50MG OR TB12 | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | oxyCODONE HCl 10MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | oxyCODONE HCl 15 MG Oral Tablet | NARCOTIC ANALGESICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3956 | INTERNAL MEDICINE | oxyCODONE HCl 15MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | oxyCODONE HCl 20MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | oxyCODONE HCl 30MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | oxyCODONE-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3961 | INTERNAL MEDICINE | Oxycodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | OxyCONTIN 30MG OR T12A | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | OxyContin 80mg Tabs (oxycodone ER) | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 4 |
| 3963 | INTERNAL MEDICINE | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | INTERNAL MEDICINE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 3 |
| 3956 | INTERNAL MEDICINE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 8 |
| 3963 | INTERNAL MEDICINE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 5 |
| 3956 | INTERNAL MEDICINE | traMADol HCl ER 200MG OR TB24 | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | traMADol HCl ER 300MG OR TB24 | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | traMADol-Acetaminophen 375-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | MEDICAL ONCOLOGY | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | NEUROLOGICAL SURGERY | Belbuca 150mcg Buccal Film (buprenorphine) | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | NEUROLOGICAL SURGERY | Belbuca 750MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | NEUROLOGICAL SURGERY | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | NEUROLOGICAL SURGERY | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | NEUROLOGICAL SURGERY | HYDROcodone-Acetaminophen 75-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | NEUROLOGICAL SURGERY | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3965 | NEUROLOGICAL SURGERY | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | NEUROLOGICAL SURGERY | oxyCODONE HCl 5MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3961 | NEUROLOGICAL SURGERY | oxycodone-acetaminophen 5-325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | NEUROLOGICAL SURGERY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | NEUROLOGY | fentanyl 25 mcg/hrmcg/other patch 72 hour | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | NEUROLOGY | oxycontin 60 mg tablet,oral only,ext.rel.12 hr | NARCOTIC ANALGESICS | Approval | 1 |
| 3967 | NEUROLOGY | trexix 320.5-30-16 mg capsule | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, ACUTE CARE | Belbuca 300MCG BU FILM | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Acetaminophen-Codeine #3 (Acetaminophen w/ Codeine) 300-30 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 6 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Acetaminophen-Codeine #3 (Acetaminophen w/ Codeine) 300-30 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Acetaminophen-Codeine #4 (Acetaminophen w/ Codeine) 300-60 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Belbuca 900MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 3 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Hydrocodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Morphine Sulfate 30MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Nucynta 75MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Tramadol (R) ER 300mg Biphasic Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Tramadol (U) ER 200mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 2 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 11 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 6 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 5 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | traMADol HCl ER 200MG OR TB24 | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | NURSE PRACTITIONER, UNSPECIFIED | Acetaminophen-Codeine #3 300-30MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Acetaminophen-Codeine #4 (Acetaminophen w/ Codeine) 300-60 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Belbuca 600MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | NURSE PRACTITIONER, UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | OPHTHALMOLOGY | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ORTHOPEDIC SURGERY | hydrocodone-acetaminophen 5-325 mg tablet | NARCOTIC ANALGESICS | No Response | 2 |
| 3956 | ORTHOPEDIC SURGERY | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ORTHOPEDIC SURGERY | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | ORTHOPEDIC SURGERY | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ORTHOPEDIC SURGERY | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | ORTHOPEDIC SURGERY | Hydrocodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3964 | ORTHOPEDIC SURGERY | HYDRORmorphone HCl 4MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ORTHOPEDIC SURGERY | Nucynta 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | ORTHOPEDIC SURGERY | Oxycodone 5mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | ORTHOPEDIC SURGERY | oxyCODONE HCl 15MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3961 | ORTHOPEDIC SURGERY | oxyCODONE-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | ORTHOPEDIC SURGERY | Oxycodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ORTHOPEDIC SURGERY | Oxycodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | ORTHOPEDIC SURGERY | Oxycodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ORTHOPEDIC SURGERY | oxycontin 10 mg tablet,oral only,ext.rel.12 hr | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | ORTHOPEDIC SURGERY | tramadol 50 mg tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | ORTHOPEDIC SURGERY | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | ORTHOPEDIC SURGERY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | ORTHOPEDIC SURGERY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | OTOLARYNGOLOGY | HYDRORcodone-Acetaminophen 7.5-325MG/15ML OR SOLN | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | OTOLARYNGOLOGY | oxyCODONE HCl 5MG/5ML OR SOLN | NARCOTIC ANALGESICS | Approval | 1 |
| 3961 | PAIN MANAGEMENT | Belbuca 600MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PAIN MEDICINE | Acetaminophen-Codeine #3 300-30MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PAIN MEDICINE | fentaNYL 25MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PAIN MEDICINE | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PAIN MEDICINE | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PALLIATIVE MEDICINE | fentaNYL 100MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | PALLIATIVE MEDICINE | fentaNYL 50MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PALLIATIVE MEDICINE | Morphine Sulfate ER 15mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PALLIATIVE MEDICINE | Morphine Sulfate ER 30mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PALLIATIVE MEDICINE | oxyCODONE HCl 100MG/5ML OR CONC | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PALLIATIVE MEDICINE | oxyCODONE HCl 30MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PALLIATIVE MEDICINE | OxyCONTIN 30MG OR T12A | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PEDIATRICS | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | PEDIATRICS | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3961 | PHYSICIAN ASSISTANT, UNSPECIFIED | HYDRORcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | HYDRORcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | HYDRORcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | HYDRORcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | oxyCODONE HCl 5MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | tramadol 50 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|---|--|---------------------------|-------------|-------|
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN, ANESTHESIOLOGY, PAIN MANAGEMENT | Acetaminophen-Codeine #3 300-30MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN, ANESTHESIOLOGY, PAIN MANAGEMENT | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN, ONCOLOGY, MEDICAL | fentaNYL 25MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | PHYSICIAN, ONCOLOGY, MEDICAL | HYDROcodone-Acetaminophen 7.5-325MG/15ML OR SOLN | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | APAP-Codeine Tab 300-30 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Belbuca 600MCG BU FILM | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3965 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | hydrocodone-acetaminophen 7.5-325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Hydrocodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Hydrocodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Hydrocodone-APAP Tab 7.5-325 mg | NARCOTIC ANALGESICS | Approval | 2 |
| 3951 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Methadone HCl 10MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Morphine Sulfate ER 15MG OR TBCR | NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Nucynta 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | oxyCODONE HCl 10MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | oxyCODONE HCl 5MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | oxyCODONE-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|---|--|---------------------------|-------------|-------|
| 3951 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | oxyCODONE-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | oxyCODONE-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Tramadol (R) ER 200mg Biphasic Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | tramadol 50 mg tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | PHYSICIAN, SURGERY, GENERAL | fentaNYL 50MCG/HR TD PT72 | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN, SURGERY, GENERAL | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | PHYSICIAN, SURGERY, GENERAL | HYDROmorphone HCl 2MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | PHYSICIAN, SURGERY, GENERAL | Oxycodone 5mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | PHYSICIAN, SURGERY, GENERAL | Oxycodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3965 | PLASTIC SURGERY | meperidine 50 mg tablet | NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | PLASTIC SURGERY | Meperidine 50mg Tablets | NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | PODIATRIST, UNSPECIFIED | acetaminophen 300 mg-codeine 60 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3964 | PODIATRIST, UNSPECIFIED | hydrocodone 5 mg-acetaminophen 325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | PODIATRIST, UNSPECIFIED | hydrocodone 7.5 mg-acetaminophen 325 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | PODIATRIST, UNSPECIFIED | HYDROmorphone HCl 4MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | PODIATRIST, UNSPECIFIED | Nucynta 50 mg tablet | NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | PODIATRIST, UNSPECIFIED | oxycodone 5 mg capsule | NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | PODIATRIST, UNSPECIFIED | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | PODIATRIST, UNSPECIFIED | traMADol HCl 50 MG Oral Tablet | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | PODIATRIST, UNSPECIFIED | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 2 |
| 3956 | PSYCHIATRY | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | PULMONARY DISEASES | Hydromorphone 2mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3961 | RHEUMATOLOGY | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | RHEUMATOLOGY | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | RHEUMATOLOGY | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | RHEUMATOLOGY | HYDROcodone-Acetaminophen 7.5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | RHEUMATOLOGY | Nucynta 100MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | RHEUMATOLOGY | Nucynta 75MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3963 | RHEUMATOLOGY | Oxycodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | RHEUMATOLOGY | Tramadol 50mg Tablets | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | RHEUMATOLOGY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | RHEUMATOLOGY | traMADol HCl 50MG OR TABS | NARCOTIC ANALGESICS | Approval | 3 |
| 3964 | SPORTS MEDICINE, FAMILY PRACTICE | HYDROcodone-Acetaminophen 5-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | SPORTS MEDICINE, FAMILY PRACTICE | Hydrocodone-APAP Tab 5-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | SURGERY, ORAL & MAXILLOFACIAL | HYDROcodone-Acetaminophen 10-325MG OR TABS | NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UROLOGY | Oxycodone-APAP Tab 10-325 mg | NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | UNSPECIFIED | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Pregabalin | NEUROLOGICAL AGENTS | Denial | 2 |
| 3951 | UNSPECIFIED | Pregabalin | NEUROLOGICAL AGENTS | No Response | 2 |
| 3956 | UNSPECIFIED | Pregabalin | NEUROLOGICAL AGENTS | Approval | 8 |
| 3956 | UNSPECIFIED | Pregabalin | NEUROLOGICAL AGENTS | Denial | 11 |
| 3956 | UNSPECIFIED | Pregabalin | NEUROLOGICAL AGENTS | No Response | 1 |
| 3963 | UNSPECIFIED | Pregabalin | NEUROLOGICAL AGENTS | Approval | 3 |
| 3963 | UNSPECIFIED | Pregabalin | NEUROLOGICAL AGENTS | Denial | 4 |
| 3964 | UNSPECIFIED | Pregabalin | NEUROLOGICAL AGENTS | Approval | 2 |
| 3964 | UNSPECIFIED | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3965 | UNSPECIFIED | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3965 | UNSPECIFIED | pregabalin (LYRICA) 75 MG capsule | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | pregabalin 100 mg capsule (LYRICA) | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 15 |
| 3963 | UNSPECIFIED | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3964 | UNSPECIFIED | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3951 | UNSPECIFIED | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 21 |
| 3963 | UNSPECIFIED | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3965 | UNSPECIFIED | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3965 | UNSPECIFIED | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 1 |
| 3965 | UNSPECIFIED | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | No Response | 1 |
| 3951 | UNSPECIFIED | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 3 |
| 3956 | UNSPECIFIED | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 1 |
| 3964 | UNSPECIFIED | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Pregabalin 225MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3951 | UNSPECIFIED | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-------------------------------------|---------------------------|-------------|-------|
| 3956 | UNSPECIFIED | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3963 | UNSPECIFIED | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 5 |
| 3951 | UNSPECIFIED | Pregabalin 300MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Pregabalin 300MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3951 | UNSPECIFIED | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 3 |
| 3956 | UNSPECIFIED | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 15 |
| 3961 | UNSPECIFIED | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3964 | UNSPECIFIED | Pregabalin 75 MG Oral Capsule | NEUROLOGICAL AGENTS | No Response | 1 |
| 3951 | UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3956 | UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 22 |
| 3956 | UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 1 |
| 3963 | UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 13 |
| 3965 | UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3956 | UNSPECIFIED | Rivastigmine Tartrate 1.5MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | ANESTHESIOLOGY | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3956 | ANESTHESIOLOGY | Pregabalin | NEUROLOGICAL AGENTS | Approval | 2 |
| 3956 | ANESTHESIOLOGY | Pregabalin | NEUROLOGICAL AGENTS | Denial | 4 |
| 3963 | ANESTHESIOLOGY | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3964 | ANESTHESIOLOGY | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3961 | ANESTHESIOLOGY | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3962 | ANESTHESIOLOGY | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | ANESTHESIOLOGY | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 3 |
| 3956 | ANESTHESIOLOGY | pregabalin 150 mg capsule | NEUROLOGICAL AGENTS | No Response | 1 |
| 3951 | ANESTHESIOLOGY | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 3 |
| 3956 | ANESTHESIOLOGY | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 7 |
| 3956 | ANESTHESIOLOGY | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | No Response | 1 |
| 3963 | ANESTHESIOLOGY | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3951 | ANESTHESIOLOGY | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 3 |
| 3962 | ANESTHESIOLOGY | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | ANESTHESIOLOGY | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3956 | ANESTHESIOLOGY | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 1 |
| 3962 | ANESTHESIOLOGY | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Pregabalin 300MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--------------------------|---------------------------|-------------|-------|
| 3951 | ANESTHESIOLOGY | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3963 | ANESTHESIOLOGY | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3951 | ANESTHESIOLOGY | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3956 | ANESTHESIOLOGY | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 3 |
| 3963 | CLINICAL NURSE SPECIALIST, EMERGENCY | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | EMERGENCY MEDICINE | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | EMERGENCY MEDICINE | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | EMERGENCY MEDICINE | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | EMERGENCY MEDICINE | Pregabalin 300MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | ENDOCRINOLOGY, DIABETES & METABOLISM | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Pregabalin | NEUROLOGICAL AGENTS | Approval | 3 |
| 3956 | FAMILY PRACTICE | Pregabalin | NEUROLOGICAL AGENTS | Approval | 12 |
| 3956 | FAMILY PRACTICE | Pregabalin | NEUROLOGICAL AGENTS | Denial | 11 |
| 3956 | FAMILY PRACTICE | Pregabalin | NEUROLOGICAL AGENTS | No Response | 1 |
| 3961 | FAMILY PRACTICE | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Pregabalin | NEUROLOGICAL AGENTS | Approval | 3 |
| 3963 | FAMILY PRACTICE | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Pregabalin | NEUROLOGICAL AGENTS | No Response | 2 |
| 3964 | FAMILY PRACTICE | Pregabalin | NEUROLOGICAL AGENTS | Approval | 2 |
| 3964 | FAMILY PRACTICE | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 12 |
| 3956 | FAMILY PRACTICE | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3967 | FAMILY PRACTICE | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 19 |
| 3956 | FAMILY PRACTICE | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 1 |
| 3964 | FAMILY PRACTICE | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3956 | FAMILY PRACTICE | Pregabalin 225MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3951 | FAMILY PRACTICE | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 3 |
| 3956 | FAMILY PRACTICE | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--------------------------------|---------------------------|-------------|-------|
| 3951 | FAMILY PRACTICE | Pregabalin 300MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Pregabalin 300MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 3 |
| 3951 | FAMILY PRACTICE | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3951 | FAMILY PRACTICE | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 26 |
| 3962 | FAMILY PRACTICE | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3961 | FAMILY PRACTICE | Pregabalin 75 MG Oral Capsule | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3956 | FAMILY PRACTICE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 34 |
| 3956 | FAMILY PRACTICE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 4 |
| 3956 | FAMILY PRACTICE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | No Response | 1 |
| 3961 | FAMILY PRACTICE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 7 |
| 3963 | FAMILY PRACTICE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | No Response | 1 |
| 3965 | FAMILY PRACTICE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3967 | FAMILY PRACTICE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | No Response | 1 |
| 3956 | GENERAL PRACTICE | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | GENERAL PRACTICE | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3964 | HEMATOLOGY & ONCOLOGY | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Pregabalin | NEUROLOGICAL AGENTS | No Response | 2 |
| 3951 | INTERNAL MEDICINE | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 3 |
| 3963 | INTERNAL MEDICINE | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3963 | INTERNAL MEDICINE | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3964 | INTERNAL MEDICINE | Pregabalin 200 MG Oral Capsule | NEUROLOGICAL AGENTS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3961 | INTERNAL MEDICINE | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3961 | INTERNAL MEDICINE | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Pregabalin 300MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 8 |
| 3962 | INTERNAL MEDICINE | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Pregabalin 75 MG Oral Capsule | NEUROLOGICAL AGENTS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---------------------------------|---------------------------|-------------|-------|
| 3951 | INTERNAL MEDICINE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Rivastigmine 4.6MG/24HR TD PT24 | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | NEUROLOGICAL SURGERY | Pregabalin | NEUROLOGICAL AGENTS | Approval | 2 |
| 3951 | NEUROLOGICAL SURGERY | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3956 | NEUROLOGICAL SURGERY | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3956 | NEUROLOGICAL SURGERY | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | NEUROLOGICAL SURGERY | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NEUROLOGICAL SURGERY | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3963 | NEUROLOGICAL SURGERY | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3951 | NEUROLOGY | Austedo | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | NEUROLOGY | Pregabalin | NEUROLOGICAL AGENTS | Approval | 2 |
| 3965 | NEUROLOGY | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | NEUROLOGY | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | NEUROLOGY | pregabalin 150 mg capsule | NEUROLOGICAL AGENTS | No Response | 1 |
| 3956 | NEUROLOGY | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 5 |
| 3961 | NEUROLOGY | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | NEUROLOGY | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3951 | NEUROLOGY | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NEUROLOGY | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3963 | NEUROLOGY | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NEUROLOGY | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3964 | NEUROLOGY | Pregabalin 300 MG Oral Capsule | NEUROLOGICAL AGENTS | No Response | 1 |
| 3963 | NEUROLOGY | Pregabalin 50 MG Oral Capsule | NEUROLOGICAL AGENTS | No Response | 1 |
| 3956 | NEUROLOGY | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3963 | NEUROLOGY | pregabalin 75 mg capsule | NEUROLOGICAL AGENTS | No Response | 1 |
| 3956 | NEUROLOGY | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3964 | NURSE PRACTITIONER, ACUTE CARE | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, ADULT HEALTH | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, ADULT HEALTH | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, ADULT HEALTH | Pregabalin 300MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, ADULT HEALTH | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, COMMUNITY HEALTH | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin | NEUROLOGICAL AGENTS | Approval | 4 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-------------------------------------|---------------------------|-------------|-------|
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin | NEUROLOGICAL AGENTS | Denial | 7 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin | NEUROLOGICAL AGENTS | Denial | 3 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | PREGABALIN | NEUROLOGICAL AGENTS | No Response | 1 |
| 3965 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 9 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 5 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | pregabalin 75 mg capsule | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 10 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 1 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Rivastigmine Tartrate 1.5MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, GERONTOLOGY | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, GERONTOLOGY | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3961 | NURSE PRACTITIONER, GERONTOLOGY | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, GERONTOLOGY | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Pregabalin 200MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Pregabalin 225MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | No Response | 1 |
| 3964 | NURSE PRACTITIONER, UNSPECIFIED | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Pregabalin 50 MG Oral Capsule | NEUROLOGICAL AGENTS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 3 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, WOMEN'S HEALTH | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|---|--------------------------|---------------------------|-------------|-------|
| 3956 | ORTHOPEDIC SURGERY | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3965 | ORTHOPEDIC SURGERY | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3961 | PAIN MANAGEMENT | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3961 | PAIN MEDICINE | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PAIN MEDICINE | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3956 | PAIN MEDICINE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PALLIATIVE MEDICINE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | PALLIATIVE MEDICINE | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | PEDIATRICS | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PEDIATRICS | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PEDIATRICS | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3951 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PHYSICIAN, SURGERY, GENERAL | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | PHYSICIAN, SURGERY, GENERAL | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PODIATRIST, GENERAL PRACTICE | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3964 | PODIATRIST, GENERAL PRACTICE | pregabalin 50 mg capsule | NEUROLOGICAL AGENTS | No Response | 1 |
| 3956 | PODIATRIST, SURGERY, FOOT & ANKLE | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PODIATRIST, UNSPECIFIED | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | PODIATRIST, UNSPECIFIED | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | PODIATRIST, UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | PODIATRIST, UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | No Response | 2 |
| 3963 | PODIATRIST, UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PSYCHIATRY | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PSYCHIATRY | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PSYCHIATRY | Pregabalin 300MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | PSYCHIATRY | Rivastigmine | NEUROLOGICAL AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--------------------------------------|---------------------------|-------------|-------|
| 3956 | PSYCHIATRY | Rivastigmine | NEUROLOGICAL AGENTS | No Response | 1 |
| 3956 | REGISTERED NURSE, EMERGENCY | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3956 | REGISTERED NURSE, EMERGENCY | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | REGISTERED NURSE, UNSPECIFIED | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | REGISTERED NURSE, UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 1 |
| 3951 | RHEUMATOLOGY | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | RHEUMATOLOGY | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3956 | RHEUMATOLOGY | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3963 | RHEUMATOLOGY | Pregabalin | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | RHEUMATOLOGY | Pregabalin | NEUROLOGICAL AGENTS | Denial | 1 |
| 3956 | RHEUMATOLOGY | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | RHEUMATOLOGY | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3951 | RHEUMATOLOGY | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | RHEUMATOLOGY | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | RHEUMATOLOGY | Pregabalin 150MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | RHEUMATOLOGY | Pregabalin 25MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3951 | RHEUMATOLOGY | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | RHEUMATOLOGY | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 5 |
| 3964 | RHEUMATOLOGY | Pregabalin 50MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3956 | RHEUMATOLOGY | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 4 |
| 3956 | RHEUMATOLOGY | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Denial | 1 |
| 3963 | RHEUMATOLOGY | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 2 |
| 3956 | SPORTS MEDICINE, FAMILY PRACTICE | Pregabalin 100MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED PHYSICIAN, INTERN/RESIDENT/FELLOW, UNSPECIFIED | Pregabalin 75MG OR CAPS | NEUROLOGICAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | diclofenac sodium (VOLTAREN) 1 % gel | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | UNSPECIFIED | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 7 |
| 3951 | UNSPECIFIED | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Denial | 3 |
| 3956 | UNSPECIFIED | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 5 |
| 3963 | UNSPECIFIED | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 15 |
| 3963 | UNSPECIFIED | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Denial | 3 |
| 3965 | UNSPECIFIED | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | UNSPECIFIED | Diclofenac Sodium 1% Topical Gel | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Diclofenac Sodium 1% Topical Gel | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | UNSPECIFIED | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | UNSPECIFIED | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 4 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3964 | UNSPECIFIED | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | UNSPECIFIED | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3965 | UNSPECIFIED | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | UNSPECIFIED | Eletriptan | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | lidocaine 5% adhesive patch,medicated | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | UNSPECIFIED | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Approval | 2 |
| 3951 | UNSPECIFIED | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | UNSPECIFIED | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 7 |
| 3961 | UNSPECIFIED | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | UNSPECIFIED | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 5 |
| 3956 | UNSPECIFIED | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 4 |
| 3956 | UNSPECIFIED | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | UNSPECIFIED | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | UNSPECIFIED | Lidocaine Patch 5% | NON-NARCOTIC ANALGESICS | Denial | 2 |
| 3965 | UNSPECIFIED | Lidocaine Patch 5% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3965 | UNSPECIFIED | Lidocaine Patch 5% | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | UNSPECIFIED | Rizatriptan Benzoate 10MG OR TBDP | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | UNSPECIFIED | SUMAtriptan Succinate 25MG OR TABS | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | SUMAtriptan Succinate 50MG OR TABS | NON-NARCOTIC ANALGESICS | Approval | 2 |
| 3951 | UNSPECIFIED | Sumatriptan Tablet | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | UNSPECIFIED | Sumatriptan Tablet | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | UNSPECIFIED | Sumatriptan Tablet | NON-NARCOTIC ANALGESICS | Denial | 3 |
| 3963 | UNSPECIFIED | Sumatriptan Tablet | NON-NARCOTIC ANALGESICS | Denial | 2 |
| 3951 | UNSPECIFIED | Voltaren Arthritis Pain 1 % topical gel | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3964 | UNSPECIFIED | Voltaren Gel (diclofenac sodium topical gel 1%) | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | ANESTHESIOLOGY | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | ANESTHESIOLOGY | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | ANESTHESIOLOGY | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | ANESTHESIOLOGY | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | ANESTHESIOLOGY | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | ANESTHESIOLOGY | SUMAtriptan Succinate 50MG OR TABS | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | EMERGENCY MEDICINE | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3964 | EMERGENCY MEDICINE | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | EMERGENCY MEDICINE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | EMERGENCY MEDICINE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--------------------------------------|---------------------------|-------------|-------|
| 3963 | EMERGENCY MEDICINE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | EMERGENCY MEDICINE | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | EMERGENCY MEDICINE | Rizatriptan Benzoate 10MG OR TBDP | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 4 |
| 3951 | FAMILY PRACTICE | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3962 | FAMILY PRACTICE | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 5 |
| 3963 | FAMILY PRACTICE | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Denial | 5 |
| 3964 | FAMILY PRACTICE | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 2 |
| 3962 | FAMILY PRACTICE | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3964 | FAMILY PRACTICE | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 3 |
| 3956 | FAMILY PRACTICE | Eletriptan | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Eletriptan Hydrobromide 40MG OR TABS | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 4 |
| 3956 | FAMILY PRACTICE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3961 | FAMILY PRACTICE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Approval | 2 |
| 3967 | FAMILY PRACTICE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 2 |
| 3956 | FAMILY PRACTICE | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 4 |
| 3951 | FAMILY PRACTICE | Lidocaine Patch 5% | NON-NARCOTIC ANALGESICS | Denial | 2 |
| 3956 | FAMILY PRACTICE | LIDOCAINE PATCH 5% | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Lidocaine Patch 5% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Lidocaine Patch 5% | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3967 | FAMILY PRACTICE | Lidocaine Patch 5% | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Rizatriptan | NON-NARCOTIC ANALGESICS | Denial | 2 |
| 3956 | FAMILY PRACTICE | Rizatriptan ODT | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Rizatriptan Tablets | NON-NARCOTIC ANALGESICS | No Response | 2 |
| 3963 | FAMILY PRACTICE | SUMatriptan Succinate 100MG OR TABS | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | FAMILY PRACTICE | SUMatriptan Succinate 25MG OR TABS | NON-NARCOTIC ANALGESICS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3956 | FAMILY PRACTICE | SUMatriptan Succinate 25MG OR TABS | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | FAMILY PRACTICE | SUMatriptan Succinate 6MG/0.5ML SC SOAJ | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | FAMILY PRACTICE | Sumatriptan Tablet | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Sumatriptan Tablet | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Denial | 2 |
| 3964 | INTERNAL MEDICINE | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3965 | INTERNAL MEDICINE | Eletriptan | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | INTERNAL MEDICINE | Eletriptan Hydrobromide 40MG OR TABS | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 2 |
| 3956 | INTERNAL MEDICINE | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3961 | INTERNAL MEDICINE | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3964 | INTERNAL MEDICINE | Lidocaine Patch 5% | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | SUMatriptan Succinate 100MG OR TABS | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | NEUROLOGICAL SURGERY | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | NEUROLOGY | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | NEUROLOGY | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | NEUROLOGY | Rizatriptan | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 2 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3962 | NURSE PRACTITIONER, FAMILY HEALTH | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | diclofenac sodium 1% gel | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3965 | NURSE PRACTITIONER, FAMILY HEALTH | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Eletriptan Hydrobromide 20MG OR TABS | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|---|--------------------------------------|---------------------------|-------------|-------|
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Rizatriptan | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Sumatriptan Tablet | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 3 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Rizatriptan | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Sumatriptan Tablet | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, WOMEN'S HEALTH | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | SUMATriptan Succinate 50MG OR TABS | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3967 | OBSTETRICS & GYNECOLOGY | Sumatriptan Tablets | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | ORTHOPEDIC SURGERY | CVS Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ORTHOPEDIC SURGERY | CVS Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3951 | ORTHOPEDIC SURGERY | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | ORTHOPEDIC SURGERY | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | ORTHOPEDIC SURGERY | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | ORTHOPEDIC SURGERY | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3964 | ORTHOPEDIC SURGERY | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3964 | ORTHOPEDIC SURGERY | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3965 | ORTHOPEDIC SURGERY | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3965 | ORTHOPEDIC SURGERY | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | ORTHOPEDIC SURGERY | voltaren 1% gel | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | PAIN MEDICINE | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PAIN MEDICINE | Diclofenac Sodium 1% Topical Gel | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | PEDIATRICS | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Lidocaine Patch 5% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Sumatriptan Tablet | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | PHYSICIAN, GERIATRIC MEDICINE | Lidocaine 5% Patch | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3963 | PHYSICIAN, ONCOLOGY, MEDICAL | Lidocaine 2.5%-Prilocaine 2.5% Cream | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3951 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | PHYSICIAN, SURGERY, GENERAL | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3963 | PODIATRIST, UNSPECIFIED | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3965 | PSYCHIATRY | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3956 | PSYCHIATRY | Eletriptan | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | REGISTERED NURSE, GENERAL PRACTICE | Lidocaine 5% EX PTCH | NON-NARCOTIC ANALGESICS | Denial | 1 |
| 3956 | REGISTERED NURSE, UNSPECIFIED | SUMATriptan Succinate 100MG OR TABS | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3951 | RHEUMATOLOGY | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 2 |
| 3963 | RHEUMATOLOGY | Diclofenac Sodium 1% EX GEL | NON-NARCOTIC ANALGESICS | Approval | 4 |
| 3951 | RHEUMATOLOGY | Diclofenac Sodium Topical Gel 1% | NON-NARCOTIC ANALGESICS | Approval | 1 |
| 3963 | UNSPECIFIED | Restasis 0.05% OP EMUL | OPHTHALMIC PREPARATIONS | Denial | 1 |
| 3963 | OPHTHALMOLOGY | Restasis 0.05% Ophthalmic Emulsion | OPHTHALMIC PREPARATIONS | Approval | 1 |
| 3963 | OPTOMETRIST, UNSPECIFIED | Restasis 0.05% OP EMUL | OPHTHALMIC PREPARATIONS | No Response | 1 |
| 3963 | OPTOMETRIST, UNSPECIFIED | Restasis MultiDose 0.05% OP EMUL | OPHTHALMIC PREPARATIONS | No Response | 1 |
| 3951 | GASTROENTEROLOGY | Codeine Sulfate 30mg Tablets | Opioid Analgesic | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Codeine Sulfate 30MG OR TABS | Opioid Analgesic | Approval | 1 |
| 3956 | UNSPECIFIED | Prolia 60MG/ML SC SOSY | OSTEOPOROSIS AGENTS | No Response | 1 |
| 3956 | UNSPECIFIED | Tymlos | OSTEOPOROSIS AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Tymlos | OSTEOPOROSIS AGENTS | Approval | 2 |
| 3963 | UNSPECIFIED | Tymlos | OSTEOPOROSIS AGENTS | No Response | 4 |
| 3963 | UNSPECIFIED | Tymlos 3120MCG/1.56ML SC SOPN | OSTEOPOROSIS AGENTS | Approval | 1 |
| 3956 | CLINICAL NURSE SPECIALIST, FAMILY HEALTH | Tymlos | OSTEOPOROSIS AGENTS | Approval | 1 |
| 3956 | ENDOCRINOLOGY, DIABETES & METABOLISM | Tymlos | OSTEOPOROSIS AGENTS | Denial | 2 |
| 3956 | FAMILY PRACTICE | Prolia 60MG/ML SC SOSY | OSTEOPOROSIS AGENTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Prolia 60MG/ML SC SOSY | OSTEOPOROSIS AGENTS | Approval | 1 |
| 3961 | INTERNAL MEDICINE | Prolia 60MG/ML SC SOSY | OSTEOPOROSIS AGENTS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Tymlos | OSTEOPOROSIS AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Prolia (Denosumab) 60 MG/ML Subcutaneous Each | OSTEOPOROSIS AGENTS | No Response | 1 |
| 3961 | OBSTETRICS & GYNECOLOGY | Prolia 60MG/ML SC SOSY | OSTEOPOROSIS AGENTS | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tymlos | OSTEOPOROSIS AGENTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tymlos | OSTEOPOROSIS AGENTS | No Response | 1 |
| 3951 | UNSPECIFIED | Linezolid | OTHER ANTIBIOTICS | Denial | 1 |
| 3963 | UNSPECIFIED | Linezolid | OTHER ANTIBIOTICS | Approval | 1 |
| 3963 | EMERGENCY MEDICINE | Linezolid | OTHER ANTIBIOTICS | Denial | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Thalomid | OTHER ANTIBIOTICS | Approval | 1 |
| 3956 | HEMATOLOGY & ONCOLOGY | Thalomid | OTHER ANTIBIOTICS | No Response | 1 |
| 3961 | HEMATOLOGY & ONCOLOGY | Thalomid | OTHER ANTIBIOTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Thalomid | OTHER ANTIBIOTICS | Approval | 1 |
| 3963 | HEMATOLOGY & ONCOLOGY | Thalomid | OTHER ANTIBIOTICS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--------------------------------------|----------------------------|-------------|-------|
| 3951 | INTERNAL MEDICINE | Linezolid | OTHER ANTIBIOTICS | Approval | 1 |
| 3964 | NURSE PRACTITIONER, FAMILY HEALTH | Linezolid | OTHER ANTIBIOTICS | Denial | 1 |
| 3963 | PODIATRIST, SURGERY, FOOT & ANKLE | Linezolid | OTHER ANTIBIOTICS | Approval | 1 |
| 3963 | PODIATRIST, UNSPECIFIED | Linezolid | OTHER ANTIBIOTICS | Approval | 1 |
| 3963 | PULMONARY DISEASES | Cayston | OTHER ANTIBIOTICS | Approval | 1 |
| 3956 | UNSPECIFIED | Opsumit | OTHER ANTIHYPERTENSIVES | Approval | 1 |
| 3961 | UNSPECIFIED | Opsumit | OTHER ANTIHYPERTENSIVES | Approval | 1 |
| 3961 | UNSPECIFIED | Opsumit | OTHER ANTIHYPERTENSIVES | No Response | 1 |
| 3961 | UNSPECIFIED | Upravi | OTHER ANTIHYPERTENSIVES | No Response | 1 |
| 3956 | CARDIOLOGY | Adempas | OTHER ANTIHYPERTENSIVES | Approval | 2 |
| 3956 | CARDIOLOGY | Adempas | OTHER ANTIHYPERTENSIVES | Denial | 1 |
| 3956 | CARDIOLOGY | Opsumit | OTHER ANTIHYPERTENSIVES | Approval | 1 |
| 3956 | CARDIOLOGY | Opsumit | OTHER ANTIHYPERTENSIVES | Denial | 1 |
| 3951 | CARDIOLOGY | Upravi | OTHER ANTIHYPERTENSIVES | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Adempas | OTHER ANTIHYPERTENSIVES | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Opsumit | OTHER ANTIHYPERTENSIVES | Approval | 2 |
| 3956 | UNSPECIFIED | dofetilide | OTHER CARDIOVASCULAR PREPS | Approval | 1 |
| 3956 | UNSPECIFIED | dofetilide | OTHER CARDIOVASCULAR PREPS | No Response | 2 |
| 3951 | CARDIOLOGY | dofetilide | OTHER CARDIOVASCULAR PREPS | Approval | 1 |
| 3956 | CARDIOLOGY | dofetilide | OTHER CARDIOVASCULAR PREPS | Approval | 2 |
| 3956 | CARDIOLOGY | dofetilide | OTHER CARDIOVASCULAR PREPS | No Response | 1 |
| 3951 | PHYSICIAN, CARDIAC ELECTROPHYSIOLOGY | dofetilide | OTHER CARDIOVASCULAR PREPS | Approval | 1 |
| 3956 | PHYSICIAN, CARDIAC ELECTROPHYSIOLOGY | dofetilide | OTHER CARDIOVASCULAR PREPS | Approval | 1 |
| 3963 | PHYSICIAN, CARDIAC ELECTROPHYSIOLOGY | dofetilide | OTHER CARDIOVASCULAR PREPS | No Response | 1 |
| 3963 | UNSPECIFIED | Genotropin | OTHER HORMONES | Approval | 1 |
| 3956 | UNSPECIFIED | Humatrope | OTHER HORMONES | Approval | 1 |
| 3956 | UNSPECIFIED | Humatrope | OTHER HORMONES | Denial | 1 |
| 3961 | UNSPECIFIED | Humatrope | OTHER HORMONES | No Response | 1 |
| 3962 | UNSPECIFIED | Norditropin | OTHER HORMONES | No Response | 1 |
| 3963 | UNSPECIFIED | Norditropin | OTHER HORMONES | Approval | 2 |
| 3963 | UNSPECIFIED | Norditropin | OTHER HORMONES | Denial | 1 |
| 3956 | UNSPECIFIED | Octreotide Acetate 200MCG/ML IJ SOLN | OTHER HORMONES | Approval | 1 |
| 3951 | EMERGENCY MEDICINE, PEDIATRIC | Norditropin | OTHER HORMONES | No Response | 1 |
| 3963 | EMERGENCY MEDICINE, PEDIATRIC | Norditropin | OTHER HORMONES | No Response | 1 |
| 3951 | ENDOCRINOLOGY, PEDIATRIC | Genotropin | OTHER HORMONES | Denial | 1 |
| 3963 | ENDOCRINOLOGY, PEDIATRIC | Genotropin | OTHER HORMONES | No Response | 1 |
| 3963 | ENDOCRINOLOGY, PEDIATRIC | Norditropin | OTHER HORMONES | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|----------------------------------|-------------|-------|
| 3963 | FAMILY PRACTICE | Norditropin | OTHER HORMONES | Denial | 1 |
| 3963 | FAMILY PRACTICE | octreotide acetate | OTHER HORMONES | Approval | 1 |
| 3961 | INTERNAL MEDICINE | Humatrope | OTHER HORMONES | No Response | 1 |
| 3956 | INTERNAL MEDICINE | octreotide acetate | OTHER HORMONES | Denial | 1 |
| 3963 | NURSE PRACTITIONER, ACUTE CARE | Genotropin MiniQuick (Somatropin) 0.4 MG Subcutaneous Each | OTHER HORMONES | No Response | 1 |
| 3963 | NURSE PRACTITIONER, ACUTE CARE | Norditropin | OTHER HORMONES | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Norditropin | OTHER HORMONES | Denial | 1 |
| 3963 | PEDIATRICS | Genotropin | OTHER HORMONES | Denial | 1 |
| 3962 | PEDIATRICS | Norditropin | OTHER HORMONES | Denial | 1 |
| 3963 | PEDIATRICS | Norditropin | OTHER HORMONES | Approval | 1 |
| 3963 | PEDIATRICS | Norditropin | OTHER HORMONES | No Response | 1 |
| 3951 | PHYSICIAN, ENDOCRINOLOGY | Genotropin 5MG SC SOLR | OTHER HORMONES | No Response | 1 |
| 3956 | UNSPECIFIED | Armodafinil 150mg | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3965 | UNSPECIFIED | Armodafinil 150mg | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3956 | UNSPECIFIED | Armodafinil 200 MG Oral Tablet | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 2 |
| 3956 | UNSPECIFIED | Armodafinil 250 MG Oral Tablet | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Desvenlafaxine ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3951 | UNSPECIFIED | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3956 | UNSPECIFIED | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 5 |
| 3956 | UNSPECIFIED | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 3 |
| 3956 | UNSPECIFIED | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 1 |
| 3951 | UNSPECIFIED | Desvenlafaxine Succinate ER 100MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3963 | UNSPECIFIED | Desvenlafaxine Succinate ER 100MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3956 | UNSPECIFIED | Desvenlafaxine Succinate ER 25MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 5 |
| 3956 | UNSPECIFIED | Desvenlafaxine Succinate ER 25MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3951 | UNSPECIFIED | Desvenlafaxine Succinate ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3951 | UNSPECIFIED | Desvenlafaxine Succinate ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3956 | UNSPECIFIED | Desvenlafaxine Succinate ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 3 |
| 3961 | UNSPECIFIED | Desvenlafaxine Succinate ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3963 | UNSPECIFIED | Desvenlafaxine Succinate ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Desvenlafaxine Succinate ER Tablet 25mg | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Viibryd (vilazodone) | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3956 | UNSPECIFIED | Viibryd 10MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3951 | UNSPECIFIED | Viibryd 20MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Viibryd 20MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | UNSPECIFIED | Viibryd 40MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 4 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|----------------------------------|-------------|-------|
| 3963 | UNSPECIFIED | Viibryd Starter Pack 10 & 20MG OR KIT | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3961 | EMERGENCY MEDICINE | Desvenlafaxine Succinate ER 100MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | EMERGENCY MEDICINE | Viibryd 20MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Armodafinil 150mg | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Armodafinil 250mg | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | DESVENLAFAX TAB 25MG | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 1 |
| 3963 | FAMILY PRACTICE | DESVENLAFAXINE ER 25MG ER TAB | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 1 |
| 3956 | FAMILY PRACTICE | DESVENLAFAXINE ER 50MG ER TAB | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 4 |
| 3956 | FAMILY PRACTICE | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Desvenlafaxine Succinate ER 100MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Desvenlafaxine Succinate ER 100MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 2 |
| 3956 | FAMILY PRACTICE | Desvenlafaxine Succinate ER 25MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 3 |
| 3961 | FAMILY PRACTICE | Desvenlafaxine Succinate ER 25MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Desvenlafaxine Succinate ER 25MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Desvenlafaxine Succinate ER 25MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Desvenlafaxine Succinate ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 3 |
| 3956 | FAMILY PRACTICE | Viibryd (vilazodone) | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Viibryd (vilazodone) | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Viibryd 20MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Viibryd 20MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Viibryd 40MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Viibryd 40MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Desvenlafaxine Succinate ER 25MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Desvenlafaxine Succinate ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | NEUROLOGY | Armodafinil 200mg | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | NEUROLOGY | Armodafinil 250mg | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Desvenlafaxine Succinate ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3961 | NURSE PRACTITIONER, ADULT HEALTH | Armodafinil 150 MG Oral Tablet | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, ADULT HEALTH | Armodafinil 250 MG Oral Tablet | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, ADULT HEALTH | Armodafinil 250mg | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|----------------------------------|-------------|-------|
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | desvenlafaxine succinate 50 mg tablet extended release 24 hr | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Desvenlafaxine Succinate ER (Desvenlafaxine Succinate) 50 MG Oral Tablet | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Desvenlafaxine Succinate ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Desvenlafaxine Succinate ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Viibryd | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Viibryd 10MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Viibryd 10MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Viibryd 20MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Viibryd 20MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 2 |
| 3961 | NURSE PRACTITIONER, FAMILY HEALTH | Viibryd 20MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, PEDIATRIC CARE | Desvenlafaxine Succinate ER 25MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, PSYCHIATRIC | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Desvenlafaxine ER | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, UNSPECIFIED | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Desvenlafaxine Succinate ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Viibryd (Vilazodone HCl) 20 MG Oral Tablet | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Viibryd (Vilazodone HCl) 40 MG Oral Tablet | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Viibryd (vilazodone) | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Viibryd 20MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Viibryd 40MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3961 | OBSTETRICS & GYNECOLOGY | Desvenlafaxine Succinate ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3951 | PEDIATRICS | Viibryd 20MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Armodafinil 150mg | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Viibryd 20MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 1 |
| 3963 | PHYSICIAN, SURGERY, GENERAL | Desvenlafaxine ER Tab | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | PSYCHIATRY | Armodafinil 200mg | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3951 | PSYCHIATRY | Desvenlafaxine Succinate ER 100MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | PSYCHIATRY | Desvenlafaxine Succinate ER 100MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | PSYCHIATRY | Desvenlafaxine Succinate ER 100MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 1 |
| 3951 | PSYCHIATRY | Desvenlafaxine Succinate ER 25MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | PSYCHIATRY | Desvenlafaxine Succinate ER 25MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|----------------------------------|-------------|-------|
| 3956 | PSYCHIATRY | Desvenlafaxine Succinate ER 25MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3956 | PSYCHIATRY | Desvenlafaxine Succinate ER 50MG OR TB24 | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 2 |
| 3956 | PSYCHIATRY | Viibryd (Vilazodone HCl) 40 MG Oral Tablet | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | No Response | 1 |
| 3956 | PSYCHIATRY | Viibryd (vilazodone) | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3963 | PSYCHIATRY | Viibryd 10MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3956 | PSYCHIATRY | Viibryd 20MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Denial | 1 |
| 3956 | PSYCHIATRY | Viibryd 40MG OR TABS | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3951 | PULMONARY DISEASES | Armodafinil 150mg | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| 3951 | PULMONARY DISEASES | Armodafinil 200mg | PSYCHOSTIMULANTS-ANTIDEPRESSANTS | Approval | 1 |
| BCBSAR | UNSPECIFIED | Synagis | RESPIRATORY AGENT | Denial | 1 |
| BCBSAR | FAMILY PRACTICE | Synagis | RESPIRATORY AGENT | Approval | 1 |
| BCBSAR | FAMILY PRACTICE | Synagis | RESPIRATORY AGENT | Denial | 1 |
| BCBSAR | PEDIATRICS | Synagis | RESPIRATORY AGENT | Approval | 2 |
| BCBSAR | PEDIATRICS | Synagis | RESPIRATORY AGENT | Denial | 3 |
| BCBSAR | PEDIATRICS | Synagis | RESPIRATORY AGENT | No Response | 1 |
| 3963 | UNSPECIFIED | Budesonide 1MG/2ML IN SUSP | RESPIRATORY AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Daliresp (roflumilast) | RESPIRATORY AGENTS | Denial | 1 |
| 3956 | UNSPECIFIED | Daliresp 250MCG OR TABS | RESPIRATORY AGENTS | Approval | 4 |
| 3956 | UNSPECIFIED | Daliresp 500MCG OR TABS | RESPIRATORY AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Nucala 100MG/ML SC SOAJ | RESPIRATORY AGENTS | No Response | 2 |
| 3956 | UNSPECIFIED | Spiriva HandiHaler 18MCG IN CAPS | RESPIRATORY AGENTS | No Response | 1 |
| 3956 | UNSPECIFIED | Tobramycin inhalation solution | RESPIRATORY AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Trelegy Ellipta 100-62.5-25MCG/INH IN AEPB | RESPIRATORY AGENTS | No Response | 1 |
| 3956 | UNSPECIFIED | Xolair 150MG/ML SC SOSY | RESPIRATORY AGENTS | Approval | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | Trelegy Ellipta | RESPIRATORY AGENTS | No Response | 1 |
| 3963 | ALLERGY & IMMUNOLOGY | Trelegy Ellipta 200-62.5-25MCG/INH IN AEPB | RESPIRATORY AGENTS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Budesonide 1MG/2ML IN SUSP | RESPIRATORY AGENTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Budesonide 1mg/2mL Suspension | RESPIRATORY AGENTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Daliresp 250MCG OR TABS | RESPIRATORY AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Spiriva HandiHaler 18MCG IN CAPS | RESPIRATORY AGENTS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Spiriva Respimat 1.25MCG/ACT IN AERS | RESPIRATORY AGENTS | Denial | 1 |
| 3956 | GASTROENTEROLOGY | Budesonide 1MG/2ML IN SUSP | RESPIRATORY AGENTS | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Daliresp 500MCG OR TABS | RESPIRATORY AGENTS | Approval | 2 |
| 3956 | INTERNAL MEDICINE | Daliresp 500MCG OR TABS | RESPIRATORY AGENTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Budesonide 1MG/2ML IN SUSP | RESPIRATORY AGENTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Daliresp 500MCG OR TABS | RESPIRATORY AGENTS | Approval | 1 |
| 3961 | NURSE PRACTITIONER, PEDIATRIC CARE | Budesonide 1mg/2mL Suspension | RESPIRATORY AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|-------------------------------|---------------------------|-------------|-------|
| 3956 | OTOLARYNGOLOGY | Budesonide 1mg/2mL Suspension | RESPIRATORY AGENTS | No Response | 1 |
| 3961 | PEDIATRICS | Xolair 150MG/ML SC SOSY | RESPIRATORY AGENTS | No Response | 1 |
| 3956 | PULMONARY DISEASES | Daliresp 500MCG OR TABS | RESPIRATORY AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Belsomra (suvorexant) | SEDATIVE NON-BARBITURATE | Denial | 1 |
| 3965 | UNSPECIFIED | Belsomra (suvorexant) | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3951 | UNSPECIFIED | Belsomra 10MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3963 | UNSPECIFIED | Belsomra 15MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3951 | UNSPECIFIED | Belsomra 20MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3956 | UNSPECIFIED | Belsomra 20MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 3 |
| 3956 | UNSPECIFIED | Belsomra 20MG OR TABS | SEDATIVE NON-BARBITURATE | Denial | 1 |
| 3951 | ANESTHESIOLOGY | Belsomra 5MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Belsomra 5MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3963 | EMERGENCY MEDICINE | Belsomra (suvorexant) | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3956 | EMERGENCY MEDICINE | Belsomra 20MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3956 | FAMILY PRACTICE | Belsomra (suvorexant) | SEDATIVE NON-BARBITURATE | Denial | 2 |
| 3963 | FAMILY PRACTICE | Belsomra (suvorexant) | SEDATIVE NON-BARBITURATE | Denial | 2 |
| 3956 | FAMILY PRACTICE | Belsomra 10MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 2 |
| 3964 | FAMILY PRACTICE | Belsomra 10MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3956 | FAMILY PRACTICE | Belsomra 15MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3961 | FAMILY PRACTICE | Belsomra 20MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3963 | FAMILY PRACTICE | Belsomra 20MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3964 | FAMILY PRACTICE | Belsomra 20MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Belsomra 20MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3956 | NURSE PRACTITIONER, ADULT HEALTH | Belsomra (suvorexant) | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Belsomra (suvorexant) | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Belsomra (suvorexant) | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Belsomra 10MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Belsomra 10MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Belsomra 20MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3964 | NURSE PRACTITIONER, UNSPECIFIED | Belsomra (suvorexant) | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Belsomra 10MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3963 | PSYCHIATRY | Belsomra 15MG OR TABS | SEDATIVE NON-BARBITURATE | Approval | 1 |
| 3956 | UNSPECIFIED | Hetlioz | SEDATIVES/HYPNOTICS | Denial | 1 |
| 3951 | INTERNAL MEDICINE | Hetlioz | SEDATIVES/HYPNOTICS | No Response | 1 |
| 3951 | OPHTHALMOLOGY | Hetlioz | SEDATIVES/HYPNOTICS | No Response | 1 |
| 3963 | ENDOCRINOLOGY, DIABETES & METABOLISM | Somatuline | SOMATOSTATIN ANALOG | Approval | 1 |
| 3963 | UNSPECIFIED | Acamprosate | SUBSTANCE ABUSE AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3951 | UNSPECIFIED | Acamprosate Calcium 333MG OR TBEC | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Acamprosate Calcium 333MG OR TBEC | SUBSTANCE ABUSE AGENTS | No Response | 2 |
| 3956 | UNSPECIFIED | Buprenorphine 10mcg/hr TD Patch Weekly | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3956 | UNSPECIFIED | Buprenorphine 10mcg/hr TD Patch Weekly | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3956 | UNSPECIFIED | Buprenorphine 10MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 3 |
| 3956 | UNSPECIFIED | Buprenorphine 10MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3963 | UNSPECIFIED | Buprenorphine 10MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Buprenorphine 15MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 5 |
| 3956 | UNSPECIFIED | Buprenorphine 20mcg/hr TD Patch Weekly | SUBSTANCE ABUSE AGENTS | Approval | 2 |
| 3956 | UNSPECIFIED | Buprenorphine 20MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3956 | UNSPECIFIED | Buprenorphine 20MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3956 | UNSPECIFIED | Buprenorphine 5MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Buprenorphine 7.5MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | No Response | 2 |
| 3956 | UNSPECIFIED | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | Approval | 2 |
| 3956 | UNSPECIFIED | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3956 | UNSPECIFIED | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3963 | UNSPECIFIED | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3951 | UNSPECIFIED | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3956 | UNSPECIFIED | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 8 |
| 3963 | UNSPECIFIED | Buprenorphine Sublingual Tablets | SUBSTANCE ABUSE AGENTS | Denial | 2 |
| 3956 | UNSPECIFIED | Vivitrol 380MG IM SUSR | SUBSTANCE ABUSE AGENTS | Approval | 2 |
| 3956 | ANESTHESIOLOGY | Buprenorphine 10MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 2 |
| 3956 | ANESTHESIOLOGY | Buprenorphine 15MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 3 |
| 3963 | ANESTHESIOLOGY | Buprenorphine 15MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3951 | ANESTHESIOLOGY | Buprenorphine 20MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 2 |
| 3956 | ANESTHESIOLOGY | Buprenorphine 5MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3956 | ANESTHESIOLOGY | Buprenorphine 7.5MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 2 |
| 3956 | ANESTHESIOLOGY | buprenorphine HCl 300 mcg film | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3951 | ANESTHESIOLOGY | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3951 | ANESTHESIOLOGY | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3956 | ANESTHESIOLOGY | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 3 |
| 3963 | ANESTHESIOLOGY | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3963 | ANESTHESIOLOGY | Buprenorphine Sublingual Tablets | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3965 | ANESTHESIOLOGY | Buprenorphine Sublingual Tablets | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3963 | EMERGENCY MEDICINE | Buprenorphine 5mcg/hr TD Patch Weekly | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3956 | EMERGENCY MEDICINE | Buprenorphine 5MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|---|---------------------------|-------------|-------|
| 3951 | EMERGENCY MEDICINE | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3963 | EMERGENCY MEDICINE | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3951 | EMERGENCY MEDICINE | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3956 | EMERGENCY MEDICINE | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 2 |
| 3956 | EMERGENCY MEDICINE | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3956 | FAMILY PRACTICE | Acamprosate Calcium 333MG OR TBEC | SUBSTANCE ABUSE AGENTS | Approval | 2 |
| 3951 | FAMILY PRACTICE | Buprenorphine 20mcg/hr TD Patch Weekly | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3951 | FAMILY PRACTICE | buprenorphine HCl 8 mg sublingual tablet | SUBSTANCE ABUSE AGENTS | No Response | 2 |
| 3956 | FAMILY PRACTICE | buprenorphine HCl 8 mg sublingual tablet | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3956 | FAMILY PRACTICE | buprenorphine hcl 8 mg tablet, sublingual | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3951 | FAMILY PRACTICE | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | Denial | 3 |
| 3963 | FAMILY PRACTICE | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 8 |
| 3963 | FAMILY PRACTICE | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 2 |
| 3963 | FAMILY PRACTICE | Buprenorphine Sublingual Tablets | SUBSTANCE ABUSE AGENTS | Denial | 2 |
| 3963 | FAMILY PRACTICE | Buprenorphine Sublingual Tablets | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3964 | FAMILY PRACTICE | Buprenorphine-Naloxone 8mg-2mg SL Tablets | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3956 | INTERNAL MEDICINE | Acamprosate Calcium 333MG OR TBEC | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Buprenorphine 5MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | Approval | 2 |
| 3963 | INTERNAL MEDICINE | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3951 | INTERNAL MEDICINE | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 2 |
| 3956 | INTERNAL MEDICINE | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 2 |
| 3963 | INTERNAL MEDICINE | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 2 |
| 3964 | INTERNAL MEDICINE | Buprenorphine Sublingual Tablets | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3965 | NEUROLOGY | Buprenorphine 15MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Buprenorphine 20MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, ADULT HEALTH | Acamprosate Calcium 333MG OR TBEC | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Buprenorphine 5MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | buprenorphine HCl 8 mg sublingual tablet | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 3 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|---|--|-------------------------------|-------------|-------|
| 3956 | NURSE PRACTITIONER, PSYCHIATRIC | Vivitrol 380MG IM SUSR | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Buprenorphine 15mcg/hr TD Patch Weekly | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Buprenorphine 15MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 2 |
| 3956 | PAIN MEDICINE | Buprenorphine 10MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3956 | PAIN MEDICINE | Buprenorphine 15MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3956 | PEDIATRICS | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3951 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | Denial | 2 |
| 3951 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | No Response | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Buprenorphine HCl 8MG SL SUBL | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3951 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3956 | PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION / PHYSIATRY | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 2 |
| 3956 | PSYCHIATRY | Acamprosate | SUBSTANCE ABUSE AGENTS | Approval | 2 |
| 3956 | PSYCHIATRY | Acamprosate Calcium 333MG OR TBEC | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3956 | PSYCHIATRY | Buprenorphine SL 8 mg Tab | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3963 | PSYCHIATRY | Buprenorphine Sublingual Tablets | SUBSTANCE ABUSE AGENTS | Denial | 1 |
| 3956 | PSYCHIATRY, ADDICTION | Acamprosate Calcium 333MG OR TBEC | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3956 | PSYCHIATRY, CHILD & ADOLESCENT | Vivitrol 380MG IM SUSR | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3964 | RHEUMATOLOGY | Buprenorphine 15MCG/HR TD PTWK | SUBSTANCE ABUSE AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 3 |
| 3956 | UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 6 |
| 3956 | UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Denial | 2 |
| 3956 | UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | No Response | 1 |
| 3963 | UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 8 |
| 3963 | UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Denial | 2 |
| 3963 | UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | No Response | 2 |
| 3964 | UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 2 |
| 3965 | UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 1 |
| 3965 | UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | No Response | 1 |
| 3951 | UNSPECIFIED | Skyrizi 150MG/ML SC SOSY | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Skyrizi Pen 150MG/ML SC SOAJ | SYSTEMIC ANTIPSORIASIS AGENTS | No Response | 1 |
| 3951 | DERMATOLOGY | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 3 |
| 3956 | DERMATOLOGY | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 8 |
| 3956 | DERMATOLOGY | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Denial | 2 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|-------------------------------|-------------|-------|
| 3956 | DERMATOLOGY | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | No Response | 2 |
| 3961 | DERMATOLOGY | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 7 |
| 3963 | DERMATOLOGY | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Denial | 3 |
| 3963 | DERMATOLOGY | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | No Response | 5 |
| 3963 | DERMATOLOGY | SKYRIZI 150MG/ML PEN | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 1 |
| 3963 | DERMATOLOGY | SKYRIZI 150MG/ML PEN | SYSTEMIC ANTIPSORIASIS AGENTS | No Response | 1 |
| 3956 | DERMATOLOGY | Skyrizi Pen 150MG/ML SC SOAJ | SYSTEMIC ANTIPSORIASIS AGENTS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 1 |
| 3963 | NURSE PRACTITIONER, UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 1 |
| 3951 | PHYSICIAN ASSISTANT, UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | No Response | 1 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 4 |
| 3956 | PHYSICIAN ASSISTANT, UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | No Response | 3 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 2 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | No Response | 1 |
| 3964 | PHYSICIAN ASSISTANT, UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 1 |
| 3967 | PHYSICIAN ASSISTANT, UNSPECIFIED | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Denial | 1 |
| 3963 | REGISTERED NURSE, GENERAL PRACTICE | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | Approval | 1 |
| 3963 | REGISTERED NURSE, GENERAL PRACTICE | Skyrizi | SYSTEMIC ANTIPSORIASIS AGENTS | No Response | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Lo Loestrin Fe | SYSTEMIC CONTRACEPTIVES | No Response | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Lo Loestrin Fe 1 MG-10 MCG /10 MCG OR TABS | SYSTEMIC CONTRACEPTIVES | No Response | 1 |
| 3951 | UNSPECIFIED | Orilissa 150mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | Orilissa 150mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Denial | 1 |
| 3956 | UNSPECIFIED | Orilissa 150mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Orilissa 150mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Approval | 1 |
| 3963 | UNSPECIFIED | Orilissa 200mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Approval | 2 |
| 3963 | UNSPECIFIED | Orilissa 200mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Denial | 1 |
| 3963 | UNSPECIFIED | Orilissa 200mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Orilissa 200mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Denial | 2 |
| 3963 | NURSE PRACTITIONER, WOMEN'S HEALTH | Orilissa 200mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | No Response | 1 |
| 3951 | OBSTETRICS & GYNECOLOGY | Orilissa 150mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Denial | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Orilissa 150mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Approval | 1 |
| 3956 | OBSTETRICS & GYNECOLOGY | Orilissa 150mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Denial | 1 |
| 3961 | OBSTETRICS & GYNECOLOGY | Orilissa 150mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Approval | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Orilissa 150mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Approval | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Orilissa 150mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3964 | OBSTETRICS & GYNECOLOGY | Orilissa 150mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | No Response | 1 |
| 3965 | OBSTETRICS & GYNECOLOGY | Orilissa 150mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Denial | 2 |
| 3956 | OBSTETRICS & GYNECOLOGY | Orilissa 200mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Approval | 2 |
| 3956 | OBSTETRICS & GYNECOLOGY | Orilissa 200mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Denial | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Orilissa 200mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Approval | 1 |
| 3963 | OBSTETRICS & GYNECOLOGY | Orilissa 200mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Denial | 1 |
| 3965 | OBSTETRICS & GYNECOLOGY | Orilissa 200mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Approval | 1 |
| 3967 | OBSTETRICS & GYNECOLOGY | Orilissa 200mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Approval | 1 |
| 3963 | REGISTERED NURSE, UNSPECIFIED | Orilissa 150mg Tablets (elagolix) | SYSTEMIC HORMONAL AGENTS | Approval | 1 |
| 3951 | UNSPECIFIED | cinacalcet | THYROID PRODUCT | Approval | 1 |
| 3956 | FAMILY PRACTICE | cinacalcet | THYROID PRODUCT | Approval | 1 |
| 3956 | INTERNAL MEDICINE | cinacalcet | THYROID PRODUCT | Approval | 1 |
| 3956 | INTERNAL MEDICINE | cinacalcet | THYROID PRODUCT | Denial | 1 |
| 3962 | INTERNAL MEDICINE | Cinacalcet HCl 30MG OR TABS | THYROID PRODUCT | Approval | 1 |
| 3956 | NEPHROLOGY / RENAL MEDICINE | cinacalcet | THYROID PRODUCT | Approval | 1 |
| 3956 | NEPHROLOGY / RENAL MEDICINE | cinacalcet | THYROID PRODUCT | No Response | 1 |
| 3956 | NEPHROLOGY / RENAL MEDICINE | Cinacalcet HCl 30MG OR TABS | THYROID PRODUCT | Approval | 1 |
| 3963 | PHYSICIAN, ENDOCRINOLOGY | cinacalcet | THYROID PRODUCT | Approval | 1 |
| 3956 | FAMILY PRACTICE | Mometasone Furoate 0.1% EX CREA | Topical Steroid | Approval | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Mometasone 0.1% Solution (Lotion) | Topical Steroid | Approval | 1 |
| 3951 | UNSPECIFIED | Nitrofurantoin Monohyd Macro 100MG OR CAPS | URINARY ANTIBACTERIALS | Approval | 1 |
| 3951 | UNSPECIFIED | Nitrofurantoin Monohyd Macro 100MG OR CAPS | URINARY ANTIBACTERIALS | No Response | 1 |
| 3961 | UNSPECIFIED | Opsumit 10MG OR TABS | VASODILATORS | No Response | 1 |
| 3951 | UNSPECIFIED | Sildenafil Citrate (Sildenafil Citrate (Pulmonary Hypertension)) 20 MG Oral Tablet | VASODILATORS | No Response | 2 |
| 3956 | UNSPECIFIED | Sildenafil Citrate (Sildenafil Citrate (Pulmonary Hypertension)) 20 MG Oral Tablet | VASODILATORS | No Response | 3 |
| 3964 | UNSPECIFIED | Sildenafil Citrate 20MG OR TABS | VASODILATORS | Denial | 1 |
| 3951 | UNSPECIFIED | sildenafil tablets | VASODILATORS | Denial | 1 |
| 3956 | UNSPECIFIED | sildenafil tablets | VASODILATORS | Denial | 2 |
| 3956 | UNSPECIFIED | sildenafil tablets | VASODILATORS | No Response | 1 |
| 3956 | UNSPECIFIED | Tadalafil 2.5mg | VASODILATORS | Denial | 1 |
| 3963 | UNSPECIFIED | Tadalafil 2.5mg | VASODILATORS | Denial | 1 |
| 3963 | UNSPECIFIED | tadalafil 20 mg tablet (pulmonary hypertension) | VASODILATORS | Denial | 1 |
| 3956 | UNSPECIFIED | tadalafil 20mg | VASODILATORS | No Response | 1 |
| 3963 | UNSPECIFIED | tadalafil 20mg | VASODILATORS | Denial | 1 |
| 3956 | UNSPECIFIED | Tadalafil 5 MG Oral Tablet | VASODILATORS | No Response | 2 |
| 3961 | UNSPECIFIED | tadalafil 5 mg tablet | VASODILATORS | No Response | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3956 | UNSPECIFIED | Tadalafil 5mg | VASODILATORS | Denial | 1 |
| 3951 | UNSPECIFIED | Tadalafil 5MG OR TABS | VASODILATORS | Denial | 1 |
| 3956 | UNSPECIFIED | Tadalafil 5MG OR TABS | VASODILATORS | Approval | 1 |
| 3956 | UNSPECIFIED | Tadalafil 5MG OR TABS | VASODILATORS | Denial | 3 |
| 3963 | UNSPECIFIED | Tadalafil 5MG OR TABS | VASODILATORS | Approval | 1 |
| 3956 | CARDIOLOGY | Alyq | VASODILATORS | Approval | 1 |
| 3956 | CARDIOLOGY | Opsumit 10MG OR TABS | VASODILATORS | Approval | 2 |
| 3956 | CARDIOLOGY | tadalafil 20mg | VASODILATORS | Approval | 2 |
| 3963 | CARDIOLOGY | tadalafil 20mg | VASODILATORS | Approval | 1 |
| 3963 | DENTIST, GENERAL PRACTICE | Sildenafil Citrate 20MG OR TABS | VASODILATORS | Approval | 1 |
| 3956 | FAMILY PRACTICE | sildenafil (pulmonary hypertension) 20 mg tablet | VASODILATORS | No Response | 1 |
| 3963 | FAMILY PRACTICE | sildenafil (pulmonary hypertension) 20 mg tablet | VASODILATORS | No Response | 1 |
| 3951 | FAMILY PRACTICE | Sildenafil Citrate 20MG OR TABS | VASODILATORS | No Response | 3 |
| 3956 | FAMILY PRACTICE | Sildenafil Citrate 20MG OR TABS | VASODILATORS | Denial | 4 |
| 3956 | FAMILY PRACTICE | Sildenafil Citrate 20MG OR TABS | VASODILATORS | No Response | 1 |
| 3963 | FAMILY PRACTICE | Sildenafil Citrate 20MG OR TABS | VASODILATORS | Denial | 2 |
| 3963 | FAMILY PRACTICE | Sildenafil Citrate 20MG OR TABS | VASODILATORS | No Response | 1 |
| 3951 | FAMILY PRACTICE | sildenafil tablets | VASODILATORS | Denial | 3 |
| 3956 | FAMILY PRACTICE | sildenafil tablets | VASODILATORS | Approval | 1 |
| 3956 | FAMILY PRACTICE | sildenafil tablets | VASODILATORS | Denial | 2 |
| 3963 | FAMILY PRACTICE | sildenafil tablets | VASODILATORS | Denial | 6 |
| 3965 | FAMILY PRACTICE | sildenafil tablets | VASODILATORS | Denial | 2 |
| 3956 | FAMILY PRACTICE | Tadalafil 2.5MG OR TABS | VASODILATORS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Tadalafil 5mg | VASODILATORS | Approval | 1 |
| 3956 | FAMILY PRACTICE | Tadalafil 5mg | VASODILATORS | Denial | 1 |
| 3963 | FAMILY PRACTICE | Tadalafil 5mg | VASODILATORS | Denial | 1 |
| 3951 | FAMILY PRACTICE | Tadalafil 5MG OR TABS | VASODILATORS | Approval | 1 |
| 3951 | FAMILY PRACTICE | Tadalafil 5MG OR TABS | VASODILATORS | Denial | 1 |
| 3956 | FAMILY PRACTICE | Tadalafil 5MG OR TABS | VASODILATORS | Approval | 3 |
| 3956 | FAMILY PRACTICE | Tadalafil 5MG OR TABS | VASODILATORS | Denial | 4 |
| 3961 | FAMILY PRACTICE | Tadalafil 5MG OR TABS | VASODILATORS | Approval | 1 |
| 3963 | FAMILY PRACTICE | Tadalafil 5MG OR TABS | VASODILATORS | Approval | 1 |
| 3956 | GENERAL PRACTICE | Tadalafil 5mg | VASODILATORS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Sildenafil Citrate (Sildenafil Citrate (Pulmonary Hypertension)) 20 MG Oral Tablet | VASODILATORS | No Response | 1 |
| 3956 | INTERNAL MEDICINE | Sildenafil Citrate 20MG OR TABS | VASODILATORS | Denial | 1 |
| 3963 | INTERNAL MEDICINE | Sildenafil Citrate 20MG OR TABS | VASODILATORS | Denial | 1 |

| Carrier | Prescriber Primary Specialty Description | Drug | Standard Code Description | Decision | Count |
|---------|--|--|---------------------------|-------------|-------|
| 3951 | INTERNAL MEDICINE | sildenafil tablets | VASODILATORS | Denial | 1 |
| 3956 | INTERNAL MEDICINE | Tadalafil 5mg | VASODILATORS | Approval | 1 |
| 3963 | INTERNAL MEDICINE | Tadalafil 5mg | VASODILATORS | Approval | 1 |
| 3961 | INTERNAL MEDICINE | Tadalafil 5MG OR TABS | VASODILATORS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, ACUTE CARE | Tadalafil 5 MG Oral Tablet | VASODILATORS | No Response | 1 |
| 3965 | NURSE PRACTITIONER, FAMILY HEALTH | sildenafil (REVATIO) 20 MG tablet | VASODILATORS | No Response | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Sildenafil Citrate (Sildenafil Citrate (Pulmonary Hypertension)) 20 MG Oral Tablet | VASODILATORS | No Response | 1 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | Sildenafil Citrate (Sildenafil Citrate (Pulmonary Hypertension)) 20 MG Oral Tablet | VASODILATORS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | sildenafil tablets | VASODILATORS | Denial | 2 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | sildenafil tablets | VASODILATORS | Denial | 2 |
| 3963 | NURSE PRACTITIONER, FAMILY HEALTH | sildenafil tablets | VASODILATORS | Denial | 2 |
| 3951 | NURSE PRACTITIONER, FAMILY HEALTH | Tadalafil 5MG OR TABS | VASODILATORS | Denial | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Tadalafil 5MG OR TABS | VASODILATORS | Approval | 1 |
| 3956 | NURSE PRACTITIONER, FAMILY HEALTH | Tadalafil 5MG OR TABS | VASODILATORS | Denial | 2 |
| 3956 | NURSE PRACTITIONER, UNSPECIFIED | sildenafil tablets | VASODILATORS | No Response | 1 |
| 3951 | NURSE PRACTITIONER, WOMEN'S HEALTH | sildenafil tablets | VASODILATORS | Denial | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Sildenafil Citrate (Sildenafil Citrate (Pulmonary Hypertension)) 20 MG Oral Tablet | VASODILATORS | No Response | 1 |
| 3963 | PHYSICIAN ASSISTANT, UNSPECIFIED | Tadalafil 5MG OR TABS | VASODILATORS | Approval | 1 |
| 3956 | PSYCHOLOGIST, SCHOOL | sildenafil tablets | VASODILATORS | Denial | 1 |
| 3956 | PULMONARY DISEASES | sildenafil tablets | VASODILATORS | Approval | 1 |
| 3956 | RHEUMATOLOGY | sildenafil tablets | VASODILATORS | Approval | 1 |
| 3956 | UROLOGY | Sildenafil Citrate 20MG OR TABS | VASODILATORS | No Response | 1 |
| 3956 | UROLOGY | Tadalafil 5mg | VASODILATORS | Approval | 1 |
| 3956 | UROLOGY | Tadalafil 5mg | VASODILATORS | Denial | 2 |
| 3951 | UROLOGY | Tadalafil 5MG OR TABS | VASODILATORS | Approval | 1 |
| 3956 | UROLOGY | Tadalafil 5MG OR TABS | VASODILATORS | Approval | 4 |
| 3956 | UROLOGY | Tadalafil 5MG OR TABS | VASODILATORS | Denial | 3 |
| 3963 | UROLOGY | Tadalafil 5MG OR TABS | VASODILATORS | Approval | 1 |
| 3963 | UROLOGY | Tadalafil 5MG OR TABS | VASODILATORS | Denial | 1 |