



Pharmacy Specialty Overview by Prior Authorization Approval or Denial 3rd Quarter 2024

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3961	FAMILY PRACTICE	ABIRATERONE	ONCOLOGY	APPROVED	1
3956	MEDICAL ONCOLOGY	ABIRATERONE	ONCOLOGY	APPROVED	1
3951	MEDICAL ONCOLOGY	ABIRATERONE	ONCOLOGY	APPROVED	1
3956	HEMATOLOGY & ONCOLOGY	ABIRATERONE	ONCOLOGY	APPROVED	1
3956	HEMATOLOGY & ONCOLOGY	ABIRATERONE	ONCOLOGY	DENIED	1
3956	MEDICAL ONCOLOGY	ABIRATERONE	ONCOLOGY	DENIED	1
3963	HEMATOLOGY & ONCOLOGY	ABIRATERONE	ONCOLOGY	APPROVED	1
3956	INTERNAL MEDICINE	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	FAMILY PRACTICE	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	INTERNAL MEDICINE	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	INTERNAL MEDICINE	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	RHEUMATOLOGY	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	RHEUMATOLOGY	ACTEMRA SQ 162MG SYRINGE/ACTPEN AUTOIN- JECTOR	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	RHEUMATOLOGY	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	PEDIATRICS	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	1
3963	FAMILY PRACTICE	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	1
3969	UNSPECIFIED SPECIALTY	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	1
3964	INTERNAL MEDICINE	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	1
3963	UNSPECIFIED SPECIALTY	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	4
3951	RHEUMATOLOGY	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	DERMATOLOGY	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3962	UNSPECIFIED SPECIALTY	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	1
3963	INTERNAL MEDICINE	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	3
3963	RHEUMATOLOGY	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	2
3956	GASTROENTEROLOGY	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3963	NURSE PRACTITIONER, ACUTE CARE	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3956	RHEUMATOLOGY	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3964	NURSE PRACTITIONER, ACUTE CARE	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	1
3963	FAMILY PRACTICE	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	2
3969	FAMILY PRACTICE	ADALIMUMAB-ADAZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	1
3969	UNSPECIFIED SPECIALTY	ADALIMUMAB-ADBM	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	1
3964	UNSPECIFIED SPECIALTY	ADBRY	ATOPIC DERMATITIS	APPROVED	1
3963	UNSPECIFIED SPECIALTY	ADBRY	ATOPIC DERMATITIS	DENIED	4
3969	UNSPECIFIED SPECIALTY	ADBRY	ATOPIC DERMATITIS	APPROVED	2
3963	UNSPECIFIED SPECIALTY	ADBRY	ATOPIC DERMATITIS	APPROVED	1
3956	INTERNAL MEDICINE	ADEMPAS	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3965	UNSPECIFIED SPECIALTY	AMBRISENTAN	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3951	UNSPECIFIED SPECIALTY	AMBRISENTAN	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3964	UNSPECIFIED SPECIALTY	AMBRISENTAN	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3964	UNSPECIFIED SPECIALTY	AMPYRA	MULTIPLE SCLEROSIS	DENIED	1
3963	UNSPECIFIED SPECIALTY	ARANESP	ANEMIA	APPROVED	1
3956	UNSPECIFIED SPECIALTY	ARANESP	ANEMIA	APPROVED	1
3956	NURSE PRACTITIONER, ADULT HEALTH	AUBAGIO	MULTIPLE SCLEROSIS	APPROVED	1
3963	UNSPECIFIED SPECIALTY	AUSTEDO	MOVEMENT DISORDERS	APPROVED	1
3963	FAMILY PRACTICE	BENLYSTA	SYSTEMIC LUPUS ERYTHAMATOSUS	DENIED	1
3963	INTERNAL MEDICINE	BENLYSTA	SYSTEMIC LUPUS ERYTHAMATOSUS	APPROVED	2
3963	RHEUMATOLOGY	BENLYSTA	SYSTEMIC LUPUS ERYTHAMATOSUS	APPROVED	1
3963	NEUROLOGY	BETASERON	MULTIPLE SCLEROSIS	APPROVED	1
3956	MEDICAL ONCOLOGY	BEXAROTENE	ONCOLOGY	APPROVED	1
3964	FAMILY PRACTICE	BIMZELX	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	UNSPECIFIED SPECIALTY	BOSENTAN 125 MG	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3951	UNSPECIFIED SPECIALTY	BOSENTAN 62.5 MG	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3963	UNSPECIFIED SPECIALTY	BOSULIF	ONCOLOGY	APPROVED	1
3969	MEDICAL ONCOLOGY	BOSULIF	ONCOLOGY	APPROVED	1
3963	UNSPECIFIED SPECIALTY	BRAFTOVI	ONCOLOGY	APPROVED	1
3963	HEMATOLOGY & ONCOLOGY	BRAFTOVI	ONCOLOGY	APPROVED	1
3956	UNSPECIFIED SPECIALTY	CABENUVA	HIV	APPROVED	2
3956	FAMILY PRACTICE	CABENUVA	HIV	APPROVED	1
3970	UNSPECIFIED SPECIALTY	CABENUVA	HIV	APPROVED	1
3970	HEMATOLOGY & ONCOLOGY	CABOMETYX	ONCOLOGY	APPROVED	1
3956	HEMATOLOGY & ONCOLOGY	CABOMETYX	ONCOLOGY	APPROVED	1
3963	MEDICAL ONCOLOGY	CABOMETYX	ONCOLOGY	APPROVED	1
3963	HEMATOLOGY & ONCOLOGY	CABOMETYX	ONCOLOGY	APPROVED	4

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3956	HEMATOLOGY & ONCOLOGY	CALQUENCE TABLET	ONCOLOGY	APPROVED	1
3965	HEMATOLOGY & ONCOLOGY	CALQUENCE TABLET	ONCOLOGY	APPROVED	1
3951	HEMATOLOGY & ONCOLOGY	CAPECITABINE	ONCOLOGY	APPROVED	3
3956	HEMATOLOGY & ONCOLOGY	CAPECITABINE	ONCOLOGY	APPROVED	10
3956	UNSPECIFIED SPECIALTY	CAPECITABINE	ONCOLOGY	APPROVED	1
3963	INTERNAL MEDICINE	CAPECITABINE	ONCOLOGY	APPROVED	1
3970	HEMATOLOGY & ONCOLOGY	CAPECITABINE	ONCOLOGY	APPROVED	2
3963	HEMATOLOGY & ONCOLOGY	CAPECITABINE	ONCOLOGY	APPROVED	5
3963	UNSPECIFIED SPECIALTY	CAPECITABINE	ONCOLOGY	APPROVED	1
3951	MEDICAL ONCOLOGY	CAPECITABINE	ONCOLOGY	APPROVED	1
3963	UNSPECIFIED SPECIALTY	CAPECITABINE 150MG OR TABS	ONCOLOGY	APPROVED	1
3965	UNSPECIFIED SPECIALTY	CAPECITABINE 500MG OR TABS	ONCOLOGY	APPROVED	1
3965	HEMATOLOGY & ONCOLOGY	CAPECITABINE 500MG OR TABS	ONCOLOGY	APPROVED	1
3963	UNSPECIFIED SPECIALTY	CIBINQO	ATOPIC DERMATITIS	APPROVED	1
3951	UNSPECIFIED SPECIALTY	CINACALCET	RENAL	APPROVED	1
3963	UNSPECIFIED SPECIALTY	CINACALCET	RENAL	APPROVED	3
3956	UNSPECIFIED SPECIALTY	CINACALCET	RENAL	DENIED	2
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	CINACALCET	RENAL	APPROVED	2
3963	INTERNAL MEDICINE	CINACALCET	RENAL	DENIED	2
3956	PEDIATRICS	CINACALCET	RENAL	APPROVED	1
3951	INTERNAL MEDICINE	CINACALCET	RENAL	APPROVED	1
3963	INTERNAL MEDICINE	CINACALCET	RENAL	APPROVED	1
3969	UNSPECIFIED SPECIALTY	CINACALCET	RENAL	DENIED	1
3965	INTERNAL MEDICINE	CINACALCET	RENAL	APPROVED	1
3951	INTERNAL MEDICINE	CINACALCET	RENAL	DENIED	1
3956	INTERNAL MEDICINE	CINACALCET	RENAL	APPROVED	1
3956	ENDOCRINOLOGY, DIABETES & METABOLISM	CINACALCET	RENAL	DENIED	1
3951	FAMILY PRACTICE	CINACALCET	RENAL	APPROVED	1
3956	NEUROLOGY	COPAXONE 40MG	MULTIPLE SCLEROSIS	APPROVED	1
3970	UNSPECIFIED SPECIALTY	COPAXONE 40MG	MULTIPLE SCLEROSIS	APPROVED	1
3963	NURSE PRACTITIONER, ADULT HEALTH	COPAXONE 40MG	MULTIPLE SCLEROSIS	APPROVED	1
3963	DERMATOLOGY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	FAMILY PRACTICE	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	FAMILY PRACTICE	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	INTERNAL MEDICINE	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	4
3963	INTERNAL MEDICINE	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3963	UNSPECIFIED SPECIALTY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3963	RHEUMATOLOGY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	5
3969	DERMATOLOGY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3956	UNSPECIFIED SPECIALTY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	FAMILY PRACTICE	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	RHEUMATOLOGY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	4
3956	DERMATOLOGY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3956	DERMATOLOGY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3956	FAMILY PRACTICE	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3964	RHEUMATOLOGY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	INTERNAL MEDICINE	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3963	UNSPECIFIED SPECIALTY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	3
3956	UNSPECIFIED SPECIALTY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	4
3951	DERMATOLOGY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3963	DERMATOLOGY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3951	UNSPECIFIED SPECIALTY	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3951	INTERNAL MEDICINE	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	FAMILY PRACTICE	COSENTYX SC	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	DERMATOLOGY	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	DERMATOLOGY	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	DERMATOLOGY	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	3
3963	FAMILY PRACTICE	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	INTERNAL MEDICINE	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	UNSPECIFIED SPECIALTY	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	4
3965	UNSPECIFIED SPECIALTY	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3961	RHEUMATOLOGY	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	UNSPECIFIED SPECIALTY	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	4
3963	UNSPECIFIED SPECIALTY	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	5
3963	UNSPECIFIED SPECIALTY	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3951	FAMILY PRACTICE	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3951	DERMATOLOGY	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	UNSPECIFIED SPECIALTY	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3961	UNSPECIFIED SPECIALTY	COSENTYX UNOREADY PEN	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	ENDOCRINOLOGY, PEDIATRIC	CRYSVITA	BONE DISORDERS - OTHER	APPROVED	1
3956	NURSE PRACTITIONER, ACUTE CARE	CUTAQUIG	IMMUNE THERAPIES	APPROVED	1
3963	NEUROLOGY	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS	DENIED	1
3964	NEUROLOGY	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS	APPROVED	1
3956	UNSPECIFIED SPECIALTY	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS	APPROVED	2

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3963	NEUROLOGY	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS	APPROVED	1
3970	NEUROLOGY	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS	APPROVED	1
3956	NEUROLOGY	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS	APPROVED	1
3965	UNSPECIFIED SPECIALTY	DALFAMPRIDINE ER	MULTIPLE SCLEROSIS	APPROVED	1
3969	HEMATOLOGY & ONCOLOGY	DASATINIB	ONCOLOGY	APPROVED	1
3956	UNSPECIFIED SPECIALTY	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS	APPROVED	1
3963	NEUROLOGY	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS	APPROVED	2
3951	NURSE PRACTITIONER, ADULT HEALTH	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS	APPROVED	1
3963	NURSE PRACTITIONER, ADULT HEALTH	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS	APPROVED	2
3963	UNSPECIFIED SPECIALTY	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS	DENIED	1
3963	UNSPECIFIED SPECIALTY	DOFETILIDE	CARDIAC DISORDERS	APPROVED	1
3956	CARDIOLOGY, INTERVENTIONAL	DOFETILIDE	CARDIAC DISORDERS	APPROVED	2
3951	CARDIAC ELECTROPHYSIOLOGY	DOFETILIDE	CARDIAC DISORDERS	APPROVED	1
3956	UNSPECIFIED SPECIALTY	DOFETILIDE	CARDIAC DISORDERS	APPROVED	5
3963	CARDIAC ELECTROPHYSIOLOGY	DOFETILIDE	CARDIAC DISORDERS	APPROVED	2
3956	CARDIAC ELECTROPHYSIOLOGY	DOFETILIDE	CARDIAC DISORDERS	APPROVED	1
3951	MEDICAL ONCOLOGY	DOPTELET	THROMBOCYTOPENIA	APPROVED	1
3963	UNSPECIFIED SPECIALTY	DOPTELET	THROMBOCYTOPENIA	APPROVED	1
3956	MEDICAL ONCOLOGY	DOPTELET	THROMBOCYTOPENIA	DENIED	1
3956	HEMATOLOGY & ONCOLOGY	DOPTELET	THROMBOCYTOPENIA	APPROVED	2
3956	FAMILY PRACTICE	DOPTELET	THROMBOCYTOPENIA	APPROVED	1
3956	MEDICAL ONCOLOGY	DOPTELET	THROMBOCYTOPENIA	APPROVED	1
3964	DERMATOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	2
3965	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	4
3965	PEDIATRICS	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3963	FAMILY PRACTICE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	6
3956	ALLERGY & IMMUNOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	4
3951	DERMATOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	2
3963	GASTROENTEROLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	2
3963	SLEEP MEDICINE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3970	PEDIATRICS	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	3
3956	OTOLARYNGOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	2
3964	PEDIATRICS	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	2
3962	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3963	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	21
3961	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	2
3963	INTERNAL MEDICINE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	4

3684 ALLEROY KAMMALADI DOY DISPORTY ALLEROY ASTRAMANDED CEPNATTIES CENTRO 2 3683 NORSE PRACTIONER ACTE CARE DUPPENT ALLEROY ASTRAMANDED CEPNATTIES DENIED 1 3693 NERSE PRACTIONER ACTE CARE DUPPENT ALLEROY ASTRAMANDED CEPNATTIES APPROVED 1 3690 DERNATOLOGY DUPPENT ALLEROY ASTRAMANDED CEPNATTIES APPROVED 2 3691 DERNATOLOGY DUPPENT ALLEROY ASTRAMANDED CEPNATTIES APPROVED 2 3693 DERNATOLOGY DUPPENT ALLEROY ASTRAMANDED CEPNATTIES APPROVED 2 3693 DERNATOLOGY DUPPENT ALLEROY ASTRAMANDED CEPNATTIES APPROVED 2 3693 ONI ARMINGO COY DUPPENT ALLEROY ASTRAMANDED CEPNATTIES APPROVED 2 3694 ONI ARMINGO COY DUPPENT ALLEROY ASTRAMANDED CEPNATTIES APPROVED 2 3695 OSTATOLITICA STANDAM CONTROLLORY DUPPENT ALLEROY ASTRAMANDED CEPNATTIES APPROVED 2 3696 OSTATOLITICA STANDAM CONTROLLORY DUPPE	Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3983 NURSE PRACTITIONER, ACUTE CARE DUNKINT ALERGIC ASTHMANATORIC DERMATTIS CAPERONEO 1 3960 INTERNAL MEDICINE DURKINT ALERGIC ASTHMANATORIC DERMATTIS APRONEO 2 3970 DERMANOLOGY DURKINT ALERGIC ASTHMANATORIC DERMATTIS APRONEO 2 3981 DERMANOLOGY DURKINT ALERGIC ASTHMANATORIC DERMATTIS APRONEO 1 3970 PERLATRICS DURKINT ALERGIC ASTHMANATORIC DERMATTIS APRONEO 2 3986 DEFMANOLOGY DURKINT ALERGIC ASTHMANATORIC DERMATTIS APRONEO 2 3983 OTOLARWINGOLOGY DURKINT ALERGIC ASTHMANATORIC DERMATTIS APRONEO 2 3985 CASTROCHTRICULOGY DURKINT ALERGIC ASTHMANATORIC DERMATTIS APRONEO 2 3986 CASTROCHTRICULOGY DURKINT ALERGIC ASTHMANATORIC DERMATTIS APRONEO 1 3981 CASTROCHTRICULOGY DURKINT ALERGIC ASTHMANATORIC DERMATTIS APRONEO 2 3981 CASTROCHTRICULOGY DURKINT ALERGIC ASTHM	3964	ALLERGY & IMMUNOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	3
3866 INTERNAL MERICANF DURKNIT ALFRIGG ASTIMANATORIC DETIMATITIS APPROVED 1 3070 DERMANDLOSY DURKNIT ALERGIC ASTIMANATORIC DERMATITIS APPROVED 2 3876 DERMANDLOSY DURKNIT ALFRIGG ASTIMANATORIC DERMATITIS APPROVED 1 3870 PEDATRICIS DURKNIT ALFRIGG ASTIMANATORIC DERMATITIS OFFIED 1 3876 DERMANDLOGY DURKNIT ALFRIGG ASTIMANATORIC DERMATITIS APPROVED 2 3866 OTOLARMINGOLOGY DURKNIT ALFRIGG ASTIMANATORIC DERMATITIS APPROVED 9 3867 ALFRICA XIMMUNDLOGY DURKNIT ALFRIGG ASTIMANATORIC DERMATITIS APPROVED 1 3868 GASTROENTEROLOGY DURKNIT ALFRIGG ASTIMANATORIC DERMATITIS DENED 1 3869 OTOLARMINOLOGY DURKNIT ALFRIGG ASTIMANATORIC DERMATITIS APPROVED 8 3861 LOSPECHES DISCLALY DURKNIT ALFRIGG ASTIMANATORIC DERMATITIS APPROVED 1 3861 LOSPECHES DISCLALY DURKNIT ALFRIGG ASTI	3963	OTOLARYNGOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	2
8970 DERMATOLOGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 2 3811 DERMATOLOGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 1 3861 DERMATOLOGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 2 3863 DERMATOLOGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 2 3865 ALLERGY SIMMANTOLOGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 1 3866 ALLERGY SIMMANDLOGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 1 3862 CASTROENTEROLOGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS DERILD 1 3868 OTOLARYMOLOGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 2 3861 OLDEROTRE CHECKY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 2 3861 OLDEROTRE CHECKY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 1 3862 ALLERGY DUPKENT ALLERGIC ASTHMANATO	3963	NURSE PRACTITIONER, ACUTE CARE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3861 DERMATOLOGY DUPNENT ALLERGY CASTHMAATORD DERMATTIS APPROVED 1 3870 PEDIATRICS DUPNENT ALLERGY STHMAATORD DERMATTIS DENIGO 1 3898 DERMATOLOY DUPNENT ALLERGY STHMAATORD DERMATTIS APPROVED 2 3803 OTOLARYNGOLOGY DUPNENT ALLERGY CASTHMAATORD DERMATTIS APPROVED 2 3808 ALLERGY & MANINOLOGY DUPNENT ALLERGY CASTHMAATORD DERMATTIS APPROVED 2 3808 ALLERGY & MANINOLOGY DUPNENT ALLERGY CASTHMAATORD DERMATTIS ORNED 1 3806 OSTROCHIEROLOGY DUPNENT ALLERGY CASTHMAATORD DERMATTIS ORNED 2 3806 OSTROCHIEROLOGY DUPNENT ALLERGY CASTHMAATORD DERMATTIS APPROVED 4 3801 OSTROCHIEROLOGY DUPNENT ALLERGY CASTHMAATORD DERMATTIS APPROVED 2 3802 ALLERGY DUPNENT ALLERGY CASTHMAATORD DERMATTIS APPROVED 2 3803 ALLERGY DUPNENT ALLERGY CASTHMAATORD DERMATTIS APPROVED	3956	INTERNAL MEDICINE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
8976 PEDATRICS OUPNETT ALLERGIC ASTHMANATORIC DERMATITIS DENIED 1 3985 DERMATCI COXY DUPNETT ALLERGIC ASTHMANATORIC DERMATITIS APPROVED 2 3986 OTOLARYNOLOGY DUPNETT ALLERGIC ASTHMANATORIC DERMATITIS APPROVED 2 3986 ALLERGY & INMUNOLOGY DUPNETT ALLERGIC ASTHMANATORIC DERMATITIS APPROVED 2 3987 RAMILY PRACTICE DUPNETT ALLERGIC ASTHMANATORIC DERMATITIS DENIED 1 3986 GASTRIONETROLOGY DUPNETT ALLERGIC ASTHMANATORIC DERMATITIS DENIED 1 3986 GASTRIONETROLOGY DUPNETT ALLERGIC ASTHMANATORIC DERMATITIS APPROVED 2 3981 URSPECIFIED SPECIALTY DUPNETT ALLERGIC ASTHMANATORIC DERMATITIS APPROVED 2 3982 ALLERGY DUPNETT ALLERGIC ASTHMANATORIC DERMATITIS APPROVED 2 3983 ALLERGY DUPNETT ALLERGIC ASTHMANATORIC DERMATITIS APPROVED 2 3986 ALLERGY DUPNETT ALLERGIC ASTHMANATOR	3970	DERMATOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	2
3856 DERMATOLOGY	3961	DERMATOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3883 GTOLARYNGOLOGY DUPXENT ALLERGIC ASTHMANTOPIC DERMATITIS APPROVED 2 3986 ALLERGY & IMMUNOLOGY DUPXENT ALLERGIC ASTHMANTOPIC DERMATITIS DENED 1 3986 ALLERGY & IMMUNOLOGY DUPXENT ALLERGIC ASTHMANTOPIC DERMATITIS DENED 1 3988 GASTROFITEROLOGY DUPXENT ALLERGIC ASTHMANTOPIC DERMATITIS DENED 1 3988 GASTROFITEROLOGY DUPXENT ALLERGIC ASTHMANTOPIC DERMATITIS APPROVED 4 3981 GASTROFITEROLOGY DUPXENT ALLERGIC ASTHMANTOPIC DERMATITIS APPROVED 6 3983 ALLERGY DUPXENT ALLERGIC ASTHMANTOPIC DERMATITIS APPROVED 2 3984 ALLERGY DUPXENT ALLERGIC ASTHMANTOPIC DERMATITIS APPROVED 2 3986 SLEEP MEDICINE DUPXENT ALLERGIC ASTHMANTOPIC DERMATITIS APPROVED 2 3986 SLEEP MEDICINE DUPXENT ALLERGIC ASTHMANTOPIC DERMATITIS APPROVED 2 3986 SLEEP MEDICINE DUPXENT ALLERGIC ASTHMANTOP	3970	PEDIATRICS	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3986 ALLERGY & IMMUNOLOGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 2 3982 FAMILY PRACTICE DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS DENIED 1 3986 OSTOLATIYROLOGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS DENIED 1 3986 OTOLATIYROLOGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 4 3981 USPECIFIED SPECIALTY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 6 3981 OSTOLATIYACIO DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 2 3981 ALLERGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 2 3983 ALLERGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 2 3984 ALLERGY DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 2 3985 SLEPP MEDICINE DUPKENT ALLERGIC ASTHMANATORIC DERMATTIS APPROVED 2 3986 SLEPS MEDICINE DUPKENT ALLERGIC ASTHMANATORIC DER	3965	DERMATOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	2
3882 FAMILY PRACTICE DUPKENT ALLERGIC ASTHMAATOPIC DERMATTIS DENIED 1 3956 GASTROENTEROLOSY DUPKENT ALLERGIC ASTHMAATOPIC DERMATTIS DENIED 1 3956 OTOLARYNGOLOGY DUPKENT ALLERGIC ASTHMAATOPIC DERMATTIS APPROVED 4 3951 UNSPECIFIED SPECIALTY DUPKENT ALLERGIC ASTHMAATOPIC DERMATTIS APPROVED 6 3963 ALLERGY DUPKENT ALLERGIC ASTHMAATOPIC DERMATTIS APPROVED 2 3963 ALLERGY DUPKENT ALLERGIC ASTHMAATOPIC DERMATTIS APPROVED 2 3969 ALLERGY DUPKENT ALLERGIC ASTHMAATOPIC DERMATTIS APPROVED 2 3969 ALLERGY DUPKENT ALLERGIC ASTHMAATOPIC DERMATTIS APPROVED 2 3960 SEEP MEDICINE DUPKENT ALLERGIC ASTHMAATOPIC DERMATTIS APPROVED 2 3961 FAMILY PRACTICE DUPKENT ALLERGIC ASTHMAATOPIC DERMATTIS APPROVED 3 3962 UNSPECIFIED SPECIALTY DUPKENT ALLERGIC ASTHMAATOPIC DERMATTIS	3963	OTOLARYNGOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	9
3966 GASTROENTEROLOGY DUPKENT ALLERGIC ASTHMAATOPIC DERMATITIS DENED 1 3966 OTOLARYNOCLOGY DUPKENT ALLERGIC ASTHMAATOPIC DERMATITIS APPROVED 4 3951 UNSPECIFIED SPECIALTY DUPKENT ALLERGIC ASTHMAATOPIC DERMATITIS APPROVED 6 3961 GASTROENTEROLOGY DUPKENT ALLERGIC ASTHMAATOPIC DERMATITIS APPROVED 2 3963 ALLERGY DUPKENT ALLERGIC ASTHMAATOPIC DERMATITIS DENIED 2 3964 ALLERGY & IMMUNOLOGY DUPKENT ALLERGIC ASTHMAATOPIC DERMATITIS APPROVED 2 3969 ALLERGY DUPKENT ALLERGIC ASTHMAATOPIC DERMATITIS APPROVED 2 3960 SLEEP MEDICINE DUPKENT ALLERGIC ASTHMAATOPIC DERMATITIS APPROVED 2 3961 FAMILY PRACTICE DUPKENT ALLERGIC ASTHMAATOPIC DERMATITIS APPROVED 2 3962 PARCTICE DUPKENT ALLERGIC ASTHMAATOPIC DERMATITIS APPROVED 1 3963 DERMATOLOGY DUPKENT ALLERGIC ASTHMAATOPIC DE	3965	ALLERGY & IMMUNOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	2
3966 OTOLARYNGOLOGY DUPXENT ALLERGIC ASTHMAJATOPIC DERMATITIS APPROVED 4 3951 UNSPECIFIED SPECIALTY DUPXENT ALLERGIC ASTHMAJATOPIC DERMATITIS APPROVED 6 3951 GASTROENTEROLOGY DUPXENT ALLERGIC ASTHMAJATOPIC DERMATITIS DENIED 1 3963 ALLERGY DUPXENT ALLERGIC ASTHMAJATOPIC DERMATITIS APPROVED 2 3964 ALLERGY DUPXENT ALLERGIC ASTHMAJATOPIC DERMATITIS APPROVED 2 3969 ALLERGY DUPXENT ALLERGIC ASTHMAJATOPIC DERMATITIS APPROVED 2 3966 SLEEP MEDICINE DUPXENT ALLERGIC ASTHMAJATOPIC DERMATITIS APPROVED 2 3962 SLEEP MEDICINE DUPXENT ALLERGIC ASTHMAJATOPIC DERMATITIS APPROVED 2 3963 FAMILY PRACTICE DUPXENT ALLERGIC ASTHMAJATOPIC DERMATITIS APPROVED 2 3965 FAMILY PRACTICE DUPXENT ALLERGIC ASTHMAJATOPIC DERMATITIS DENIED 1 3961 DERMATOLOGY DUPXENT ALLERGIC ASTHMAJATOPI	3962	FAMILY PRACTICE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3961 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMANTOPIC DERMATITIS APPROVED 6 3961 GASTROENTEROLOGY DUPIXENT ALLERGIC ASTHMANTOPIC DERMATITIS DENIED 1 3963 ALLERGY DUPIXENT ALLERGIC ASTHMANTOPIC DERMATITIS APPROVED 2 3969 ALLERGY & IMMUNOLOGY DUPIXENT ALLERGIC ASTHMANTOPIC DERMATITIS APPROVED 1 3969 ALLERGY DUPIXENT ALLERGIC ASTHMANTOPIC DERMATITIS APPROVED 2 3960 SLEEP MEDICINE DUPIXENT ALLERGIC ASTHMANTOPIC DERMATITIS APPROVED 2 3961 FAMILY PRACTICE DUPIXENT ALLERGIC ASTHMANTOPIC DERMATITIS DENIED 2 3962 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMANTOPIC DERMATITIS DENIED 1 3963 DERMATOLOGY DUPIXENT ALLERGIC ASTHMANTOPIC DERMATITIS DENIED 1 3964 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMANTOPIC DERMATITIS DENIED 1 3970 FAMILY PRACTICE DUPIXENT <td< td=""><td>3956</td><td>GASTROENTEROLOGY</td><td>DUPIXENT</td><td>ALLERGIC ASTHMA/ATOPIC DERMATITIS</td><td>DENIED</td><td>1</td></td<>	3956	GASTROENTEROLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3951 GASTROENTEROLOGY DUPIXENT ALLERGIC ASTHMAATOPIC DERMATITIS DENIED 1 3983 ALLERGY DUPIXENT ALLERGIC ASTHMAATOPIC DERMATITIS APPROVED 2 3984 ALLERGY & IMMUNOLOGY DUPIXENT ALLERGIC ASTHMAATOPIC DERMATITIS DENIED 2 3986 ALLERGY DUPIXENT ALLERGIC ASTHMAATOPIC DERMATITIS APPROVED 1 3986 SLEEP MEDICINE DUPIXENT ALLERGIC ASTHMAATOPIC DERMATITIS APPROVED 2 3986 FAMILY PRACTICE DUPIXENT ALLERGIC ASTHMAATOPIC DERMATITIS DENIED 2 3986 FAMILY PRACTICE DUPIXENT ALLERGIC ASTHMAATOPIC DERMATITIS DENIED 1 3986 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMAATOPIC DERMATITIS DENIED 1 3987 DERMATOLOGY DUPIXENT ALLERGIC ASTHMAATOPIC DERMATITIS DENIED 1 3989 DERMATOLOGY DUPIXENT ALLERGIC ASTHMAATOPIC DERMATITIS DENIED 1 3990 GASTROENTEROLOGY DUPIXENT ALLERGIC ASTHMAATO	3956	OTOLARYNGOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	4
3963 ALLERGY DUPXENT ALLERGY ASTHMANATOPIC DERMATITIS APPROVED 2 3964 ALLERGY & IMMUNOLOGY DUPXENT ALLERGIC ASTHMANATOPIC DERMATITIS DENIED 2 3969 ALLERGY DUPXENT ALLERGIC ASTHMANATOPIC DERMATITIS APPROVED 1 3966 SEEP MEDICINE DUPXENT ALLERGIC ASTHMANATOPIC DERMATITIS APPROVED 2 3966 FAMILY PRACTICE DUPXENT ALLERGIC ASTHMANATOPIC DERMATITIS DENIED 2 3966 FAMILY PRACTICE DUPXENT ALLERGIC ASTHMANATOPIC DERMATITIS DENIED 2 3967 FAMILY PRACTICE DUPXENT ALLERGIC ASTHMANATOPIC DERMATITIS DENIED 1 3968 UNSPECIFIED SPECIALTY DUPXENT ALLERGIC ASTHMANATOPIC DERMATITIS DENIED 1 3969 PERMATOLOGY DUPXENT ALLERGIC ASTHMANATOPIC DERMATITIS DENIED 1 3960 DERMATOLOGY DUPXENT ALLERGIC ASTHMANATOPIC DERMATITIS APPROVED 1 3960 DERMATOLOGY DUPXENT ALLERGIC ASTHMANATOPIC DE	3951	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	6
3964 ALLERGY & IMMUNOLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2 3968 ALLERGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 1 3965 SLEEP MEDICINE DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 2 3964 FAMILY PRACTICE DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 2 3956 FAMILY PRACTICE DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 1 3962 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 1 3965 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 1 3966 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 1 3970 FAMILY PRACTICE DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 1 3960 DERMATOLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 1 3970 GASTROENTEROLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 2 3996 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 2 3996	3951	GASTROENTEROLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3969ALLERGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED13965SLEEP MEDICINEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED23964FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23966FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED33962UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13965UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43961DERMATOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970GASTROENTEROLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970GASTROENTEROLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED13966UISPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED293966ALLERGY & IMMUNOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33970FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33961UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23963PEDIATRICSDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23969UNSPECIFIED SPECIALTYDUPIXENT	3963	ALLERGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	2
3966SLEEP MEDICINEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED23964FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23956FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED33962UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13965UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43951DERMATOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED13985DERMATOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED13990GASTROENTEROLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED23986UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED23996ALLERGY & IMMUNOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33991UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33992UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23993UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED23994UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED23995UNSPECIFIED	3964	ALLERGY & IMMUNOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	2
3964FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23956FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED33962UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13965UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43951DERMATOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED13970GASTROENTEROLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970GASTROENTEROLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED13956UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED23960ALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33970FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33991UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33992UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23993PEDIATRICSDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23993PEDIATRICSDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23996UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITIS </td <td>3969</td> <td>ALLERGY</td> <td>DUPIXENT</td> <td>ALLERGIC ASTHMA/ATOPIC DERMATITIS</td> <td>APPROVED</td> <td>1</td>	3969	ALLERGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3956FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED33962UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13966UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43951DERMATOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970GASTROENTEROLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970GASTROENTEROLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED13966UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED293970ALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33970ALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33971AND SPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33981UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED83990UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23993PEDIATRICSDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23996PEDIATRICSDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43998UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED3 <td>3965</td> <td>SLEEP MEDICINE</td> <td>DUPIXENT</td> <td>ALLERGIC ASTHMA/ATOPIC DERMATITIS</td> <td>APPROVED</td> <td>2</td>	3965	SLEEP MEDICINE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	2
3962UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13965UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43951DERMATOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED13965DERMATOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970GASTROENTEROLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED13986UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED293986ALLERGY & IMMUNOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43970FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33981UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23970UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23970UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED23963PEDIATRICSDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43969UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED33970UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED4	3964	FAMILY PRACTICE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	2
3965UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43951DERMATOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED13965DERMATOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970GASTROENTEROLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED13966UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED293956ALLERGY & IMMUNOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43970FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33951UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33968PEDIATRICSDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23970UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23963PEDIATRICSDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43969UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33970UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43969UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED33970UNSPECIFIED SPECIALTY <t< td=""><td>3956</td><td>FAMILY PRACTICE</td><td>DUPIXENT</td><td>ALLERGIC ASTHMA/ATOPIC DERMATITIS</td><td>APPROVED</td><td>3</td></t<>	3956	FAMILY PRACTICE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	3
DERMATOLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 1 3970 FAMILY PRACTICE DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 1 3965 DERMATOLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 1 3970 GASTROENTEROLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 1 3970 GASTROENTEROLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 2 3956 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 2 3956 ALLERGY & IMMUNOLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 FAMILY PRACTICE DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3951 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 8 3956 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2 3963 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 2 3963 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 5 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 5 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 5 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 5 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 5 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 5 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 5 3970 UNSPECIFIED SPECIALTY DUPIXENT A	3962	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3970FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED13965DERMATOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED13970GASTROENTEROLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED13956UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED293956ALLERGY & IMMUNOLOGYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43970FAMILY PRACTICEDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED33951UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED83956PEDIATRICSDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23970UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED23963PEDIATRICSDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43969UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED33970UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED33989UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED33970UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED3	3965	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	4
DERMATOLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 1 3970 GASTROENTEROLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 1 3956 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 29 3956 ALLERGY & IMMUNOLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 FAMILY PRACTICE DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3951 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3956 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2 3963 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3	3951	DERMATOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3970 GASTROENTEROLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 1 3966 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 29 3956 ALLERGY & IMMUNOLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 FAMILY PRACTICE DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3951 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 8 3956 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2 3963 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2	3970	FAMILY PRACTICE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3956 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 29 3956 ALLERGY & IMMUNOLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 FAMILY PRACTICE DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3951 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 8 3956 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 2 3963 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2	3965	DERMATOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3956 ALLERGY & IMMUNOLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 FAMILY PRACTICE DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3951 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 8 3956 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 2 3963 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2	3970	GASTROENTEROLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3970 FAMILY PRACTICE DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3951 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 8 3956 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 2 3963 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2	3956	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	29
3951 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 8 3956 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 2 3963 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2	3956	ALLERGY & IMMUNOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	4
3956PEDIATRICSDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED23970UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED23963PEDIATRICSDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED43969UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISAPPROVED33970UNSPECIFIED SPECIALTYDUPIXENTALLERGIC ASTHMA/ATOPIC DERMATITISDENIED2	3970	FAMILY PRACTICE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	3
3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 2 3963 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2	3951	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	8
3963 PEDIATRICS DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4 3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2	3956	PEDIATRICS	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	2
3969 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS APPROVED 3 3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2	3970	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	2
3970 UNSPECIFIED SPECIALTY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 2	3963	PEDIATRICS	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	4
	3969	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	3
3963 GASTROENTEROLOGY DUPIXENT ALLERGIC ASTHMA/ATOPIC DERMATITIS DENIED 4	3970	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	2
	3963	GASTROENTEROLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	4

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3964	DERMATOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3963	ALLERGY & IMMUNOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	11
3967	INTERNAL MEDICINE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	2
3961	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3956	GASTROENTEROLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3956	INTERNAL MEDICINE, CRITICAL CARE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3969	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3963	DERMATOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	13
3963	DERMATOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	15
3961	NURSE PRACTITIONER, ACUTE CARE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3967	INTERNAL MEDICINE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3951	PEDIATRICS	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3963	INTERNAL MEDICINE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	7
3951	OTOLARYNGOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3970	INTERNAL MEDICINE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3956	DERMATOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	17
3963	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	37
3956	DERMATOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	13
3963	PEDIATRICS	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	2
3956	INTERNAL MEDICINE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	4
3964	FAMILY PRACTICE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3956	PEDIATRICS	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	2
3964	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	2
3963	ALLERGY & IMMUNOLOGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	5
3963	FAMILY PRACTICE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	10
3967	FAMILY PRACTICE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3970	ALLERGY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3956	UNSPECIFIED SPECIALTY	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	21
3956	FAMILY PRACTICE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	8
3951	INTERNAL MEDICINE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	3
3961	NURSE PRACTITIONER, ACUTE CARE	DUPIXENT	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3969	ALLERGY & IMMUNOLOGY	DUPIXENT 300MG/2ML SC SOPN	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3965	UNSPECIFIED SPECIALTY	DUPIXENT INJ 200	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3963	UNSPECIFIED SPECIALTY	DUPIXENT SYN 300	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3965	UNSPECIFIED SPECIALTY	DUPIXENT SYN 300	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3964	PEDIATRICS	DUPIXENT SYN 300	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3964	UNSPECIFIED SPECIALTY	DUPIXENT SYN 300	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
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Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3965	UNSPECIFIED SPECIALTY	DUPIXENT SYN 300	ALLERGIC ASTHMA/ATOPIC DERMATITIS	DENIED	1
3965	DERMATOLOGY	DUPIXENT SYN 300	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3963	UNSPECIFIED SPECIALTY	ELIGARD 22.5MG	HORMONAL THERAPIES	APPROVED	1
3965	UNSPECIFIED SPECIALTY	ELIGARD 45MG	HORMONAL THERAPIES	APPROVED	1
3963	UNSPECIFIED SPECIALTY	EMFLAZA	MUSCULAR DYSTROPHY	APPROVED	1
3956	FAMILY PRACTICE	ENBREL 25MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	FAMILY PRACTICE	ENBREL 25MG + ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970	INTERNAL MEDICINE	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3956	INTERNAL MEDICINE	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	13
3956	UNSPECIFIED SPECIALTY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3963	INTERNAL MEDICINE	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	INTERNAL MEDICINE	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	11
3964	PSYCHIATRY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	UNSPECIFIED SPECIALTY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3970	FAMILY PRACTICE	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3965	RHEUMATOLOGY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3951	INTERNAL MEDICINE	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3961	RHEUMATOLOGY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	PSYCHIATRY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970	RHEUMATOLOGY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	4
3970	RHEUMATOLOGY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	FAMILY PRACTICE	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	8
3956	RHEUMATOLOGY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	14
3964	FAMILY PRACTICE	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	RHEUMATOLOGY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	14
3956	INTERNAL MEDICINE	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	3
3963	DERMATOLOGY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	FAMILY PRACTICE	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3951	RHEUMATOLOGY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3961	NURSE PRACTITIONER, ACUTE CARE	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3962	UNSPECIFIED SPECIALTY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	RHEUMATOLOGY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3969	UNSPECIFIED SPECIALTY	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3969	INTERNAL MEDICINE	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3964	INTERNAL MEDICINE	ENBREL 50MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	NURSE PRACTITIONER, ACUTE CARE	ENTECAVIR	HEPATITIS B	APPROVED	2
3956	UNSPECIFIED SPECIALTY	ENTECAVIR	HEPATITIS B	APPROVED	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3956	GASTROENTEROLOGY	ENTECAVIR	HEPATITIS B	APPROVED	1
3956	FAMILY PRACTICE	ENTECAVIR	HEPATITIS B	APPROVED	2
3970	UNSPECIFIED SPECIALTY	EPCLUSA	HEPATITIS C	DENIED	3
3963	INTERNAL MEDICINE	EPCLUSA	HEPATITIS C	APPROVED	2
3956	INTERNAL MEDICINE	EPCLUSA	HEPATITIS C	APPROVED	1
3970	NURSE PRACTITIONER, ACUTE CARE	EPCLUSA	HEPATITIS C	APPROVED	1
3963	FAMILY PRACTICE	EPCLUSA	HEPATITIS C	APPROVED	1
3963	GASTROENTEROLOGY	EPCLUSA	HEPATITIS C	APPROVED	1
3956	UNSPECIFIED SPECIALTY	EPCLUSA	HEPATITIS C	APPROVED	10
3951	UNSPECIFIED SPECIALTY	EPCLUSA	HEPATITIS C	APPROVED	2
3951	FAMILY PRACTICE	EPCLUSA	HEPATITIS C	DENIED	4
3956	GASTROENTEROLOGY	EPCLUSA	HEPATITIS C	APPROVED	3
3951	NURSE PRACTITIONER, ACUTE CARE	EPCLUSA	HEPATITIS C	APPROVED	3
3951	FAMILY PRACTICE	EPCLUSA	HEPATITIS C	APPROVED	9
3970	FAMILY PRACTICE	EPCLUSA	HEPATITIS C	APPROVED	3
3956	UNSPECIFIED SPECIALTY	EPCLUSA	HEPATITIS C	DENIED	2
3963	UNSPECIFIED SPECIALTY	EPCLUSA	HEPATITIS C	APPROVED	3
3956	NURSE PRACTITIONER, ACUTE CARE	EPCLUSA	HEPATITIS C	APPROVED	3
3970	UNSPECIFIED SPECIALTY	EPCLUSA	HEPATITIS C	APPROVED	2
3956	FAMILY PRACTICE	EPCLUSA	HEPATITIS C	DENIED	3
3970	FAMILY PRACTICE	EPCLUSA	HEPATITIS C	DENIED	1
3956	FAMILY PRACTICE	EPCLUSA	HEPATITIS C	APPROVED	18
3956	INTERNAL MEDICINE	EPCLUSA	HEPATITIS C	DENIED	3
3963	FAMILY PRACTICE	EPCLUSA	HEPATITIS C	DENIED	1
3963	NEUROLOGY	EPIDIOLEX	SEIZURE DISORDERS	DENIED	1
3963	UNSPECIFIED SPECIALTY	EPIDIOLEX	SEIZURE DISORDERS	APPROVED	2
3969	NEUROLOGY, PEDIATRIC	EPIDIOLEX	SEIZURE DISORDERS	DENIED	1
3956	HEMATOLOGY & ONCOLOGY	ERIVEDGE	ONCOLOGY	APPROVED	1
3951	HEMATOLOGY & ONCOLOGY	ERLEADA	ONCOLOGY	APPROVED	1
3965	UNSPECIFIED SPECIALTY	ERLEADA	ONCOLOGY	APPROVED	1
3965	UROLOGY	ERLEADA	ONCOLOGY	APPROVED	1
3970	HEMATOLOGY & ONCOLOGY	ERLEADA	ONCOLOGY	APPROVED	1
3964	MEDICAL ONCOLOGY	EVEROLIMUS	ONCOLOGY	APPROVED	1
3964	HEMATOLOGY & ONCOLOGY	EVEROLIMUS	ONCOLOGY	APPROVED	1
3956	NEUROLOGY	EVEROLIMUS	ONCOLOGY	APPROVED	1
3956	MEDICAL ONCOLOGY	EVEROLIMUS 5 MG	ONCOLOGY	APPROVED	1
3956	INTERNAL MEDICINE	FASENRA	ASTHMA	DENIED	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3956	INTERNAL MEDICINE	FASENRA	ASTHMA	APPROVED	1
3956	INTERNAL MEDICINE, CRITICAL CARE	FASENRA	ASTHMA	APPROVED	1
3963	INTERNAL MEDICINE	FASENRA	ASTHMA	APPROVED	3
3951	INTERNAL MEDICINE	FASENRA	ASTHMA	DENIED	1
3970	SLEEP MEDICINE	FASENRA	ASTHMA	DENIED	1
3956	UNSPECIFIED SPECIALTY	FASENRA	ASTHMA	APPROVED	2
3956	ALLERGY	FASENRA	ASTHMA	DENIED	1
3956	ALLERGY	FASENRA	POST LIMIT	APPROVED	1
3963	FAMILY PRACTICE	FASENRA	ASTHMA	APPROVED	1
3970	UNSPECIFIED SPECIALTY	FASENRA	ASTHMA	APPROVED	1
3963	ALLERGY & IMMUNOLOGY	FASENRA	ASTHMA	APPROVED	3
3970	INTERNAL MEDICINE	FASENRA	ASTHMA	APPROVED	1
3956	ALLERGY	FASENRA	ASTHMA	APPROVED	1
3956	UNSPECIFIED SPECIALTY	FASENRA	ASTHMA	DENIED	4
3963	ALLERGY & IMMUNOLOGY	FASENRA PEN 30MG/ML INJ	POST LIMIT	APPROVED	1
3965	FAMILY PRACTICE	FORTEO	OSTEOPOROSIS	APPROVED	1
3956	MEDICAL ONCOLOGY	FULVESTRANT	ONCOLOGY	APPROVED	1
3970	MEDICAL ONCOLOGY	FULVESTRANT	ONCOLOGY	APPROVED	1
3964	UNSPECIFIED SPECIALTY	FYLNETRA	NEUTROPENIA	APPROVED	1
3956	ENDOCRINOLOGY, DIABETES & METABOLISM	GENOTROPIN	GROWTH HORMONE AND RELATED DISORDERS	DENIED	1
3951	NEUROLOGY	GLATIRAMER	MULTIPLE SCLEROSIS	APPROVED	1
3970	FAMILY PRACTICE	GLATIRAMER	MULTIPLE SCLEROSIS	APPROVED	1
3970	NURSE PRACTITIONER, ADULT HEALTH	GLATIRAMER	MULTIPLE SCLEROSIS	APPROVED	1
3963	NEUROLOGY	GLATIRAMER	MULTIPLE SCLEROSIS	APPROVED	1
3956	NEUROLOGY	GLATIRAMER	MULTIPLE SCLEROSIS	DENIED	1
3956	NEUROLOGY	GLATIRAMER	MULTIPLE SCLEROSIS	APPROVED	1
3970	NEUROLOGY	GLATIRAMER	MULTIPLE SCLEROSIS	APPROVED	1
3951	FAMILY PRACTICE	GLATOPA	MULTIPLE SCLEROSIS	APPROVED	1
3962	NURSE PRACTITIONER, ACUTE CARE	GLATOPA	MULTIPLE SCLEROSIS	APPROVED	1
3956	NEUROLOGY	GLATOPA	MULTIPLE SCLEROSIS	APPROVED	1
3963	NEUROLOGY	GLATOPA	MULTIPLE SCLEROSIS	APPROVED	3
3951	HEMATOLOGY & ONCOLOGY	GLEEVEC	ONCOLOGY	DENIED	1
3963	UNSPECIFIED SPECIALTY	HADLIMA	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	1
3963	FAMILY PRACTICE	HARVONI	HEPATITIS C	APPROVED	2
3956	GENERAL PRACTICE	HARVONI	HEPATITIS C	DENIED	1
3956	FAMILY PRACTICE	HARVONI	HEPATITIS C	APPROVED	7
3956	GENERAL PRACTICE	HARVONI	HEPATITIS C	APPROVED	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3970	GENERAL PRACTICE	HARVONI	HEPATITIS C	APPROVED	1
3956	UNSPECIFIED SPECIALTY	HARVONI	HEPATITIS C	APPROVED	1
3951	FAMILY PRACTICE	HARVONI	HEPATITIS C	DENIED	2
3970	FAMILY PRACTICE	HARVONI	HEPATITIS C	APPROVED	1
3956	FAMILY PRACTICE	HARVONI	HEPATITIS C	DENIED	1
3951	FAMILY PRACTICE	HARVONI	HEPATITIS C	APPROVED	2
3963	NEUROLOGY, PEDIATRIC	HIZENTRA	IMMUNE THERAPIES	APPROVED	1
3963	INTERNAL MEDICINE	HIZENTRA	IMMUNE THERAPIES	DENIED	1
3964	INTERNAL MEDICINE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	2
3951	RHEUMATOLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3970	PEDIATRICS	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	RHEUMATOLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3956	GASTROENTEROLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	10
3956	DERMATOLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	GASTROENTEROLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	DERMATOLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3964	RHEUMATOLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	1
3956	UNSPECIFIED SPECIALTY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	7
3956	UNSPECIFIED SPECIALTY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3961	GASTROENTEROLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3963	INTERNAL MEDICINE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	5
3956	FAMILY PRACTICE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	6
3956	INTERNAL MEDICINE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	9
3961	RHEUMATOLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3970	INTERNAL MEDICINE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3951	FAMILY PRACTICE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	FAMILY PRACTICE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	6
3963	NURSE PRACTITIONER, ACUTE CARE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	RHEUMATOLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	5
3963	FAMILY PRACTICE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	1
3956	NEPHROLOGY / RENAL MEDICINE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	GASTROENTEROLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	INTERNAL MEDICINE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	7
3963	UNSPECIFIED SPECIALTY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3961	UNSPECIFIED SPECIALTY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970	UNSPECIFIED SPECIALTY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3970	RHEUMATOLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
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Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3970	INTERNAL MEDICINE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3951	FAMILY PRACTICE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3963	UNSPECIFIED SPECIALTY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	2
3965	GASTROENTEROLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	1
3951	INTERNAL MEDICINE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	INTERNAL MEDICINE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	DERMATOLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	7
3963	INTERNAL MEDICINE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	3
3963	PEDIATRICS	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3970	NURSE PRACTITIONER, ACUTE CARE	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	PEDIATRICS	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970	RHEUMATOLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	RHEUMATOLOGY	HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	7
3963	UNSPECIFIED SPECIALTY	HUMIRA 80 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	DERMATOLOGY	HUMIRA 80 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3970	MATERNAL & FETAL MEDICINE	HUMIRA 80 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	DERMATOLOGY	HUMIRA 80 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3970	MATERNAL & FETAL MEDICINE	HUMIRA 80 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	GASTROENTEROLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	DERMATOLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	UNSPECIFIED SPECIALTY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	INTERNAL MEDICINE	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	DERMATOLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	UNSPECIFIED SPECIALTY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	DERMATOLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3956	FAMILY PRACTICE	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	UNSPECIFIED SPECIALTY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	DERMATOLOGY	HUMIRA CROHNS/UC/HS STARTER PACK + HUMIRA 80 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	UNSPECIFIED SPECIALTY	HUMIRA PED. UC STARTER PACK + 80 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	DERMATOLOGY	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3956	UNSPECIFIED SPECIALTY	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3956	FAMILY PRACTICE	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	UNSPECIFIED SPECIALTY	HUMIRA PSO/UV/ADOLESCENT HS + HUMIRA 40 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	UNSPECIFIED SPECIALTY	HYQVIA	IMMUNE THERAPIES	DENIED	1
3963	RHEUMATOLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3965	RHEUMATOLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	3
3963	UNSPECIFIED SPECIALTY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970	GASTROENTEROLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970	INTERNAL MEDICINE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	INTERNAL MEDICINE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	FAMILY PRACTICE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	4
3951	INTERNAL MEDICINE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	1
3970	INTERNAL MEDICINE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3951	INTERNAL MEDICINE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	2
3956	DERMATOLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	INTERNAL MEDICINE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	6
3963	INTERNAL MEDICINE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	4
3965	INTERNAL MEDICINE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	2
3963	UNSPECIFIED SPECIALTY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	4
3964	INTERNAL MEDICINE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	2
3965	DERMATOLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	1
3951	DERMATOLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3964	FAMILY PRACTICE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	1
3967	FAMILY PRACTICE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	1
3963	PEDIATRICS	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	1
3963	DERMATOLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	2
3963	GASTROENTEROLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	10
3965	GASTROENTEROLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	1
3964	UNSPECIFIED SPECIALTY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	2
3963	RHEUMATOLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	7
3965	UNSPECIFIED SPECIALTY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	1
3963	UNSPECIFIED SPECIALTY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	6
3956	UNSPECIFIED SPECIALTY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3951	FAMILY PRACTICE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	1
3956	UNSPECIFIED SPECIALTY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1

3644 FAMILY PRACTICE HYBINOZ ALTO IMMAINE RARSORRIBONA DENIED 2 3856 GASTROCHIBEROLOY HYBINOZ ALTO IMMAINE RARSORRIBO APROMED 2 3856 GASTROCHIBEROLOY HYBINOZ ALTO IMMAINE RARSORRIBO APROMED 2 3856 BIELLANDIO GOY HYBINOZ ALTO IMMAINE RARSORRIBO APROMED 2 3856 RICHARDIO GOY HYBINOZ AUTO IMMAINE RARSORRIBO APROMED 2 3856 RARIDY FRACICE HYBINOZ AUTO IMMAINE RARSORRIBONA APROMED 1 3858 GASTROCHIBROLOY HYBINOZ ALTO IMMAINE RARSORRIBONA DENED 1 3830 GASTROCHIBROLOY HYBINOZ ALTO IMMAINE RARSORRIBONA DENED 1 3843 GASTROCHIBROLOY HYBINOZ ALTO IMMAINE RARSORRIBONA DENED 1 3843 GERMATOLOGY HYBINOZ ALTO IMMAINE RARSORRIBONA APROMED 1 3843 GERMATOLOGY HYBINOZ ALTO IMMAINE RARSORRIBONA APROMED 1 38	Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3888 CASTROENTEROLOGY HYRINDZ AUTO IMMUNE IRAPSORRBD A PEROLOGY 2 3896 RELUMATOLOGY HYRINDZ AUTO MALURE IRAPSORRBDMA APRONED 2 3896 RELUMATOLOGY HYRINDZ AUTO MALURE IRAPSORRBDMA APRONED 2 3898 RYMIZY PRACTICE HYRINDZ AUTO MALURE IRAPSORRBDMA APRONED 1 3898 RESTROENTRIOLOGY HYRINDZ AUTO MALURE IRAPSORRBD APRONED 1 3898 GASTROENTRIOLOGY HYRINDZ AUTO MALURE IRAPSORRBDMA DENIED 1 3898 GASTROENTRIOLOGY HYRINDZ AUTO MALURE IRAPSORRBDMA DENIED 1 3898 HELIMATOLOGY HYRINDZ AUTO MALURE IRAPSORRBDMA DENIED 1 3898 BERLANDACIO GOY HYRINDZ AUTO MALURE IRAPSORRBDMA DENIED 1 3898 HELIMATOLOGY HYRINDZ AUTO MALURE IRAPSORRBDMA DENIED 1 3898 HELIMATOLOGY HYRINDZ AUTO MALURE IRAPSORRBDMA DENIED 1 3899 </td <td>3964</td> <td>FAMILY PRACTICE</td> <td>HYRIMOZ</td> <td>AUTO IMMUNE (RA/PSOR/IBD)/AA</td> <td>DENIED</td> <td>1</td>	3964	FAMILY PRACTICE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	1
S986 PREJUNATOLOGY HYRIMOZ AUTO IMMUNE (RAPSONBO) APPROVED 1 3886 HELIMATOLOGY HYRIMOZ AUTO IMMUNE (RAPSONBOMA APPROVED 2 3886 FAMILY PRACTICE HYRIMOZ AUTO IMMUNE (RAPSONBOMA APPROVED 1 3886 INTERNAL MEDICINE HYRIMOZ AUTO IMMUNE (RAPSONBOMA OBMED 1 3883 OSTROENTEROLOGY HYRIMOZ AUTO IMMUNE (RAPSONBOMA DENED 1 3883 SHEUMATOLOGY HYRIMOZ AUTO IMMUNE (RAPSONBOMA DENED 3 3893 SHEUMATOLOGY HYRIMOZ AUTO IMMUNE (RAPSONBOMA DENED 3 3893 SHEUMATOLOGY HYRIMOZ AUTO IMMUNE (RAPSONBOMA DENED 3 3893 HELMATOLOGY HYRIMOZ (RIMGO MILLS CSOAJ AUTO IMMUNE (RAPSONBOMA APROVED 1 3893 HELMATOLOGY HYRIMOZ (RIMGO MILLS CSOAJ AUTO IMMUNE (RAPSONBOMA APROVED 1 3893 HELMATOLOGY & ONCOLOGY IBRANCE ONCOLOGY APROVED 1 <	3963	FAMILY PRACTICE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	2
3864 REUMATOLOGY HYRIMOZ AUTO IMMUNE RIAPSORIBONA APPROVED 2 3806 FANILY PRACTICE HYRIMOZ AUTO IMMUNE RIAPSORIBON APPROVED 1 3808 INTERNAL REDICINE HYRIMOZ AUTO IMMUNE RIAPSORIBON APPROVED 1 3803 GASTROENTEROLOGY HYRIMOZ AUTO IMMUNE RIAPSORIBONA CENED 1 3803 RIELUMATOLOGY HYRIMOZ AUTO IMMUNE RIAPSORIBONA CENED 1 3803 RIELUMATOLOGY HYRIMOZ AUTO IMMUNE RIAPSORIBONA CENED 1 3804 DERINATOLOGY HYRIMOZ AUTO IMMUNE RIAPSORIBONA CENED 1 3805 DERINATOLOGY HYRIMOZ AUMOÇAMIL SC SOAI AUTO IMMUNE RIAPSORIBONA CENED 1 3806 DERINATOLOGY HYRIMOZ AUMOÇAMIL SC SOAI AUTO IMMUNE RIAPSORIBONA APPROVED 1 3807 DERINATOLOGY HYRIMOZ AUMOÇAMIL SC SOAI AUTO IMMUNE RIAPSORIBONA APPROVED 1 3808 HEMARDOLOGY HYRIMOZ AUMOÇAMIL SC SOAI AUTO IMMUNE RIAPSORIBONA APPROVE	3956	GASTROENTEROLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3966 FAMILY PRACTICE HYRIMOZ AUTO IMMUNE (RAPSORIBO) APPROVED 1 3950 INTERNAL MEDICINE HYRIMOZ AUTO IMMUNE (RAPSORIBO) APPROVED 1 3953 OASTROBINTEROLOSY HYRIMOZ AUTO IMMUNE (RAPSORIBO) DENIED 1 3953 RHELMATOLOGY HYRIMOZ AUTO IMMUNE (RAPSORIBO)MA DENIED 2 3958 RHELMATOLOGY HYRIMOZ AUTO IMMUNE (RAPSORIBO)MA DENIED 3 3958 RHELMATOLOGY HYRIMOZ (ADMIQUAML SC SOAJ) AUTO IMMUNE (RAPSORIBO)MA APPROVED 1 3959 HERMATOLOGY HYRIMOZ (ADMIQUAML SC SOAJ) AUTO IMMUNE (RAPSORIBO)MA APPROVED 1 3950 HERMATOLOGY HIRMATOLOGY HIRMATOLOGY HIRMATOLOGY APPROVED 1 3951 HERMATOLOGY MATINE MESYLATE ONCOLOGY APPROVED 1 3952 MEDICAL ONCOLOGY MATINE MESYLATE ONCOLOGY APPROVED 2 3953 LEGAL MEDICAN MIRMATOLOGY & ONCOLOGY MERMATOLOGY & ONCOLOGY APPROVE	3956	RHEUMATOLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3856 NTERNAL MEDICINE HYRIMOZ AUTO IMMUNE (RAPSORIBDI) APPROVED 1 3883 GASTROENTEROLOCY HYRIMOZ AUTO IMMUNE (RAPSORIBDI) DENIED 1 3883 GASTROENTEROLOCY HYRIMOZ AUTO IMMUNE (RAPSORIBDI) DENIED 3 3883 REMARTOLOCY HYRIMOZ AUTO IMMUNE (RAPSORIBDI) DENIED 3 3886 DERMATOLOCY HYRIMOZ AUTO IMMUNE (RAPSORIBDI) APPROVED 1 3883 RIFLEMATOLOCY HYRIMOZ AUTO IMMUNE (RAPSORIBDI) APPROVED 1 3883 RIFLEMATOLOCY HYRIMOZ AUTO IMMUNE (RAPSORIBDI) APPROVED 1 3883 HELMATOLOCY & ONCOLOCY IBRANCE ONCOLOCY APPROVED 1 3881 HEMATOLOCY & ONCOLOCY IMATINE MESYLATE ONCOLOCY APPROVED 1 3893 MEDICAL ONCOLOCY IMATINE MISSYLATE ONCOLOCY APPROVED 2 3893 MEDICAL ONCOLOCY IMATINE MISSYLATE ONCOLOCY APPROVED 1 3893	3964	RHEUMATOLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	2
3883 GASTROENTEROLOGY HYRIMOZ AUTO IMMUNE RAPSOR/RBOJA DENED 1 3883 GASTROENTEROLOGY HYRIMOZ AUTO IMMUNE RAPSOR/RBOJAA DENED 1 3883 RHELMATOLOGY HYRIMOZ AUTO IMMUNE RAPSOR/RBOJAA DENED 3 3866 DERMATOLOGY HYRIMOZ AUTO IMMUNE RAPSOR/RBOJAA APROVED 1 3883 RHELMATOLOGY HYRIMOZ ADMORI AMI SC SQAJ AUTO IMMUNE RAPSOR/RBOJAA APROVED 1 3883 RHELMATOLOGY HYRIMOZ ADMORI AMI SC SQAJ AUTO IMMUNE RAPSOR/RBOJAA APROVED 1 3883 HEMATOLOGY ONCOLOGY HYRIMOZ ADMORI AMI SC SQAJ AUTO IMMUNE RAPSOR/RBOJAA APROVED 1 3883 HEMATOLOGY ONCOLOGY MARTINE MESYLATE ONCOLOGY APROVED 1 3863 UNSPECIFIED SPECIALTY MATINE MESYLATE ONCOLOGY APROVED 2 3863 MEDICAL ONCOLOGY MATINE MESYLATE ONCOLOGY APROVED 1 3963 LEGAL MEDICINE MARINICA ONCOLOGY APROVED 1 <td>3956</td> <td>FAMILY PRACTICE</td> <td>HYRIMOZ</td> <td>AUTO IMMUNE (RA/PSOR/IBD)</td> <td>APPROVED</td> <td>1</td>	3956	FAMILY PRACTICE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3883 GASTROENTEROLOGY HYRIMOZ AUTO IMMUNE (RAPSOR/IBD)MA DENIED 3 3893 RIELEMATOLOGY HYRIMOZ AUTO IMMUNE (RAPSOR/IBD)MA DENIED 3 3893 RIELEMATOLOGY HYRIMOZ AUTO IMMUNE (RAPSOR/IBD)MA APROVED 1 3893 RIELEMATOLOGY HYRIMOZ 40MG/0 AML SC SOAJ AUTO IMMUNE (RAPSOR/IBD)MA APROVED 1 3893 HEMATOLOGY & ONCOLOGY IBRANCE ONCOLOGY APROVED 1 3893 HEMATOLOGY & ONCOLOGY IBRANCE ONCOLOGY APROVED 1 3893 UNSPECIFIED SPEICALTY IMATINIS MESYLATE ONCOLOGY APROVED 1 3893 MEDICAL ONCOLOGY IMATINIS MESYLATE ONCOLOGY APROVED 2 3893 MEDICAL ONCOLOGY IMATINIS MESYLATE ONCOLOGY APROVED 1 3997 LEGAL MEDICINE IMBRUYICA ONCOLOGY APROVED 1 3983 HEMATOLOGY & ONCOLOGY IMBRUYICA ONCOLOGY APROVED 1 3986 <td< td=""><td>3956</td><td>INTERNAL MEDICINE</td><td>HYRIMOZ</td><td>AUTO IMMUNE (RA/PSOR/IBD)</td><td>APPROVED</td><td>1</td></td<>	3956	INTERNAL MEDICINE	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3983 RHEUMATOLOGY HYRIMOZ AUTO IMMUNE RIAPSOR/IBDI/AA DENIED 3 3966 DERMATOLOGY HYRIMOZ MURQUAMI, SC SOAJ AUTO IMMUNE RIAPSOR/IBDI/AA APROVED 1 3968 BHEMATOLOGY HYRIMOZ 40MQO, AMI, SC SOAJ AUTO IMMUNE RIAPSOR/IBDI/AA APROVED 1 3969 HEMATOLOGY & ONCOLOGY IBRANCE ONCOLOGY APROVED 1 3961 PEDATRICS LARIS CAPSGOUT APROVED 1 3963 UNSPECIFIED SPECIALTY MATINIB MESYLATE ONCOLOGY APROVED 2 3963 MEDICAL ONCOLOGY IMATINIB MESYLATE ONCOLOGY APROVED 2 3963 MEDICAL ONCOLOGY IMATINIB MESYLATE ONCOLOGY APROVED 2 3963 MEDICAL ONCOLOGY IMATINIB MESYLATE ONCOLOGY APROVED 1 3967 LEGAL MEDICINE IMBRUVICA ONCOLOGY APROVED 1 3968 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APROVED 1 3969 HEMA	3963	GASTROENTEROLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3866 DERMATOLOGY HYRIMOZ AUTO IMMUNE IRAPSORIBO) APPROVED 1 3863 RIEUMATOLOGY HYRIMOZ GMOGO/MUSE SOAJ AUTO IMMUNE IRAPSORIBONAA APPROVED 1 3863 HEMATOLOGY & ONCOLOGY HAPROVED 1 3861 PEDIATRICS ILARIS CAPSCOUT APPROVED 1 3863 UNSPECIFIED SPECIALTY IMATINIB MESYLATE ONCOLOGY APPROVED 2 3868 MEDICAL ONCOLOGY IMATINIB MESYLATE ONCOLOGY APPROVED 2 3869 MEDICAL ONCOLOGY IMATINIB MESYLATE ONCOLOGY APPROVED 2 3870 LEGAL MEDICINE IMATINIB MESYLATE ONCOLOGY APPROVED 1 3873 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3874 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 2 3863 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3864 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY	3963	GASTROENTEROLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	1
3883 RHEUMATOLOGY HYRIMOZ 40MGQ 4MI SC SOAJ AUTO IMMUNE (RAIPSOR/IBDWAA) APPROVED 1 3893 HEMATOLOGY & ONCOLOGY IBRANCE ONCOLOGY APPROVED 1 3961 PEDIATRICS ILARIS CAPGGOUT APPROVED 1 3963 UNSPECIFIED SPECIALTY IMATINIB MESYLATE ONCOLOGY APPROVED 1 3966 MEDICAL ONCOLOGY IMATINIB MESYLATE ONCOLOGY APPROVED 1 3970 LEGAL MEDICINE IMATINIB MESYLATE ONCOLOGY APPROVED 1 3970 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3983 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3970 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3983 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3986 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3981 HEMATOLOGY & ONCOLOGY	3963	RHEUMATOLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)/AA	DENIED	3
3969 HEMATOLOGY & ONCOLOGY IBRANCE ONCOLOGY APPROVED 1 3951 PEDIATRICS ILARIS CARSGOUT APPROVED 1 3963 UNSPECIFIED SPECIALTY IMATINIS MESYLATE ONCOLOGY APPROVED 2 3968 MEDICAL ONCOLOGY IMATINIS MESYLATE ONCOLOGY APPROVED 2 3963 MEDICAL ONCOLOGY IMATINIS MESYLATE ONCOLOGY APPROVED 2 3970 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3973 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3986 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3986 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3981 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3983 MEDICAL ONCOLOGY IMBRUVICA <t< td=""><td>3956</td><td>DERMATOLOGY</td><td>HYRIMOZ</td><td>AUTO IMMUNE (RA/PSOR/IBD)</td><td>APPROVED</td><td>1</td></t<>	3956	DERMATOLOGY	HYRIMOZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951 PEDIATRICS ILARIS CAPSGOUT APPROVED 1 3963 UNSPECIFIED SPECIALTY MATINIE MESYLATE ONCOLOGY APPROVED 1 3965 MEDICAL ONCOLOGY IMATINIE MESYLATE ONCOLOGY APPROVED 2 3963 MEDICAL ONCOLOGY IMATINIE MESYLATE ONCOLOGY APPROVED 1 3970 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3973 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3964 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3965 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3961 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY IMBRUVICA	3963	RHEUMATOLOGY	HYRIMOZ 40MG/0.4ML SC SOAJ	AUTO IMMUNE (RA/PSOR/IBD)/AA	APPROVED	1
3883 UNSPECIFIED SPECIALTY IMATINIS MESYLATE ONCOLOGY APPROVED 2 3985 MEDICAL ONCOLOGY IMATINIS MESYLATE ONCOLOGY APPROVED 2 3983 MEDICAL ONCOLOGY IMATINIS MESYLATE ONCOLOGY APPROVED 1 3983 MEDICAL ONCOLOGY IMATUNIS MESYLATE ONCOLOGY APPROVED 1 3993 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3993 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3996 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3996 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3996 HEMATOLOGY & ONCOLOGY I	3969	HEMATOLOGY & ONCOLOGY	IBRANCE	ONCOLOGY	APPROVED	1
3966 MEDICAL ONCOLOGY IMATINIB MESYLATE ONCOLOGY APPROVED 2 3983 MEDICAL ONCOLOGY IMATINIB MESYLATE ONCOLOGY APPROVED 1 3970 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3983 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3983 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3986 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3986 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3981 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3983 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3981 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3983 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3983 HEMATOLOGY & ONCOLOGY IMBRUVICA <td>3951</td> <td>PEDIATRICS</td> <td>ILARIS</td> <td>CAPS/GOUT</td> <td>APPROVED</td> <td>1</td>	3951	PEDIATRICS	ILARIS	CAPS/GOUT	APPROVED	1
3963 MEDICAL ONCOLOGY IMATINIB MESYLATE ONCOLOGY APPROVED 1 3970 LEGAL MEDICINE IMBRUVICA ONCOLOGY DENIED 1 3970 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3956 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3956 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3961 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3961 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 MEDICAL ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 MEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 UNSPECIFIED SPECIALTY INLYTA <t< td=""><td>3963</td><td>UNSPECIFIED SPECIALTY</td><td>IMATINIB MESYLATE</td><td>ONCOLOGY</td><td>APPROVED</td><td>1</td></t<>	3963	UNSPECIFIED SPECIALTY	IMATINIB MESYLATE	ONCOLOGY	APPROVED	1
3970 LEGAL MEDICINE IMBRUVICA ONCOLOGY DENIED 1 3970 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3966 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3961 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3961 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 MEDICAL ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 UNSPECIFIED SPECIALTY INCELANDA MOYEMENT DISORBERS APPROVED 1 3961 UNSPECIFIED SPECIALTY INLYTA	3965	MEDICAL ONCOLOGY	IMATINIB MESYLATE	ONCOLOGY	APPROVED	2
3970 LEGAL MEDICINE IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3956 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3956 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY DENIED 1 3951 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3956 MEDICAL ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3956 MEDICAL ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3956 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY, PEDIATRIC IMFLIMIAB AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 UNSPECIFIED SPECIALTY INGREZZA MOVEMENT DISORDERS APPROVED 1 3963 UNSPECIFIED SPECIALTY INLYTA ONCOLOGY APPROVED 1 3965 HEMATOLOGY & ONCOLOGY	3963	MEDICAL ONCOLOGY	IMATINIB MESYLATE	ONCOLOGY	APPROVED	1
3963 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3956 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3956 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY DENIED 1 3961 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3956 MEDICAL ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3956 MEDICAL ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3964 UNSPECIFIED SPECIALTY INLYTA ONCOLOGY APPROVED 1 3970 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 5 3963 HEMATOLOGY & ONCOLOGY JAKAFI O	3970	LEGAL MEDICINE	IMBRUVICA	ONCOLOGY	DENIED	1
3956 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 2 3956 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY DENIED 1 3961 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3956 MEDICAL ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3958 MEDICAL ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY, PEDIATRIC INFLIXIMAB AUTO IMMUNE (RAYPSOR/IBD) DENIED 1 3964 UNSPECIFIED SPECIALTY INCREZZA MOVEMENT DISORDERS APPROVED 1 3963 UNSPECIFIED SPECIALTY INLYTA ONCOLOGY APPROVED 1 3961 UNSPECIFIED SPECIALTY INLYTA ONCOLOGY APPROVED 1 3962 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 5 3963 HEMATOLOGY & ONCOLOGY	3970	LEGAL MEDICINE	IMBRUVICA	ONCOLOGY	APPROVED	1
3956 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY DENIED 1 3961 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3956 MEDICAL ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY, PEDIATRIC INFLIXIMAB AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3964 UNSPECIFIED SPECIALTY INIGREZZA MOVEMENT DISORDERS APPROVED 1 3963 UNSPECIFIED SPECIALTY INLYTA ONCOLOGY APPROVED 1 3961 UNSPECIFIED SPECIALTY INLYTA ONCOLOGY APPROVED 1 3970 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3965 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3966 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 5 3963 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 1 3963 PEDIATRICS JAV	3963	HEMATOLOGY & ONCOLOGY	IMBRUVICA	ONCOLOGY	APPROVED	1
9911 HEMATOLOGY & ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3956 MEDICAL ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY, PEDIATRIC INFLIXIMAB AUTO IMMUNE (RAYPSOR/IBD) DENIED 1 3964 UNSPECIFIED SPECIALTY INGREZZA MOVEMENT DISORDERS APPROVED 1 3963 UNSPECIFIED SPECIALTY INLYTA ONCOLOGY APPROVED 1 3961 UNSPECIFIED SPECIALTY INLYTA ONCOLOGY APPROVED 1 3970 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3965 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3966 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 5 3963 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 1 3963 PEDIATRICS APPRO	3956	HEMATOLOGY & ONCOLOGY	IMBRUVICA	ONCOLOGY	APPROVED	2
9966 MEDICAL ONCOLOGY IMBRUVICA ONCOLOGY APPROVED 1 3963 HEMATOLOGY & ONCOLOGY, PEDIATRIC INFLIXIMAB AUTO IMMUNE (RAYPSOR/IBD) DENIED 1 3964 UNSPECIFIED SPECIALTY INGREZZA MOVEMENT DISORDERS APPROVED 1 3963 UNSPECIFIED SPECIALTY INLYTA ONCOLOGY APPROVED 1 3951 UNSPECIFIED SPECIALTY INLYTA ONCOLOGY APPROVED 1 3970 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3965 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3966 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 5 3963 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 1 3963 PEDIATRICS JAVYGTOR PHENYLKETONURIA (PKU) APPROVED 1 3963 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 1 3964 UNSPECIFIED SPECIALT	3956	HEMATOLOGY & ONCOLOGY	IMBRUVICA	ONCOLOGY	DENIED	1
9963HEMATOLOGY & ONCOLOGY, PEDIATRICINFLIXIMABAUTO IMMUNE (RA/PSOR/IBD)DENIED13964UNSPECIFIED SPECIALTYINGREZZAMOVEMENT DISORDERSAPPROVED13963UNSPECIFIED SPECIALTYINLYTAONCOLOGYAPPROVED13951UNSPECIFIED SPECIALTYINLYTAONCOLOGYAPPROVED13970HEMATOLOGY & ONCOLOGYINLYTAONCOLOGYAPPROVED13966HEMATOLOGY & ONCOLOGYINLYTAONCOLOGYAPPROVED13956HEMATOLOGY & ONCOLOGYJAKAFIONCOLOGYAPPROVED53963HEMATOLOGY & ONCOLOGYJAKAFIONCOLOGYAPPROVED13963PEDIATRICSJAVYGTORPHENYLKETONURIA (PKU)APPROVED13963UNSPECIFIED SPECIALTYKESIMPTAMULTIPLE SCLEROSISAPPROVED23964UNSPECIFIED SPECIALTYKESIMPTAMULTIPLE SCLEROSISAPPROVED1	3961	HEMATOLOGY & ONCOLOGY	IMBRUVICA	ONCOLOGY	APPROVED	1
3964UNSPECIFIED SPECIALTYINGREZZAMOVEMENT DISORDERSAPPROVED13963UNSPECIFIED SPECIALTYINLYTAONCOLOGYAPPROVED13951UNSPECIFIED SPECIALTYINLYTAONCOLOGYAPPROVED13970HEMATOLOGY & ONCOLOGYINLYTAONCOLOGYAPPROVED13965HEMATOLOGY & ONCOLOGYINLYTAONCOLOGYAPPROVED13956HEMATOLOGY & ONCOLOGYJAKAFIONCOLOGYAPPROVED53963HEMATOLOGY & ONCOLOGYJAKAFIONCOLOGYAPPROVED13963PEDIATRICSJAVYGTORPHENYLKETONURIA (PKU)APPROVED13963UNSPECIFIED SPECIALTYKESIMPTAMULTIPLE SCLEROSISAPPROVED23963NURSE PRACTITIONER, ADULT HEALTHKESIMPTAMULTIPLE SCLEROSISAPPROVED13964UNSPECIFIED SPECIALTYKESIMPTAMULTIPLE SCLEROSISAPPROVED1	3956	MEDICAL ONCOLOGY	IMBRUVICA	ONCOLOGY	APPROVED	1
3963 UNSPECIFIED SPECIALTY INLYTA ONCOLOGY APPROVED 1 3961 UNSPECIFIED SPECIALTY INLYTA ONCOLOGY APPROVED 1 3970 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3965 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3966 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3956 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 5 3963 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 1 3963 PEDIATRICS JAVYGTOR PHENYLKETONURIA (PKU) APPROVED 1 3963 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 2 3963 NURSE PRACTITIONER, ADULT HEALTH KESIMPTA MULTIPLE SCLEROSIS APPROVED 1 3964 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 1	3963	HEMATOLOGY & ONCOLOGY, PEDIATRIC	INFLIXIMAB	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3951 UNSPECIFIED SPECIALTY INLYTA ONCOLOGY APPROVED 1 3970 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3965 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3956 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3956 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 5 3963 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 1 3963 PEDIATRICS JAVYGTOR PHENYLKETONURIA (PKU) APPROVED 1 3963 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 2 3964 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 1	3964	UNSPECIFIED SPECIALTY	INGREZZA	MOVEMENT DISORDERS	APPROVED	1
3970 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY ONCOLOGY APPROVED 1 3965 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3956 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 5 3963 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 1 3963 PEDIATRICS JAVYGTOR PHENYLKETONURIA (PKU) APPROVED 1 3963 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 2 3964 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 1 3964 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 1	3963	UNSPECIFIED SPECIALTY	INLYTA	ONCOLOGY	APPROVED	1
3965 HEMATOLOGY & ONCOLOGY INLYTA ONCOLOGY APPROVED 1 3966 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 5 3963 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 1 3963 PEDIATRICS JAVYGTOR PHENYLKETONURIA (PKU) APPROVED 1 3963 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 2 3964 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 1 3964 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 1	3951	UNSPECIFIED SPECIALTY	INLYTA	ONCOLOGY	APPROVED	1
3956 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY ONCOLOGY APPROVED 5 3963 HEMATOLOGY & ONCOLOGY JAKAFI ONCOLOGY APPROVED 1 3963 PEDIATRICS JAVYGTOR PHENYLKETONURIA (PKU) APPROVED 1 3963 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 2 3964 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 1 3964 MULTIPLE SCLEROSIS APPROVED 1	3970	HEMATOLOGY & ONCOLOGY	INLYTA	ONCOLOGY	APPROVED	1
3963HEMATOLOGY & ONCOLOGYJAKAFIONCOLOGYAPPROVED13963PEDIATRICSJAVYGTORPHENYLKETONURIA (PKU)APPROVED13963UNSPECIFIED SPECIALTYKESIMPTAMULTIPLE SCLEROSISAPPROVED23963NURSE PRACTITIONER, ADULT HEALTHKESIMPTAMULTIPLE SCLEROSISAPPROVED13964UNSPECIFIED SPECIALTYKESIMPTAMULTIPLE SCLEROSISAPPROVED1	3965	HEMATOLOGY & ONCOLOGY	INLYTA	ONCOLOGY	APPROVED	1
3963 PEDIATRICS JAVYGTOR PHENYLKETONURIA (PKU) APPROVED 1 3963 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 2 3963 NURSE PRACTITIONER, ADULT HEALTH KESIMPTA MULTIPLE SCLEROSIS APPROVED 1 3964 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 1	3956	HEMATOLOGY & ONCOLOGY	JAKAFI	ONCOLOGY	APPROVED	5
3963 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 2 3963 NURSE PRACTITIONER, ADULT HEALTH KESIMPTA MULTIPLE SCLEROSIS APPROVED 1 3964 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 1	3963	HEMATOLOGY & ONCOLOGY	JAKAFI	ONCOLOGY	APPROVED	1
3963 NURSE PRACTITIONER, ADULT HEALTH KESIMPTA MULTIPLE SCLEROSIS APPROVED 1 3964 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 1	3963	PEDIATRICS	JAVYGTOR	PHENYLKETONURIA (PKU)	APPROVED	1
3964 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS APPROVED 1	3963	UNSPECIFIED SPECIALTY	KESIMPTA	MULTIPLE SCLEROSIS	APPROVED	2
	3963	NURSE PRACTITIONER, ADULT HEALTH	KESIMPTA	MULTIPLE SCLEROSIS	APPROVED	1
3963 UNSPECIFIED SPECIALTY KESIMPTA MULTIPLE SCLEROSIS DENIED 2	3964	UNSPECIFIED SPECIALTY	KESIMPTA	MULTIPLE SCLEROSIS	APPROVED	1
	3963	UNSPECIFIED SPECIALTY	KESIMPTA	MULTIPLE SCLEROSIS	DENIED	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3963	NEUROLOGY	KESIMPTA	MULTIPLE SCLEROSIS	APPROVED	2
3963	FAMILY PRACTICE	KESIMPTA 20MG/0.4ML SC SOAJ	MULTIPLE SCLEROSIS	APPROVED	1
3963	NEUROLOGY	KESIMPTA 20MG/0.4ML SC SOAJ	MULTIPLE SCLEROSIS	APPROVED	1
3963	INTERNAL MEDICINE	KEVZARA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970	RHEUMATOLOGY	KEVZARA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	FAMILY PRACTICE	KEVZARA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	RHEUMATOLOGY	KEVZARA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3956	RHEUMATOLOGY	KEVZARA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	FAMILY PRACTICE	KEVZARA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	UNSPECIFIED SPECIALTY	KEYTRUDA	ONCOLOGY	APPROVED	1
3970	HEMATOLOGY & ONCOLOGY	KEYTRUDA	ONCOLOGY	APPROVED	1
3956	HEMATOLOGY & ONCOLOGY	KEYTRUDA	ONCOLOGY	APPROVED	3
3956	HEMATOLOGY & ONCOLOGY	KEYTRUDA	ONCOLOGY	DENIED	1
3956	HEMATOLOGY & ONCOLOGY	KISQALI	ONCOLOGY	APPROVED	3
3962	HEMATOLOGY & ONCOLOGY	KISQALI	ONCOLOGY	APPROVED	1
3965	MEDICAL ONCOLOGY	KISQALI	ONCOLOGY	APPROVED	1
3970	HEMATOLOGY & ONCOLOGY	KISQALI	ONCOLOGY	APPROVED	3
3963	HEMATOLOGY & ONCOLOGY	KISQALI	ONCOLOGY	APPROVED	1
3964	HEMATOLOGY & ONCOLOGY	KISQALI	ONCOLOGY	APPROVED	2
3969	UNSPECIFIED SPECIALTY	KISQALI	ONCOLOGY	DENIED	3
3970	MEDICAL ONCOLOGY	KISQALI	ONCOLOGY	APPROVED	1
3963	MEDICAL ONCOLOGY	KISQALI	ONCOLOGY	APPROVED	1
3956	MEDICAL ONCOLOGY	KISQALI	ONCOLOGY	APPROVED	1
3964	HEMATOLOGY & ONCOLOGY	KISQALI PAK FEMARA	ONCOLOGY	APPROVED	1
3963	UNSPECIFIED SPECIALTY	KITABIS PAK	CYSTIC FIBROSIS	APPROVED	1
3963	UNSPECIFIED SPECIALTY	KRAZATI	ONCOLOGY	APPROVED	1
3963	UNSPECIFIED SPECIALTY	LENALIDOMIDE	ONCOLOGY	APPROVED	1
3956	HEMATOLOGY & ONCOLOGY	LENALIDOMIDE	ONCOLOGY	APPROVED	1
3964	MEDICAL ONCOLOGY	LENVIMA	ONCOLOGY	APPROVED	1
3964	HEMATOLOGY & ONCOLOGY	LENVIMA	ONCOLOGY	APPROVED	1
3956	UNSPECIFIED SPECIALTY	LENVIMA	ONCOLOGY	APPROVED	1
3951	HEMATOLOGY & ONCOLOGY, PEDIATRIC	LENVIMA	ONCOLOGY	APPROVED	1
3965	UNSPECIFIED SPECIALTY	LEUPROLIDE ACETATE KIT	HORMONAL THERAPIES	DENIED	1
3963	OBSTETRICS & GYNECOLOGY	LUPRON DEPOT 3.75MG	HORMONAL THERAPIES/CPP	APPROVED	1
3963	MEDICAL ONCOLOGY	LYNPARZA	ONCOLOGY	APPROVED	1
3956	HEMATOLOGY & ONCOLOGY	LYNPARZA	ONCOLOGY	APPROVED	1
3963	UNSPECIFIED SPECIALTY	LYNPARZA	ONCOLOGY	APPROVED	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3956	MEDICAL ONCOLOGY	LYNPARZA	ONCOLOGY	APPROVED	1
3961	UNSPECIFIED SPECIALTY	LYNPARZA	ONCOLOGY	DENIED	1
3963	HEMATOLOGY & ONCOLOGY	LYNPARZA	ONCOLOGY	APPROVED	1
3970	HEMATOLOGY & ONCOLOGY	LYNPARZA	ONCOLOGY	APPROVED	1
3963	NEUROLOGY	MAVENCLAD	MULTIPLE SCLEROSIS	DENIED	1
3951	FAMILY PRACTICE	MAVYRET	HEPATITIS C	DENIED	1
3956	UNSPECIFIED SPECIALTY	MEKINIST	ONCOLOGY	APPROVED	1
3963	UNSPECIFIED SPECIALTY	MEKINIST	ONCOLOGY	APPROVED	1
3951	NEUROLOGY	MEKINIST	ONCOLOGY	APPROVED	1
3963	MEDICAL ONCOLOGY	MEKINIST	ONCOLOGY	APPROVED	1
3963	UNSPECIFIED SPECIALTY	MEKTOVI	ONCOLOGY	APPROVED	1
3963	HEMATOLOGY & ONCOLOGY	NINLARO	ONCOLOGY	APPROVED	1
3956	MEDICAL ONCOLOGY	NIVESTYM	NEUTROPENIA	APPROVED	2
3963	HEMATOLOGY & ONCOLOGY	NIVESTYM	NEUTROPENIA	APPROVED	3
3951	HEMATOLOGY & ONCOLOGY	NIVESTYM	NEUTROPENIA	APPROVED	2
3964	HEMATOLOGY & ONCOLOGY	NIVESTYM	NEUTROPENIA	APPROVED	1
3970	MEDICAL ONCOLOGY	NIVESTYM	NEUTROPENIA	APPROVED	1
3956	MEDICAL ONCOLOGY	NIVESTYM	NEUTROPENIA	DENIED	1
3963	UNSPECIFIED SPECIALTY	NIVESTYM	NEUTROPENIA	APPROVED	2
3963	FAMILY PRACTICE	NORDITROPIN	GROWTH HORMONE AND RELATED DISORDERS	APPROVED	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	NORDITROPIN	GROWTH HORMONE AND RELATED DISORDERS	DENIED	1
3963	ENDOCRINOLOGY, PEDIATRIC	NORDITROPIN	GROWTH HORMONE AND RELATED DISORDERS	DENIED	1
3963	ENDOCRINOLOGY, PEDIATRIC	NORDITROPIN	GROWTH HORMONE AND RELATED DISORDERS	APPROVED	3
3956	UNSPECIFIED SPECIALTY	NORDITROPIN	GROWTH HORMONE AND RELATED DISORDERS	DENIED	1
3965	UNSPECIFIED SPECIALTY	NORDITROPIN	GROWTH HORMONE AND RELATED DISORDERS	APPROVED	1
3961	HEMATOLOGY & ONCOLOGY	NUBEQA	ONCOLOGY	APPROVED	1
3956	HEMATOLOGY & ONCOLOGY	NUBEQA	ONCOLOGY	DENIED	1
3963	FAMILY PRACTICE	NUBEQA	ONCOLOGY	APPROVED	1
3965	FAMILY PRACTICE	NUBEQA	ONCOLOGY	APPROVED	1
3965	FAMILY PRACTICE	NUBEQA	ONCOLOGY	DENIED	2
3951	HEMATOLOGY & ONCOLOGY	NUBEQA	ONCOLOGY	DENIED	2
3963	ALLERGY & IMMUNOLOGY	NUCALA	ASTHMA	DENIED	1
3963	INTERNAL MEDICINE	NUCALA	ASTHMA	DENIED	1
3965	SLEEP MEDICINE	NUCALA	ASTHMA	APPROVED	1
3967	UNSPECIFIED SPECIALTY	NUCALA	ASTHMA	APPROVED	1
3963	ALLERGY & IMMUNOLOGY	NUCALA	ASTHMA	APPROVED	1
3965	INTERNAL MEDICINE	NUCALA	ASTHMA	APPROVED	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3963	UNSPECIFIED SPECIALTY	NUCALA	ASTHMA	APPROVED	4
3951	OTOLARYNGOLOGY	NUCALA	ASTHMA	DENIED	1
3963	MEDICAL ONCOLOGY	NYVEPRIA	NEUTROPENIA	APPROVED	2
3963	HEMATOLOGY & ONCOLOGY	NYVEPRIA	NEUTROPENIA	DENIED	1
3951	UNSPECIFIED SPECIALTY	NYVEPRIA	NEUTROPENIA	DENIED	1
3956	MEDICAL ONCOLOGY	NYVEPRIA	NEUTROPENIA	DENIED	1
3963	UNSPECIFIED SPECIALTY	NYVEPRIA	NEUTROPENIA	APPROVED	2
3956	HEMATOLOGY & ONCOLOGY	NYVEPRIA	NEUTROPENIA	APPROVED	9
3963	HEMATOLOGY & ONCOLOGY	NYVEPRIA	NEUTROPENIA	APPROVED	6
3956	MEDICAL ONCOLOGY	NYVEPRIA	NEUTROPENIA	APPROVED	4
3970	HEMATOLOGY & ONCOLOGY	NYVEPRIA	NEUTROPENIA	APPROVED	5
3951	UNSPECIFIED SPECIALTY	NYVEPRIA	NEUTROPENIA	APPROVED	1
3951	HEMATOLOGY & ONCOLOGY	NYVEPRIA	NEUTROPENIA	APPROVED	2
3963	GASTROENTEROLOGY	OCALIVA	GASTROINTESTINAL DISORDERS - OTHER	APPROVED	1
3956	MEDICAL ONCOLOGY	OCTREOTIDE ACETATE	ACROMEGALY	DENIED	1
3963	UNSPECIFIED SPECIALTY	OCTREOTIDE ACETATE	ACROMEGALY	APPROVED	1
3956	MEDICAL ONCOLOGY	OCTREOTIDE ACETATE	ACROMEGALY	APPROVED	1
3951	UNSPECIFIED SPECIALTY	ODOMZO	ONCOLOGY	APPROVED	1
3956	HEMATOLOGY & ONCOLOGY	ODOMZO	ONCOLOGY	APPROVED	1
3963	INTERNAL MEDICINE	OFEV	PULMONARY DISORDERS	DENIED	1
3963	UNSPECIFIED SPECIALTY	OFEV	PULMONARY DISORDERS	DENIED	1
3964	FAMILY PRACTICE	OFEV	PULMONARY DISORDERS	APPROVED	1
3963	UNSPECIFIED SPECIALTY	OFEV	PULMONARY DISORDERS	APPROVED	3
3956	INTERNAL MEDICINE	OFEV	PULMONARY DISORDERS	APPROVED	2
3956	CARDIOLOGY	OPSUMIT	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3963	INTERNAL MEDICINE, CRITICAL CARE	OPSUMIT	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3964	INTERNAL MEDICINE, CRITICAL CARE	OPSUMIT	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3968	INTERNAL MEDICINE	OPSUMIT	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3956	INTERNAL MEDICINE	OPSUMIT	PULMONARY ARTERIAL HYPERTENSION	APPROVED	2
3963	INTERNAL MEDICINE	OPSUMIT	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3964	RHEUMATOLOGY	ORENCIA SQ 125 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	INTERNAL MEDICINE	ORENITRAM	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3965	UNSPECIFIED SPECIALTY	ORGOVY	POST LIMIT	APPROVED	1
3963	UNSPECIFIED SPECIALTY	ORGOVYX	ONCOLOGY	APPROVED	1
3965	UROLOGY	ORGOVYX	ONCOLOGY	APPROVED	1
3963	UROLOGY	ORGOVYX	ONCOLOGY	APPROVED	2
3965	UNSPECIFIED SPECIALTY	ORGOVYX	ONCOLOGY	APPROVED	2

383 IRMATOLOGY & ONCO GRY ORSCRYX ONCO GRY APPROVED 1 386 URSPECIFIED SPECIALTY ORSAMIS APPROVED 3 0 386 URSPECIFIED SPECIALTY OTEXA 30MG APTO IMMUNE RIAPSORBRO APPROVED 2 3863 CRAILY SARCTICE OTEXA 30MG APTO IMMUNE RIAPSORBRO DENED 1 3863 CRAILY SARCTICE OTEXA 30MG APTO IMMUNE RIAPSORBRO DENED 1 3863 CRAILY SHACTICE OTEXA 30MG APTO IMMUNE RIAPSORBRO DENED 1 3866 OTEXA 30MG APTO IMMUNE RIAPSORBRO CREMICA 1 3867 OTEXA 30MG OTEXA 30MG APTO IMMUNE RIAPSORBRO	Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3886 UNSPECTIED SPECULTY OFEZA 30MG AUTO IMMUNE (RAPSORRBO) APPROVED 2 3883 BANLY PRACTICE OFEZA 30MG AUTO IMMUNE (RAPSORRBO) DENED 1 3883 PANIZY PRACTICE OFEZA 30MG AUTO IMMUNE (RAPSORRBO) DENED 1 3883 PANIZY PRACTICE OFEZA 30MG AUTO IMMUNE (RAPSORRBO) DENED 1 3886 DENAROLOGY OFEZA 30MG AUTO IMMUNE (RAPSORRBO) APPROVED 4 3861 DINSPECIFIED SPECIALTY OFEZA 30MG AUTO IMMUNE (RAPSORRBO) APPROVED 2 3862 PANITY PRACTICE OFEZA 30MG AUTO IMMUNE (RAPSORRBO) DENED 2 3863 DINSPECIFIED SPECIALTY OFEZA 30MG AUTO IMMUNE (RAPSORRBO) DENED 2 3863 DINSPECIFIED SPECIALTY OFEZA 30MG AUTO IMMUNE (RAPSORRBO) APPROVED 3 3864 DINSPECIFIED SPECIALTY OFEZA 30MG AUTO IMMUNE (RAPSORRBO) APPROVED 1 3865 DINSPECIFIED SPECIALTY OFEZA 30MG AUTO IMMUNE (RAPSORRBO) A	3963	HEMATOLOGY & ONCOLOGY	ORGOVYX	ONCOLOGY	APPROVED	1
9883 FAMILY PRACTICE OTEZIA SONG AUTO IMMUNE (BAPSONRB) APPROVED 2 3861 UNISTECPIED STECLALTY DTEZIA SONG AUTO IMMUNE (BAPSONRB) DENIED 1 3883 FAMILY PRACTICE OTEZIA SONG AUTO IMMUNE (BAPSONRB) DENIED 1 3886 DERMATOLOCY OTEZIA SONG AUTO IMMUNE (BAPSONRB) APPROVED 1 3886 HAMILY PRACTICE OTEZIA SONG AUTO IMMUNE (BAPSONRB) DENIED 3 3983 DERMATOLOGY OTEZIA SONG AUTO IMMUNE (BAPSONRB) DENIED 3 3983 DERMATOLOGY OTEZIA SONG AUTO IMMUNE (BAPSONRB) DENIED 3 3983 DERMATOLOGY OTEZIA SONG AUTO IMMUNE (BAPSONRB) DENIED 1 3983 INTERNAL MEDICINE OTEZIA SONG AUTO IMMUNE (BAPSONRB) APPROVED 1 3983 INTERNAL MEDICINE OTEZIA SONG AUTO IMMUNE (BAPSONRB) APPROVED 1 3986 UNSPECIFIED SPECIALTY OTEZIA SONG AUTO IMMUNE (BAPSONRB) APPROVED 1 <td>3963</td> <td>UNSPECIFIED SPECIALTY</td> <td>ORKAMBI</td> <td>CYSTIC FIBROSIS</td> <td>APPROVED</td> <td>1</td>	3963	UNSPECIFIED SPECIALTY	ORKAMBI	CYSTIC FIBROSIS	APPROVED	1
3951 UNSPECTIFIED SPECIALTY OTEZIA 30MG AUTO IMMUNE (RAIPSORIBE) CENED 1 3830 SANILY PRACTICE OTEZIA 30MG AUTO IMMUNE (RAIPSORIBE) DENED 1 3868 DERMATOLODY OTEZIA 30MG AUTO IMMUNE (RAIPSORIBE) APROVED 1 3861 UNSPECTED SPECIALTY OTEZIA 30MG AUTO IMMUNE (RAIPSORIBE) APROVED 1 3863 OFERMATOLOSY OTEZIA 30MG AUTO IMMUNE (RAIPSORIBE) OTENED 2 3863 OFERMATOLOSY OTEZIA 30MG AUTO IMMUNE (RAIPSORIBE) OTENED 2 3863 OFERMATOLOSY OTEZIA 30MG AUTO IMMUNE (RAIPSORIBE) APROVED 1 3863 OTEZIA 30MG AUTO IMMUNE (RAIPSORIBE) APROVED 1 3863 OTEZIA 30MG AUTO IMMUNE (RAIPSORIBE) APROVED 1 3864 UNSPECTIFIC SPECIALTY OTEZIA 30MG AUTO IMMUNE (RAIPSORIBE) APROVED 1 3865 RELUMATOLOSY OTEZIA 30MG AUTO IMMUNE (RAIPSORIBE) OTEZIA 30MG AUTO IMMUNE (RAIPSORIBE) APROVED	3956	UNSPECIFIED SPECIALTY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3963 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBO) DENEO 1 3960 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBO) APPROVED 4 3961 DIASPECIFIES SECRLITY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBO) APPROVED 2 3963 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBO) DENED 2 3983 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBO) DENED 3 3983 UNISPECIFIES SECRLITY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBO) APPROVED 2 3985 INTERNAL MEDIONE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBO) APPROVED 2 3986 INTERNAL MEDIONE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBO) APPROVED 1 3986 INTERNAL MEDIONE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBO) APPROVED 1 3986 INTERNAL MEDIONE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBO) APPROVED 1 3986 PRELIMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBO) APPR	3963	FAMILY PRACTICE	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3856 DERMATOLOSY OTEZA 30MG AJTO IMMUNE IRAPSOR/IBD APPROVED 4 3881 UNSPECIFIED SPECIALTY OTEZA 30MG ALTO IMMUNE IRAPSOR/IBD APPROVED 1 3885 FAMILY PRACTICE OTEZA 30MG ALTO IMMUNE IRAPSOR/IBD DENIED 2 3863 DERMATOLOSY OTEZA 30MG ALTO IMMUNE IRAPSOR/IBD DENIED 3 3865 UNSPECIFIED SPECIALTY OTEZA 30MG ALTO IMMUNE IRAPSOR/IBD APPROVED 2 3863 INTERNAL MEDICINE OTEZA 30MG ALTO IMMUNE IRAPSOR/IBD APPROVED 2 3866 INTERNAL MEDICINE OTEZA 30MG ALTO IMMUNE IRAPSOR/IBD DENIED 1 3866 UNSPECIFIED SPECIALTY OTEZA 30MG ALTO IMMUNE IRAPSOR/IBD DENIED 1 3863 UNSPECIFIED SPECIALTY OTEZA 30MG ALTO IMMUNE IRAPSOR/IBD DENIED 1 3864 UNSPECIFIED SPECIALTY OTEZA 30MG ALTO IMMUNE IRAPSOR/IBD DENIED 1 3863 DERMATOLOGY OTEZA 30MG ALTO IMMUNE IRAPSOR/IBD APPROVED<	3951	UNSPECIFIED SPECIALTY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3951 UNSPECIFIED SPECIALTY OTEZA 30MG AUTO IMMUNE (RAPSORIBD) APPROVED 1 3986 FAMILY PRACTICE OTEZA 30MG AUTO IMMUNE (RAPSORIBD) DENED 2 3986 DERBATOLOGY OTEZA 30MG AUTO IMMUNE (RAPSORIBD) DENED 3 3965 UNSPECIFIED SPECIALTY OTEZA 30MG AUTO IMMUNE (RAPSORIBD) APPROVED 1 3985 INTERNAL MEDICINE OTEZA 30MG AUTO IMMUNE (RAPSORIBD) APPROVED 2 3986 INTERNAL MEDICINE OTEZA 30MG AUTO IMMUNE (RAPSORIBD) APPROVED 1 3986 UNSPECIFIED SPECIALTY OTEZA 30MG AUTO IMMUNE (RAPSORIBD) APPROVED 1 3986 UNSPECIFIED SPECIALTY OTEZA 30MG AUTO IMMUNE (RAPSORIBD) APPROVED 1 3983 UNSPECIFIED SPECIALTY OTEZA 30MG AUTO IMMUNE (RAPSORIBD) APPROVED 1 3983 UNSPECIFIED SPECIALTY OTEZA 30MG AUTO IMMUNE (RAPSORIBD) APPROVED 1 3983 UNSPECIFIED SPECIALTY OTEZA 30MG AUTO IMMUNE (RAPSORIBD)<	3963	FAMILY PRACTICE	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) DENED 2 3938 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) DENED 3 3966 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3963 INTERNAL MEDICINE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 2 3969 INTERNAL MEDICINE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3969 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3969 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3968 HELIMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 7 3963 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3963 RIFLUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3963 RIFLUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD)	3956	DERMATOLOGY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	4
3863 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/RBD) DENIED 3 3965 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/RBD) APPROVED 1 3965 INTERNAL MEDICINE OTEZLA 30MG AUTO IMMUNE (RAPSOR/RBD) APPROVED 2 3966 INTERNAL MEDICINE OTEZLA 30MG AUTO IMMUNE (RAPSOR/RBD) DENIED 1 3966 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/RBD) DENIED 1 3966 RIFELDARTOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/RBD) APPROVED 1 3963 RIFELDARTOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/RBD) APPROVED 7 3963 DEFMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/RBD) APPROVED 7 3963 RIFELDARTOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/RBD) APPROVED 1 3963 RIFELDARTOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/RBD) APPROVED 1 3961 RIFELDARTOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/RBD)	3951	UNSPECIFIED SPECIALTY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3866 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 2 3863 INTERNAL MEDICINE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 2 3866 INTERNAL MEDICINE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3866 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) DENVED 1 3867 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) DENVED 1 3868 RIFLIMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) DENVED 1 3863 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 3 3863 RIFLUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3863 RIFLUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3863 RIFLUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3863 RAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD)	3956	FAMILY PRACTICE	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
SPECIAL SOME OTEZLA SOME AUTO IMMUNE (RAPPSOR/IBD) APPROVED 2	3963	DERMATOLOGY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	3
3966 INTERNAL MEDICNE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3986 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) DENIED 1 3984 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3986 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) DENIED 1 3983 USSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 7 3983 USSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 3 3983 USSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3983 BIEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3983 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3986 RAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3987 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD)<	3965	UNSPECIFIED SPECIALTY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3986 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) DENIED 1 3984 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3966 RIEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) DENIED 1 3963 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 3 3963 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 3 3963 RIFLUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3963 RIFLUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) DENIED 1 3963 RIFLUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 1 3965 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) APPROVED 3 3965 RIFLUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) DENIED 1 3966 RIFLUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPSOR/IBD) DENI	3963	INTERNAL MEDICINE	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3964 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RAPPSOR/IBD) APPROVED 1 3986 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPPSOR/IBD) DENIED 1 3983 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPPSOR/IBD) APPROVED 7 3983 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPPSOR/IBD) APPROVED 3 3983 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPPSOR/IBD) APPROVED 1 3983 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPPSOR/IBD) DENIED 1 3983 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPPSOR/IBD) APPROVED 1 3986 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RAPPSOR/IBD) APPROVED 3 3987 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RAPPSOR/IBD) DENIED 1 3980 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RAPPSOR/IBD) DENIED 1 3981 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RAPPSOR/IBD) APPROVED <td>3956</td> <td>INTERNAL MEDICINE</td> <td>OTEZLA 30MG</td> <td>AUTO IMMUNE (RA/PSOR/IBD)</td> <td>APPROVED</td> <td>1</td>	3956	INTERNAL MEDICINE	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 7 3963 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 3 3963 RIEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3963 RIEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3961 RIEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3965 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3961 BERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3961 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3961 PAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3961 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED	3965	UNSPECIFIED SPECIALTY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 7 3963 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 3 3963 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3963 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3961 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 3 3966 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3967 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3968 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3965 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3961 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED	3964	UNSPECIFIED SPECIALTY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963 UNSPECIFIED SPECIALTY OTEZIA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 3 3963 RHEUMATOLOGY OTEZIA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3963 RHEUMATOLOGY OTEZIA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3961 RHEUMATOLOGY OTEZIA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 3 3966 FAMILY PRACTICE OTEZIA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3961 DERMATOLOGY OTEZIA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3961 DERMATOLOGY OTEZIA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 FAMILY PRACTICE OTEZIA 30MG AUTO IMMUNE (RA/PSOR/IBD) APROVED 1 3965 DERMATOLOGY OTEZIA 30MG AUTO IMMUNE (RA/PSOR/IBD) APROVED 1 3960 DERMATOLOGY OTEZIA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3960 DERMATOLOGY OTEZIA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED	3956	RHEUMATOLOGY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3863 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3963 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3951 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3956 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 3 3956 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3951 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3951 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3951 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3965 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3966 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3966 RHEUMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED	3963	DERMATOLOGY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	7
3963 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3951 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3956 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 3 3965 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3951 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3951 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3965 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3970 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3970 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3963 HEUMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED	3963	UNSPECIFIED SPECIALTY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3951 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3996 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 3 3966 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3951 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3951 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3950 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3970 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3956 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3963 RHEUMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 FAMILY PRACTICE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD)	3963	RHEUMATOLOGY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 3 3965 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3951 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3951 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3965 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3970 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3966 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3967 UNSPECIFIED SPECIALTY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 FAMILY PRACTICE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE	3963	RHEUMATOLOGY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3965 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3951 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3951 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3965 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3970 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3966 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3967 UNSPECIFIED SPECIALTY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3963 FAMILY PRACTICE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3966 RHEUMATOLOGY OTEZLA 30MG + OTEZLA 20MG	3951	RHEUMATOLOGY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 FAMILY PRACTICE OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3951 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3965 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3970 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3970 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3956 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3965 UNSPECIFIED SPECIALTY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 FAMILY PRACTICE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3961 FAMILY PRACTICE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3966 RHEUMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3970 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3970 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3970 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3970 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3970 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 2 3970 DERMATOLOGY DENIED 2 3970 DERMATOLOGY DENIED 2 3970 DERMATOLOGY DENIED 2 3970 DERMATOLOGY DE	3956	FAMILY PRACTICE	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3970FAMILY PRACTICEOTEZLA 30MGAUTO IMMUNE (RA/PSOR/IBD)DENIED23951DERMATOLOGYOTEZLA 30MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13965DERMATOLOGYOTEZLA 30MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13970DERMATOLOGYOTEZLA 30MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13956RHEUMATOLOGYOTEZLA 30MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13965UNSPECIFIED SPECIALTYOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13963FAMILY PRACTICEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13951FAMILY PRACTICEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13963INTERNAL MEDICINEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13956RHEUMATOLOGYOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13970INTERNAL MEDICINEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13970INTERNAL MEDICINEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13970INTERNAL MEDICINEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13983DERMATOLOGYOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED2	3965	RHEUMATOLOGY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3951DERMATOLOGYOTEZLA 30MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13965DERMATOLOGYOTEZLA 30MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13970DERMATOLOGYOTEZLA 30MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13966RHEUMATOLOGYOTEZLA 30MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13965UNSPECIFIED SPECIALTYOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13963FAMILY PRACTICEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13963INTERNAL MEDICINEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13963INTERNAL MEDICINEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13970INTERNAL MEDICINEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13963DERMATOLOGYOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13963DERMATOLOGYOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED1	3951	DERMATOLOGY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3970 DERMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3986 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3986 UNSPECIFIED SPECIALTY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3983 FAMILY PRACTICE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3981 FAMILY PRACTICE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3983 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3986 RHEUMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3987 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3986 RHEUMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3987 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3988 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1	3970	FAMILY PRACTICE	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3970DERMATOLOGYOTEZLA 30MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13956RHEUMATOLOGYOTEZLA 30MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13965UNSPECIFIED SPECIALTYOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13963FAMILY PRACTICEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13951FAMILY PRACTICEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13963INTERNAL MEDICINEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13956RHEUMATOLOGYOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13970INTERNAL MEDICINEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13963DERMATOLOGYOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13963DERMATOLOGYOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED2	3951	DERMATOLOGY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956 RHEUMATOLOGY OTEZLA 30MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3965 UNSPECIFIED SPECIALTY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 FAMILY PRACTICE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3951 FAMILY PRACTICE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3963 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3956 RHEUMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3963 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3964 AUTO IMMUNE (RA/PSOR/IBD) DENIED 1	3965	DERMATOLOGY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3965 UNSPECIFIED SPECIALTY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 FAMILY PRACTICE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3951 FAMILY PRACTICE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3963 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3956 RHEUMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1	3970	DERMATOLOGY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963 FAMILY PRACTICE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3951 FAMILY PRACTICE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3963 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3956 RHEUMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1	3956	RHEUMATOLOGY	OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951FAMILY PRACTICEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13963INTERNAL MEDICINEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13956RHEUMATOLOGYOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED13970INTERNAL MEDICINEOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)DENIED13963DERMATOLOGYOTEZLA 30MG + OTEZLA 20MGAUTO IMMUNE (RA/PSOR/IBD)APPROVED2	3965	UNSPECIFIED SPECIALTY	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3956 RHEUMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 2	3963	FAMILY PRACTICE	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956 RHEUMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 2	3951	FAMILY PRACTICE	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970 INTERNAL MEDICINE OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 3963 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 2	3963	INTERNAL MEDICINE	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963 DERMATOLOGY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 2	3956	RHEUMATOLOGY	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
	3970	INTERNAL MEDICINE	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3970 UNSPECIFIED SPECIALTY OTEZLA 30MG + OTEZLA 20MG AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1	3963	DERMATOLOGY	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
	3970	UNSPECIFIED SPECIALTY	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3963	UNSPECIFIED SPECIALTY	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	FAMILY PRACTICE	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	UNSPECIFIED SPECIALTY	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	FAMILY PRACTICE	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	UNSPECIFIED SPECIALTY	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	FAMILY PRACTICE	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	INTERNAL MEDICINE	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3956	RHEUMATOLOGY	OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3956	UNSPECIFIED SPECIALTY	OTEZLA 30MG OR TABS	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	RHEUMATOLOGY	OTEZLA STARTER PACK + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	INTERNAL MEDICINE	OTEZLA STARTER PACK + OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3965	UNSPECIFIED SPECIALTY	OTEZLA STARTER PACK + OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970	FAMILY PRACTICE	OTEZLA STARTER PACK + OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	FAMILY PRACTICE	OTEZLA STARTER PACK + OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	FAMILY PRACTICE	OTEZLA STARTER PACK + OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3951	FAMILY PRACTICE	OTEZLA STARTER PACK + OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	DERMATOLOGY	OTEZLA STARTER PACK + OTEZLA 30MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3951	FAMILY PRACTICE	OTEZLA STARTER PACK + OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	NURSE PRACTITIONER, ACUTE CARE	OTEZLA STARTER PACK + OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	INTERNAL MEDICINE	OTEZLA STARTER PACK + OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	FAMILY PRACTICE	OTEZLA STARTER PACK + OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3962	UNSPECIFIED SPECIALTY	OTEZLA STARTER PACK + OTEZLA 30MG + OTEZLA 20MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	FAMILY PRACTICE	OTREXUP	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	FAMILY PRACTICE	OTREXUP	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3956	HEMATOLOGY & ONCOLOGY	PAZOPANIB	ONCOLOGY	DENIED	1
3956	MEDICAL ONCOLOGY	PAZOPANIB	ONCOLOGY	DENIED	1
3956	HEMATOLOGY & ONCOLOGY	PEGASYS	HEPATITIS C	APPROVED	1
3956	MEDICAL ONCOLOGY	PEGASYS	HEPATITIS C	APPROVED	2
3970	INTERNAL MEDICINE	PIRFENIDONE	PULMONARY DISORDERS	DENIED	1
3963	NURSE PRACTITIONER, ADULT HEALTH	PLEGRIDY	MULTIPLE SCLEROSIS	APPROVED	1
3963	UNSPECIFIED SPECIALTY	PLEGRIDY	MULTIPLE SCLEROSIS	APPROVED	1
3956	UNSPECIFIED SPECIALTY	PROLASTIN-C	ALPHA-1 ANTITRYPSIN DEFICIENCY	APPROVED	1
3956	UNSPECIFIED SPECIALTY	PROLASTIN-C	ALPHA-1 ANTITRYPSIN DEFICIENCY	DENIED	1
3963	UNSPECIFIED SPECIALTY	PROLASTIN-C	ALPHA-1 ANTITRYPSIN DEFICIENCY	DENIED	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3956	PEDIATRICS	PROLIA	OSTEOPOROSIS	APPROVED	1
3956	FAMILY PRACTICE	PROLIA	OSTEOPOROSIS	DENIED	2
3956	HEMATOLOGY & ONCOLOGY	PROLIA	OSTEOPOROSIS	APPROVED	2
3956	UNSPECIFIED SPECIALTY	PROLIA	OSTEOPOROSIS	DENIED	2
3956	FAMILY PRACTICE	PROLIA	OSTEOPOROSIS	APPROVED	7
3951	UNSPECIFIED SPECIALTY	PROLIA	OSTEOPOROSIS	DENIED	1
3956	UNSPECIFIED SPECIALTY	PROLIA	OSTEOPOROSIS	APPROVED	5
3970	FAMILY PRACTICE	PROLIA	OSTEOPOROSIS	APPROVED	2
3963	FAMILY PRACTICE	PROLIA	OSTEOPOROSIS	APPROVED	1
3970	UNSPECIFIED SPECIALTY	PROLIA	OSTEOPOROSIS	DENIED	1
3963	UNSPECIFIED SPECIALTY	PROLIA	OSTEOPOROSIS	APPROVED	1
3951	INTERNAL MEDICINE	PROLIA	OSTEOPOROSIS	DENIED	2
3961	FAMILY PRACTICE	PROLIA	OSTEOPOROSIS	APPROVED	1
3956	INTERNAL MEDICINE	PROLIA	OSTEOPOROSIS	APPROVED	1
3956	RHEUMATOLOGY	PROLIA	OSTEOPOROSIS	DENIED	1
3964	HEMATOLOGY & ONCOLOGY	PROMACTA	THROMBOCYTOPENIA	DENIED	1
3964	HEMATOLOGY & ONCOLOGY	PROMACTA	THROMBOCYTOPENIA	APPROVED	1
3963	INTERNAL MEDICINE, CRITICAL CARE	PULMOZYME	CYSTIC FIBROSIS	APPROVED	1
3963	FAMILY PRACTICE	RASUVO	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	RHEUMATOLOGY	REMICADE 100MG IV SOLR	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	FAMILY PRACTICE	REPATHA	LIPID DISORDERS - PCSK9I	DENIED	1
3956	HEMATOLOGY & ONCOLOGY	RETACRIT	ANEMIA	DENIED	1
3963	UNSPECIFIED SPECIALTY	REVLIMID	ONCOLOGY	APPROVED	1
3965	HEMATOLOGY & ONCOLOGY	REVLIMID	ONCOLOGY	APPROVED	1
3963	HEMATOLOGY & ONCOLOGY	REVLIMID	ONCOLOGY	APPROVED	1
3970	HEMATOLOGY & ONCOLOGY	REVLIMID	ONCOLOGY	APPROVED	1
3956	HEMATOLOGY & ONCOLOGY	REVLIMID	ONCOLOGY	APPROVED	2
3951	GASTROENTEROLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	2
3970	FAMILY PRACTICE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	1
3963	RHEUMATOLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	1
3956	INTERNAL MEDICINE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	13
3951	INTERNAL MEDICINE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	4
3963	UNSPECIFIED SPECIALTY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	10
3956	DERMATOLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	4
3956	FAMILY PRACTICE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	2
3970	GASTROENTEROLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	3
3956	RHEUMATOLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	9

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3969	NURSE PRACTITIONER, ACUTE CARE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	1
3963	NURSE PRACTITIONER, ACUTE CARE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	2
3961	INTERNAL MEDICINE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	1
3965	UNSPECIFIED SPECIALTY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	1
3965	DERMATOLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	2
3951	INTERNAL MEDICINE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	1
3962	INTERNAL MEDICINE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	1
3963	GASTROENTEROLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	6
3965	INTERNAL MEDICINE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	2
3956	GASTROENTEROLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	3
3956	GASTROENTEROLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	7
3963	GASTROENTEROLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	2
3970	FAMILY PRACTICE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	2
3961	UNSPECIFIED SPECIALTY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	1
3964	GASTROENTEROLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	1
3963	INTERNAL MEDICINE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	4
3956	UNSPECIFIED SPECIALTY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	10
3963	FAMILY PRACTICE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	1
3956	RHEUMATOLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	2
3963	UNSPECIFIED SPECIALTY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	5
3970	INTERNAL MEDICINE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	1
3963	DERMATOLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	1
3964	UNSPECIFIED SPECIALTY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	2
3956	DERMATOLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	2
3963	FAMILY PRACTICE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	4
3963	DERMATOLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	3
3963	RHEUMATOLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	6
3956	FAMILY PRACTICE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	6
3956	UNSPECIFIED SPECIALTY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	5
3970	GASTROENTEROLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	2
3965	FAMILY PRACTICE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	1
3963	INTERNAL MEDICINE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	6
3965	INTERNAL MEDICINE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	2
3965	FAMILY PRACTICE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	DENIED	1
3965	GASTROENTEROLOGY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	1
3965	UNSPECIFIED SPECIALTY	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	2
3964	FAMILY PRACTICE	RINVOQ	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3964	GASTROENTEROLOGY	RINVOQ 30MG	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	1
3964	GASTROENTEROLOGY	RINVOQ 45MG + 15MG	AUTO IMMUNE (RA/PSOR/IBD)/ATOPIC DERMATITIS	APPROVED	1
3961	RHEUMATOLOGY	RUXIENCE	AUTO IMMUNE (RA/PSOR/IBD)/ONCOLOGY	APPROVED	1
3961	UNSPECIFIED SPECIALTY	SAPROPTERIN	PHENYLKETONURIA (PKU)	APPROVED	1
3963	INTERNAL MEDICINE	SIGNIFOR	CUSHING'S SYNDROME	APPROVED	1
3963	FAMILY PRACTICE	SILDENAFIL 20MG TABLET	PULMONARY ARTERIAL HYPERTENSION	DENIED	9
3963	UROLOGY	SILDENAFIL 20MG TABLET	PULMONARY ARTERIAL HYPERTENSION	DENIED	1
3963	UNSPECIFIED SPECIALTY	SILDENAFIL 20MG TABLET	PULMONARY ARTERIAL HYPERTENSION	DENIED	3
3970	CARDIOLOGY, INTERVENTIONAL	SILDENAFIL 20MG TABLETS	PULMONARY ARTERIAL HYPERTENSION	DENIED	1
3951	UNSPECIFIED SPECIALTY	SILDENAFIL 20MG TABLETS	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3956	INTERNAL MEDICINE	SILDENAFIL 20MG TABLETS	PULMONARY ARTERIAL HYPERTENSION	DENIED	1
3956	FAMILY PRACTICE	SILDENAFIL 20MG TABLETS	PULMONARY ARTERIAL HYPERTENSION	DENIED	9
3956	UNSPECIFIED SPECIALTY	SILDENAFIL 20MG TABLETS	PULMONARY ARTERIAL HYPERTENSION	APPROVED	2
3970	FAMILY PRACTICE	SILDENAFIL 20MG TABLETS	PULMONARY ARTERIAL HYPERTENSION	DENIED	1
3963	UNSPECIFIED SPECIALTY	SILDENAFIL 20MG TABLETS	PULMONARY ARTERIAL HYPERTENSION	DENIED	1
3963	FAMILY PRACTICE	SILDENAFIL 20MG TABLETS	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3951	FAMILY PRACTICE	SILDENAFIL 20MG TABLETS	PULMONARY ARTERIAL HYPERTENSION	DENIED	2
3956	UNSPECIFIED SPECIALTY	SILDENAFIL 20MG TABLETS	PULMONARY ARTERIAL HYPERTENSION	DENIED	1
3956	HEMATOLOGY & ONCOLOGY	SILDENAFIL 20MG TABLETS	PULMONARY ARTERIAL HYPERTENSION	DENIED	1
3956	INTERNAL MEDICINE	SILDENAFIL 20MG TABLETS	PULMONARY ARTERIAL HYPERTENSION	APPROVED	2
3963	FAMILY PRACTICE	SILDENAFIL 20MG TABLETS	PULMONARY ARTERIAL HYPERTENSION	DENIED	5
3963	UNSPECIFIED SPECIALTY	SILDENAFIL SUSPENSION	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3963	UNSPECIFIED SPECIALTY	SILDENAFIL SUSPENSION	PULMONARY ARTERIAL HYPERTENSION	DENIED	2
3970	GASTROENTEROLOGY	SIMPONI 100MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	RHEUMATOLOGY	SIMPONI 50MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	INTERNAL MEDICINE	SIMPONI ARIA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3965	FAMILY PRACTICE	SKYCLARYS	MOVEMENT DISORDERS	APPROVED	1
3956	FAMILY PRACTICE	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	6
3951	UNSPECIFIED SPECIALTY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3965	RHEUMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	FAMILY PRACTICE	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	INTERNAL MEDICINE	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3970	RHEUMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3964	UNSPECIFIED SPECIALTY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3956	UNSPECIFIED SPECIALTY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	6
3963	NEPHROLOGY / RENAL MEDICINE	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3951	DERMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3963	INTERNAL MEDICINE	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3963	DERMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	11
3963	FAMILY PRACTICE	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	4
3956	DERMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	16
3965	DERMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	INTERNAL MEDICINE	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3961	DERMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	INTERNAL MEDICINE	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3964	UNSPECIFIED SPECIALTY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	FAMILY PRACTICE	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	DERMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3962	UNSPECIFIED SPECIALTY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	DERMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	UNSPECIFIED SPECIALTY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	25
3965	UNSPECIFIED SPECIALTY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	UNSPECIFIED SPECIALTY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	19
3963	UNSPECIFIED SPECIALTY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	3
3956	RHEUMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3963	FAMILY PRACTICE	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	3
3970	UNSPECIFIED SPECIALTY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	RHEUMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3968	DERMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	RHEUMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	GASTROENTEROLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3970	DERMATOLOGY	SKYRIZI 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3956	FAMILY PRACTICE	SKYRIZI 150MG/ML SC SOSY	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970	GASTROENTEROLOGY	SKYRIZI 360MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	INTERNAL MEDICINE	SKYRIZI 360MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	INTERNAL MEDICINE	SKYRIZI 360MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	GASTROENTEROLOGY	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	8
3963	GASTROENTEROLOGY	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	FAMILY PRACTICE	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970	NURSE PRACTITIONER, ACUTE CARE	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	UNSPECIFIED SPECIALTY	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3956	UNSPECIFIED SPECIALTY	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	INTERNAL MEDICINE	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	GASTROENTEROLOGY	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3970	INTERNAL MEDICINE	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	GASTROENTEROLOGY	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	5
3964	GASTROENTEROLOGY	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	GASTROENTEROLOGY	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3970	GASTROENTEROLOGY	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	FAMILY PRACTICE	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	FAMILY PRACTICE	SKYRIZI 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970	GASTROENTEROLOGY	SKYRIZI 600MG + 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	GASTROENTEROLOGY	SKYRIZI 600MG + 360MG + 180MG + 150MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	UNSPECIFIED SPECIALTY	SODIUM OXYBATE	SLEEP DISORDERS	APPROVED	1
3951	PEDIATRICS	SOGROYA	GROWTH HORMONE AND RELATED DISORDERS	APPROVED	1
3965	ENDOCRINOLOGY, PEDIATRIC	SOGROYA	GROWTH HORMONE AND RELATED DISORDERS	DENIED	1
3956	HEMATOLOGY & ONCOLOGY	SOMATULINE DEPOT	ACROMEGALY	APPROVED	1
3970	INTERNAL MEDICINE	SOMATULINE DEPOT	ACROMEGALY	DENIED	2
3963	HEMATOLOGY & ONCOLOGY	SOMATULINE DEPOT	ACROMEGALY	APPROVED	1
3956	ENDOCRINOLOGY, DIABETES & METABOLISM	SOMAVERT	ACROMEGALY	APPROVED	1
3956	MEDICAL ONCOLOGY	SORAFENIB	ONCOLOGY	APPROVED	1
3964	UNSPECIFIED SPECIALTY	SPRAVATO	MENTAL HEALTH CONDITIONS	DENIED	1
3962	PSYCHIATRY	SPRAVATO	MENTAL HEALTH CONDITIONS	DENIED	1
3963	GERIATRIC PSYCHIATRY	SPRAVATO	MENTAL HEALTH CONDITIONS	DENIED	1
3963	PSYCHIATRY	SPRAVATO	MENTAL HEALTH CONDITIONS	APPROVED	3
3963	UNSPECIFIED SPECIALTY	SPRAVATO	MENTAL HEALTH CONDITIONS	DENIED	3
3963	FAMILY PRACTICE	SPRAVATO	MENTAL HEALTH CONDITIONS	DENIED	1
3951	UNSPECIFIED SPECIALTY	SPRAVATO	MENTAL HEALTH CONDITIONS	APPROVED	3
3965	PSYCHIATRY	SPRAVATO	MENTAL HEALTH CONDITIONS	APPROVED	1
3963	UNSPECIFIED SPECIALTY	SPRAVATO	MENTAL HEALTH CONDITIONS	APPROVED	7
3964	PSYCHIATRY	SPRAVATO	MENTAL HEALTH CONDITIONS	APPROVED	1
3962	PSYCHIATRY	SPRAVATO	MENTAL HEALTH CONDITIONS	APPROVED	1
3951	PSYCHIATRY	SPRAVATO	MENTAL HEALTH CONDITIONS	APPROVED	1
3963	PSYCHIATRY	SPRAVATO	MENTAL HEALTH CONDITIONS	DENIED	2
3969	PSYCHIATRY	SPRAVATO	MENTAL HEALTH CONDITIONS	APPROVED	1
3970	HEMATOLOGY & ONCOLOGY	SPRYCEL	ONCOLOGY	APPROVED	1
3956	MEDICAL ONCOLOGY	SPRYCEL	ONCOLOGY	APPROVED	3
3963	MEDICAL ONCOLOGY	SPRYCEL	ONCOLOGY	DENIED	1
3963	MEDICAL ONCOLOGY	SPRYCEL	ONCOLOGY	APPROVED	1
3956	HEMATOLOGY & ONCOLOGY	SPRYCEL	ONCOLOGY	APPROVED	1
3963	HEMATOLOGY & ONCOLOGY	SPRYCEL	ONCOLOGY	APPROVED	2

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3951	HEMATOLOGY & ONCOLOGY	SPRYCEL	ONCOLOGY	APPROVED	2
3970	UNSPECIFIED SPECIALTY	SPRYCEL	ONCOLOGY	APPROVED	1
3956	GASTROENTEROLOGY	STELARA 45MG	POST LIMIT	DENIED	1
3963	GASTROENTEROLOGY	STELARA 45MG VIAL	POST LIMIT	DENIED	1
3963	FAMILY PRACTICE	STELARA IV + STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	FAMILY PRACTICE	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3961	UNSPECIFIED SPECIALTY	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	DERMATOLOGY	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	UNSPECIFIED SPECIALTY	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970	UNSPECIFIED SPECIALTY	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	DERMATOLOGY	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	6
3962	INTERNAL MEDICINE	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	INTERNAL MEDICINE	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	GASTROENTEROLOGY	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	GASTROENTEROLOGY	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3964	DERMATOLOGY	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	UNSPECIFIED SPECIALTY	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3961	UNSPECIFIED SPECIALTY	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	GASTROENTEROLOGY	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	GASTROENTEROLOGY	STELARA SQ 45MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3963	UNSPECIFIED SPECIALTY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	9
3969	GASTROENTEROLOGY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	GASTROENTEROLOGY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3963	INTERNAL MEDICINE	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3956	UNSPECIFIED SPECIALTY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	UNSPECIFIED SPECIALTY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3970	INTERNAL MEDICINE	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3963	UNSPECIFIED SPECIALTY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3956	FAMILY PRACTICE	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3962	GASTROENTEROLOGY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	GASTROENTEROLOGY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	3
3956	FAMILY PRACTICE	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	GASTROENTEROLOGY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	4
3965	GASTROENTEROLOGY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	RHEUMATOLOGY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3965	UNSPECIFIED SPECIALTY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	FAMILY PRACTICE	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3956	INTERNAL MEDICINE	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3961	UNSPECIFIED SPECIALTY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	GASTROENTEROLOGY	STELARA SQ 90MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3956	HEMATOLOGY & ONCOLOGY	STIVARGA	ONCOLOGY	APPROVED	1
3956	UNSPECIFIED SPECIALTY	STIVARGA	ONCOLOGY	APPROVED	1
3963	HEMATOLOGY & ONCOLOGY	STIVARGA	ONCOLOGY	APPROVED	1
3963	HEMATOLOGY & ONCOLOGY	SUNITINIB	ONCOLOGY	APPROVED	1
3965	UNSPECIFIED SPECIALTY	TADALAFIL 20MG	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3964	UNSPECIFIED SPECIALTY	TADALAFIL 20MG	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3963	UNSPECIFIED SPECIALTY	TAFINLAR	ONCOLOGY	APPROVED	1
3963	MEDICAL ONCOLOGY	TAFINLAR	ONCOLOGY	APPROVED	1
3956	UNSPECIFIED SPECIALTY	TAFINLAR	ONCOLOGY	APPROVED	1
3951	DERMATOLOGY	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	6
3970	UNSPECIFIED SPECIALTY	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3970	FAMILY PRACTICE	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3956	FAMILY PRACTICE	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
3963	FAMILY PRACTICE	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3963	DERMATOLOGY	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	6
3956	INTERNAL MEDICINE	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3963	INTERNAL MEDICINE	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	FAMILY PRACTICE	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	3
3956	RHEUMATOLOGY	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3961	FAMILY PRACTICE	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	DERMATOLOGY	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	7
3970	DERMATOLOGY	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	UNSPECIFIED SPECIALTY	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	4
3951	FAMILY PRACTICE	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	INTERNAL MEDICINE	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3961	UNSPECIFIED SPECIALTY	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	UNSPECIFIED SPECIALTY	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	9
3970	UNSPECIFIED SPECIALTY	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	UNSPECIFIED SPECIALTY	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	20
3956	UNSPECIFIED SPECIALTY	TALTZ	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	3
3963	HEMATOLOGY & ONCOLOGY	TASIGNA	ONCOLOGY	APPROVED	1
3963	PSYCHIATRY	TAVNEOS	RARE DISORDERS	DENIED	1
3963	RHEUMATOLOGY	TAVNEOS	RARE DISORDERS	APPROVED	1
3951	NEUROLOGY	TEMOZOLOMIDE	ONCOLOGY	APPROVED	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3970	HEMATOLOGY & ONCOLOGY	TEMOZOLOMIDE	ONCOLOGY	APPROVED	1
3956	UNSPECIFIED SPECIALTY	TEMOZOLOMIDE	ONCOLOGY	APPROVED	1
3956	HEMATOLOGY & ONCOLOGY	TEMOZOLOMIDE	ONCOLOGY	APPROVED	1
3956	NEUROLOGY	TEMOZOLOMIDE	ONCOLOGY	APPROVED	2
3956	NURSE PRACTITIONER, ADULT HEALTH	TERIFLUNOMIDE	MULTIPLE SCLEROSIS	APPROVED	1
3963	NEUROLOGY	TERIFLUNOMIDE	MULTIPLE SCLEROSIS	APPROVED	2
3963	NURSE PRACTITIONER, ADULT HEALTH	TERIFLUNOMIDE	MULTIPLE SCLEROSIS	APPROVED	2
3963	NEUROLOGY	TERIFLUNOMIDE	MULTIPLE SCLEROSIS	DENIED	1
3963	UNSPECIFIED SPECIALTY	TERIFLUNOMIDE	MULTIPLE SCLEROSIS	APPROVED	1
3956	NEUROLOGY	TERIFLUNOMIDE	MULTIPLE SCLEROSIS	APPROVED	1
3964	INTERNAL MEDICINE	TERIPARATIDE [GENERIC]	OSTEOPOROSIS	APPROVED	1
3963	UNSPECIFIED SPECIALTY	TERIPARATIDE [GENERIC]	OSTEOPOROSIS	DENIED	1
3963	ENDOCRINOLOGY, DIABETES & METABOLISM	TERIPARATIDE [GENERIC]	OSTEOPOROSIS	APPROVED	1
3970	FAMILY PRACTICE	TETRABENAZINE	MOVEMENT DISORDERS	DENIED	1
3956	UNSPECIFIED SPECIALTY	TETRABENAZINE	MOVEMENT DISORDERS	DENIED	1
3965	UNSPECIFIED SPECIALTY	TEZSPIRE	ASTHMA	APPROVED	1
3964	INTERNAL MEDICINE	TEZSPIRE	ASTHMA	APPROVED	1
3965	ALLERGY & IMMUNOLOGY	TEZSPIRE	ASTHMA	DENIED	1
3963	PULMONARY DISEASES	TEZSPIRE	ASTHMA	APPROVED	1
3964	UNSPECIFIED SPECIALTY	TEZSPIRE	ASTHMA	APPROVED	1
3951	ALLERGY	TEZSPIRE	ASTHMA	APPROVED	1
3964	UNSPECIFIED SPECIALTY	TEZSPIRE	ASTHMA	DENIED	1
3963	UNSPECIFIED SPECIALTY	TEZSPIRE	ASTHMA	DENIED	2
3963	ALLERGY & IMMUNOLOGY	TEZSPIRE	ASTHMA	APPROVED	1
3963	UNSPECIFIED SPECIALTY	TEZSPIRE	ASTHMA	APPROVED	1
3963	HEMATOLOGY & ONCOLOGY	THALOMID	ONCOLOGY	APPROVED	2
3963	INTERNAL MEDICINE	TIBSOVO	ONCOLOGY	APPROVED	1
3963	UNSPECIFIED SPECIALTY	TIBSOVO	ONCOLOGY	DENIED	1
3963	INTERNAL MEDICINE	TOBI	CYSTIC FIBROSIS	APPROVED	1
3956	FAMILY PRACTICE	TOBRAMYCIN INHALATION SOLUTION	CYSTIC FIBROSIS	DENIED	3
3969	PULMONARY DISEASES	TOBRAMYCIN INHALATION SOLUTION	CYSTIC FIBROSIS	APPROVED	1
3956	UNSPECIFIED SPECIALTY	TOLVAPTAN	CARDIAC DISORDERS	DENIED	1
3961	DERMATOLOGY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3970	RHEUMATOLOGY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	DERMATOLOGY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	8
3956	DERMATOLOGY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	6
3963	FAMILY PRACTICE	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3

DFINATOLOGY	Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
NEW	3956	FAMILY PRACTICE	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
	3961	DERMATOLOGY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
UNSPECIFIED SPECIALTY TREMPYA	3963	UNSPECIFIED SPECIALTY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	7
NURSE PRACTITIONER, ACUTE CARRE TREMEYA	3970	DERMATOLOGY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
UNSPECIFIED SPECIALTY TREMFYA	3964	UNSPECIFIED SPECIALTY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	4
NEW	3956	NURSE PRACTITIONER, ACUTE CARE	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
APPROVED B	3963	UNSPECIFIED SPECIALTY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
NTERNAL MEDICINE TREMFYA	3970	UNSPECIFIED SPECIALTY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
DERMATOLOGY	3956	UNSPECIFIED SPECIALTY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	8
INTERNAL MEDICINE TREMFYA	3965	INTERNAL MEDICINE	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
INTERNAL MEDICINE	3964	DERMATOLOGY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
	3963	INTERNAL MEDICINE	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	3
1 1 1 1 1 1 1 1 1 1	3965	INTERNAL MEDICINE	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
INTERNAL MEDICINE TREMFYA	3964	UNSPECIFIED SPECIALTY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
INTERNAL MEDICINE TREMFYA AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1	3968	UNSPECIFIED SPECIALTY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
Per	3964	INTERNAL MEDICINE	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
1	3956	INTERNAL MEDICINE	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
Internal Medicine Tremfya Auto Immune (raypsor/ibb) Approved 1	3951	UNSPECIFIED SPECIALTY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
RHEUMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) DENIED 1	3956	UNSPECIFIED SPECIALTY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
AUTO IMMUNE (RA/PSOR/IBD) DENIED 1	3962	INTERNAL MEDICINE	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
1 TREMFYA AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 1 S951 DERMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 1 S956 DERMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 1 S956 DERMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 1 S956 INTERNAL MEDICINE TREMFYA AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 1 S963 RHEUMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 1 S965 DERMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 1 S965 DERMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 1 S966 FAMILY PRACTICE TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 1 S961 PEDIATRICS TRIKAFTA CYSTIC FIBROSIS APPROVED 1 1 S969 PULMONARY DISEASES TRIKAFTA CYSTIC FIBROSIS APPROVED 1 1 S966 INTERNAL MEDICINE TRIKAFTA CYSTIC FIBROSIS APPROVED 1 1 S963 INTERNAL MEDICINE TRIKAFTA CYSTIC FIBROSIS APPROVED 1 1 S963 UNSPECIFIED SPECIALTY TRIKAFTA CYSTIC FIBROSIS APPROVED 2	3956	RHEUMATOLOGY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
DERMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 DERMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 DERMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 DENIED	3956	FAMILY PRACTICE	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
DERMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) DENIED 1	3965	UNSPECIFIED SPECIALTY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
INTERNAL MEDICINE TREMFYA AUTO IMMUNE (RA/PSOR/IBD) DENIED 1 RHEUMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA CYSTIC FIBROSIS APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE	3951	DERMATOLOGY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
RHEUMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMATOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMATOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMATOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMATOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMATOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMATOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMATOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMATOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMATOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMATOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMATOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMATOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMETOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMETOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMETOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMETOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMETOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMETOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMETOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMETOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMETOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMETOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMETOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMETOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 BERMETOLOGY TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APP	3956	DERMATOLOGY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
DERMATOLOGY TREMFYA AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 REMF	3956	INTERNAL MEDICINE	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
FAMILY PRACTICE TREMFYA 100MG/ML SC SOSY AUTO IMMUNE (RA/PSOR/IBD) APPROVED 1 3961 PEDIATRICS TRIKAFTA CYSTIC FIBROSIS APPROVED 2 3969 PULMONARY DISEASES TRIKAFTA CYSTIC FIBROSIS APPROVED 1 3956 INTERNAL MEDICINE TRIKAFTA CYSTIC FIBROSIS APPROVED 1 3963 INTERNAL MEDICINE TRIKAFTA CYSTIC FIBROSIS APPROVED 1 3963 UNSPECIFIED SPECIALTY TRIKAFTA CYSTIC FIBROSIS APPROVED 2	3963	RHEUMATOLOGY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
PEDIATRICS TRIKAFTA CYSTIC FIBROSIS APPROVED 2 PULMONARY DISEASES TRIKAFTA CYSTIC FIBROSIS APPROVED 1 PEDIATRICS TRIKAFTA CYSTIC FIBROSIS APPROVED 2	3965	DERMATOLOGY	TREMFYA	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
PULMONARY DISEASES TRIKAFTA CYSTIC FIBROSIS APPROVED 1 SPECIAL TRIKAFTA CYSTIC FIBROSIS APPROVED 2	3956	FAMILY PRACTICE	TREMFYA 100MG/ML SC SOSY	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956 INTERNAL MEDICINE TRIKAFTA CYSTIC FIBROSIS APPROVED 1 3963 INTERNAL MEDICINE TRIKAFTA CYSTIC FIBROSIS APPROVED 1 3963 UNSPECIFIED SPECIALTY TRIKAFTA CYSTIC FIBROSIS APPROVED 2	3961	PEDIATRICS	TRIKAFTA	CYSTIC FIBROSIS	APPROVED	2
9963 INTERNAL MEDICINE TRIKAFTA CYSTIC FIBROSIS APPROVED 1 3963 UNSPECIFIED SPECIALTY TRIKAFTA CYSTIC FIBROSIS APPROVED 2	3969	PULMONARY DISEASES	TRIKAFTA	CYSTIC FIBROSIS	APPROVED	1
UNSPECIFIED SPECIALTY TRIKAFTA CYSTIC FIBROSIS APPROVED 2	3956	INTERNAL MEDICINE	TRIKAFTA	CYSTIC FIBROSIS	APPROVED	1
	3963	INTERNAL MEDICINE	TRIKAFTA	CYSTIC FIBROSIS	APPROVED	1
8956 UNSPECIFIED SPECIALTY TRIKAFTA CYSTIC FIBROSIS APPROVED 2	3963	UNSPECIFIED SPECIALTY	TRIKAFTA	CYSTIC FIBROSIS	APPROVED	2
	3956	UNSPECIFIED SPECIALTY	TRIKAFTA	CYSTIC FIBROSIS	APPROVED	2
9965 UNSPECIFIED SPECIALTY TRIKAFTA CYSTIC FIBROSIS APPROVED 1	3965	UNSPECIFIED SPECIALTY	TRIKAFTA	CYSTIC FIBROSIS	APPROVED	1
PEDIATRICS TRIKAFTA CYSTIC FIBROSIS APPROVED 1	3951	PEDIATRICS	TRIKAFTA	CYSTIC FIBROSIS	APPROVED	1

	escriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3956 INT	FERNAL MEDICINE, CRITICAL CARE	TRIKAFTA	CYSTIC FIBROSIS	APPROVED	1
3951 PUL	LMONARY DISEASES	TRIKAFTA	CYSTIC FIBROSIS	APPROVED	1
3956 HEN	MATOLOGY & ONCOLOGY	TUKYSA	ONCOLOGY	DENIED	1
3956 HEN	MATOLOGY & ONCOLOGY	TUKYSA	ONCOLOGY	APPROVED	1
3956 INT	TERNAL MEDICINE	TYMLOS	OSTEOPOROSIS	DENIED	2
3956 INT	FERNAL MEDICINE	TYMLOS	OSTEOPOROSIS	APPROVED	2
3964 OR	THOPEDIC SURGERY	TYMLOS	OSTEOPOROSIS	APPROVED	1
3956 ENI	DOCRINOLOGY, DIABETES & METABOLISM	TYMLOS	OSTEOPOROSIS	APPROVED	2
3956 FAN	MILY PRACTICE	TYMLOS	OSTEOPOROSIS	APPROVED	2
3963 UNS	SPECIFIED SPECIALTY	TYMLOS	OSTEOPOROSIS	APPROVED	1
3963 ENI	DOCRINOLOGY, DIABETES & METABOLISM	TYMLOS	OSTEOPOROSIS	APPROVED	2
3951 ENI	DOCRINOLOGY, DIABETES & METABOLISM	TYMLOS	OSTEOPOROSIS	APPROVED	1
3965 ENI	DOCRINOLOGY, DIABETES & METABOLISM	TYMLOS	OSTEOPOROSIS	DENIED	2
3963 FAN	MILY PRACTICE	TYMLOS	OSTEOPOROSIS	APPROVED	2
3956 UNS	SPECIFIED SPECIALTY	TYMLOS	OSTEOPOROSIS	APPROVED	1
3965 ENI	DOCRINOLOGY, DIABETES & METABOLISM	TYMLOS	OSTEOPOROSIS	APPROVED	1
3956 UNS	SPECIFIED SPECIALTY	TYSABRI 300MG/15ML IV CONC	AUTO IMMUNE (CD/MS)	APPROVED	1
3963 INT	FERNAL MEDICINE	TYVASO	PULMONARY ARTERIAL HYPERTENSION	DENIED	1
3965 UNS	SPECIFIED SPECIALTY	TYVASO	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3951 UN	SPECIFIED SPECIALTY	TYVASO DRY POWDER INHALER (DPI)	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3956 CAF	RDIOLOGY	UPTRAVI	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3970 CAF	RDIOLOGY	UPTRAVI	PULMONARY ARTERIAL HYPERTENSION	APPROVED	1
3956 UN	SPECIFIED SPECIALTY	VALCYTE	INFECTIOUS DISEASE	DENIED	1
3956 UN	SPECIFIED SPECIALTY	VALGANCICLOVIR	INFECTIOUS DISEASE	APPROVED	1
3956 INT	FERNAL MEDICINE	VALGANCICLOVIR	INFECTIOUS DISEASE	APPROVED	1
3970 INT	FERNAL MEDICINE	VALGANCICLOVIR	INFECTIOUS DISEASE	APPROVED	1
3963 NUI	IRSE PRACTITIONER, ACUTE CARE	VALGANCICLOVIR	INFECTIOUS DISEASE	APPROVED	1
3951 UNS	SPECIFIED SPECIALTY	VEMLIDY	HEPATITIS B	DENIED	1
3970 GAS	STROENTEROLOGY	VEMLIDY	HEPATITIS B	APPROVED	1
3951 FAN	MILY PRACTICE	VEMLIDY	HEPATITIS B	APPROVED	1
3956 UN:	SPECIFIED SPECIALTY	VEMLIDY	HEPATITIS B	APPROVED	1
3956 FAN	MILY PRACTICE	VEMLIDY	HEPATITIS B	APPROVED	1
3963 HEN	MATOLOGY & ONCOLOGY	VENCLEXTA	ONCOLOGY	DENIED	1
3963 UN	SPECIFIED SPECIALTY	VENCLEXTA	ONCOLOGY	APPROVED	2
3963 ME	EDICAL ONCOLOGY	VENCLEXTA	ONCOLOGY	APPROVED	3
3956 HEN	MATOLOGY & ONCOLOGY	VENCLEXTA	ONCOLOGY	APPROVED	2
3963 HEN	MATOLOGY & ONCOLOGY	VERZENIO	ONCOLOGY	DENIED	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3963	MEDICAL ONCOLOGY	VERZENIO	ONCOLOGY	APPROVED	1
3963	HEMATOLOGY & ONCOLOGY	VERZENIO	ONCOLOGY	APPROVED	2
3956	MEDICAL ONCOLOGY	VERZENIO	ONCOLOGY	APPROVED	1
3956	HEMATOLOGY & ONCOLOGY	VERZENIO	ONCOLOGY	APPROVED	3
3969	UNSPECIFIED SPECIALTY	VERZENIO	ONCOLOGY	DENIED	1
3956	HEMATOLOGY & ONCOLOGY	VERZENIO	ONCOLOGY	DENIED	1
3963	NEUROLOGY	VIGABATRIN POWDER FOR SOLUTION	SEIZURE DISORDERS	APPROVED	1
3963	NEUROLOGY, PEDIATRIC	VIGABATRIN POWDER FOR SOLUTION	SEIZURE DISORDERS	APPROVED	1
3956	NEUROLOGY, PEDIATRIC	VIGADRONE POWDER FOR SOLUTION	SEIZURE DISORDERS	APPROVED	1
3956	FAMILY PRACTICE	VOSEVI	HEPATITIS C	DENIED	1
3951	UNSPECIFIED SPECIALTY	VOSEVI	HEPATITIS C	APPROVED	1
3963	SLEEP MEDICINE	WAKIX	SLEEP DISORDERS	DENIED	1
3962	FAMILY PRACTICE	WAKIX	SLEEP DISORDERS	DENIED	1
3956	INTERNAL MEDICINE	XELJANZ 5 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3963	RHEUMATOLOGY	XELJANZ 5 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	RHEUMATOLOGY	XELJANZ 5 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	INTERNAL MEDICINE	XELJANZ 5 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	GASTROENTEROLOGY	XELJANZ 5 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3964	INTERNAL MEDICINE	XELJANZ 5 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	RHEUMATOLOGY	XELJANZ 5 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3956	FAMILY PRACTICE	XELJANZ 5 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	UNSPECIFIED SPECIALTY	XELJANZ XR 11 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3965	INTERNAL MEDICINE	XELJANZ XR 11 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3963	RHEUMATOLOGY	XELJANZ XR 11 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3965	INTERNAL MEDICINE	XELJANZ XR 11 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	GASTROENTEROLOGY	XELJANZ XR 11 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3951	RHEUMATOLOGY	XELJANZ XR 11 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3956	RHEUMATOLOGY	XELJANZ XR 11 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	5
3963	INTERNAL MEDICINE	XELJANZ XR 11 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3963	RHEUMATOLOGY	XELJANZ XR 11 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3964	RHEUMATOLOGY	XELJANZ XR 11 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3970	RHEUMATOLOGY	XELJANZ XR 11 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3956	INTERNAL MEDICINE	XELJANZ XR 11 MG	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	2
3963	INTERNAL MEDICINE	XELJANZ XR 11 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	2
3951	INTERNAL MEDICINE	XELJANZ XR 11MG ORTB24	AUTO IMMUNE (RA/PSOR/IBD)	APPROVED	1
3963	GASTROENTEROLOGY	XELJANZ XR 22 MG	AUTO IMMUNE (RA/PSOR/IBD)	DENIED	1
3965	UNSPECIFIED SPECIALTY	XELODA	ONCOLOGY	DENIED	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3963	HEMATOLOGY & ONCOLOGY	XGEVA	ONCOLOGY	APPROVED	5
3956	DERMATOLOGY	XOLAIR	ASTHMA	DENIED	1
3963	PEDIATRICS	XOLAIR	ASTHMA	APPROVED	3
3956	ALLERGY & IMMUNOLOGY	XOLAIR	ASTHMA	DENIED	6
3963	FAMILY PRACTICE	XOLAIR	ASTHMA	DENIED	1
3963	UNSPECIFIED SPECIALTY	XOLAIR	ASTHMA	DENIED	1
3963	FAMILY PRACTICE	XOLAIR	ASTHMA	APPROVED	1
3963	ALLERGY & IMMUNOLOGY	XOLAIR	ASTHMA	DENIED	3
3956	PEDIATRICS	XOLAIR	ASTHMA	APPROVED	3
3956	ALLERGY	XOLAIR	ASTHMA	DENIED	2
3956	INTERNAL MEDICINE	XOLAIR	ASTHMA	DENIED	2
3956	PULMONARY DISEASES	XOLAIR	ASTHMA	DENIED	1
3951	ALLERGY & IMMUNOLOGY	XOLAIR	ASTHMA	APPROVED	1
3963	PULMONARY DISEASES	XOLAIR	ASTHMA	DENIED	1
3951	UNSPECIFIED SPECIALTY	XOLAIR	ASTHMA	APPROVED	1
3956	ALLERGY & IMMUNOLOGY	XOLAIR	ASTHMA	APPROVED	6
3965	ALLERGY & IMMUNOLOGY	XOLAIR	ASTHMA	APPROVED	1
3956	UNSPECIFIED SPECIALTY	XOLAIR	ASTHMA	DENIED	2
3963	ALLERGY & IMMUNOLOGY	XOLAIR	ASTHMA	APPROVED	6
3963	UNSPECIFIED SPECIALTY	XOLAIR	ASTHMA	APPROVED	3
3964	ALLERGY & IMMUNOLOGY	XOLAIR	ASTHMA	APPROVED	2
3970	UNSPECIFIED SPECIALTY	XOLAIR	ASTHMA	APPROVED	1
3956	PULMONARY DISEASES	XOLAIR	ASTHMA	APPROVED	1
3963	ALLERGY & IMMUNOLOGY	XOLAIR	ALLERGIC ASTHMA/ATOPIC DERMATITIS	APPROVED	1
3951	FAMILY PRACTICE	XOLAIR	ASTHMA	DENIED	1
3956	UNSPECIFIED SPECIALTY	XOLAIR	ASTHMA	APPROVED	1
3970	ALLERGY & IMMUNOLOGY	XOLAIR 150MG/ML SC SOAJ	ASTHMA	APPROVED	1
3951	HEMATOLOGY & ONCOLOGY	XTANDI	ONCOLOGY	APPROVED	1
3963	HEMATOLOGY & ONCOLOGY	XTANDI	ONCOLOGY	APPROVED	1
3963	HEMATOLOGY & ONCOLOGY	XTANDI	ONCOLOGY	DENIED	1
3963	MEDICAL ONCOLOGY	XTANDI	ONCOLOGY	DENIED	1
3956	UROLOGY	XTANDI	ONCOLOGY	APPROVED	1
3963	MEDICAL ONCOLOGY	XTANDI	ONCOLOGY	APPROVED	1
3956	UROLOGY	XTANDI	ONCOLOGY	DENIED	1
3963	FAMILY PRACTICE	XTANDI	ONCOLOGY	APPROVED	1
3963	UNSPECIFIED SPECIALTY	XTANDI	ONCOLOGY	APPROVED	1
3969	HEMATOLOGY & ONCOLOGY	XTANDI 40MG OR TABS	ONCOLOGY	APPROVED	1

Carrier	Prescriber Primary Specialty Description	Drug Name	Drug Class	Decision	Count
3963	SLEEP MEDICINE	XYWAV	SLEEP DISORDERS	DENIED	2
3963	SLEEP MEDICINE	XYWAV	SLEEP DISORDERS	APPROVED	2
3963	INTERNAL MEDICINE	XYWAV	SLEEP DISORDERS	APPROVED	1
3963	UNSPECIFIED SPECIALTY	XYWAV	SLEEP DISORDERS	DENIED	1
3956	HEMATOLOGY & ONCOLOGY	ZEJULA	ONCOLOGY	DENIED	1
3970	HEMATOLOGY & ONCOLOGY	ZEJULA	ONCOLOGY	APPROVED	1
3956	UNSPECIFIED SPECIALTY	ZOLEDRONIC ACID 5MG	OSTEOPOROSIS	DENIED	2