

# List of Drugs Requiring Prior Authorization

Your Manulife group benefits plan provides coverage for many prescription drugs. There are some instances where you may need to provide additional medical information to Manulife before certain prescriptions can be considered for payment under the group benefits plan.

Below is a list of prescription drugs that currently require prior authorization under Manulife's standard drug plans. Once approval from Manulife is received, future claims can be submitted for payment.

|                                |                        |                           |                        |                          |                         |                        |
|--------------------------------|------------------------|---------------------------|------------------------|--------------------------|-------------------------|------------------------|
| Aclasta                        | Copaxone <sup>▲•</sup> | Genotropin <sup>▲</sup>   | Kineret <sup>▲</sup>   | Plegridy <sup>▲•</sup>   | Simponi <sup>▲</sup>    | Vectibix <sup>▲</sup>  |
| Actemra <sup>▲</sup>           | Cosentyx <sup>▲</sup>  | Gilenya <sup>▲•</sup>     | Kuvan                  | Pomalyst                 | Somavert <sup>▲</sup>   | Vidaza                 |
| Adcirca <sup>▲</sup>           | Cotellic <sup>▲</sup>  | Giotrif                   | Lemtrada <sup>▲•</sup> | Prolastin-C <sup>▲</sup> | Sovaldi <sup>▲•</sup>   | Vimpat <sup>▲</sup>    |
| Adempas <sup>▲</sup>           | Cyramza <sup>▲</sup>   | Gleevec <sup>▲</sup>      | Lenvima <sup>▲</sup>   | Prolia                   | Sprycel <sup>▲</sup>    | Volibris <sup>▲</sup>  |
| Afinitor <sup>▲</sup>          | Daklinza <sup>▲•</sup> | Harvoni <sup>▲•</sup>     | Lucentis <sup>▲</sup>  | Pulmozyme <sup>▲</sup>   | Stelara <sup>▲</sup>    | Votrient <sup>▲</sup>  |
| Afinitor Disperz <sup>▲</sup>  | Diacomit <sup>▲</sup>  | Holkira Pak <sup>▲•</sup> | Mekinist <sup>▲</sup>  | Quinsair                 | Stivarga <sup>▲</sup>   | Xalkori <sup>▲</sup>   |
| Apo-Tadalafil PAH <sup>▲</sup> | Duodopa <sup>▲</sup>   | Humatrope <sup>▲</sup>    | Movantik               | Rebif <sup>▲•</sup>      | Sunvepra <sup>▲•</sup>  | Xeljanz <sup>▲</sup>   |
| Aredia <sup>▲</sup>            | Egrifta <sup>▲</sup>   | Humira <sup>▲</sup>       | Nexavar <sup>▲</sup>   | Relistor                 | Sutent <sup>▲</sup>     | Xeomin <sup>▲</sup>    |
| Arzerra <sup>▲</sup>           | Enbrel <sup>▲</sup>    | Ibavyr <sup>▲•</sup>      | Norditropin            | Remicade <sup>▲</sup>    | Tafinlar <sup>▲</sup>   | Xgeva <sup>▲</sup>     |
| Aubagio <sup>▲•</sup>          | Entyvio                | Iclusig <sup>▲</sup>      | Simplexx <sup>▲</sup>  | Remodulin                | Tarceva <sup>▲</sup>    | Xiaflex                |
| Avastin <sup>▲</sup>           | Erivedge <sup>▲</sup>  | Ilaris                    | Norditropin            | Resotran                 | Tasigna <sup>▲</sup>    | Xolair <sup>▲•</sup>   |
| Avonex <sup>▲•</sup>           | Esbriet                | Imbruvica <sup>▲</sup>    | Nordiflex <sup>▲</sup> | Revatio <sup>▲</sup>     | Tecfidera <sup>▲•</sup> | Xtandi <sup>▲</sup>    |
| Banzel <sup>▲</sup>            | Exjade <sup>▲</sup>    | Inflectra <sup>▲</sup>    | Nplate <sup>▲</sup>    | Revestive                | Technivie <sup>▲•</sup> | Xyrem                  |
| Benlysta <sup>▲</sup>          | Extavia <sup>▲</sup>   | Inlyta <sup>▲</sup>       | Nucala <sup>▲•</sup>   | Revlimid                 | Temodal <sup>▲</sup>    | Zavesca <sup>▲</sup>   |
| Betaseron <sup>▲</sup>         | Eylea <sup>▲</sup>     | Inspra                    | Nutropin <sup>▲</sup>  | Revolade <sup>▲</sup>    | Thalomid                | Zaxine <sup>▲</sup>    |
| Bosulif <sup>▲</sup>           | Fampyra <sup>▲•</sup>  | Iressa <sup>▲</sup>       | Ofev                   | Rituxan <sup>▲</sup>     | Thyrogen <sup>▲</sup>   | Zelboraf <sup>▲</sup>  |
| Botox                          | Ferriprox              | Jakavi <sup>▲</sup>       | Omnitrope <sup>▲</sup> | Saizen <sup>▲</sup>      | Tobi <sup>▲</sup>       | Zepatier <sup>▲•</sup> |
| Caprelsa                       | Firazyr <sup>▲</sup>   | Jetrea                    | Opsumit <sup>▲</sup>   | Samsca <sup>▲</sup>      | Toctino <sup>▲</sup>    | Zolinza <sup>▲</sup>   |
| Carbaglu <sup>▲</sup>          | Flolan                 | Jinarc <sup>▲</sup>       | Orencia <sup>▲</sup>   | Sativex <sup>▲</sup>     | Tracleer <sup>▲</sup>   | Zometa <sup>▲</sup>    |
| Caripul <sup>▲</sup>           | Forteo <sup>▲</sup>    | Juxtapid <sup>▲</sup>     | Otezla <sup>▲</sup>    | Serostim <sup>▲</sup>    | Treanda <sup>▲</sup>    | Zydelig <sup>▲</sup>   |
| Cayston                        | Galexos <sup>▲•</sup>  | Kalydeco <sup>▲</sup>     | Pegasys <sup>▲•</sup>  | Signifor                 | Tykerb <sup>▲</sup>     | Zykadia <sup>▲</sup>   |
| Cimzia <sup>▲</sup>            | Gazyva <sup>▲</sup>    | Keytruda <sup>▲</sup>     | Pegatron <sup>▲•</sup> | Signifor LAR             | Tysabri <sup>▲•</sup>   | Zytiga <sup>▲</sup>    |
|                                |                        |                           | Pheburane <sup>▲</sup> |                          |                         |                        |

▲ Included in Manulife's Specialty Drug Care program.

• Requires Manulife's exclusive pharmacy to dispense medication where applicable.

\* Received Health Canada's Notice of Compliance but is not currently marketed in Canada.

This is a dynamic list used for informational purposes and is subject to change upon review of new products or information. Eligibility will be determined in accordance with the terms of the claimant's group benefits policy and the drug plan in place at the time of the claim.

