

Drug Guide and Clinical Program Updates

The Prime Therapeutics® Pharmacy and Therapeutics Committee, in association with Blue Cross and Blue Shield of Alabama's Formulary Business Committee, recently approved updates to the Drug Guides and made clinical program changes to select medications. Members will receive a letter from Blue Cross if they are negatively affected by a formulary change that is not a result of a new generic being available.

Formulary and Clinical Programs – Effective April 1, 2025

Click the links below to view updated formularies and clinical programs. If patients have questions about their benefits, they should call the Customer Service number on the back of their Blue Cross member ID card.

- [Standard Prescription Drug Guide Updates](#)
- [Generics Plus Drug Guide Updates](#)
- [High-Cost Exclusion Updates](#)
- [Source Rx Formulary Updates](#)
- [NetResults Formulary Updates](#)
- **Clinical Programs**
 - ▶ [Prior Authorization](#)
 - ▶ [Step Therapy](#)
 - ▶ [Quantity Limit](#)

Mandatory Drug Wastage Program Update – Effective April 1, 2025

New drugs have been added to the Mandatory Drug Wastage Program. The new drug list is posted to the draft page located [here](#). The official policy will be posted [here](#) on April 1, 2025.

New or Revised Provider-Administered (Medical) Drug Policies

Policy Name	Type of Policy	Coverage Criteria and Changes
Aucatzyl (obecabtagene autoleucel)	Medical PA	New – Effective 3/1/25 – New policy for acute B-cell precursor lymphoblastic leukemia (ALL).
Bizengri (zenocutuzumab-zbco)	Medical PA	New – Effective 4/1/25 – New policy for non-small cell lung cancer and pancreatic adenocarcinoma.
Kebilidi (eladocagene exuparvovec-tneq)	Medical PA	New – Effective 3/1/25 – New policy for aromatic L-amino acid decarboxylase (AADC) deficiency.
Qalsody (tofersen)	Medical PA	New – Effective 4/1/25 – New policy for amyotrophic lateral sclerosis (ALS).
Unloxcyt (cosibelimab-ipdl)	Medical PA	New – Effective 4/1/25 – New policy for cutaneous squamous cell carcinoma (cSCC).
Vyloy (zolbetuximab-clzb)	Medical PA	New – Effective 2/1/25 – New policy for gastroesophageal junction cancers.
Ziihera (zanidatamab-hrii)	Medical PA	New – Effective 4/1/25 – New policy for biliary tract cancers.

Note: Prior authorization is abbreviated as PA.

The Prime Therapeutics P&T Committee — consisting of doctors, pharmacists and other healthcare professionals — advises and makes recommendations based on clinical appropriateness. The Blue Cross and Blue Shield of Alabama Formulary Business Committee gives final approval of these clinical recommendations before implementation. Prime Therapeutics LLC is an independent company contracted by Blue Cross and Blue Shield of Alabama to provide pharmacy benefit management services. Blue Cross and Blue Shield of Alabama is an independent licensee of the Blue Cross and Blue Shield Association. ICD-10 is the 10th revision of the International Statistical Classification of Diseases and Related Health Problems (ICD), a medical classification list by the World Health Organization (WHO).