

Expedited Emergency Supply Request Drugs

For drugs listed in the table below, expedited emergency supply requests may be submitted only using the Specialized Transmission Approval Technology-Prior Authorization (STAT-PA) system.

Effective 01/01/2025

| Up to 14-Day Supply Authorization | Up to 34-Day Supply Authorization | Up to 100-Day Supply Authorization |
|--|---|---|
| Drug or Class Name | Drug or Class Name | Drug or Class Name |
| Alzheimer's Agents | Androgenic Agents (Excluding Azmiro) | Prenatal Vitamins |
| Analgesics/Anesthetics, Topical (Excluding diclofenac 2% pump [Gen-Pennsaid pump]) | Antipsychotics, Injectable (Excluding risperidone ER [Gen-Risperdal Consta]) | |
| Analgesics, Opioids Long-Acting (Excluding buprenorphine transdermal, fentanyl transdermal 37.5 mcg, 62.5 mcg, 87.5 mcg, and hydrocodone ER tablets [Gen-Hysingla ER]) | Bronchodilators, Beta Agonists (Excluding albuterol HFA [Gen-Ventolin]) | |
| Analgesics, Opioids Short-Acting (Excluding Roxybond) | COPD Agents (Excluding tiotropium [Gen-Spiriva]) | |
| Angiotensin Modulators/CCB combo | COPD Agents—12 Years and Under | |
| Angiotensin Modulators, ACE Inhibitors | Epinephrine, Self-Administered | |
| Angiotensin Modulators, ARBs and DRIs | Glucagon Agents | |
| Antibiotics, Beta-Lactam | Glucagon Agents, Gvoke—6 Years and Under | |
| Antibiotics, GI (GI Infections) (Excluding Vowst capsule) | Glucocorticoids, Inhaled (Excluding budesonide/formoterol [Gen-Symbicort], fluticasone/salmeterol [Gen-Advair HFA and Gen-Airduo Respiclick], fluticasone/vilanterol [Gen-Breo Elipta], and Breyna Inhaler) | |
| Antibiotics, Macrolides/Ketolides | Hypoglycemics, Insulins (Excluding Long-Acting Insulins) | |
| Antibiotics, Tetracyclines | Intranasal Rhinitis Agents | |
| Antibiotics, Topical | Ophthalmics, Allergic Conjunctivitis | |
| Antibiotics, Vaginal | Ophthalmics, Antibacterial | |

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| Anticoagulants Agents (Excluding dabigatran capsule [Gen-Pradaxa]) | Ophthalmic Antibiotic/ Steroid Combinations | |
| Anticonvulsants (Excluding carbamazepine ER caps, carbamazepine ER tabs, divalproex sprinkle, topiramate ER [Gen-Trokendi XR], topiramate ER [Gen-Qudexy XR], Vigadrone, Vigafyde, Vigpoder, and Ztalmly) | Ophthalmics, Anti-Inflammatories | |
| Antidepressants, Other | Ophthalmics, Anti-Inflammatory/ Immunomodulators (Excluding cyclosporine eye emulsion [Gen-Restasis], Cequa solution, Tyrvaya nasal spray, and Verkazia) | |
| Antidepressants, SSRI | Ophthalmics, Glaucoma—Beta Blockers | |
| Antiemetics | Ophthalmics, Glaucoma—Other (Excluding brimonidine tartrate-timolol [Gen-Combigan] and brinzolamide 1% drops [Gen-Azopt]) | |
| Antiemetics/Antivertigo (Excluding doxylamine succinate/pyridoxine [Gen-Diclegis]) | Ophthalmics, Glaucoma—Prostaglandins (Excluding bimatoprost 0.03% 7.5 ml) | |
| Antifungals, Oral | Otics Anti-Infectives and Anesthetics | |
| Antifungals, Topical (Excluding tavaborole solution [Gen-Kerydin] and Jublia) | Otics, Antibiotics | |
| Antihistamines, Minimally Sedating | Pulmonary Arterial Hypertension (Excluding Opsynvi tablet) | |
| Antihypertensives, Miscellaneous | Steroids, Topical Low (Excluding Hydroxym Gel) | |
| Antiparasitics, Topical | Steroids, Topical Medium | |
| Antiparkinson's Agents | Steroids, Topical High | |
| Antipsoriatics, Oral | Steroids, Topical Very High | |
| Antipsoriatics, Topical | | |
| Antivirals, Influenza | | |

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| Antivirals, Other | | |
| Antivirals, Topical | | |
| Anxiolytics | | |
| Atypical Antipsychotics (Excluding Abilify MyCite) | | |
| Beta Blocker | | |
| Bile Salts (Excluding Bylvay, Cholbam, and Livmarli solution) | | |
| Bladder Relaxant Preparations (Excluding fesoterodine ER [Gen-Toviaz ER] and mirabegron ER [Gen-Myrbetriq er]) | | |
| Bone Resorption Suppression (Excluding teriparatide [Gen- Bonsity] and teriparatide [Gen-Forteo]) | | |
| BPH Agents, Adrenergic | | |
| BPH Agents, Alpha Reductase Inhibitors (Excluding Entadfi) | | |
| Calcium Channel Blocking Agents | | |
| Erythropoiesis Stimulating Proteins (Excluding Jesduvroq and Vafseo tablet) | | |
| Fibromyalgia | | |
| Fluoroquinolones | | |
| GI Motility, Chronic— Constipation | | |
| GI Motility, Chronic—Diarrhea | | |
| Glucocorticoids, Oral (Excluding deflazacort suspension [Gen-Emflaza suspension], deflazacort tabs [Gen-Emflaza tabs], Agamree suspension, and Emflaza) | | |
| Gout Agents (Excluding colchicine capsule [Gen- Mitigare]) | | |
| H2 Antagonists | | |
| Headache Agents, Triptans Injectable (Zembrace only) | | |

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| Headache Agents, Triptans Non-Injectable | | |
| Hepatitis B Agents | | |
| HIV/AIDS | | |
| Hypoglycemics, Alpha-Glucosidase Inhibitors | | |
| Hypoglycemics, DPP-4 Inhibitors | | |
| Hypoglycemics, Meglitinides | | |
| Hypoglycemics, Other (Excluding metformin ER OSM-tab) | | |
| Hypoglycemics, Sulfonylureas | | |
| Hypoglycemics, Thiazolidinediones | | |
| Idiopathic Pulmonary Fibrosis | | |
| Immunomodulators, Atopic Dermatitis (Opzelura and Zoryve 0.15% cream only) | | |
| Immunomodulators, Topical | | |
| Leukotriene Modifiers | | |
| Lipotropics, Bile Acid Sequestrants | | |
| Lipotropics, Fibric Acids | | |
| Lipotropics, Other | | |
| Methotrexate | | |
| Neuropathic Pain | | |
| Nonsteroidal Anti-Inflammatory Drugs (Excluding Kiprofen) | | |
| Opioid Dependency Agents (Only buprenorphine tabs [without naloxone] for pregnant women) | | |
| Pancreatic Enzymes | | |
| Phosphate Binders (Excluding lanthanum carbonate) | | |
| Platelet Aggregation Inhibitors | | |

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| Proton Pump Inhibitors (Excluding dexlansoprazole capsules [Gen-Dexilant DR], esomeprazole DR packet [Gen-Nexium DR packet], lansoprazole ODT solutab [Gen-Prevacid solutab], and pantoprazole suspension [Gen-Protonix suspension]) | | |
| Sedative Hypnotics (Excluding temazepam 7.5 mg and 22.5 mg) | | |
| Skeletal Muscle Relaxants (Excluding chlorzoxazone 375 mg and 750 mg tabs, cyclobenzaprine ER capsule, Amrix, Lorzone, and Tanlor) | | |
| Ulcerative Colitis (Excluding budesonide ER [Gen-Uceris ER], Velsipity, and Zeposia) | | |