



December 17, 2025

Use this list for the lines of business in the columns below: Commercial managed products, Commercial managed products, Essential Plan, Medicare, Dual Eligible Special Needs Plan (HMO, D-SNP), and Managed Safety Net Products.

Requests for the drugs on this list are handled by the Medical Specialty Drug unit: Phone 1-800-499-1275 and Fax 1-800-306-0188

Updates Are Highlighted In Grey

IMPORTANT

> The following Medical Specialty Drugs are covered under the Medical Benefit (when administered by a health care professional) and require preauthorization. Regardless of the preauthorization requirement under the member contract, claims for the following medical specialty drugs will deny or suspend for review across all lines of business if preauthorization is not obtained.

> Please refer to our website frequently for updates to this list as new drugs are added as they receive FDA approval and are available for use.

> The provider or specialty pharmacy rendering the service is responsible for ensuring that the required preauthorization has been obtained.

> **Commercial Self Funded Plans:** Refer to the **Injectable Medications Benefit** for coverage details (any coverage exclusions for certain drugs listed with a drug category will be noted under **Injectable Medications**).

> **C- Cross-Over drug** is a drug that can be reviewed under the Medical Benefit (Health care professional administered) or Pharmacy Benefit (self-administered). Please note, the prior auth requirements may differ between medical and pharmacy.

>**Avastin injected into the eye does not require a prior authorization

> ^^ Stelara & Skyrizi IV loading doses do not require a prior authorization under the medical benefit. Please obtain prior authorization approval for ongoing SQ therapy PRIOR to administering any IV loading dose(s) to ensure appropriate care for your member.

‡ Lemtrada is indicated for relapsing forms of multiple sclerosis only. If seeking treatment with Campath (also alemtuzumab), Campath is no longer commercially available. A restricted distribution program may allow access for appropriate patients. Information is available through the Campath Distribution Program at 1-877-422-6728 or Genzyme medical information at 1-800-745-4447 (option #2).












****MA Program = Medication Assurance Program**

*** Please note: Any associated inpatient admission related to the administration of this medication may require prior authorization and must be requested separately via our Medical Intake teams:**

Commercial and Medicare: Call: 800-363-4658, or Fax: 877-203-9401
Safety Net: Call: 844-694-6411, or Fax: 844-279-7140

> Drugs without a permanent HCPCS code assigned yet are listed as NONE (C codes are for facility billing only).

[illegible]

| Drug Category | Drug Brand Name | Drug Code (HCPCS/CPT) | Commercial Fully Insured | Commercial Self Funded | Medicare | HMO D-SNP (VYV) | Safety Net Child Health Plus (VYB) | Safety Net Essential Plan (YNC) | Safety Net Managed Medicaid (VYT) | Safety Net Health and Recovery Program (VYT) |
|-------------------------|---|-----------------------|--------------------------|------------------------|--------------|-----------------|------------------------------------|---------------------------------|-----------------------------------|--|
| Orphan Drug | Besponsa | J9229 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Besremi  | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| | Beyfortus | 90380/90381 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| | Bildvos | NONE | NOT Required | NOT Required | NOT Required | Required | Required | Required | Required | Required |
| | Bilprevda | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| MA Program | Biviqam | J1556 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Bizengri | J9382 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Bkemv | Q5152 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Blenrep | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Blincyto®  | J9039 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Bomyntra | Q5158 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Boruzu | J9054 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Botox | J0585 | NOT Required | NOT Required | NOT Required | Required | Required | NOT Required | Required | Required |
| CAR-T | Breyanzi  | Q2054 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Brineura | J0567 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Briumvi | J2329 | NOT Required | NOT Required | NOT Required | Required | Required | Required | Required | Required |
| | Byoviz | Q5124 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| Orphan Drug | Cabivi  | C9047 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Camcevi | J1952 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Carimune | J1566 | Required | Required | Required | Required | Required | Required | Required | Required |
| CAR-T | Carvykti  | Q2056 | Required | Required | Required | Required | Required | Required | Required | Required |
| Gene Therapy | Casgevy  | J3392 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Ceprotin | J2724 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Cerezyme | J1786 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Cimzia  | J0717 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Cinqair  | J2786 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Cinryze  | J0598 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Cinvanti | J0185 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Coaadaex | J7175 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| MA Program | Columvi  | J9286 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Conexence | Q5158 | NOT Required | NOT Required | NOT Required | Required | Required | Required | Required | Required |
| | Corifact | J7180 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Cortrophin  | J0802 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Cosela | J1448 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Cosentyx IV | J3247 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Cosentyx SC  | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Crysita | J0584 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Cutaquig | J1551 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Cuvitru | J1555 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Cyramza | J9308 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug, MA Program | Danyelza | J9348 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Darzalex | J9145 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Darzalex Faspro | J9144 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Datroway | J9011 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Daxxify | J0589 | Required | Required | NOT Required | Required | Required | Required | Required | Required |
| | Docivvyx | J9172 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Durolane | J7318 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Dysport | J0586 | Required | Required | NOT Required | Required | Required | Required | Required | Required |
| Orphan Drug | Edaravone | J1301 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Elahere | J9063 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Elaprase | J1743 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Elevys | J3060 | Required | Required | Required | Required | Required | Required | Required | Required |
| Gene Therapy | Elevidys | J1413 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Elfabrio | J2508 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Eligard | J9217 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| Orphan Drug | Elitek | J2783 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Eloctate | J7205 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| Orphan Drug, MA Program | Elrexio | J1323 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Elzonris | J9269 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Empaveli | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Empliciti | J9176 | Required | Required | Required | Required | Required | Required | Required | Required |
| MA Program | Emrelis | C9306 | Required | Required | Required | Required | Required | Required | Required | Required |
| Gene Therapy | Encelto | J3403 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Enflonsia | 90382 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| | Enhertu | J9358 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Enjaymo | J1302 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Ensprynq | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| | Entyvio  | J3380 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Epkinly  | J9321 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Epoprostenol (generic Flolan) | J1325 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Epoprostenol (generic Veletri) | J1325 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Epyxali | Q5151 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Erwinaze | J9019 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Esperoct | J7204 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Euflexxa | J7323 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | Required | Required |
| | Eventy | J3111 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Evkeeza | J1305 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug, MA Program | Exondys 51 | J1428 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Eylea 2 mg | J0178 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Eylea HD | J0177 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Fabrazyme  | J0180 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Fasenra  | J0517 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Feiba | J7198 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Fensolvi  | J1951 | Required | Required | NOT Required | Required | Required | Required | Required | Required |

| Drug Category | Drug Brand Name | Drug Code (HCPCS/CPT) | Commercial Fully Insured | Commercial Self Funded | Medicare | HMO D-SNP (VVV) | Safety Net Child Health Plus (VYB) | Safety Net Essential Plan (YNC) | Safety Net Managed Medicaid (VYT) | Safety Net Health and Recovery Program (VYT) |
|--------------------------|-------------------------------------|-----------------------|--------------------------|------------------------|--------------|-----------------|------------------------------------|---------------------------------|-----------------------------------|--|
| | Feraheme | Q0138 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| | Flebogamma | J1572 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Fiolan | J1325 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Focinvez | J1434 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug, MA Program | Folotyln | J9307 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Fosaprepitant (Teva/Actavis 505lbs) | J1456 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Fulphila C | Q5108 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Furoscix | J1941 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Fvarro | J9331 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Fvlnetra C | Q5130 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Gamifant A | J9210 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Gammagard | J1569 J1566 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Gammaked | J1561 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Gammaplex | J1557 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Gamunex | J1561 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Gamunex C | J1561 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Gazvva | J9301 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Gel-One | J7326 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Gel-Syn | J7328 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Genviscr850 | J7320 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Givlaari | J0223 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Glaxsia | J0257 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Granix C | J1447 | Required | Required | Required | Required | Required | Required | Required | Required |
| Gene Therapy | Hemgenix | J1411 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Hemlibra | J7170 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Hemofil | J7190 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| Orphan Drug | Heptazo A | J9248 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Herceptin | J9355 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Herceptin Hylecta | J9356 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Hercessi | Q5146 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Herzuma | O5113 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Hizentra | J1559 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Humate-P | J7187 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Hyalgan | J7321 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Hydroxyprogesterone caproate | J1729 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Hymovis | J7322 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Hymovis One | J7322 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Hymdavzi | J7172 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Hqvvia | J1575 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Idelvion | J7202 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Ilaris | J0638 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Inlexxo | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| | Ilumya | J3245 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Imaavy | C9305 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Imdelltra | J9026 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Imfinzi | J9173 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Imjudo | J9347 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Immune Globulin Products | 90283 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Immune Globulin Products | 90284 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Imuldosa C | Q5098 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Inflectra | O5103 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| | Infliximab | J1745 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Infugem | J9198 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Injectafer | J1439 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Istodax | J9315 J9319 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Ivra | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| | IXinity | J7213 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Izervay | J2782 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Jelmyto | J9281 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Jemperli | J9272 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Jeuveau | NONE | NOT Required | NOT Required | NOT Required | Required | Required | Required | Required | Required |
| | Jivi | J7208 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Jobevne | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| | Jubbonti | Q5136 | NOT Required | NOT Required | NOT Required | Required | Required | Required | Required | Required |
| | Kadcycla | J9354 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Kalbitor | J1290 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Kanuma | J2840 | Required | Required | Required | Required | Required | Required | Required | Required |
| Gene therapy, MA Program | Kebilidi A | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| | Keytruda | J9271 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Keytruda Olex | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Kimtrak | J9274 | Required | Required | Required | Required | Required | Required | Required | Required |
| Anti-Amvloid Agent | Kisunla | J0175 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Koate/Koate DVI | J7190 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Kogenate FS | J7192 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Kovaltry | J7211 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| Orphan Drug | Krystexxa | J2507 | Required | Required | Required | Required | Required | Required | Required | Required |
| CAR-T | Kymriah A | O2042 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Kyprolis | J9047 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Kyxata | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Lantidra | NONE | Required | Required | Required | Required | Required | Required | Required | Required |

[illegible]

| Drug Category | Drug Brand Name | Drug Code (HCPCS/CPT) | Commercial Fully Insured | Commercial Self Funded | Medicare | HMO D-SNP (VVV) | Safety Net Child Health Plus (VYB) | Safety Net Essential Plan (YNC) | Safety Net Managed Medicaid (VYT) | Safety Net Health and Recovery Program (VYT) |
|---|--|-----------------------|--------------------------|------------------------|--------------|-----------------|------------------------------------|---------------------------------|-----------------------------------|--|
| Orphan Drug | Privigen | J1459 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Profilnine | J7194 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Prolastin-C | J0256 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Prolia | J0897 | NOT Required | NOT Required | NOT Required | Required | Required | Required | Required | Required |
| | Provenge | Q2043 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Pyzchiva SC | Q9996 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Pyzchiva IV Loading dose | Q9997 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug, MA Program | Qalsody | J1304 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Ofitlia | J7174 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Radicava | J1301 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Rebinvn | J7203 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| Orphan Drug | Reblozyl | J0896 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Rebyota | J1440 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Recombine | J7192 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Releuko | Q5125 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Remicade | J1745 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Remodulin | J3285 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Renflexis | Q5104 | Required | Required | Required | Required | Required | Required | Required | Required |
| Allogenic Processed Thymus tissue agent | Revmym | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Revcovi | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| | Riabni | Q5123 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Rituxan | J9312 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Rituxan Hycela | J9311 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Rivfloza | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| Gene Therapy | Rixubis | J7200 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Roctavian | J1412 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Rolvedon | J1449 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Romidespin | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Romidespin | J9318 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Ruconest | J0596 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Rybrevant | J9061 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Rylaze | J9021 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Ryoncil | J3402 | Required | Required | Required | Required | Required | Required | Required | Required |
| Hypoplasminogenemia Agent | Ryplazim | J2998 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Rystigmo | J9333 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Rytelo | J0870 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Ryzneuta | J9361 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Sandostatn LAR | J2353 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Saphnelo | J0491 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Sarclisa | J9227 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Scenesse | J7352 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Selarsol | Q9998 | Required | Required | Required | Required | Required | Required | Required | Required |
| | SevenFact | J7212 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| Orphan Drug | Signifor LAR | J2502 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Simponia Aria | J1602 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Skyrizi IV Loading Dose Only | J2327 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| Gene therapy, MA Program | Skysona | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Soliris | J1299 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Sodium Thiosulfate (Hope Pharmaceutical s) | J0209 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| | Somatuline Depot | J1930 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| Orphan Drug | Spevioo | J1747 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Spirazta | J2326 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Spravato | G2082 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Spravato | G2083 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Spravato | S0013 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Stariemza | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Stelara | J3357 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Stelara IV Loading Dose Only | J3358 | NOT Required | NOT Required | NOT Required | NOT Required | NOT required | NOT Required | NOT Required | NOT Required |
| | Steogeyma | Q5099 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Stimufend | Q5127 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Stoboclo | Q5157 | NOT Required | NOT Required | NOT Required | Required | Required | Required | Required | Required |
| | Sunlenca | J1961 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| Orphan Drug | Supartz | J7321 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Supprelin LA | J9226 | Required | Required | NOT Required | Required | Required | Required | Required | Required |
| Orphan Drug | Syfovre | J2781 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Sylvant | J2860 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Synagis | 90378 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Synoioynt | J7331 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Synribo | J9262 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Synvisc | J7325 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | Required | Required |
| | Synvisc One | J7325 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | Required | Required |
| Orphan Drug | Takzhvro | J0593 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug, MA Program | Talvey | J3055 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Taxol | J9267 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |

| Drug Category | Drug Brand Name | Drug Code (HCPCS/CPT) | Commercial Fully Insured | Commercial Self Funded | Medicare | HMO D-SNP (VYV) | Safety Net Child Health Plus (VYB) | Safety Net Essential Plan (YNC) | Safety Net Managed Medicaid (VYT) | Safety Net Health and Recovery Program (VYT) |
|--------------------------------|---------------------|-----------------------|--------------------------|------------------------|--------------|-----------------|------------------------------------|---------------------------------|-----------------------------------|--|
| CAR-T Gene Therapy/ MA Program | Tecartus 🌿 | O2053 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Tecelra | Q2057 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Tecentria | J9022 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Tecentriq Hybreza | J9024 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug, MA Program | Tecvayi | J9380 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Tepezza | J3241 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Tepylute | J9341 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Testopel | S0189 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Tevimbra | J9329 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Tezspire ⚡ | J2356 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Tivdak | J9273 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Tofidence | O5133 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Torisel | J9330 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Treanda | J9033 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Tremfya ⚡ | J1628 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Treprostinil | J3285 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Tretten | J7181 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Triluron | J7332 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Triptodur ⚡ | J3316 | Required | Required | NOT Required | Required | Required | Required | Required | Required |
| | TrIVisc | J7329 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Trodelvy | J9317 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Troazarzo | J1746 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| | Tyenne ⚡ | O5135 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Tyruko | O5124 | NOT Required | NOT Required | NOT Required | Required | Required | Required | Required | Required |
| | Tysabri | J2323 | NOT Required | NOT Required | NOT Required | Required | Required | Required | Required | Required |
| | Tyvaso Neb Solution | J7686 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Tziel | J9381 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Ultomiris | J1303 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Unloxyt | J9275 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Uplizna | J1823 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Updravi 🌿 | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| | Ustekinumab-Aauz ⚡ | Q9999 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Ustekinumab ⚡ | J3357 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Ustekinumab-Aekn ⚡ | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| | Ustekinumab-ttwc ⚡ | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| | Vabrinty | NONE | Not Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| | Vabysmo | J2777 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Vectibix | J9303 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Veazelma | O5129 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Veletri | J1325 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Ventavis | O4074 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Venofor | J1756 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| | Veopoz | J9376 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug, MA Program | Viltespo | J1427 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Vimizim | J1322 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Visco-3 | J7321 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Vivimusta | J9056 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Vonvedi | J1719 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| Orphan Drug | VPRIV | J3385 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Vyalev ⚡ | J7356 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Vyvetri | J3032 | Required | Required | Required | Required | Required | Required | Required | Required |
| Gene Therapy | Vyjuvek | J3401 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Vyloy | J1326 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Vyondys-53 | J1429 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Vyvqart | J9332 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Vyvqart Hytrulo | J9334 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Vxees | J9153 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Wezelma ⚡ | O5138 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Winrevair ⚡ | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| | Wilate | J7183 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Wyost | O5136 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Xembify | J1558 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Xenpozyme | J0218 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Xeomin | J0588 | NOT Required | NOT Required | NOT Required | Required | Required | NOT Required | Required | Required |
| | Xoava | J0897 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Xiaflex | J0775 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Xolair ⚡ | J2357 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Xyntha | J7185 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Xyntha Solofuse | J7185 | NOT Required | NOT Required | NOT Required | Required | NOT Required | NOT Required | Required | Required |
| | Ycanth | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| | Yesintek ⚡ | O5100 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Yervoy | J9228 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Yeztugo | J0799 | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required | NOT Required |
| | Yimmuqo | NONE | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Yondelis | J9352 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Yescarta 🌿 | Q2041 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Zaltrap | J9400 | Required | Required | Required | Required | Required | Required | Required | Required |
| Orphan Drug | Zemaira | J0256 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Zepzelca | J9223 | Required | Required | Required | Required | Required | Required | Required | Required |
| | Gene therapy | Zevaskyn | NONE | Required | Required | Required | Required | Required | Required | Required |
| | Ziextenzo ⚡ | O5120 | Required | Required | Required | Required | Required | Required | Required | Required |

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