MEDICARE PART B STEP THERAPY DRUG LIST

The chart below lists non-preferred drugs with step therapy under Medicare Part B (medical).
Step therapy requires you to try one or more (preferred) drugs first to treat your medical condition before another drug (non-preferred) is covered under your plan. Please refer to the drug specific policy for additional guidance.

Step therapy for Part B drugs applies to new starts only.

Drug Category	Preferred Drugs	Non-Preferred Drugs
Ankylosing Spondylitis	Avsola Inflectra Simponi Aria	Cimzia
Antiemetic Agents	Emend / fosaprepitant generics	Cinvanti Focinvez Fosaprepitant (Teva/ Actavis 505(b)(2)) Navitrux (fosaprepitant)
Blood Disorders	Neulasta Udenyca	Armlupeg Fulphila Fylnetra Nyvepria Rolvedon Ryzneuta Stimufend Ziextenzo
	Zarxio	Granix Neupogen Nivestym Nypozi Releuko
Chronic Rhinosinusitis with Nasal Polyps (CRSwNP)	mometasone nasal spray Xhance (Requires Prior Auth)	Nucala Tezspire Xolair
Crohn's Disease	Avsola Entyvio Inflectra Selarsdi Skyrizi Tremfya Yesintek	Cimzia Stelara
Dyslipidemics	Repatha	Leqvio
Gaucher Disease	Elelyso	VPRIV Cerezyme
Pompe Disease	Pombiliti	Lumizyme Nexviazyme
Generalized Myasthenia Gravis / CIDP	Vyvgart Hytrulo Prefilled Syringe	Vyvgart Vyvgart Hytrulo (vial) Rystiggo* Imaavy* Ultomiris* Eculizumab products*^
^Eculizumab products	Epysqli	Soliris/Bkemv

***Preferred drugs may vary based on diagnosis**
Last Updated: 10/01/2026

MEDICARE PART B STEP THERAPY DRUG LIST

Drug Category	Preferred Drugs	Non-Preferred Drugs
Genetic Disease	Prolastin-C	Aralast NP Glassia Zemaira
Hemophilia A	Hemlibra	Alhemo Hympavzi Qfitlia
Hereditary Angioedema	Haegarda Takhzyro	Cinryze
	Icatibant	Berinert Kalbitor Ruconest
Inflammatory Diseases	Avsola Inflectra	Remicade Reneflexis unbranded infliximab
	Selarsdi Yesintek	Imuldosa Otulfi Pyzchiva Starjemza Stelara Steqeyma Ustekinumab-aauz Ustekinumab-aekn ustekinumab-ttwe Wezlana
Iron Replacement Products (injectable)	Feraheme	Injectafer*
Juvenile Idiopathic Arthritis	Simponi Aria	Actemra Actozma Orencia Tofidence Tyenne
	Enbrel Hadlima Simlandi	Ilaris
Lupus	Benlysta (SQ administration)	Benlysta (IV administration) Gazyva Saphnelo
Multiple Sclerosis	dimethyl fumarate fingolimod glatiramer Glatopa Kesimpta Rebif teriflunomide	Briumvi (D-SNP only) Tyruko (D-SNP only) Tysabri (D-SNP only)
Neuromyelitis Optica Spectrum Disorder	Ultomiris	Eculizumab products
	Enspryng Uplizna	Ultomiris
	Enspryng	Uplizna
	Cisplatin (J9060)	Axycis
	paclitaxel	Abraxane* paclitaxel protein-bound*
	etoposide/Etopophos	Avopef

***Preferred drugs may vary based on diagnosis**

Last Updated: 10/01/2026

MEDICARE PART B STEP THERAPY DRUG LIST

Drug Category	Preferred Drugs	Non-Preferred Drugs
Oncology	Fulvestrant (J9395 and J9394)	Cligavyx
	Yondelis	Evdi
	fluorouracil	Favlyxa
	Mvasi Zirabev	Alymsys Avastin Jobevne Vegzelma Zaltrap
	Velcade	Kyprolis
	Eligard Lupron Depot Vabrinity	Camcevi Leuprolide Depot 22.5 mg Vial Lutrate Depot
	Ruxience (rituximab-pvvr) Truxima (rituximab-abbs)	Riabni Rituxan Rituxan Hycela
	Kanjinti Trazimera	Herceptin Herceptin Hylecta Hercessi Herzuma Ogivri Ontruzant
	Bilprevda Xtrenbo	Aukelso Bomyntra Osenvelt Wyost Xgeva Jubereq Xbryk
	Belrapzo bendamustine Bendeka Treanda	Vivimusta
	Alimta pemetrexed	Axtle Pemfexy Pemrydi RTU
	gemcitabine Gemzar	Avgemsi Infugem Gemcitabine (J9196)
	Erbitux	Vectibix
	Docetaxel (Taxotere)	Beizray Docivyx
	Adstiladrin Keytruda	Anktiva* Inlexzo*
	Reblozyl	Rytelo
	Velcade Bortezomib (J9041 and J9049)	Boruzu
	Trodelvy	Datroway
	Paraplatin Carboplatin (J9045)	Kyxata
	Tepadina	Tepylute

***Preferred drugs may vary based on diagnosis**

Last Updated: 10/01/2026

MEDICARE PART B STEP THERAPY DRUG LIST

Drug Category	Preferred Drugs	Non-Preferred Drugs
	Thiotepa (J9340)	
	Melphalan (J9245)	Ivra
	Cyclophosphamide (J9071, J9073, J9075)	Cyclophosphamide (J9072, J9074, J9076)
Ophthalmic Agents	Avastin Beovu*** Byooviz*** Cimerli*** Enzeevu*** Eylea HD*** Eylea*** Lucentis*** Nufymco*** Pavblu*** Susvimo*** Vabysmo*** Yesafill*** ****requires trial / failure of a bevacizumab containing product prior to approval*	
	Syfovre	Izervay
Osteoarthritis	Euflexxa Synvisc Synvisc-One	Durolane Gel-One Gelsyn-3 Genvisc 850 Hyalgan Hymovis Hymovis One Monovisc Orthovisc Supartz FX Synojoynt Triluron Visco-3
	Depo-Medrol (methylprednisolone acetate) Kenalog (triamcinolone acetonide)	Zilretta
Osteoporosis	Bildyos Enoby	Bosaya Conexxence Jubbonti Ospomyv Osvyrti Prolia Stoboclo
	teriparatide	Evenity
Paroxysmal Nocturnal Hemoglobinuria	Ultomiris	Eculizumab products
Psoriasis	Avsola Illumya Inflectra Selarsdi Skyrizi	Cimzia Stelara

***Preferred drugs may vary based on diagnosis**

Last Updated: 10/01/2026

MEDICARE PART B STEP THERAPY DRUG LIST

Drug Category	Preferred Drugs	Non-Preferred Drugs
	Tremfya Yesintek	
Psoriatic Arthritis	Avsola Inflectra Selarsdi Simponi Aria Skyrizi Tremfya Yesintek	Cimzia Orencia Stelara
Pulmonary Arterial Hypertension	epoprostenol	Flolan Veletri
	treprostinil	Remodulin
Rare Diseases	Lanreotide acetate (J1930 or J1932) Somatuline Depot (J1930)	Sandostatin LAR/octreotide intramuscular injection (generic Sandostatin LAR) Signifor LAR
	Ruxience (rituximab-pvvr) Truxima (rituximab-abbs)	Enjaymo
	Attruby Vyndamax	Amvuttra*
Rheumatoid Arthritis	Avsola Inflectra Simponi Aria	Actemra Actozma Cimzia Orencia Tofidence Tyenne
Sickle Cell Disease	Casgevy	Lyfgenia
Testosterone Replacement Products (injectable)	Depo-Testosterone Testosterone cypionate Testosterone enanthate	Aveed Azmiro Testopel

***Preferred drugs may vary based on diagnosis**

Last Updated: 10/01/2026