

Step Therapy (Medical Benefit) Drug List	
Policy ID#	Policy Name <i>Revised 05/06/2022</i>
2022012	Anifrolumab-fnia (e.g., Saphnelo)-effective July 1, 2022
2006020	Abatacept (Orencia)
2021033	Belimumab (Benlysta)
2020023	Bimatoprost (Durysta™)
2019012	Brexanolone (Zulresso™)
2016013	C 5 Complement Inhibitors (Eculizumab and Ravulizumab)
2022003	Cabotegravir ER inj susp (e.g., Apretude)
2020026	Canakinumab (Ilaris™)
2018002	Chemodenervation, Botulinum Toxins (Migraine headache requests only)
2020011	Crizanlizumab (Adakveo™)
2022001	Efgartigimod (Vyvgart)
2019013	Emapalumab-LZSG (Gamifant)
2020007	Eptinezumab-jjmr (VYEPTI™)
2021027	Evinacumab-dgnb (Evkeeza)
2009015	Golimumab (Simponi Aria)
2013032	Hereditary Angioedema (HAE), Prophylaxis and Acute Treatment (Chronic therapy only – Cinryze)
2009047	Hormone Pellet Implantation Hormone Replacement Therapy
2022016	Inclisiran (Leqvio) (new policy effective July 15, 2022)
1998161	Infliximab
2018023	Levodopa-carbidopa Intestinal Gel (Duopa) for Treatment of Advanced Parkinson's Disease
2021032	Lumasiran (Oxlumo)
2022014	Lutetium Lu 177 vipivotide tetraxetan (Pluvicto) (effective April 2022)
2016018	Natalizumab (Tysabri)
2016021	Paliperidone Palmitate (Long-acting Injectables Invega Sustenna® & Invega Trinza)
2018027	Pegloticase (Krystexxa®)
1998144	Pulmonary Arterial Hypertension, Pharmacological Treatment with Prostacyclin Analogues, Endothelin Receptors Antagonists, or Phosphodiesterase Inhibitors.
2010046	Intravitreal, Punctum Corticosteroid Implants and Ranibizumab (e.g., Susvimo) (PA required only for Ranibizumab [e.g., Susvimo], Current HCPCS code=C9093)
2018008	Reslizumab (Cinqair)
2008031	Rilonacept (Arcalyst)
2021034	Rituximab (Rituxan) and Biosimilars – Non-Oncologic Indications
2019009	Romosozumab-aqqg (Evenity®)
2021006	Satralizumab-mwge (Enspryng™)
2022015	Tezepelumab (Tezspire) (new policy effective July 15, 2022)
2020022	Tocilizumab (Actemra)
2021028	Ustekinumab (Stelara)
2015011	Vedolizumab (Entyvio) for Inflammatory Bowel Disease