



# Specialty Pharmacy Program Drug List for The Empire Plan Prescription Drug Program – Advanced Flexible Formulary

If you are an enrollee or health care provider, please contact CVS Specialty® at 1-855-264-3238 or visit [Empireplanrxprogram.com](http://Empireplanrxprogram.com)

With more than 40 years of specialty pharmacy experience, CVS Specialty provides proactive quality care and service. We have a network of pharmacies that includes those with Joint Commission and URAC accreditation. The Joint Commission and URAC are nationally recognized symbols of quality that reflect an organization's commitment to meet high standards of quality and safety.

**Coverage under The Empire Plan Prescription Drug Program requires that the following medications be ordered from CVS Specialty.**

## ACROMEGALY

Lanreotide  
octreotide acetate  
(SANDOSTATIN)<sup>1</sup>  
Sandostatin LAR  
Somatuline Depot\*  
Somavert\*

## ALCOHOL/OPIOID DEPENDENCY

Brixadi\*<sup>5</sup>  
Vivitrol<sup>5</sup>

## ALLERGEN IMMUNOTHERAPY

Xolair\*

## ALOPECIA AREATA

Litfulo\*

## AMYLOIDOSIS

Amvuttra\*  
Onpattro\*<sup>†</sup>  
Vyndamax\*  
Vyndaqel\*

## ALPHA-1 ANTITRYPSIN DEFICIENCY

Aralast NP\*  
Glassia\*  
Zemaira\*

## ANEMIA

Aranesp<sup>2</sup>  
Enjaymo\*  
Epogen  
Reblozyl\*  
Retacrit

## ANTICOAGULANTS

enoxaparin (LOVENOX)<sup>1,5</sup>

## ANTIEMETICS

Anzemet<sup>5</sup>  
granisetron (KYTRIL)<sup>1,5</sup>  
palonosetron (ALOXI)<sup>1,5</sup>

## ASTHMA

Cinqair\*  
Dupixent  
Fasenra\*  
Nucala\*  
Tezspire\*  
Xolair\*

## ATOPIC DERMATITIS

Adbry\*  
Dupixent

## BONE DISORDERS - OTHER

Sohonos\*  
Voxzogo\*

## CARDIAC DISORDERS

Arcalyst\*  
Camzyos\*  
dofetilide (TIKOSYN)<sup>1,4</sup>

## CRYOPYRIN-ASSOCIATED PERIODIC SYNDROMES

Arcalyst\*  
Ilaris\*

## CUSHING'S SYNDROME

mifepristone

## CYSTIC FIBROSIS

Bethkis\*  
Bronchitol\*  
Cayston\*  
Kitabis Pak\*  
Pulmozyme  
tobramycin nebulizer<sup>1</sup>

## DUPUYTREN'S CONTRACTURE

Xiaflex\*

## ELECTROLYTE DISORDER

tolvaptan\*  
(SAMSCA\*)<sup>1,4</sup>

## ENDOCRINE DISORDERS-OTHER

Acthar\*  
Cortrophin\*

## GASTROINTESTINAL DISORDERS – OTHER

Dupixent  
Gattex\*  
Ocaliva\*  
Solesta\*<sup>5</sup>

## GOUT

Ilaris\*  
Krystexxa\*

## GROWTH HORMONE & RELATED DISORDERS

Growth Hormone  
Disorders  
Humatrope

Ngenla\*  
Norditropin  
Serostim\*  
Skytrofa\*  
Sogroya\*  
IGF-1 Deficiency  
Increlex\*

## HEMATOPOIETICS

plerixafor  
Mozobil\*

## HEMOPHILIA, VON WILLEBRAND DISEASE & ELATED BLEEDING DISORDERS

Advate  
Adynovate  
Afstyla  
Alphanate  
AlphaNine SD

Alprolix  
Altuviiiio\*  
BeneFIX  
Coagadex\*  
Corifact\*  
Eloctate  
Esperoct\*  
Feiba NF  
Fibryga  
Hemlibra  
Hemofil M  
Humate-P  
Idelvion  
Ixinity  
Jivi\*  
Koate

Koate-DVI  
Kovaltry  
Monoclate-P  
Mononine  
NovoEight\*  
NovoSeven<sup>2</sup>  
NovoSeven RT  
Nuwiq  
Obizur\*  
Profilnine SD  
Rebinyn  
Recombinate  
RiaSTAP  
Rixubis  
Sevenfact\*  
Stimate  
Tretten\*  
Vonvend\*  
Wilate  
Xyntha<sup>2</sup>

## HEPATITIS C

Epclusa  
Harvoni  
PegIntron<sup>2</sup>  
RibaPak  
RibaTab  
ribavirin caps  
ribavirin tabs  
Sovaldi  
Vosevi

## HEREDITARY ANGIOEDEMA

Berinert\*  
Cinryze\*  
Haegarda\*



icatibant acetate\*  
(FIRAZYR\*)<sup>1</sup>

Kalbitor\*

Ruconest\*

Takhzyro\*

#### HIV MEDICATIONS

Apretude\*<sup>5</sup>

Cabenuva\*

Egrifta SV\*

Fuzeon

Sunlenca\*<sup>5</sup>

#### HORMONAL THERAPIES

Aveed\*

Eligard

Fensolvi\*

Firmagon

leuprolide acetate (LUPRON)<sup>1</sup>

Leuprolide Acetate

Injection Depot

Lupron Depot<sup>2</sup>

Supprelin LA\*

Trelstar<sup>2</sup>

Zoladex

#### IMMUNE DEFICIENCIES & RELATED DISORDERS

Asceniv\*

Bivigam\*

Cutaquig\*

Cuvitru\*

Cytogam

Flebogamma DIF

GamaSTAN S/D

Gammagard Liquid

Gammagard S/D

Gammaked

Gammaplex\*

Gamunex C

HepaGam B<sup>5</sup>

Hizentra\*

HyperHEP B<sup>5</sup>

HyperRHO S/D<sup>5</sup>

HyQvia

MICRhoGAM<sup>2,5</sup>

Nabi-HB<sup>5</sup>

Octaga

Panzyga

Privigen

RhoGAM<sup>2,5</sup>

Rhophylac<sup>5</sup>

Varizig<sup>4,5</sup>

WinRho SDF<sup>5</sup>

Xembify\*

#### IMMUNE (IDIOPATHIC) THROMBOCYTOPENIA PURPURA

Doptelet\*

Nplate

Promacta\*

#### INFECTIOUS DISEASE

Actimmune\*

Alferon N<sup>4</sup>

#### INFERTILITY

cetorelix acetate  
chorionic gonadotropin  
(NOVAREL, PREGNYL)<sup>1</sup>

Ganirelix **B4G**

Gonal-F

Gonal-F RFF

Menopur

Ovidrel

#### INFLAMMATORY BOWEL DISEASE

adalimumab-adaz

Avsola\*

Entyvio

Hadlima

Humira

Hyrimoz (Cordavis)

Inflectra\*

Infliximab\*

OmvoH\*

Remicade

Renflexis\*

Skyrizi

Stelara

Tysabri\*

Velsipity\*

Zeposia\*

Zymfentra

#### IRON OVERLOAD

deferasirox\*  
(EXJADE\*/JADENU\*)<sup>1</sup>

deferoxamine  
(DESFERAL)<sup>1</sup>

#### LYSOSOMAL STORAGE DISORDERS

Aldurazyme\*

Cerdelga\*

Cerezyme\*

Cystagon\*

Elaprased\*

Elelyso\*

Elfabrio\*

Fabrazyme\*

Kanuma\*

Lumizyme\*

miglustat

Naglazyme\*

Nexviazyme\*

Opfolda\*

Pombiliti\*

Vimizim\*

VPRIV\*

Xenpozyme\*

#### MENTAL HEALTH CONDITIONS

Zulresso\*

#### MOVEMENT DISORDERS

Apokyn\*

Austedo

Austedo XR

droxidopa\*

(NORTHERA\*)

Duopa\*

Ingrezza\*

Nuplazid\*

Radicava\*<sup>†</sup>

Radicava ORS\*

tetrabenazine

(XENAXINE\*)<sup>1</sup>

#### MULTIPLE SCLEROSIS

Acthar\*

Ampyra\*

Avonex<sup>2</sup>

Betaseron

Briumvi\*

Cortrophin\*

dimethyl fumarate

fingolimod\* (GILENYA)

glatiramer acetate

(COPAXONE,

glatopa)<sup>1</sup>

Kesimta\*

Lemtrada\*

Mavenclad\*

Mayzent\*

Ocrevus\*

Plegridy\*

Rebif<sup>2</sup>

teriflunomide

(AUBAGIO\*)

Tysabri\*

Vumerity\*

Zeposia\*

#### MUSCULAR DYSTROPHY

deflazacort

#### NEUROMUSCULAR

Rystiggo\*

Soliris\*

Ultomiris\*

Vyvgart\*

Vyvgart Hytrulo\*

#### NEUTROPENIA

Granix

FyInetra\*

Leukine

Neulasta

Nivestym

Nyvepria

Releuko

Rolvedon\*

Stimufend\*

Udenyca

#### ONCOLOGY – INJECTABLE<sup>3</sup>

Adcetris\*<sup>4</sup>

Alymsys\*

Avastin<sup>4</sup>

azacitidine

(VIDAZA)<sup>1,4</sup>

Bavencio\*<sup>†</sup>

Beleodaq\*

Belrapzo\*

bendamustine

(BENDEKA\*)

bendamustine lyophilized

(TREANDA<sup>4</sup>)

Besponsa\*

Blinicyto\*

Bortezomib<sup>4</sup>

Columvi\*

Cyramza\*

Darzalex\*

Darzalex Faspro\*

decitabine

(DACOGEN\*)<sup>1,4</sup>

Empliciti\*

Enhertu

Erbitux<sup>4</sup>

Evomela\*<sup>5</sup>

Gazyva<sup>1,4</sup>

Halaven<sup>4</sup>

Herceptin<sup>4</sup>

Herceptin Hylecta<sup>4</sup>

Herzuma

Imfinzi\*

Imjudo\*

Intron A\*<sup>4</sup>

Istodax\*<sup>4</sup>

Ixempra<sup>4</sup>

Jemperli\*

Jevtana<sup>4</sup>

Kadcyla<sup>4</sup>

Kanjinti\*

Keytruda\*

Khazory\*<sup>4</sup>

Kyprolis\*

Levoleucovorin<sup>4</sup>

Loqtorzi\*

Lunsumio\*

Margenza\*

Mitoxantrone<sup>4,5</sup>

Mvasi\*

Mylotarg\*

Ogivri\*

Oncaspar\*<sup>4</sup>

Onivyde\*

Ontruzant\*

Opdualag\*

Opdivo\*

Padcev\*

Perjeta\*<sup>4</sup>

Phesgo\*

Polivy\*

Poteligeo\*

Pralatrexate

(FOLOTYN<sup>4</sup>)

Proleukin<sup>4</sup>

Riabni\*

Rituxan<sup>4</sup>

Rituxan Hycela\*

Romidepsin<sup>4</sup>

Ruxience

Rybrevent\*

Rylaze\*

Sarclisa\*

Sylatron<sup>4</sup>

Sylvant\*

Tecentriq\*

Temodar<sup>4</sup>

Temsirolimus

(TORISEL)<sup>4</sup>

Tepadina<sup>5</sup>

Thyrogen\*<sup>5</sup>

Tivdak\*

Trazimera

Truxima\*

valrubicin<sup>4,5</sup>

Vectibix\*<sup>4</sup>

Vegzelma\*

Velcade<sup>4</sup>

Vivimusta\*

Vyxeos\*<sup>5</sup>

Xgeva

Yervoy<sup>4</sup>

Yondelis\*<sup>5</sup>



Zaltrap\*,<sup>4</sup>  
Zepzelca\*  
Zirabev\*  
zoledronic acid<sup>1</sup>  
Zynzy

**ONCOLOGY –  
ORAL/TOPICAL**

Alecensa\*  
Augtyro\*  
Balversa\*  
bexarotene  
(TARGRETIN)<sup>1</sup>  
Bosulif  
Braftovi\*  
Cabometyx\*  
capecitabine  
(XELODA)<sup>1</sup>  
Cometriq\*  
Copiktra\*  
Cotellic\*  
Daurismo\*  
Erivedge\*  
Erleada\*  
erlotinib hydrochloride\*<sup>1</sup>  
everolimus  
(AFINITOR)<sup>2</sup>  
Gavreto\*  
gefitinib (IRESSA\*)  
Gleostine\*,<sup>5</sup>  
Hycamtin\*  
Ibrance\*  
IDHIFA\*  
imatinib mesylate<sup>1</sup>  
Inlyta\*  
Inqovi\*  
Inrebic\*  
Jakafi\*  
Jaypirca\*  
Kisqali  
Kisqali Femara Co-Pack  
lapatinib (TYKERB\*)  
lenalidomide\*  
(REVLIMID)\*  
Lenvima\*  
Lonsurf\*  
Lorbrena\*  
Lumakras\*  
Lynparza  
Mekinist\*  
Mektovi\*  
Mugard<sup>4</sup>  
Nerlynx\*

Ninlaro\*  
Nubeqa  
Odomzo\*  
Onureg\*  
pazopanib (VOTRIENT\*)  
Pomalyst\*  
Purixan\*  
Retevmo\*  
Rozlytrek\*  
Rubraca\*  
Rydapt  
Scemblix\*  
sorafenib (NEXAVAR\*)  
Sprycel  
Stivarga\*  
sunitinib  
(SUTENT)  
Tabrecta  
Tafinlar\*  
Tagrisso\*  
Talzenna\*  
Tasigna  
Temozolmide  
(TEMODAR)<sup>1</sup>  
Thalomid  
Verzenio\*  
Vitrakvi\*  
Vizimpro\*  
Xalkori\*  
Xospata\*  
Xtandi\*  
Yonsa\*  
Zejula\*  
Zelboraf\*  
Zolinz  
Zydelig\*  
Zykadia\*  
Zytiga 250 mg\*

**PAROXYSMAL  
NOCTURNAL  
HEMOGLOBINURIA**

Soliris\*  
Ultomiris\*

**PHENYLKETONURIA**

Palyngiq\*  
sapropterin  
dihydrochloride  
(KUVAN\*)<sup>1</sup>

**PSORIASIS**

adalimumab-adaz  
Avsola\*

Bimzelx\*  
Cosentyx\*  
Enbrel  
Hadlima  
Humira  
Hyrimoz (Cordavis)  
Inflectra\*  
Infliximab\*  
Otezla  
Otrexup  
Rasuvo  
Reditrex\*  
Remicade  
Renflexis\*  
Skyrizi  
Sotyktu  
Stelara  
Tremfya

**PULMONARY  
ARTERIAL  
HYPERTENSION**

Adempas\*  
ambisentan  
(LETAIRIS\*)<sup>1</sup>  
bosentan\*  
(TRACLEER\*)<sup>1</sup>  
epoprostenol sodium\*  
(FLOLAN\*,  
VELETRI\*)<sup>1</sup>  
Liqrev  
Opsumit\*  
Opsynvi\*  
Orenitram\*  
tadalafil (ADCIRCA)<sup>1</sup>  
Tadliq\*  
treprostinil sodium\*  
(REMODULIN\*)<sup>1</sup>  
Tyvaso\*  
Tyvaso DPI\*  
Upravi\*  
Ventavis\*  
Winrevair\*

**PULMONARY  
DISORDERS –  
OTHER**  
Ofev\*  
pirfenidone (ESBRIET\*)

**RARE DISORDERS –  
OTHER**

betaine anhydrous  
Crysvita\*

Dojolvi\*  
Enspryng\*  
Gamifant\*<sup>†</sup>  
nitisinone\*  
Uplizna\*<sup>†</sup>  
Vioice\*  
Zokinvy\*

**RENAL DISEASE**

Filspari\*  
Parsabiv\*  
Rivfloza\*  
Sensipar

**RESPIRATORY  
SYNCYTIAL  
VIRUS**

Synagis

**RETINAL/OCULAR  
DISORDERS**

Beovu\*  
Byooviz  
Cimerli\*  
Durysta\*  
Eylea\*  
Iluvien\*  
Lucentis\*  
Macugen\*  
Ozurdex\*  
Retisert\*  
Susvimo\*  
Tepezza\*<sup>†</sup>  
Vabysmo\*  
Visudyne\*  
Xdemvy\*

**RHEUMATOID  
ARTHRITIS**

adalimumab-adaz  
Actemra IV\*  
Avsola\*  
Enbrel  
Hadlima  
Humira  
Hyrimoz (Cordavis)  
Inflectra\*  
Infliximab\*  
Orencia  
Otrexup  
Rasuvo  
Reditrex\*  
Remicade  
Renflexis\*

Riabni\*  
Truxima\*  
Xeljanz

**SEIZURE  
DISORDERS**

Epidiolex\*  
Acthar\*  
vigabatrin powder  
(SABRIL POWDER\*)<sup>1</sup>  
vigabatrin tabs  
(SABRIL TABS\*)<sup>1</sup>

**SICKLE CELL  
DISEASE**

Adakveo  
Endari\*  
Oxbryta\*

**SLEEP DISORDER**

Lumryz\*  
Wakix\*

**SYSTEMIC LUPUS  
ERYTHEMATOSUS**

Benlysta  
Saphnelo\*

**THROMBOCYTOPENIA**

Adzynma\*  
Alvaiz\*  
Mupleta

**TRANSPLANT**

Astagraf XL<sup>5</sup>  
cyclosporine  
(gengraf,  
NEORAL,  
SANDIMMUNE)<sup>1,5</sup>  
Envarsus XR<sup>5</sup>  
Nulojix<sup>5</sup>  
Prograf Injectable<sup>5</sup>  
Zortress<sup>5</sup>

**UREA  
CYCLE  
DISORDERS**

Buphenyl\*  
Olpruva\*  
Ravicti\*  
sodium phenylbutyrate



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1. Lowercase type indicates generic name and availability; lowercase type within parentheses indicates trademark generics listed only when no brand is available; products in all capital letters within parentheses indicate brand names of generic products.
2. Multiple dosage formulations and/or injectable devices are available.
3. Call CVS Specialty at 1-855-264-3238 for specific medications available through CVS Specialty. Listing is subject to change.
4. Certain specialty drugs may be obtained at your local retail network pharmacy or through CVS Specialty.
5. Certain products do not require approval through Specialty Guideline Management (SGM).

**B4G** Brand for generic medication. Brand-name product is dispensed at the generic copayment. Copayment, copay or coinsurance means the amount a member is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.

\* Indicates Limited Distribution products distributed by CVS Specialty.

† Indicates products exclusively distributed by Coram CVS Specialty Infusion Services.

Most specialty drugs must be approved through Specialty Guideline Management (SGM), a clinical prior authorization review required to determine coverage under the prescription benefit to promote their safe, appropriate, and cost-effective use.

The first fill ("Grace Fill") of a specialty prescription medication may be dispensed from a pharmacy other than the CVS Specialty Pharmacy.

Subsequent fills must be dispensed through the CVS Specialty Pharmacy.

Products distributed by CVS Specialty, as well as products covered by a plan member's prescription and medical benefit plan, may change from time to time. In addition, a member's specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance on this document at any time. This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Specialty.