April 2025

NEW YORK STATE | Department of Civil Service
The Empire Plan

CVS specialty®

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

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)[1]
octreotide LA (SANDOSTATIN LAR)
*Somatuline Depot**
*Somavert**

ALCOHOL/OPIOID DEPENDENCY
*Brixadi**,[5]
Vivitrol[5]

ALLERGEN IMMUNOTHERAPY
*Xolair**

ALOPECIA AREATA
*Litfulo**

AMYLOIDOSIS
*Amvuttra**
*Onpattro**†
*Vyndamax**
*Vyndaqel**

ALPHA-1 ANTITRYPSIN DEFICIENCY
*Aralast NP**
*Glassia**
*Zemaira**

ANEMIA
Aranesp[2]
*Enjaymo**
Epogen
*Reblozyl**
Retacrit

ANTICOAGULANTS
enoxaparin (LOVENOX)[1,5]

ANTIEMETICS
Anzemet[5]
granisetron (KYTRIL)[1,5]
palonosetron (ALOXI)[1,5]

ASTHMA
*Cinqair**
Dupixent
*Fasenra**
*Nucala**
*Tezspire**
*Xolair**

ATOPIC DERMATITIS
*Adbry**
Dupixent
*Ebglyss**
*Nemluvio**

BONE DISORDERS - OTHER
*Sohonos**
*Voxzogo**

CARDIAC DISORDERS
*Arcalyst**
*Camzyos**
dofetilide (TIKOSYN)[1,4]

CRYOPYRIN-ASSOCIATED PERIODIC SYNDROMES
*Arcalyst**
*Ilaris**

CUSHING'S SYNDROME
mifepristone

CYSTIC FIBROSIS
*Alyftrek**
*Bethkis***
*Bronchitol**
*Cayston**
*Kalydeco**
*Kitabis Pak**
*Orkambi**
Pulmozyme
*Symdeko**
tobramycin nebulizer[1]
*Trikafta**

DERMATOLIGICAL DISORDERS – OTHER
*Nemluvio**

DUPUYTREN'S CONTRACTURE
*Xiaflex**

ELECTROLYTE DISORDER
*tolvaptan** *(SAMSCA*)*[1,4]

ENDOCRINE DISORDERS-OTHER
*Acthar**
*Cortrophin**

GASTROINTESTINAL DISORDERS – OTHER
Dupixent
*Gattex**
*Iqirvo**
*Ocaliva**
*Solesta**,[5]

GOUT
*Ilaris**
*Krystexxa**

GROWTH HORMONE & RELATED DISORDERS
Growth Hormone Disorders
Humatrope
*Ngenla**
Norditropin
*Serostim**
*Skytrofa**
*Sogroya**

HEMATOPOIETICS
plerixafor
*Mozobil**

HEMOPHILIA, VON WILLEBRAND DISEASE & ELATED BLEEDING DISORDERS
Advate
Adynovate
Afstyla
Alphanate
AlphaNine SD
Alprolix
*Altuviiio**
BeneFIX
*Coagadex**
*Corifact**
Eloctate
*Esperoct**
Feiba NF
Fibryga
Hemlibra
Hemofil M
Humate-P
*Hympavzi**
Idelvion
Ixinity
*Jivi**
Koate
Koate-DVI
Kovaltry
Monoclate-P
Mononine
*NovoEight**
NovoSeven[2]
NovoSeven RT
Nuwiq
*Obizur**
Profilnine SD
Rebinyn
Recombinate
RiaSTAP
Rixubis
*Sevenfact**
Stimate
*Tretten**
*Vonvendi**
Wilate
Xyntha[2]

HEPATITIS C
Epclusa
Harvoni
RibaPak
RibaTab
ribavirin caps
ribavirin tabs
Sovaldi
Vosevi

April 2025

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HEREDITARY ANGIOEDEMA
*Berinert**
*Cinryze**
*Haegarda**

*icatibant acetate** *(FIRAZYR*)*[1]
*Kalbitor**
*Ruconest**
*Takhzyro**

HIV MEDICATIONS
Apretude[*,5]*
Cabenuva[*,5]*
*Egrifta SV**
Fuzeon[,5]*
Sunlenca[*,5]*

HORMONAL THERAPIES
*Aveed**
Eligard
*Fensolvi**
Firmagon
leuprolide acetate (LUPRON)[1]
Leuprolide Acetate Injection Depot
Lupron Depot[2]
*Supprelin LA**
Trelstar[2]
Zoladex

IMMUNE DEFICIENCIES & RELATED DISORDERS
*Alyglo**
*Asceniv**
*Bivigam**
*Cutaquig**
*Cuvitru**
Cytogam
Flebogamma DIF
GamaSTAN S/D
Gammagard Liquid
Gammagard S/D
Gammaked
*Gammaplex**
Gamunex C
HepaGam B[5]
*Hizentra**
HyperHEP B[5]
HyperRHO S/D[5]
HyQvia
MICRhoGAM[2,5]
Nabi-HB[5]
Octaga
Panzyga
Privigen
RhoGAM[2,5]
Rhophylac[5]
Varizig[4,5]
WinRho SDF[5]
*Xembify**

IMMUNE (IDIOPATHIC) THROMBOCYTOPENIA PURPURA
*Doptelet**
Nplate
*Promacta**

INFECTIOUS DISEASE
*Actimmune**
Alferon N[4]

INFERTILITY
cetrorelix acetate
chorionic gonadotropin (NOVAREL, PREGNYL)[1]
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**
Simlandi
Skyrizi
Stelara
Tremfya IV
*Tysabri**
*Velsipity**
*Zeposia**
Zymfentra

IRON OVERLOAD
*deferasirox** *(EXJADE*/JADENU*)*[1]
deferoxamine (DESFERAL)[1]

LYSOSOMAL STORAGE DISORDERS
*Aldurazyme**
*Cerdelga**
*Cerezyme**
*Cystagon**
*Elaprase**
*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**
edaravone (RADICAVA†)*
*Ingrezza**
*Ingrezza Sprinkle**
*Nuplazid**
*Radicava ORS**
tetrabenazine (XENAXINE)*[1]
*Vyalev**

MULTIPLE SCLEROSIS
*Acthar**
*Ampyra**
Avonex[2]
Betaseron
*Briumvi**
*Cortrophin**
dimethyl fumarate
fingolimod (GILENYA)*
glatiramer acetate (COPAXONE, glatopa)[1]
*Kesimta**
*Lemtrada**
*Mavenclad**
*Mayzent**
*Ocrevus**
*Ocrevus Zunovo**
*Plegridy**
Rebif[2]
teriflunomide (AUBAGIO)*
*Tysabri**
*Vumerity**
*Zeposia**

MUSCULAR DYSTROPHY
deflazacort

NEUROMUSCULAR
*Rystiggo**
*Soliris**
*Ultomiris**
*Vyvgart**
*Vyvgart Hytrulo**

NEUTROPENIA
Granix
*Fylnetra**
Leukine
Neulasta
Nivestym
Nyvepria
Releuko
*Rolvedon**
*Stimufend**
Udenyca

ONCOLOGY – INJECTABLE[3]
Adcetris[*4]*
*Alymsys**
Avastin[4]
azacitidine (VIDAZA)[1,4]
*Beleodaq**
*Belrapzo**
bendamustine (BENDEKA)*
bendamustine lyophilized (TREANDA[4])*
*Besponsa**
Bortezomib[4]
*Columvi**
*Cyramza**
*Darzalex**
*Darzalex Faspro**
decitabine
*Empliciti**
Enhertu
Erbitux[4]
eribulin (HALAVEN[4])*
Evomela[*,5]*
Gazyva[*4]*
Herceptin[4]
Herceptin Hylecta[4]
Herzuma
*Imdelltra**
*Imfinzi**
*Imjudo**
Istodax[*4]*
Ixempra[4]
*Jemperli**
Jevtana[4]
Kadcyla[4]
*Kanjinti**
*Keytruda**
Khapzory[*4]*
*Kyprolis**
Levoleucovorin[4]
*Loqtorzi**
*Lunsumio**
*Margenza**
Mitoxantrone[4,5]
*Mvasi**
*Mylotarg**
*Ogivri**
Oncaspar[*4]*
*Onivyde**
*Ontruzant**
*Opdualag**
*Opdivo**
*Padcev**
Perjeta[*4]*
*Phesgo**
*Polivy**
*Poteligeo**
pralatrexate (FOLOTYN[4])*
Proleukin[4]
*Riabni**
Rituxan[4]
*Rituxan Hycela**
Romidepsin[4]
Ruxience
*Rybrevant**
*Rylaze**
*Sarclisa**
Sylatron[4]
*Sylvant**
*Tecentriq**
*Tecentriq Hybreza**
Temodar[4]
Temsirolimus (TORISEL)[4]
Tepadina[5]
Thyrogen[*,5]*
*Tivdak**
Trazimera

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*Truxima**
valrubicin [4,5]
*Vectibix**[4]
*Vegzelma**
Velcade[4]
*Vivimusta**
*Vyxeos**,[5]
Xgeva
Yervoy[4]
*Yondelis**,[5]
*Zaltrap**,[4]
*Zepzelca**
*Zirabev**
zoledronic acid[1]
Zynyz

ONCOLOGY – ORAL/TOPICAL

*Alecensa**
*Augtyro**
*Balversa**
bexarotene (TARGRETIN) 1
Bosulif
*Braftovi**
*Cabometyx**
capecitabine (XELODA) 1
*Cometriq**
*Copiktra**
*Cotellic**
dasatinib (SPRYCEL)
*Daurismo**
*Erivedge**
*Erleada**
*erlotinib hydrochloride**[1]
everolimus (AFINITOR)[2]
gefitinib (IRESSA)*
*Gleostine**,[5]
*Hycamtin**
*Ibrance**
*IDHIFA**
imatinib mesylate[1]
*Inlyta**
*Inqovi**
*Inrebic**
*Itovebi**
*Jakafi**
*Jaypirca**
Kisqali
lapatinib (TYKERB)*
lenalidomide (REVLIMID)**
*Lenvima**
*Lonsurf**
*Lorbrena**
*Lumakras**
Lynparza
*Mekinist**
*Mektovi**
metyrosine (DEMSER)
Mugard[4]
*Nerlynx**
*Ninlaro**
Nubeqa
*Odomzo**
*Onureg**
pazopanib (VOTRIENT)*
*Pomalyst**
*Purixan**
*Retevmo**
*Rozlytrek**
*Rubraca**
Rydapt
sorafenib (NEXAVAR)*
*Stivarga**
sunitinib (SUTENT)
Tabrecta
*Tafinlar**
*Tagrisso**
*Talzenna**
Tasigna
temozolmide
Thalomid
*Verzenio**
*Vitrakvi**
*Vizimpro**
*Xalkori**
*Xospata**
*Xtandi**
*Yonsa**
*Zejula**
*Zelboraf**
Zolinz
*Zydelig**
*Zykadia**
*Zytiga 250 mg**

PAROXYSMAL NOCTURNAL HEMOGLOBINURIA

*Soliris**
*Piasky**
*Ultomiris**

PHENYLKETONURIA

*Palynziq**
sapropterin dihydrochloride (KUVAN)*[1]

PSORIASIS

adalimumab-adaz
*Avsola**
*Bimzelx**
*Cosentyx**
Enbrel
Hadlima
Humira
Hyrimoz (Cordavis)
*Inflectra**
*Infliximab**
Otezla
Otrexup
Rasuvo
*Reditrex**
Remicade
*Renflexis**
Skyrizi
Simlandi
Sotyktu
Stelara
Tremfya

PULMONARY ARTERIAL HYPERTENSION

*Adempas**
ambrisentan (LETAIRIS)*[1]
bosentan (TRACLEER*)*[1]
epoprostenol sodium (FLOLAN,VELETRI*)*[1]
*Opsumit**
*Opsynvi**
*Orenitram**
tadalafil (ADCIRCA)[1]
*Tadliq**
treprostinil sodium (REMODULIN*)*[1]
*Tyvaso**
*Tyvaso DPI**
*Uptravi**
*Ventavis**
*Winrevair**

PULMONARY DISORDERS – OTHER

*Ofev**
pirfenidone (ESBRIET)*

RARE DISORDERS – OTHER

betaine anhydrous
*Crysvita**
*Dojolvi**
*Enspryng**
*Gamifant**[†]
*nitisinone**
*Ryplazim**
*Uplizna**[†]
*Vijoice**

RENAL DISEASE

*Filspari**
*Parsabiv**
*Rivfloza**

RESPIRATORY SYNCYTIAL VIRUS

Synagis

RETINAL/OCULAR DISORDERS

*Beovu**
Byooviz
*Cimerli**
*Durysta**
*Eylea**
*Iluvien**
*Lucentis**
*Macugen**
*Ozurdex**
*Retisert**
*Susvimo**
*Tepezza**[†]
*Vabysmo**
*Visudyne**
*Xdemvy**
*Yutiq**,[5]

RHEUMATOID ARTHRITIS

adalimumab-adaz
*Actemra IV**
*Avsola**
Enbrel
Hadlima
Humira
Hyrimoz (Cordavis)
*Inflectra**
*Infliximab**
Orencia
Otrexup
Rasuvo
*Reditrex**
Remicade
*Renflexis**
*Riabni**
Simlandi
*Truxima**
Tyenne
Xeljanz

SEIZURE DISORDERS

*Epidiolex**
*Acthar**
vigabatrin powder (SABRIL POWDER)*[1]
vigabatrin tabs (SABRIL TABS)*[1]

SICKLE CELL DISEASE

Adakveo
L-glutamine (ENDARI*)*

SLEEP DISORDER

*Lumryz**
*Wakix**

SYSTEMIC LUPUS ERYTHEMATOSUS

Benlysta
*Saphnelo**

THROMBOCYTOPENIA

*Adzynma**,[†]
Alvaiz
Mulpleta

TRANSPLANT

Astagraf XL[5]
cyclosporine (gengraf, NEORAL, SANDIMMUNE)[1,5]
Envarsus XR[5]
Nulojix[5]
Prograf Injectable[5.]
Zortress[5]

UREA CYCLE DISORDERS

*Buphenyl**
*Pheburane**
*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) and do not have Specialty Quantity Limits applied.

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.