

CareFirst BlueCross BlueShield Medicare Advantage
Preferred Drug List

Medicare Part B Step Therapy
 January 2024

The CareFirst BlueCross BlueShield Medicare Advantage Preferred Drug List encourages utilization of clinically appropriate and lower net cost products within the following therapeutic drug classes. The listed preferred products must be used first before a non-preferred product can be covered. This step therapy requirement does not apply to plan members who are actively receiving treatment with listed non-preferred products.

<i>Drug Class</i>	<i>Non-Preferred Product(s)</i>	<i>Preferred Product(s)</i>
<i>Acromegaly</i>	Lanreotide	Sandostatin LAR Somatuline Depot
<i>Antimyasthenic Agents</i>	Rystiggo	Vyvgart Vyvgart Hytrulo Soliris Ultomiris
<i>Autoimmune (excluding multiple sclerosis)</i>	Actemra Orencia Entyvio Skyrizi (IV) Tysabri	Simponi Aria Cimzia Ilumya Stelara
<i>Autoimmune Infused Infliximab</i>	Remicade Ixifi Inflectra Infliximab	Avsola Renflexis
<i>Bevacizumab</i>	Avastin Vegzelma Alymys	Mvasi Zirabev
<i>Botulinum Toxins</i>	Botox Myobloc	Dysport Xeomin

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Drug Class	Non-Preferred Product(s)	Preferred Product(s)
<i>Complement inhibitors</i>	Empaveli Enspryng Uplizna	Ultomiris Soliris
<i>Hematologic, Erythropoiesis – Stimulating Agents (ESA)</i>	Epogen Mircera Procrit	Aranesp Retacrit
<i>Hematologic, Neutropenia Colony Stimulating Factors – Short Acting</i>	Granix Leukine Neupogen Releuko	Nivestym Zarxio
<i>Hematologic, Neutropenia Colony Stimulating Factors – Long Acting</i>	Neulasta (including Onpro) Fulphila Ziextenzo Rolvedon Stimufend Fynetra	Nyvepria Udenyca
<i>Hemophilia A</i>	Advate Adynovate Afstyla Esperoct Hemlibra Jivi Kogenate Kovaltry Novoeight Recombinate Roctavian Xyntha	Altuviio Eloctate Nuwiq
<i>Hemophilia B</i>	Idelvion Ixinity Rebinyn Rixubis Mononine Alphanine SD Profilnine Benefix	Alprolix

Drug Class	Non-Preferred Product(s)	Preferred Product(s)
<i>Hereditary Transthyretin Amyloidosis</i>	Tegsedi	Onpattro Amvuttra
<i>Lysosomal Storage Disorders – Gaucher Disease</i>	VPRIV Elelyso	Cerezyme
<i>Osteoarthritis, Viscosupplements</i>	Gel-one Gelsyn-3 Genvisc 850 Hyalgan Hymovis Monovisc Orthovisc Supartz fx Synojoy Synvisc Synvisc-one Triluron Trivisc Visco-3	Durolane Euflexxa
<i>Pulmonary Arterial Hypertension</i>	Remodulin	Treprostinil
<i>Retinal Disorders Agents</i>	Lucentis Susvimo Beovu	Avastin Byooviz Vabysmo Cimreli Eylea Eylea HD
<i>Rituximab</i>	Rituxan Rituxan Hycela Ruxience	Riabni Truxima
<i>Severe Asthma</i>	Xolair Cinqair Tezspire	Fasenra Nucala

<i>Drug Class</i>	Non-Preferred Product(s)	Preferred Product(s)
<i>Trastuzumab</i>	Herceptin Herceptin Hylecta Trazimera Herzuma	Kanjinti Ogivri Ontruzant