

SITE OF CARE / DRUG BENEFIT ALIGNMENT (DBA) SPECIALTY PHARMACY DRUG LIST

For Total Choice, PLUS, and Community Choice members

Effective April 1, 2024

The following drugs have been designated for coverage under the pharmacy benefit and will no longer be covered under your medical benefit.

If you are a plan member or health care provider, please contact CVS Specialty® Customer Care at 888-265-7790 or visit CVSSpecialty.com.

A <ul style="list-style-type: none"> ABRILADA ACTEMRA ACTHAR GEL ACTIMMUNE ADAKVEO ADVATE ADYNOVATE AFINITOR AFSTYLA ALDURAZYME ALPHANATE ALPHANINE SD ALPROLIX ALTUVIIIIO AMVUTTRA APOKYN ARALAST NP ARCALYST ASCENIV AVONEX AVSOLA 	C <ul style="list-style-type: none"> CEREZYME CIMZIA prefilled syringe CINQAIR CINRYZE COAGADEX COPAXONE CORIFACT CORTROPHIN CRYSVITA CUTAQUIG CUVITRU 	F <ul style="list-style-type: none"> FABRAZYME FASENRA prefilled syringe FASENRA pen FEIBA FIRAZYR FLEBOGAMMA FLOLAN FOLLISTIM AQ FORTEO FUZEON FYREMADEL 	<ul style="list-style-type: none"> HEMOFIL M HIZENTRA HUMATE-P HUMATROPE HUMIRA HYCAMTIN HYQVIA
B <ul style="list-style-type: none"> BENEFIX BENLYSTA BETASERON BETHKIS BIVIGAM BRIUMVI 	D <ul style="list-style-type: none"> DUOPA E <ul style="list-style-type: none"> ELAPRASE ELELYSO ELFABRIO ELOCTATE ENBREL ENJAYMO ENTYVIO EPOPROSTENOL SODIUM ESPEROCT EXTAVIA 	G <ul style="list-style-type: none"> GAMMAGARD LIQUID GAMMAGARD S/D GAMMAKED GAMMAPLEX GAMUNEX-C GANIRELIX ACETATE GEFITINIB GENOTROPIN GLASSIA GLATOPA GLEEVEC GONAL-F 	I <ul style="list-style-type: none"> IDACIO IDELVION INCRELEX INFLECTRA INFLIXIMAB IRESSA IXINITY
		H <ul style="list-style-type: none"> HAEGARDA HEMLIBRA 	J <ul style="list-style-type: none"> JIVI K <ul style="list-style-type: none"> KANUMA KITABIS PAK KOATE KOGENATE KOVALTRY KRYSTEXXA L <ul style="list-style-type: none"> LUMIZYME

M

- MENOPUR
- MONONINE

N

- NAGLAZYME
- NEXVIAZYME
- NORDITROPIN
- NOVAREL
- NOVOEIGHT
- NOVOSEVEN RT
- NUCALA lyophilized powder
- NUCALA prefilled syringe/autoinjector
- NUTROPIN
- NUWIQ

O

- OCREVUS
- OCTAGAM
- OMNITROPE
- ONPATTRO
- ORENCIA CLICKJET
- ORENCIA lyophilized powder
- ORENCIA prefilled syringe

P

- PANZYGA
- PEGASYS
- POMBILITI
- PREGNYL
- PRIVIGEN
- PROFILNINE SD
- PULMOZYME

R

- REBIF
- REBINYN
- RECOMBINATE
- REMICADE
- REMODULIN
- RENFLEXIS

- REVATIO
- RIXUBIS

S

- SAIZEN
- SAJAZIR
- SAPHNELO
- SEROSTIM
- SEVENFACT
- SIMPONI ARIA
- SOLIRIS
- STELARA

T

- TAKHZYRO
- TEMODAR
- TEZSPIRE PEN
- TEZSPIRE vial/prefilled syringe
- TOBI
- TREMFYA
- TRETEN
- TYSABRI
- TYVASO

U

- ULTOMIRIS

V

- VELETRI
- VENTAVIS
- VIMIZIM
- VONVENDI
- VPRIV

W

- WILATE

X

- XELODA
- XENPOZYME
- XEMBIFY
- XOLAIR lyophilized powder
- XOLAIR prefilled syringe
- XYNTHA

Z

- ZEMAIRA
- ZOMACTON
- ZORBTIVE