



NALC Health Benefit Plan Specialty Drug List

Specialty drugs may require preauthorization and may need to be obtained from CVS Specialty. Contact CVS Specialty toll-free at 1-800-237-2767 for Specialty Pharmacy service.

For Your Information: This is a summary of specialty medications for the NALC Health Benefit Plan. It does not guarantee coverage. Listed available medicines, this list may not be all inclusive and may change without notice. Dispensing Limits, Specialty Pharmacy dispensing and/or preauthorization requirements apply to all brand and generic equivalents listed below. Products distributed and therapies covered by CVS Caremark may change or expand from time to time. New-to-market products and new variations of products already in the marketplace will not be added to the formulary immediately. Each product will be evaluated for clinical appropriateness and cost effectiveness. This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Caremark.

Some medications may not be covered, or may be covered only under certain circumstances, regardless of their appearance on this document. For more information, please read the 2025 official Plan brochure, RI 71-009 (High Option, Consumer Driven Health Plan). All benefits are subject to the definitions, limitations, and exclusions set forth in the 2025 official Plan brochure.

Medications listed may be FDA (Food & Drug Administration) approved for more than one indication. Please check with your prescriber regarding specific questions for your indication.

Generic products are listed in lowercase *italics*.

Legend of symbols used in the chart below and on the following pages:

- † Prior Approval, also referred to as Specialty Guideline Management (SGM), is required through CVS Caremark when using the prescription drug benefit. Please contact CVS Specialty at 1-800-237-2767. Select medications may only be approved for certain indications.
- * Specialty medication must be obtained through CVS Specialty. Please contact CVS Specialty at 1-800-237-2767 or visit www.cvscaremarkspecialtyrx.com. Certain specialty medications may have Limited Distribution with restricted access and may not be available at CVS Specialty.
- ∞ Step Therapy for certain Advanced Control Specialty Formulary drugs is required, and the use of a specialty preferred drug must be completed before a non-preferred specialty drug will be authorized. ♦ Indications for certain Hepatitis C and Autoimmune drugs may require step therapy and the use of a specialty preferred drug must be completed before a non-preferred specialty drug will be authorized. Please contact CVS Specialty at 1-800-237-2767.
- ^ Please contact NALC Health Benefit Plan for FEHB High Option at 877-814-NALC (6252) and for FEHB CDHP at 800-594-NALC (6252) for prior authorization.

| Medication Name | Prior Approval Required (SGM)† | Medication Obtained through CVS Specialty * | Step Therapy ∞ ♦ |
|---------------------------------------|--------------------------------|---|------------------|
| <i>abacavir</i> | NO | ✓ | |
| <i>abacavir/lamivudine</i> | NO | ✓ | |
| <i>abacavir/lamivudine/zidovudine</i> | NO | ✓ | |
| <i>abiraterone</i> | YES | ✓ | |
| <i>Abirtega (abiraterone)</i> | YES | ✓ | |
| Abraxane | NO | ✓ | |
| Abrilada | YES | ✓ | |
| Actemra | YES | ✓ | ♦ |
| Acthar H.P. Gel | YES | ✓ | |
| Actimmune | YES | ✓ | |
| Adakveo | YES | ✓ | |
| Adalimumab-aacf | YES | ✓ | ♦ |
| Adalimumab-aaty | YES | ✓ | ♦ |
| Adalimumab-adaz | YES | ✓ | |
| Adalimumab-adbm | YES | ✓ | ♦ |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|-------------------------|--|---|-----------------------------|
| Adalimumab-fkjp | YES | ✓ | |
| Adalimumab-ryvk | YES | ✓ | ♦ |
| Adbry | YES | ✓ | |
| Adcetris | YES | ✓ | |
| Adcirca | YES | ✓ | ∞ |
| <i>adefovir</i> | NO | ✓ | |
| Adempas | YES | ✓ | |
| Advate | YES | ✓ | |
| Adynovate | YES | ✓ | |
| Adzynma | YES | ✓ | |
| Afinitor | YES | ✓ | ∞ |
| Afstyla | YES | ✓ | |
| Agamree | YES | | |
| Akeega | YES | | |
| Aldurazyme | YES | ✓ | |
| Alecensa | YES | ✓ | |
| Alferon-N | NO | ✓ | |
| Alhemo | YES | ✓ | |
| Aliqopa | YES | | ∞ |
| Alphanate | YES | ✓ | |
| Alphanine SD | YES | ✓ | |
| Alprolix | YES | ✓ | |
| Altuviio | YES | ✓ | |
| Alunbrig | YES | | |
| Alvaiz | YES | ✓ | |
| Alyftrek | YES | ✓ | |
| Alygo | YES | ✓ | |
| Alymsys | YES | ✓ | |
| <i>Alyq (tadalafil)</i> | YES | ✓ | |
| <i>ambrisentan</i> | YES | ✓ | |
| Amjevita | YES | ✓ | ♦ |
| Amondys 45 | YES | | |
| Ampyra | YES | ✓ | ∞ |
| Amvuttra | YES | ✓ | |
| Andembry | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|---|--|---|-----------------------------|
| Aphexda | YES | | |
| Apligraf | NO | | |
| Apokyn | YES | ✓ | ∞ |
| <i>apomorphine</i> | YES | | |
| Apretude | NO | ✓ | |
| Aptivus | NO | ✓ | ∞ |
| Aqneursa | YES | | |
| Aralast NP | YES | ✓ | ∞ |
| Aranesp | YES | ✓ | |
| Arcalyst | YES | ✓ | |
| Arikayce | YES | | |
| Arzerra | YES | | |
| Asceniv | YES | ✓ | |
| Asparlas | YES | | |
| Astagraf XL | NO | ✓ | |
| <i>atazanavir sulfate</i> | NO | ✓ | |
| Atripla (<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate</i>) | NO | ✓ | ∞ |
| Attruby | YES | | ∞ |
| Aubagio (<i>teriflunomide</i>) | YES | ✓ | ∞ |
| Augtyro | YES | | |
| Aurlumyn | NO | | |
| Austedo | YES | ✓ | ∞ |
| Austedo XR | YES | ✓ | ∞ |
| Avastin | YES | ✓ | ∞ |
| Aveed | YES | ✓ | |
| Avgemsi | NO | | |
| Avmapki | YES | | |
| Avonex | YES | ✓ | |
| Avsola | YES | ✓ | ∞ |
| Avtozma | YES | ✓ | |
| Axtle | NO | | |
| Avtozma | YES | ✓ | |
| Ayvakit | YES | | |
| <i>azacitidine</i> | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|----------------------------|--|---|-----------------------------|
| Bafiertam | YES | ✓ | |
| Balversa | YES | ✓ | |
| Baraclude | NO | ✓ | ∞ |
| Bavencio | YES | | |
| Beizray | NO | | |
| Beleodaq | YES | ✓ | |
| Belrapzo | YES | ✓ | |
| <i>bendamustine</i> | YES | ✓ | |
| Bendeka | YES | ✓ | |
| Benefix | YES | ✓ | |
| Benlysta | YES | ✓ | |
| Beovu | YES | ✓ | |
| Berinert | YES | ✓ | ∞ |
| Besponsa | YES | ✓ | |
| Besremi | YES | | |
| <i>betaine (Cystadane)</i> | YES | | |
| Betaseron | YES | ✓ | |
| Bethkis | YES | ✓ | |
| <i>bexarotene</i> | YES | ✓ | |
| Biktarvy | NO | ✓ | |
| Bildyos | YES | ✓ | |
| Bilprevda | YES | ✓ | |
| Bimzelx | YES | ✓ | ♦ |
| Bivigam | YES | ✓ | |
| Bizengri | YES | | |
| Blenrep | YES | | |
| Blincyto | YES | | |
| Bkemv | YES | ✓ | |
| Bomynta | YES | ✓ | |
| Bonsity | YES | | |
| <i>bortezomib</i> | YES | ✓ | ∞ |
| Boruzu | YES | ✓ | |
| <i>bosentan</i> | YES | ✓ | |
| Bosulif | YES | ✓ | |
| Braftovi | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|------------------------------------|--|---|-----------------------------|
| Briumvi | YES | ✓ | |
| Brixadi | YES | ✓ | |
| Bronchitol | YES | ✓ | |
| Brukinsa | YES | | |
| Buphenyl | YES | ✓ | ∞ |
| Bylvay | YES | | |
| Bynfezia | YES | ✓ | |
| Byooviz | YES | ✓ | |
| Cabenuva | YES | ✓ | |
| Cablivi | YES | | |
| Cabometyx | YES | ✓ | |
| Calquence | YES | | |
| Camcevi | YES | | |
| Camzyos | YES | ✓ | |
| <i>capecitabine</i> | YES | ✓ | |
| Caprelsa | YES | | |
| Carbaglu (<i>carglumic acid</i>) | YES | | |
| <i>carglumic acid</i> (Carbaglu) | YES | ✓ | |
| Cayston | YES | ✓ | |
| CellCept | NO | ✓ | |
| Ceprotrin | NO | ✓ | |
| Cerdelga | YES | ✓ | |
| Cerezyme | YES | ✓ | |
| <i>cetrotidex</i> (Cetrotide) | YES | ✓ | |
| Cetrotide (<i>cetrotidex</i>) | YES | ✓ | |
| Chenodal | YES | | |
| Cholbam | YES | | |
| Chorionic Gonadotropin | YES | ✓ | ∞ |
| Cibinqo | YES | ✓ | |
| Cimerli | YES | ✓ | |
| Cimduo | NO | ✓ | |
| Cimzia | YES | ✓ | ♦ |
| <i>cinacalcet</i> | YES | ✓ | |
| Cinqair | YES | ✓ | |
| Cinryze | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|------------------------------------|--|---|-----------------------------|
| Clovique (<i>trientine</i>) | NO | ✓ | |
| Coagadex | YES | ✓ | |
| Combivir | NO | ✓ | |
| Columvi | YES | ✓ | |
| Cometriq | YES | ✓ | |
| Complera | NO | ✓ | ∞ |
| Conexence | YES | ✓ | |
| Copaxone 20mg | YES | ✓ | ∞ |
| Copaxone 40mg | YES | ✓ | ∞ |
| Copiktra | YES | ✓ | |
| Corifact | YES | ✓ | |
| Cortrophin gel | YES | ✓ | |
| Cosela | YES | | |
| Cosentyx IV | YES | | ♦ |
| Cosentyx SUB-Q | YES | ✓ | ♦ |
| Cotellic | YES | ✓ | |
| Crenessity | NO | | |
| Crixivan | NO | ✓ | |
| Crysvita | YES | ✓ | |
| Ctexli | YES | | |
| Cuprimine (<i>penicillamine</i>) | NO | ✓ | ∞ |
| Cutaquig | YES | (Coram has access) | |
| Cuvrior | NO | | |
| Cuvitru | YES | ✓ | ∞ |
| <i>cyclosporine</i> | NO | ✓ | |
| Cyltezo | YES | ✓ | ♦ |
| Cyramza | YES | ✓ | |
| Cystadane (<i>betaine</i>) | YES | | |
| Cystadrops | YES | | |
| Cystagon | YES | ✓ | |
| Cystaran | YES | | |
| Cytogam | NO | ✓ | |
| D-Penamime | NO | ✓ | |
| Dacogen | YES | ✓ | |
| <i>dalfampridine/ ER</i> | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) [†] | Medication Obtained through CVS Specialty * | Step Therapy [∞] [♦] |
|--|--|---|--|
| Danyelza | YES | | |
| Danziten | YES | | |
| <i>darunavir</i> (Prezista) | NO | ✓ | |
| Darzalex | YES | ✓ | |
| Darzalex Faspro | YES | ✓ | |
| <i>dasatinib</i> (Sprycel) | YES | ✓ | |
| Datroway | YES | ✓ | |
| Daurismo | YES | ✓ | |
| Dawnzera | YES | | |
| Daybue | YES | | |
| <i>decitabine</i> | YES | ✓ | |
| <i>deferasirox</i> | YES | ✓ | |
| <i>deferasirox granules 90mg & 180mg</i> | YES | ✓ | |
| <i>deferiprone</i> (Ferriprox) | YES | ✓ | |
| <i>deferoxamine</i> | YES | ✓ | |
| <i>deflazacort</i> (Emflaza) | YES | ✓ | |
| Delstrigo | NO | ✓ | |
| Demser (<i>metyrosine</i>) | YES | ✓ | ∞ |
| Depen Titratat (<i>penicillamine</i>) | NO | ✓ | |
| Descovy | NO | ✓ | |
| Desferal | YES | ✓ | ∞ |
| Diacomit | NO | | |
| <i>dichlorphenamide</i> | YES | ✓ | |
| <i>didanosine</i> | NO | ✓ | |
| <i>dimethyl fumarate 120mg & 240mg</i> | YES | ✓ | |
| <i>dofetilide</i> | YES | | |
| Dojolvi | YES | ✓ | |
| Doptelet | YES | ✓ | |
| Dovato | NO | ✓ | |
| <i>droxidopa</i> (Northera) | YES | ✓ | |
| Duopa | YES | ✓ | |
| Dupixent | YES | ✓ | |
| Duvyzat | YES | | |
| Ebglyss | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) [†] | Medication Obtained through CVS Specialty * | Step Therapy [∞] [♦] |
|---|--|---|--|
| edaravone (Radivaca) | YES | ✓ | |
| Edurant | NO | ✓ | |
| efavirenz | NO | ✓ | |
| efavirenz/emtricitabine/tenofovir disoproxil fumarate (Atripla) | NO | ✓ | |
| efavirenz/lamivudine/tenofovir disoproxil fumarate (Symfi & Symfi Lo) | NO | ✓ | |
| Egrifta | YES | ✓ | |
| Egrifta WR | YES | ✓ | |
| Ekterly | YES | ✓ | |
| Elahere | YES | | |
| Elaprase | YES | ✓ | |
| Elelyso | YES | ✓ | ∞ |
| Elfabrio | YES | ✓ | |
| Eligard | YES | ✓ | |
| Eloctate | YES | ✓ | |
| Elrexio | YES | | |
| eltrombopag (Promacta) | YES | ✓ | |
| Emflaza (deflazacort) | YES | | ∞ |
| Empaveli | YES | | |
| Empliciti | YES | ✓ | |
| Emrelis | YES | | |
| emtricitabine capsules (Emtriva) | NO | ✓ | |
| emtricitabine/tenofovir disoproxil fumarate 200/300mg (Truvada) | NO | ✓ | |
| Emtriva (emtricitabine) | NO | ✓ | |
| Enbrel/ Mini | YES | ✓ | ♦ |
| Endari | YES | ✓ | |
| Enhertu | YES | ✓ | |
| Enjaymo | YES | ✓ | |
| Ensacove | YES | | |
| entecavir | NO | ✓ | |
| Enspryng | YES | ✓ | |
| Entyvio | YES | ✓ | ♦ |
| Envarsus XR | NO | ✓ | |
| Epclusa (sofosbuvir/velpatasvir) | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) [†] | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|------------------------------------|--|---|-----------------------------|
| Epivir | NO | ✓ | |
| Epivir HBV Solution | NO | ✓ | |
| Epkinly | YES | | |
| Epogen | YES | ✓ | ∞ |
| <i>epoprostenol sodium</i> | YES | ✓ | |
| Epidiolex [^] | YES | ✓ | |
| Epysqli | YES | ✓ | |
| Epzicom | NO | ✓ | |
| Erbitux | YES | ✓ | |
| <i>eribulin mesylate (Halaven)</i> | YES | ✓ | |
| Erivedge | YES | ✓ | |
| Erleada | YES | ✓ | |
| <i>erlotinib</i> | YES | ✓ | |
| Erwinase | YES | ✓ | |
| Esbriet (<i>pirfenidone</i>) | YES | ✓ | ∞ |
| Esperoct | YES | ✓ | |
| <i>etravirine (Intelence)</i> | NO | ✓ | |
| Evenity | YES | ✓ | |
| <i>everolimus (Afinitor)</i> | YES | ✓ | |
| <i>everolimus (Zortress)</i> | NO | ✓ | |
| Evkeeza | YES | | |
| Evomela | NO | ✓ | |
| Evotaz | NO | ✓ | |
| Evrysdi | YES | | |
| Exjade | YES | ✓ | ∞ |
| Exkivity | YES | | |
| Exondys 51 | YES | | |
| Extavia | YES | ✓ | ∞ |
| Eylea/HD | YES | ✓ | |
| Fabhalta | YES | | |
| Fabrazyme | YES | ✓ | |
| Farydak | YES | ✓ | |
| Fasenra | YES | ✓ | |
| Faslodex | YES | | |
| Feiba | YES | ✓ | ∞ |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] [♦] |
|------------------------------------|--|---|--|
| Fensolvi | YES | ✓ | |
| Ferriprox (<i>deferiprone</i>) | YES | | ∞ |
| Fibryga | YES | ✓ | |
| Filspari | YES | ✓ | |
| Filsuvez | NO | | |
| <i> fingolimod 0.5mg</i> (Gilenya) | YES | ✓ | |
| Fintepla | YES | | |
| Firazyr | YES | ✓ | ∞ |
| Firdapse | YES | | |
| Firmagon | YES | ✓ | |
| Flebogamma DIF | YES | ✓ | |
| Flolan | YES | ✓ | |
| Follistim AQ | YES | ✓ | ∞ |
| Folotyn | YES | ✓ | |
| Forteo | YES | ✓ | ∞ |
| Forzinity | YES | | |
| Fotivda | YES | | |
| <i> fosamprenavir</i> | NO | ✓ | |
| Frindovyx | NO | | |
| Fruzaqla | YES | | |
| Fulphila | YES | ✓ | ∞ |
| <i> fulvestrant</i> | YES | | |
| Fuzeon | YES | ✓ | |
| Fyarro | YES | | |
| Fylnetra | YES | ✓ | |
| Fyremadel | YES | ✓ | ∞ |
| Galafold | YES | | |
| Gamastan S/D | YES | ✓ | |
| Gammagard Liquid | YES | ✓ | ∞ |
| Gammagard S/D | YES | ✓ | ∞ |
| Gammaked | YES | ✓ | |
| Gammaplex | YES | ✓ | |
| Gamunex | YES | ✓ | |
| Gamunex-C | YES | ✓ | |
| <i> ganirelix</i> | YES | ✓ | ∞ |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|--|--|---|-----------------------------|
| Ganirelix | YES | ✓ | |
| Gattex | YES | ✓ | |
| Gavreto | YES | | |
| Gazyva | YES | ✓ | |
| <i>gefitinib (Iressa)</i> | YES | ✓ | |
| Gengraf | NO | ✓ | |
| Genotropin | YES | ✓ | ∞ |
| Genvoya | NO | ✓ | |
| Gilenya | YES | ✓ | ∞ |
| Gilotrif | YES | | |
| Givlaari | YES | ✓ (Effective December 1, 2025) | |
| Glassia | YES | ✓ | ∞ |
| <i>glatiramer acetate</i> | YES | ✓ | |
| Glatopa | YES | ✓ | |
| Gleevec | YES | ✓ | ∞ |
| Gleostine | NO | ✓ | |
| <i>glycerol phenylbutyrate (Ravicti)</i> | YES | ✓ | |
| Gomekli | YES | | |
| Gonal-F | YES | ✓ | |
| Grafapex | NO | | |
| Granix | YES | ✓ | ∞ |
| Hadlima | YES | ✓ | ♦ |
| Haegarda | YES | ✓ | |
| Halaven (<i>eribulin mesylate</i>) | YES | ✓ | ∞ |
| Harliku | YES | | |
| Harvoni (<i>ledipasvir/sofosbuvir</i>) | YES | ✓ | ♦ |
| Hemlibra | YES | ✓ | |
| Hemofil M | YES | ✓ | |
| HepaGam B | NO | ✓ | |
| Herceptin | YES | ✓ | ∞ |
| Herceptin Hylecta | YES | ✓ | ∞ |
| Hercessi | YES | ✓ | |
| Hernexeos | YES | | |
| Herzuma | YES | ✓ | |
| Hetlioz (<i>tasimelteon</i>) | YES | | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|-------------------------------------|--|---|-----------------------------|
| Hizentra | YES | ✓ | |
| H.P. Acthar Gel | YES | ✓ | |
| Humate-P | YES | ✓ | |
| Humatrope | YES | ✓ | |
| Hulio | YES | ✓ | ♦ |
| Humira | YES | ✓ | ♦ |
| Hycamtin | YES | ✓ | |
| <i>hydroxyprogesterone caproate</i> | YES | ✓ | |
| Hypavzi | YES | ✓ | |
| HyperHep B | NO | ✓ | |
| HyperRho S/D | NO | ✓ | |
| Hyrimoz | YES | ✓ | |
| HyQvia | YES | ✓ | ∞ |
| Ibrance | YES | ✓ | |
| Ibuprofen | YES | | |
| <i>icatibant</i> | YES | ✓ | |
| Iclusig | YES | | ∞ |
| Idacio | YES | ✓ | ♦ |
| Idelvion | YES | ✓ | |
| Idhifa | YES | ✓ | |
| Ilaris | YES | ✓ | |
| Ilumya | YES | ✓ | ∞ |
| Iluvien | NO | ✓ | |
| Imaavy | YES | ✓ | |
| imatinib | YES | ✓ | |
| Imbruvica | YES | | |
| Imcivree | YES | | |
| Imdelltra | YES | ✓ | |
| Imfinzi | YES | ✓ | |
| Imjudo | YES | ✓ | |
| Imkeldi | YES | ✓ | |
| Imlygic | YES | | |
| Imuldosa | YES | | |
| Inbrija | YES | | |
| Increlex | YES | | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] [♦] |
|------------------------|--|---|--|
| Inflectra | YES | ✓ | ∞ |
| Infugem | NO | | |
| Ingrezza | YES | ✓ | |
| Inluriyo | YES | | |
| Inlyta | YES | ✓ | |
| Inqovi | YES | ✓ | |
| Inrebic | YES | ✓ | |
| Intelence (etravirine) | NO | ✓ | |
| Iqirvo | YES | ✓ | |
| Iressa (gefitinib) | YES | ✓ | ∞ |
| Isentress | NO | ✓ | |
| Istodax | YES | ✓ | |
| Isturisa | YES | | |
| Itovebi | YES | ✓ | |
| Ivra | YES | ✓ | |
| Iwilfin | YES | | |
| Ixempra | YES | ✓ | |
| Ixinity | YES | ✓ | |
| Izervay | YES | | |
| Jadenu | YES | ✓ | ∞ |
| Jakafi | YES | ✓ | |
| Jascayd | YES | ✓ | |
| Javygtor (sapropterin) | YES | | |
| Jaypirca | YES | | |
| Jaythari (deflazacort) | YES | | |
| Jemperli | YES | ✓ | |
| Jesduvroq | YES | | |
| Jevtana | YES | ✓ | |
| Jivi | YES | ✓ | |
| Jobevne | YES | ✓ | |
| Joenja | YES | | |
| Jubbonti | YES | ✓ | |
| Juluca | NO | ✓ | |
| Juxtapid | YES | | |
| Jynarque | YES | | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] [◆] |
|------------------------------|--|---|--|
| Kadcyla | YES | ✓ | |
| Kalbitor | YES | ✓ | |
| Kaletra | NO | ✓ | |
| Kalydeco | YES | ✓ | |
| Kanjinti | YES | ✓ | |
| Kanuma | YES | ✓ | |
| Kesimpta | YES | ✓ | |
| Keveyis | YES | | ∞ |
| Kevzara | YES | ✓ | |
| Keytruda/Qlex | YES | ✓ | |
| Khapzory | YES | ✓ | |
| Kimmtrak | YES | | |
| Kineret | YES | | ◆ |
| Kisqali | YES | ✓ | |
| Kisqali Femara | YES | ✓ | |
| Kitabis Pak | YES | ✓ | |
| Koate-DVI | YES | ✓ | |
| Kogenate FS | YES | ✓ | |
| Korlym | YES | | ∞ |
| Koselugo | YES | | |
| Kovaltry | YES | ✓ | |
| Krazati | YES | | |
| Krystexxa | YES | ✓ | |
| Kuvan (<i>sapropterin</i>) | YES | ✓ | ∞ |
| Kynmobi | YES | ✓ | |
| Kyprolis | YES | ✓ | ∞ |
| Kyxata | NO | | |
| <i>l</i> -glutamine (Endari) | YES | ✓ | |
| Lamzedo | YES | | |
| <i>lamivudine</i> | NO | ✓ | |
| <i>lamivudine/zidovudine</i> | NO | ✓ | |
| Lanreotide | YES | ✓ | |
| <i>lapatinib</i> (Tykerb) | YES | ✓ | |
| Lazcluze | YES | | |
| <i>ledipasvir/sofosbuvir</i> | YES | ✓ | ∞ |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] [♦] |
|--------------------------------|--|---|--|
| Lemtrada | YES | ✓ | |
| <i>lenalidomide</i> (Revlimid) | YES | ✓ | |
| Lenvima | YES | ✓ | |
| Leqselvi | YES | ✓ | |
| Letairis | YES | ✓ | ∞ |
| Leukine | YES | ✓ | |
| <i>leuprolide acetate</i> | YES | ✓ | |
| <i>levoleucovorin calcium</i> | YES | ✓ | |
| Lexiva | NO | ✓ | ∞ |
| Libtayo | YES | | |
| Liqrev | YES | ✓ | |
| Litfulo | YES | ✓ | |
| Livdelzi | YES | | |
| Livmarli | YES | | |
| Livtency | NO | | |
| Lonsurf | YES | ✓ | |
| <i>lopinavir/ritonavir</i> | NO | ✓ | |
| Loqtorzi | YES | ✓ | |
| Lorbrena | YES | ✓ | |
| Lucentis | YES | ✓ | |
| Lumakras | YES | ✓ | |
| Lumizyme | YES | ✓ | |
| Lumoxiti | YES | ✓ | |
| Lumryz | YES | ✓ | |
| Lunsumio | YES | ✓ | |
| Lupaneta Pack | YES | ✓ | |
| Lupkynis | YES | | |
| Lupron Depot | YES | ✓ | ∞ |
| Lupron Depot-PED | YES | ✓ | |
| Lynozytic | YES | | |
| Lynparza | YES | ✓ | |
| Lysodren | NO | | |
| Lytgobi | YES | | |
| Macugen | YES | ✓ | |
| <i>maraviroc</i> | NO | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) [†] | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|-------------------------------|--|---|-----------------------------|
| Margenza | YES | ✓ | |
| Matulane | NO | | |
| Mavenclad | YES | ✓ | |
| Mavyret | YES | ✓ | ♦ |
| Mayzent | YES | ✓ | |
| Mekinist | YES | ✓ | |
| Mektovi | YES | ✓ | |
| Menopur | YES | ✓ | |
| Mepsevii | YES | | |
| <i>metyrosine</i> (Demser) | YES | ✓ | |
| MicRhogam | NO | ✓ | |
| <i>mifepristone</i> (Korlym) | YES | | |
| <i>miglustat</i> | YES | ✓ | |
| Miplyffa | YES | | |
| Mircera | YES | | |
| <i>mitoxantrone</i> | YES | ✓ | |
| Modeyso | YES | | |
| Monjuvi | YES | | |
| Mononine | YES | ✓ | |
| Mozobil (<i>plerixafor</i>) | YES | ✓ | ∞ |
| MuGard | NO | | |
| Mulpleta | YES | ✓ | |
| Mvasi | YES | ✓ | |
| Myalept | YES | | |
| Mycapssa | YES | | |
| <i>mycophenolate mofetil</i> | NO | ✓ | |
| <i>mycophenolic acid</i> | NO | ✓ | |
| Myfortic | NO | ✓ | |
| Mylotarg | YES | ✓ | |
| Nabi HB | NO | ✓ | |
| Naglzyme | YES | ✓ | |
| Natpara | YES | ✓ | |
| Nemluvio | YES | ✓ | |
| Neoral | NO | ✓ | |
| Nerlynx | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) [†] | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|------------------------------------|--|---|-------------------------------|
| Neulasta | YES | ✓ | ∞ |
| Neupogen | YES | ✓ | ∞ |
| nevirapine/ER | NO | ✓ | |
| Nexavar (<i>sorafenib</i>) | YES | ✓ | |
| Nexvazyme | YES | ✓ | |
| Ngenla | YES | ✓ | |
| Niktimvo | YES | ✓ | |
| nilotinib | YES | ✓ | |
| Ninlaro | YES | ✓ | |
| nitisinone capsules | YES | ✓ | |
| Nityr | YES | | |
| Nivestym | YES | ✓ | |
| Norditropin | YES | ✓ | |
| Northera (<i>droxidopa</i>) | YES | ✓ | ∞ |
| Norvir | NO | ✓ | |
| Novarel | YES | ✓ | ∞ |
| Novoeight | YES | ✓ | |
| Novoseven RT | YES | ✓ | |
| Nplate | YES | ✓ | |
| Nubeqa | YES | ✓ | |
| Nucala (except lyophilized powder) | YES | ✓ | ∞ (Effective January 1, 2026) |
| Nucala lyophilized powder | YES | ✓ | |
| Nulibry | YES | | |
| Nulojix | NO | ✓ | |
| Nuplazid | YES | ✓ | |
| Nutropin | YES | ✓ | ∞ |
| Nutropin AQ | YES | ✓ | ∞ |
| Nuwiq | YES | ✓ | |
| Nypozi | YES | ✓ | |
| Nyvepria | YES | ✓ | |
| Obizur | YES | ✓ | |
| Ocaliva | YES | ✓ | ∞ |
| Ocrevus/Zunovo | YES | ✓ | |
| Octagam | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) [†] | Medication Obtained through CVS Specialty * | Step Therapy [∞] [♦] |
|-------------------------------|--|---|--|
| <i>octreotide acetate</i> | YES | ✓ | |
| Odefsey | NO | ✓ | |
| Odomzo | YES | ✓ | |
| Ofev | YES | ✓ | |
| Ogier | YES | ✓ | |
| Ogsiveo | YES | | |
| Ojemda | YES | | |
| Ojjaara | YES | | |
| Olpruva | YES | | |
| Olumiant | YES | ✓ | |
| Omnitrope | YES | ✓ | ∞ |
| Omvoh | YES | ✓ | |
| Onapgo | YES | ✓ | |
| Oncaspar | YES | | |
| Opdivo/Qvantig | YES | ✓ | |
| Opdualag | YES | ✓ | |
| Onivyde | NO | ✓ | |
| Onpattro | YES | ✓ | |
| Ontruzant | YES | ✓ | |
| Onureg | YES | ✓ | |
| Opfolda | YES | ✓ | |
| Opsumit | YES | ✓ | |
| Opsynvi | YES | ✓ | |
| Orencia | YES | ✓ | ♦ |
| Orenitram | YES | ✓ | ∞ (Effective January 1, 2026) |
| Orfadin (<i>nitisinone</i>) | YES | | |
| Orgovyx | YES | | |
| Orkambi | YES | ✓ | |
| Orladeyo | YES | | |
| <i>Ormalvi</i> | YES | | |
| Orserdu | YES | | |
| Osenvelt | YES | ✓ | |
| Ospomyv | YES | ✓ | |
| Otezla/XR | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) [†] | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|--|--|---|-----------------------------|
| Otrexup | YES | ✓ | ∞ |
| Otufi | YES | ✓ | |
| Oxervate | YES | | |
| Oxlumo | YES | ✓ (Effective December 1, 2025) | |
| Ozurdex | NO | ✓ | |
| Padcev | YES | ✓ | |
| Palsonify | YES | | |
| Palynziq | YES | ✓ | |
| Panzyga | YES | ✓ | |
| Parsabiv | YES | ✓ | |
| <i>pazopanib</i> (Votrient) | YES | ✓ | |
| Pavblu | YES | ✓ | |
| Pedmark | NO | | |
| Pegasys | YES | ✓ | ∞ |
| Peg-Intron | YES | ✓ | |
| Pemfexy | NO | | |
| Pemazyre | YES | | |
| Pemrydi RTU | YES | | |
| <i>penicillamine</i> (Cuprimine, Depen Titratab) | NO | ✓ | |
| Perjeta | YES | ✓ | |
| <i>phenylbutyrate sodium</i> | YES | ✓ | |
| Pheburane | YES | ✓ | |
| Phesgo | YES | ✓ | |
| Phyrago | YES | | |
| PiaSky | YES | ✓ | |
| Pifeltro | NO | ✓ | |
| Piqray | YES | | |
| <i>pirfenidone</i> (Esbriet) | YES | ✓ | |
| Plegridy | YES | ✓ | |
| <i>plerixafor</i> (Mozobil) | YES | ✓ | |
| Polivy | YES | ✓ | |
| Pomalyst | YES | ✓ | |
| Pombiliti | YES | ✓ | |
| Ponvory | YES | ✓ | |
| Poteligeo | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) [†] | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|--|--|---|-------------------------------|
| Portrazza | YES | ✓ | |
| <i>pralatrexate</i> | YES | ✓ | |
| Pregnyl | YES | ✓ | ∞ |
| Prezcobix | NO | ✓ | |
| Prezista | NO | ✓ | |
| Prialt | NO | | |
| Privigen | YES | ✓ | |
| Procrit | YES | ✓ | ∞ |
| Procysbi | YES | | ∞ |
| Profilnine SD | YES | ✓ | |
| Prograf | NO | ✓ | |
| Prolastin | YES | | |
| Prolastin-C | YES | | ∞ (Effective January 1, 2026) |
| Proleukin | YES | ✓ | |
| Prolia | YES | ✓ | |
| Promacta | YES | ✓ | ∞ |
| Provenge | NO | | |
| Pulmozyme | YES | ✓ | |
| Purixan | YES | ✓ | |
| Pyrukynd | YES | | |
| Pyzchiva | YES | ✓ | |
| Qfitlia | YES | | |
| Qinlock | YES | | |
| Qutenza | NO | | |
| Radicava (<i>edaravone</i>) | YES | ✓ | ∞ |
| Radicava ORS | YES | ✓ | |
| Rapamune | NO | ✓ | |
| Rasuvo | YES | ✓ | ∞ |
| Ravicti (<i>glycerol phenylbutyrate</i>) | YES | ✓ | ∞ |
| Rebetol | YES | ✓ | |
| Rebif | YES | ✓ | |
| Rebinyn | YES | ✓ | |
| Reblozyl | YES | ✓ | |
| Rebyota | YES | | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM)† | Medication Obtained through CVS Specialty * | Step Therapy ∞ ♦ |
|----------------------------------|--------------------------------|---|-------------------------------|
| Reclast | YES | ✓ | |
| Recombinate | YES | ✓ | |
| Recorlev | YES | | |
| RediTrex | YES | ✓ | |
| Releuko | YES | ✓ | |
| Relyvrio | YES | ✓ | |
| Remicade | YES | ✓ | |
| Remodulin | YES | ✓ | ∞ |
| Renflexis | YES | ✓ | ∞ |
| Rescriptor | NO | ✓ | |
| Retacrit | YES | ✓ | |
| Retevmo | YES | ✓ | |
| Retisert | NO | ✓ | |
| Retrovir | NO | ✓ | |
| Revatio | YES | ✓ | ∞ |
| Revcovi | NO | | |
| Revlimid (<i>lenalidomide</i>) | YES | ✓ | ∞ (Effective January 1, 2026) |
| Revuforj | YES | | |
| Reyataz | NO | ✓ | |
| Rezlidhia | YES | | |
| Rezurock | YES | | |
| Rhogam | NO | ✓ | |
| Rhophylac | NO | ✓ | |
| Riabni | YES | ✓ | ∞ |
| RiaSTAP | YES | ✓ | |
| <i>ribavirin</i> | NO | ✓ | |
| Rinvoq | YES | ✓ | |
| <i>ritonavir</i> | NO | ✓ | |
| Rituxan Hycela | YES | ✓ | |
| Rituxan | YES | ✓ | ∞ |
| Rivfloza | YES | ✓ | |
| Rixubis | YES | ✓ | |
| Rolvedon | YES | ✓ | |
| <i>romidepsin</i> | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|----------------------------|--|---|-----------------------------|
| Romvimza | YES | | |
| Rozlytrek | YES | ✓ | |
| Rubraca | YES | ✓ | ∞ |
| Ruconest | YES | ✓ | |
| Rukobia | NO | ✓ | |
| Ruxience | YES | ✓ | |
| Rybrevant | YES | ✓ | |
| Rystiggo | YES | ✓ | |
| Rydapt | YES | ✓ | |
| Rylaze | YES | ✓ | |
| Ryplazim | YES | ✓ | |
| Rytelo | YES | | |
| Ryzneuta | YES | ✓ | |
| Sabril | YES | ✓ | ∞ |
| Saizen | YES | ✓ | ∞ |
| <i>Sajazir (icatibant)</i> | YES | | |
| <i>Samsca (tolvaptan)</i> | YES | ✓ | ∞ |
| Sandimmune | NO | ✓ | |
| Sandostatin | YES | ✓ | |
| Sandostatin LAR | YES | ✓ | ∞ |
| Saphnelo | YES | ✓ | |
| <i>sapropterin (Kuvan)</i> | YES | ✓ | |
| Sarclisa | YES | ✓ | |
| Scemblix | YES | | |
| Selarsdi | YES | ✓ | |
| Selzentry | NO | ✓ | |
| Sensipar | YES | ✓ | |
| Sephience | YES | | |
| Serostim | YES | ✓ | |
| Sevenfact | YES | ✓ | |
| Signifor | YES | | |
| Signifor LAR | YES | | ∞ |
| <i>sildenafil 20mg</i> | YES | ✓ | |
| Siliq | YES | ✓ | |
| Simlandi | YES | ✓ | ♦ |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|-------------------------------|--|---|-----------------------------|
| Simponi | YES | ✓ | ♦ |
| Simponi Aria | YES | ✓ | ♦ |
| <i>sirolimus</i> | NO | ✓ | |
| Skyclarys | YES | | |
| Skyrizi | YES | ✓ | |
| Skytrofa | YES | ✓ | |
| <i>sodium oxybate</i> | YES | | |
| <i>sodium phenylbutyrate</i> | YES | ✓ | |
| <i>sofosbuvir/velpatasvir</i> | YES | ✓ | ∞ |
| Sogroya | YES | ✓ | |
| Sohonos | YES | ✓ | |
| Solesta | NO | ✓ | |
| Soliris | YES | ✓ | |
| Somatuline Depot | YES | ✓ | |
| Somavert | YES | ✓ | ∞ |
| <i>sorafenib (Nexavar)</i> | YES | ✓ | |
| Sotyktu | YES | ✓ | |
| Sovaldi | YES | ✓ | ♦ |
| Spevigo | YES | | |
| Sprycel (<i>dasatinib</i>) | YES | ✓ | ∞ |
| <i>stavudine</i> | NO | ✓ | |
| Steqeyma | YES | ✓ | |
| Stelara | YES | ✓ | ♦ |
| Stimate | YES | ✓ | |
| Stimufend | YES | ✓ | |
| Stivarga | YES | ✓ | |
| Stoboclo | YES | ✓ | |
| Strensiq | YES | | |
| Stribild | NO | ✓ | ∞ |
| Strontium SR-89 | NO | | |
| Sucraid | NO | | |
| <i>sunitinib (Sutent)</i> | YES | ✓ | |
| Sunlenca | YES | ✓ | |
| Supprelin LA | YES | ✓ | |
| Sustiva | NO | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) [†] | Medication Obtained through CVS Specialty * | Step Therapy [∞] [♦] |
|--|--|---|--|
| Sutent (<i>sunitinib</i>) | YES | ✓ | ∞ |
| Susvimo | YES | ✓ | |
| Syfovre | YES | | |
| Sylvant | YES | ✓ | |
| Symdeko | YES | ✓ | |
| Symfi/Lo (<i>efavirenz/lamivudine/tenofovir disoproxil fumarate</i>) | NO | ✓ | |
| Symtuza | NO | ✓ | |
| Synagis | YES | ✓ | |
| Syprine (<i>trientine</i>) | NO | ✓ | ∞ |
| Tabrecta | YES | ✓ | |
| <i>tacrolimus</i> | NO | ✓ | |
| <i>tadalafil 20mg (Adcirca 20mg)</i> | YES | ✓ | |
| Tadliq | YES | ✓ | |
| Tafinlar | YES | ✓ | |
| Tagrisso | YES | ✓ | |
| Takhzyro | YES | ✓ | |
| Talzenna | YES | ✓ | |
| Taltz | YES | ✓ | ♦ |
| Talvey | YES | | |
| Targretin | YES | ✓ | ∞ |
| Tarpeyo | YES | | |
| Tascenso ODT | YES | | |
| Tasigna | YES | ✓ | ∞ |
| <i>tasimelteon (Hetlioz)</i> | YES | ✓ | |
| Tavalisse | YES | | |
| Tavneos | YES | | |
| Tazverik | YES | | |
| Tecentriq/Hybreza | YES | ✓ | |
| Tecfidera | YES | ✓ | ∞ |
| Tecvayli | YES | | |
| Tegsedi | YES | | |
| Temixys | NO | ✓ | |
| Temodar | YES | ✓ | ∞ |
| <i>temozolomide</i> | YES | ✓ | |
| <i>temsirolimus</i> | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) [†] | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|--------------------------------------|--|---|-----------------------------|
| <i>tenofovir disoproxil fumarate</i> | NO | ✓ | |
| Tepadina | NO | ✓ | |
| Tepezza | YES | ✓ | |
| Tepmetko | YES | | |
| <i>teriflunomide (Aubagio)</i> | YES | ✓ | |
| <i>teriparatide</i> | YES | ✓ | |
| <i>tetrabenazine</i> | YES | ✓ | |
| Tevimbra | YES | | |
| Tezspire | YES | ✓ | |
| Thalomid | YES | ✓ | |
| Thiola/EC | YES | | ∞ |
| <i>thiotepa</i> | NO | | |
| Thyrogen | NO | ✓ | |
| Tibsovo | YES | | |
| Tikosyn | NO | | ∞ |
| <i>tiopronin/DR (Thiola/EC)</i> | YES | ✓ | |
| Tivdak | YES | ✓ | |
| Tivicay | NO | ✓ | |
| Tobi | YES | ✓ | ∞ |
| Tobi Podhaler | YES | ✓ | ∞ |
| <i>tobramycin inh soln</i> | YES | ✓ | |
| Tofidence | YES | ✓ | |
| <i>tolvaptan (Samsca)</i> | YES | ✓ | |
| Torisel | YES | ✓ | ∞ |
| <i>Torpenz (everolimus)</i> | YES | | |
| Tracleer | YES | ✓ | ∞ |
| Trazimera | YES | ✓ | |
| Treanda | YES | ✓ | |
| Trelstar | YES | ✓ | ∞ |
| Tremfya | YES | ✓ | |
| <i>treprostinil</i> | YES | ✓ | |
| Tretten | YES | ✓ | |
| <i>trientine (Clovique, Syprine)</i> | NO | ✓ | |
| Trikafta | YES | ✓ | |
| Triptodur | YES | | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) [†] | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|--|--|---|-----------------------------|
| Triumeq/PD | NO | ✓ | |
| Trizivir | NO | ✓ | |
| Trodelvy | YES | | |
| Trogarzo | NO | ✓ | |
| Truqap | YES | | |
| Truseltiq | YES | ✓ | |
| Truvada (<i>emtricitabine/tenofovir disoproxil fumarate</i>) | NO | ✓ | ∞ |
| Truxima | YES | ✓ | ∞ |
| Tryngolza | YES | | |
| Tukysa | YES | | |
| Turalio | YES | | |
| Tybost | NO | ✓ | |
| Tyenne | YES | ✓ | ♦ |
| Tykerb (<i>lapatinib</i>) | YES | ✓ | ∞ |
| Tymlos | YES | ✓ | |
| Tyruko | YES | ✓ | |
| Tysabri | YES | ✓ | |
| Tyvaso | YES | ✓ | |
| Tzield | YES | | |
| Udenyca | YES | ✓ | ∞ |
| Ultomiris | YES | ✓ | |
| Unituxin | NO | | |
| Unloxcyt | YES | ✓ | |
| Uplinza | YES | ✓ (available through Coram) | |
| Uptravi | YES | ✓ | |
| Ustekinumab-aaaz | YES | ✓ | ♦ |
| Ustekinumab-ttwe | YES | ✓ | ♦ |
| Vabrinty | YES | | |
| Vabysmo | YES | ✓ | |
| Vafseo | YES | | |
| Valchlor | YES | | |
| <i>valrubicin</i> | NO | ✓ | |
| Valstar | NO | ✓ | |
| Vanflyta | YES | | |
| Vanrafia | YES | | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|-----------------------------|--|---|-----------------------------|
| Varithena | NO | | |
| Varizig | NO | ✓ | |
| Vectibix | YES | ✓ | |
| Vegzelma | YES | ✓ | |
| Velcade | YES | ✓ | |
| Veletri | YES | ✓ | |
| Velsipity | YES | ✓ | |
| Vemlidy | NO | ✓ | |
| Venclexta | YES | | |
| Ventavis | YES | ✓ | |
| <i>Venxxiva (tiopronin)</i> | YES | | |
| Veopoz | YES | | |
| Verzenio | YES | ✓ | |
| Vidaza | YES | ✓ | |
| Videx | NO | ✓ | |
| Videx EC | NO | ✓ | |
| Viekira Pak | YES | ✓ | ♦ |
| <i>Vigabatrin</i> | YES | ✓ | |
| <i>vigadrone</i> | YES | | |
| Vigafyde | YES | | |
| <i>vigpoder</i> | YES | | |
| Vijoje | YES | | |
| Viltepso | YES | | |
| Vimizim | YES | ✓ | |
| Viracept | NO | ✓ | ∞ |
| Viramune | NO | ✓ | |
| Viramune XR | NO | ✓ | |
| Viread | NO | ✓ | |
| Vistogard | NO | | |
| Visudyne | YES | ✓ | |
| Vitrakvi | YES | ✓ | |
| Vivimusta | YES | ✓ | |
| Vizimpro | YES | ✓ | |
| Vocabria | NO | | |
| Vonjo | YES | | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) ⁺ | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|-------------------------------|--|---|-----------------------------|
| Vonvendi | YES | ✓ | |
| Voranigo | YES | | |
| Voraxaze | NO | | |
| Vosevi | YES | ✓ | |
| Votrient (<i>pazopanib</i>) | YES | ✓ | ∞ |
| Vowst | YES | | |
| Voxzogo | YES | ✓ | |
| Voydeya | YES | | |
| VPRIV | YES | ✓ | |
| Vumerity | YES | ✓ | |
| Vyalev | YES | ✓ | |
| Vyjuvek | YES | ✓ | |
| Vykat XR | YES | | |
| Vyloy | YES | | |
| Vyndama | YES | ✓ | |
| Vyndaqel | YES | ✓ | |
| Vyndamax | YES | ✓ | |
| Vyondys 53 | YES | | |
| Vyvgart | YES | ✓ | |
| Vyloy | YES | | |
| Vyxeos | NO | ✓ | |
| Wainua | YES | | |
| Wakix | YES | ✓ | |
| Wayrilz | YES | | |
| Welireg | YES | | |
| Wezlana | YES | ✓ | |
| Wilate | YES | ✓ | |
| Winrevair | YES | ✓ | |
| WinRho SDF | NO | ✓ | |
| Wyost | YES | ✓ | |
| Xalkori | YES | ✓ | |
| Xdemvy | YES | ✓ | |
| Xeljanz | YES | ✓ | ♦ |
| Xeljanz XR | YES | ✓ | ♦ |
| Xeloda | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM) [†] | Medication Obtained through CVS Specialty * | Step Therapy [∞] ♦ |
|-----------------|--|---|-----------------------------|
| Xembify | YES | ✓ | |
| Xenazine | YES | ✓ | ∞ |
| Xenpozyme | YES | ✓ | |
| Xermelo | YES | | |
| Xgeva | YES | ✓ | |
| Xiaflex | YES | ✓ | |
| Xipere | YES | | |
| Xofigo | NO | | |
| Xolair | YES | ✓ | |
| Xolremdi | YES | | |
| Xospata | YES | ✓ | |
| Xpovio | YES | | |
| Xtandi | YES | ✓ | |
| Xuriden | NO | | |
| Xyntha | YES | ✓ | |
| Xyrem | YES | | ∞ |
| Xywav | YES | | |
| Yervoy | YES | ✓ | |
| Yesintek | YES | ✓ | |
| Yondelis | NO | ✓ | |
| Yonsa | YES | ✓ | |
| Yorvipath | YES | | |
| Yuflyma | YES | ✓ | ♦ |
| Yusimry | YES | ✓ | ♦ |
| Yutiq | NO | ✓ | |
| Zaltrap | YES | ✓ | |
| Zarxio | YES | ✓ | ∞ |
| Zavesca | YES | | ∞ |
| Zejula | YES | ✓ | |
| Zelboraf | YES | ✓ | |
| Zemaira | YES | ✓ | ∞ |
| Zepatier | YES | ✓ | ♦ |
| Zeposia | YES | ✓ | |
| Zepzelca | YES | ✓ | |



FEHB

NALC Health Benefit Plan Specialty Drug List

| Medication Name | Prior Approval Required (SGM)† | Medication Obtained through CVS Specialty * | Step Therapy ∞ ♦ |
|------------------------|--------------------------------|---|------------------|
| Zevalin | NO | | |
| Ziagen | NO | ✓ | |
| <i>zidovudine</i> | NO | ✓ | |
| Ziextenzo | YES | ✓ | ∞ |
| Ziihera | YES | ✓ | |
| Zilbrysq | YES | | |
| Zirabev | YES | ✓ | |
| Zokinvy | YES | | |
| Zoladex | YES | ✓ | ∞ |
| <i>zoledronic acid</i> | YES | ✓ | |
| Zolinza | YES | ✓ | |
| Zomacton | YES | ✓ | |
| Zortress | NO | ✓ | |
| Ztalmy | YES | | |
| Zulresso | YES | ✓ | |
| Zurzuvae | YES | ✓ | |
| Zydelig | YES | ✓ | ∞ |
| Zykadia | YES | ✓ | |
| Zymfentra | YES | ✓ | |
| Zynlonta | YES | | |
| Zynyz | YES | ✓ | |
| Zytiga | YES | ✓ | ∞ |