

Medical Preferred Drug List

Step Therapy (Applies to the Outpatient setting only.)

The CareFirst BlueCross BlueShield Community Health Plan Maryland (CareFirst CHPMD) Medical Preferred Drug List (PDL) encourages utilization of clinically appropriate and lower net cost products within the following drug and therapeutic drug classes available under CareFirst CHPMD medical benefit.

Prior authorization is required for all non-preferred products and some preferred products where indicated(*). The listed preferred products must be used first. An exception process is in place for specific circumstances that may warrant a need for a non-preferred product. CareFirst CHPMD members who are actively receiving treatment will be allowed to continue with a non-preferred product on the Medical PDL as long as their current medical records support its use.

<i>Drug Class</i>	<i>Non-Preferred Product(s)</i>	<i>Preferred Product(s)*</i>
Bevacizumab (oncology)	Avastin Alymsys Vegzelma	Mvasi Zirabev
Filgrastim	Granix Leukine Neupogen Releuko Nivestym	Zarxio
Hemophilia B	Ixinity Rebinyn Rixubis Mononine Alphanine SD Profilnine	Alprolix Benefix* Idelvion
Infliximab	Remicade Infliximab Renflexis	Avsola Inflectra
Pulmonary Arterial Hypertension	Remodulin	Treprostinil
Rituximab	Rituxan Rituxan Hycela Ruxience	Riabni Truxima
Botulinum Toxins	Botox Myobloc Daxxify	Dysport Xeomin

<i>Drug Class</i>	Non-Preferred Product(s)	Preferred Product(s)*
Trastuzumab	Herceptin Herceptin Hylecta Herzuma Trazimera Ogivri	Kanjinti Ontruzant
<i>Osteoarthritis, Viscosupplements</i>	Gel-One Genvisc 850 Hyalgan Hymovis Monovisc Orthovisc Sodium hyaluronate Supartz FX SynoJoynt Synvisc Synvisc-one Triluron Trivisc Visco-3	Durolane Euflexxa Gelsyn-3

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