

## EES with HIV and without Fertility Specialty Drug List October 2023

## Medications listed below are covered under the PrudentRx Program

Brand-name drugs are capitalized (e.g., SANDOSTATIN) and generic drugs are listed in lower case (e.g., octreotide acetate).

Please note: If you are a plan member, please call 1-800-578-4403 and a customer service advocate will be available to answer any questions and enroll you in the program. Representatives are available Monday through Friday from 8 a.m. to 8 p.m. ET

ACROMEGALY	1	OTEZLA <sup>1</sup>
LANREOTIDE <sup>1</sup>	<u>ASTHMA</u>	OTREXUP <sup>1</sup>
MYCAPSSA*1	CINQAIR <sup>1</sup>	RASUVO <sup>1</sup>
octreotide	FASENRA <sup>1</sup>	REDITREX <sup>1</sup>
SANDOSTATIN	NUCALA <sup>1</sup>	REMICADE <sup>1</sup>
SANDOSTATIN LAR DEPOT <sup>1</sup>	TEZSPIRE <sup>1</sup>	RENFLEXIS <sup>1</sup>
SIGNIFOR LAR*1	XOLAIR <sup>1</sup>	RINVOQ <sup>1</sup>
SOMATULINE <sup>1</sup>		SILIQ <sup>1</sup>
SOMAVERT <sup>1</sup>	<u>AUTOIMMUNE</u>	SIMPONI <sup>1</sup>
	ACTEMRA <sup>1</sup>	SIMPONI ARIA <sup>1</sup>
ALOPECIA AREATA	ADALIMUMAB-ADAZ <sup>1</sup>	SKYRIZI <sup>1</sup>
LITFULO <sup>1</sup>	ADALIMUMAB-FKJP <sup>1</sup>	SOTYKTU <sup>1</sup>
	ADBRY <sup>1</sup>	STELARA <sup>1</sup>
ALPHA-1 ANTITRYPSIN DEFICIENCY	AMJEVITA <sup>1</sup>	TALTZ <sup>1</sup>
ARALAST <sup>1</sup>	AVSOLA <sup>1</sup>	TREMFYA <sup>1</sup>
GLASSIA <sup>1</sup>	CIBINQO <sup>1</sup>	
PROLASTIN-C*1	CIMZIA <sup>1</sup>	XELJANZ <sup>1</sup>
	COSENTYX <sup>1</sup>	YUFLYMA <sup>1</sup>
ZEMAIRA <sup>1</sup>	CYLTEZO <sup>1</sup>	YUSIMRY <sup>1</sup>
AMYLOIDOSIS	DUPIXENT <sup>1</sup>	PONE DISORDERS OTHER
AMVUTTRA <sup>1</sup>	ENBREL <sup>1</sup>	BONE DISORDERS - OTHER STRENSIQ*1
ONPATTRO <sup>1</sup>	ENTYVIO <sup>1</sup>	VOXZOGO <sup>1</sup>
VYNDAMAX <sup>1</sup>	HADLIMA <sup>1</sup>	VOXZOGO
VYNDAQEL <sup>1</sup>	HULIO <sup>1</sup>	CARDIAC DISORDERS
VINDAGEE	HUMIRA <sup>1</sup>	CAMZYOS <sup>1</sup>
ANEMIA	HYRIMOZ <sup>1</sup>	
ARANESP <sup>1</sup>	IDACIO <sup>1</sup>	COAGULATION DISORDERS
ENJAYMO <sup>1</sup>	ILUMYA <sup>1</sup>	CEPROTIN
EPOGEN <sup>1</sup>	INFLECTRA <sup>1</sup>	
MIRCERA*1	INFLIXIMAB <sup>1</sup>	CRYOPYRIN-ASSOCIATED
PROCRIT <sup>1</sup>	KEVZARA <sup>1</sup>	PERIODIC SYNDROMES
REBLOZYL <sup>1</sup>	KINERET*1	ARCALYST <sup>1</sup>
RETACRIT	OLUMIANT <sup>1</sup>	ILARIS <sup>1</sup>
ZYNTEGLO <sup>1</sup>	ORENCIA <sup>1</sup>	CHCHINGIC
	UNEINCIA	CUSHING'S

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Payments made by you for a medication that does not qualify as an "essential health benefit" under the Affordable Care Act (ACA), will not count toward your deductible or out-of-pocket maximum (if any), unless otherwise required by law. If you are enrolled in a high-deductible health plan with a health savings account, payments made by you for medications

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SIGNIFOR*1	GASTROINTESTINAL DISORDERS-OTHER	ELOCTATE <sup>1</sup> ESPEROCT <sup>1</sup>
CYSTIC FIBROSIS	GATTEX <sup>1</sup>	FEIBA <sup>1</sup>
BETHKIS	OCALIVA <sup>1</sup>	FIBRYGA
BRONCHITOL <sup>1</sup>	SOLESTA <sup>1</sup>	HEMGENIX <sup>1</sup>
BRONCHITOL TOLERANCE		HEMLIBRA <sup>1</sup>
TEST <sup>1</sup> CAYSTON <sup>1</sup>	<u>GOUT</u>	HEMOFIL <sup>1</sup>
KALYDECO*1	KRYSTEXXA <sup>1</sup>	HUMATE-P <sup>1</sup>
KITABIS PAK <sup>1</sup>		IDELVION <sup>1</sup>
ORKAMBI*1	GROWTH HORMONE AND RELATED DISORDERS	IXINITY <sup>1</sup>
PULMOZYME	EGRIFTA <sup>1</sup>	JIVI
SYMDEKO*1	GENOTROPIN <sup>1</sup>	KOATE <sup>1</sup>
TOBI <sup>1</sup>		KOGENATE <sup>1</sup>
TOBI PODHALER <sup>1</sup>	HUMATROPE <sup>1</sup>	KOVALTRY <sup>1</sup>
tobramycin	INCRELEX <sup>1</sup>	MONONINE
TRIKAFTA*1	NGENLA <sup>1</sup>	NOVOEIGHT
	NORDITROPIN <sup>1</sup>	NOVOSEVEN <sup>1</sup>
DERMATOLOGICAL	NUTROPIN <sup>1</sup>	NUWIQ
DISORDERS - OTHER	OMNITROPE <sup>1</sup>	OBIZUR <sup>1</sup>
VYJUVEK <sup>1</sup>	SAIZEN <sup>1</sup>	PROFILNINE
	SAIZENPREP <sup>1</sup>	REBINYN <sup>1</sup>
DUPUYTREN'S	SEROSTIM <sup>1</sup>	RECOMBINATE <sup>1</sup>
CONTRACTURE XIAFLEX <sup>1</sup>	SKYTROFA <sup>1</sup>	RIASTAP
AIAFLEA	SOGROYA <sup>1</sup>	RIXUBIS <sup>1</sup>
ELECTROLYTE DISORDERS	ZOMACTON <sup>1</sup>	ROCTAVIAN <sup>1</sup>
dichlorphenamide	ZORBTIVE <sup>1</sup>	SEVENFACT <sup>1</sup>
SAMSCA <sup>1</sup>		TRETTEN <sup>1</sup>
tolvaptan¹	<u>HEMATOPOIETICS</u>	VONVENDI <sup>1</sup>
	MOZOBIL	WILATE <sup>1</sup>
ENDOCRINE DISORDERS -	plerixafor	XYNTHA
OTHER OTHER	HEMOPHILIA	
CORTROPHIN <sup>1</sup>	ADVATE <sup>1</sup>	HEPATITIS B
ENZYME DEFICIENCY	ADYNOVATE <sup>1</sup>	adefovir BARACLUDE <sup>1</sup>
DISORDERS - OTHER	AFSTYLA <sup>1</sup>	
betaine anhydrous (cosette	ALPHANATE/VON <sup>1</sup>	entecavir EPIVIR HBV <sup>1</sup>
mgf)	ALPHANINE	HEPSERA <sup>1</sup>
nitisinone	ALPROLIX <sup>1</sup>	lamivudine (hbv)
NITYR*1	ALTUVIIIO <sup>1</sup>	VEMLIDY <sup>1</sup>
ORFADIN*1	BENEFIX <sup>1</sup>	
SUCRAID*1	COAGADEX <sup>1</sup>	HEPATITIS C
	CORIFACT	EPCLUSA <sup>1</sup>
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HARVONI <sup>1</sup>	CABENUVA <sup>1</sup>	STRIBILD <sup>1</sup>
	CIMDUO	SUNLENCA <sup>1</sup>
LEDIPASVIR/SOFOSBUVIR <sup>1</sup>	COMBIVIR	
MAVYRET <sup>1</sup>	COMPLERA <sup>1</sup>	SUSTIVA
PEGASYS <sup>1</sup>		SYMFI SYMTUZA <sup>1</sup>
ribavirin	darunavir DELSTRIGO¹	
SOFOSBUVIR/VELPATASVIR <sup>1</sup>		TEMIXYS
SOVALDI	DESCOVY <sup>1</sup>	tenofovir
VOSEVI <sup>1</sup>	DOVATO¹	TIVICAY TRIUMEQ
ZEPATIER <sup>1</sup>	EDURANT	TRIUMEQ PD <sup>1</sup>
	efavirenz	
HEREDITARY ANGIOEDEMA	efavirenz/emtricitabine/ten ofovir df	TRIZIVIR TROGARZO
BERINERT <sup>1</sup>		TRUVADA <sup>1</sup>
CINRYZE <sup>1</sup>	efavirenz/lamivudine/tenofo vir df	
FIRAZYR <sup>1</sup>	emtricitabine	TYBOST VIRACEPT <sup>1</sup>
HAEGARDA <sup>1</sup>	emtricitabine/tenofovir df¹	
icatibant¹	EMTRIVA	VIREAD ZIAGEN
KALBITOR <sup>1</sup>	EPIVIR EPIVIR	zidovudine
ORLADEYO*1	EPZICOM	zidovadine
	etravirine	IMMUNE DEFICIENCIES
RUCONEST TAKHZYRO <sup>1</sup>	EVOTAZ	AND RELATED DISORDERS
TARRETRO	fosamprenavir	ASCENIV <sup>1</sup>
HODBAONAL THEDADIES	FUZEON	BIVIGAM <sup>1</sup>
HORMONAL THERAPIES  AVEED <sup>1</sup>	GENVOYA <sup>1</sup>	CUTAQUIG <sup>1</sup>
ELIGARD	INTELENCE	CUVITRU <sup>1</sup>
FENSOLVI	ISENTRESS	
		CYTOGAM
FIRMAGONI	JULUCA	ELEDOCANANAA1
FIRMAGON LUPRON DEPOT <sup>1</sup>	JULUCA KALETRA <sup>1</sup>	FLEBOGAMMA <sup>1</sup>
LUPRON DEPOT <sup>1</sup>		GAMASTAN <sup>1</sup>
LUPRON DEPOT <sup>1</sup> LUPRON DEPOT-PED <sup>1</sup>	KALETRA <sup>1</sup>	GAMASTAN <sup>1</sup> GAMMAGARD <sup>1</sup>
LUPRON DEPOT <sup>1</sup> LUPRON DEPOT-PED <sup>1</sup> SUPPRELIN <sup>1</sup>	KALETRA¹ lamivudine	GAMASTAN <sup>1</sup>
LUPRON DEPOT <sup>1</sup> LUPRON DEPOT-PED <sup>1</sup> SUPPRELIN <sup>1</sup> TRELSTAR <sup>1</sup>	KALETRA¹  lamivudine  lamivudine/zidovudine	GAMASTAN <sup>1</sup> GAMMAGARD <sup>1</sup>
LUPRON DEPOT <sup>1</sup> LUPRON DEPOT-PED <sup>1</sup> SUPPRELIN <sup>1</sup> TRELSTAR <sup>1</sup> TRIPTODUR* <sup>1</sup>	KALETRA <sup>1</sup> lamivudine  lamivudine/zidovudine  LEXIVA <sup>1</sup>	GAMASTAN <sup>1</sup> GAMMAGARD <sup>1</sup> GAMMAKED <sup>1</sup>
LUPRON DEPOT <sup>1</sup> LUPRON DEPOT-PED <sup>1</sup> SUPPRELIN <sup>1</sup> TRELSTAR <sup>1</sup>	KALETRA <sup>1</sup> lamivudine  lamivudine/zidovudine  LEXIVA <sup>1</sup> lopinavir/ritonavir	GAMASTAN <sup>1</sup> GAMMAGARD <sup>1</sup> GAMMAKED <sup>1</sup> GAMMAPLEX <sup>1</sup>
LUPRON DEPOT <sup>1</sup> LUPRON DEPOT-PED <sup>1</sup> SUPPRELIN <sup>1</sup> TRELSTAR <sup>1</sup> TRIPTODUR* <sup>1</sup>	KALETRA¹  lamivudine  lamivudine/zidovudine  LEXIVA¹  lopinavir/ritonavir  maraviroc	GAMASTAN <sup>1</sup> GAMMAGARD <sup>1</sup> GAMMAKED <sup>1</sup> GAMMAPLEX <sup>1</sup> GAMUNEX-C <sup>1</sup>
LUPRON DEPOT¹  LUPRON DEPOT-PED¹  SUPPRELIN¹  TRELSTAR¹  TRIPTODUR*¹  ZOLADEX¹  HUMAN	KALETRA¹  lamivudine  lamivudine/zidovudine  LEXIVA¹  lopinavir/ritonavir  maraviroc  nevirapine	GAMASTAN <sup>1</sup> GAMMAGARD <sup>1</sup> GAMMAKED <sup>1</sup> GAMMAPLEX <sup>1</sup> GAMUNEX-C <sup>1</sup> HEPAGAM B
LUPRON DEPOT¹  LUPRON DEPOT-PED¹  SUPPRELIN¹  TRELSTAR¹  TRIPTODUR*¹  ZOLADEX¹  HUMAN  IMMUNODEFICIENCY VIRUS	KALETRA¹  lamivudine  lamivudine/zidovudine  LEXIVA¹  lopinavir/ritonavir  maraviroc  nevirapine  NORVIR	GAMASTAN <sup>1</sup> GAMMAGARD <sup>1</sup> GAMMAKED <sup>1</sup> GAMMAPLEX <sup>1</sup> GAMUNEX-C <sup>1</sup> HEPAGAM B HIZENTRA <sup>1</sup>
LUPRON DEPOT¹  LUPRON DEPOT-PED¹  SUPPRELIN¹  TRELSTAR¹  TRIPTODUR*¹  ZOLADEX¹  HUMAN  IMMUNODEFICIENCY VIRUS  abacavir	KALETRA¹  lamivudine  lamivudine/zidovudine  LEXIVA¹  lopinavir/ritonavir  maraviroc  nevirapine  NORVIR  ODEFSEY	GAMASTAN <sup>1</sup> GAMMAGARD <sup>1</sup> GAMMAKED <sup>1</sup> GAMMAPLEX <sup>1</sup> GAMUNEX-C <sup>1</sup> HEPAGAM B HIZENTRA <sup>1</sup> HYPERHEP
LUPRON DEPOT¹  LUPRON DEPOT-PED¹  SUPPRELIN¹  TRELSTAR¹  TRIPTODUR*¹  ZOLADEX¹  HUMAN  IMMUNODEFICIENCY VIRUS  abacavir  abacavir/lamivudine	KALETRA¹  lamivudine lamivudine/zidovudine LEXIVA¹  lopinavir/ritonavir maraviroc nevirapine NORVIR ODEFSEY PIFELTRO¹ PREZCOBIX PREZISTA	GAMASTAN <sup>1</sup> GAMMAGARD <sup>1</sup> GAMMAKED <sup>1</sup> GAMMAPLEX <sup>1</sup> GAMUNEX-C <sup>1</sup> HEPAGAM B HIZENTRA <sup>1</sup> HYPERHEP HYPERRHO
LUPRON DEPOT¹  LUPRON DEPOT-PED¹  SUPPRELIN¹  TRELSTAR¹  TRIPTODUR*¹  ZOLADEX¹  HUMAN  IMMUNODEFICIENCY VIRUS  abacavir  abacavir/lamivudine  APRETUDE¹	KALETRA¹  lamivudine  lamivudine/zidovudine  LEXIVA¹  lopinavir/ritonavir  maraviroc  nevirapine  NORVIR  ODEFSEY  PIFELTRO¹  PREZCOBIX  PREZISTA  RETROVIR	GAMASTAN <sup>1</sup> GAMMAGARD <sup>1</sup> GAMMAKED <sup>1</sup> GAMMAPLEX <sup>1</sup> GAMUNEX-C <sup>1</sup> HEPAGAM B HIZENTRA <sup>1</sup> HYPERHEP HYPERRHO HYQVIA <sup>1</sup>
LUPRON DEPOT¹  LUPRON DEPOT-PED¹  SUPPRELIN¹  TRELSTAR¹  TRIPTODUR*¹  ZOLADEX¹  HUMAN  IMMUNODEFICIENCY VIRUS  abacavir  abacavir/lamivudine	KALETRA¹  lamivudine lamivudine/zidovudine LEXIVA¹  lopinavir/ritonavir maraviroc nevirapine NORVIR ODEFSEY PIFELTRO¹ PREZCOBIX PREZISTA RETROVIR REYATAZ	GAMASTAN <sup>1</sup> GAMMAGARD <sup>1</sup> GAMMAKED <sup>1</sup> GAMMAPLEX <sup>1</sup> GAMUNEX-C <sup>1</sup> HEPAGAM B HIZENTRA <sup>1</sup> HYPERHEP HYPERRHO HYQVIA <sup>1</sup> MICRHOGAM
LUPRON DEPOT¹  LUPRON DEPOT-PED¹  SUPPRELIN¹  TRELSTAR¹  TRIPTODUR*¹  ZOLADEX¹  HUMAN  IMMUNODEFICIENCY VIRUS  abacavir  abacavir/lamivudine  APRETUDE¹  APTIVUS¹  atazanavir	KALETRA¹  lamivudine lamivudine/zidovudine LEXIVA¹  lopinavir/ritonavir maraviroc nevirapine NORVIR ODEFSEY PIFELTRO¹ PREZCOBIX PREZISTA RETROVIR REYATAZ ritonavir	GAMASTAN¹ GAMMAGARD¹ GAMMAKED¹ GAMMAPLEX¹ GAMUNEX-C¹ HEPAGAM B HIZENTRA¹ HYPERHEP HYPERHO HYQVIA¹ MICRHOGAM NABI-HB
LUPRON DEPOT¹  LUPRON DEPOT-PED¹  SUPPRELIN¹  TRELSTAR¹  TRIPTODUR*¹  ZOLADEX¹  HUMAN  IMMUNODEFICIENCY VIRUS  abacavir  abacavir/lamivudine  APRETUDE¹  APTIVUS¹	KALETRA¹  lamivudine lamivudine/zidovudine LEXIVA¹  lopinavir/ritonavir maraviroc nevirapine NORVIR ODEFSEY PIFELTRO¹ PREZCOBIX PREZISTA RETROVIR REYATAZ	GAMASTAN¹ GAMMAGARD¹ GAMMAKED¹ GAMMAPLEX¹ GAMUNEX-C¹ HEPAGAM B HIZENTRA¹ HYPERHEP HYPERRHO HYQVIA¹ MICRHOGAM NABI-HB OCTAGAM¹

**RHOGAM** 

**SELZENTRY** 

 $\mathsf{BIKTARVY}^1$ 

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**IRON OVERLOAD** 

LUMIZYME1

VPRIV1

RHOPHYLAC AUSTEDO1 **TYSABRI** VUMERITY1 **VARIZIG** droxidopa1 **WINRHO** ZEPOSIA1 DUOPA XEMBIFY1 EXSERVAN\*1

INBRIJA\*1 **MUSCULAR DYSTROPHY INFECTIOUS DISEASE -ELEVIDYS** INGREZZA1

**OTHER** NORTHERA1 ACTIMMUNE<sup>1</sup> **NEUROLOGICAL DISORDERS** 

ALFERON N ADUHELM1 ARIKAYCE\*1 RADICAVA INJ<sup>1</sup> LEQEMBI1 RADICAVA ORS1 SKYSONA1

NUPLAZID1

RELYVRIO1 deferasirox tetrabenazine **NEUROMUSCULAR** deferiprone1 TIGLUTIK\* 1

EVRYSDI\*1 deferoxamine XENAZINE1 RYSTIGGO<sup>1</sup> DESFERAL<sup>1</sup>

VYVGART1 EXJADE1 **MULTIPLE SCLEROSIS** JADENU1

AMPYRA1 **NEUTROPENIA** AUBAGIO1 FULPHILA1 LYSOSOMAL STORAGE AVONEX1 FYLNETRA1 **DISORDER** 

BAFIFRTAM1 ALDURAZYME1 GRANIX1 BETASERON1 CERDELGA1 LEUKINE1 BRIUMVI1 CEREZYME1 NEULASTA1 COPAXONE1 **CYSTAGON** NEUPOGEN1 ELAPRASE1 dalfampridine **NIVESTYM** 

dimethyl fumarate1 ELELYSO1 NYVEPRIA1 EXTAVIA1 FABRAZYME1 RELEUKO1 finaolimod1 KANUMA1 ROLVEDON1

alatiramer1 miglustat UDENYCA1 **NAGLAZYME** alatopa1 ZARXIO1

STIMUFEND1

GILENYA1

NEXVIAZYME1 KESIMPTA<sup>1</sup> ZIEXTENZO1 VIMIZIM LEMTRADA1

**MAVENCLAD** 

**OCULAR DISORDERS** XENPOZYME1 MAYZENT1 BEOVU1 ZAVESCA\*1 mitoxantrone BYOOVIZ1 OCREVUS1 CIMERI I1

**MENTAL HEALTH** PLEGRIDY1 EYLEA1 **CONDITIONS** PONVORY1 ILUVIEN1 ZULRESSO1 **REBIF** LUCENTIS1

TECFIDERA1 **MOVEMENT DISORDERS** OZURDEX1 teriflunomide1 APOKYN1

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SUSVIMO¹  TEPEZZA¹  DAURISMO¹  KANJINTI¹  VABYSMO¹  VISUDYNE¹  EMPLICITI¹  ENHERTU¹  ERBITUX¹  KOSELUGO*¹	RETISERT <sup>1</sup>	DACOGEN	JEVTANA <sup>1</sup>
VABYSMO¹  VISUDYNE¹  EMPLICITI¹  ENHERTU¹  ERBITUX¹  KATONT¹  KEYTRUDA¹  KHAPZORY¹  KISQALI¹  KOSELUGO*¹  KOSELUGO*¹	SUSVIMO <sup>1</sup>	DARZALEX <sup>1</sup>	KADCYLA <sup>1</sup>
VISUDYNE <sup>1</sup> EMPLICITI <sup>1</sup> ENHERTU <sup>1</sup> CNCOLOGY  ERBITUX <sup>1</sup> KHAPZORY <sup>1</sup> KISQALI <sup>1</sup> KOSELUGO* <sup>1</sup>	TEPEZZA <sup>1</sup>	DAURISMO <sup>1</sup>	KANJINTI <sup>1</sup>
ENHERTU¹ KISQALI¹  ONCOLOGY ERBITUX¹ KOSELUGO*¹	VABYSMO <sup>1</sup>	decitabine	KEYTRUDA <sup>1</sup>
ONCOLOGY ERBITUX <sup>1</sup> KOSELUGO* <sup>1</sup>	VISUDYNE <sup>1</sup>	EMPLICITI <sup>1</sup>	KHAPZORY <sup>1</sup>
KOSELOGO**		ENHERTU <sup>1</sup>	KISQALI <sup>1</sup>
	ONCOLOGY	ERBITUX <sup>1</sup>	KOSELUGO*1
abiraterone ERIVEDGE <sup>1</sup> KYPROLIS <sup>1</sup>	abiraterone	ERIVEDGE <sup>1</sup>	KYPROLIS <sup>1</sup>
ABRAXANE <sup>1</sup> ERLEADA <sup>1</sup> LAPATINIB <sup>1</sup>	ABRAXANE <sup>1</sup>	ERLEADA <sup>1</sup>	LAPATINIB <sup>1</sup>
ADCETRIS <sup>1</sup> erlotinib lenalidomide <sup>1</sup>	ADCETRIS <sup>1</sup>	erlotinib	lenalidomide <sup>1</sup>
AFINITOR <sup>1</sup> everolimus LENVIMA <sup>1</sup>	AFINITOR <sup>1</sup>		
AKEEGA*1 EVOMELA¹ levoleucovorin calcium	AKEEGA*1		
ALECENSA <sup>1</sup> FOLOTYN <sup>1</sup> LONSURF <sup>1</sup>	ALECENSA <sup>1</sup>	FOLOTYN <sup>1</sup>	
ALUNBRIG*1 GAVRETO¹ LORBRENA¹	ALUNBRIG*1	GAVRETO <sup>1</sup>	LORBRENA <sup>1</sup>
ALYMSYS <sup>1</sup> GAZYVA <sup>1</sup> LUMAKRAS <sup>1</sup>	ALYMSYS <sup>1</sup>	GAZYVA <sup>1</sup>	LUMAKRAS <sup>1</sup>
ARZERRA gefitinib <sup>1</sup> LUMOXITI <sup>1</sup>	ARZERRA	gefitinib <sup>1</sup>	
AVASTIN <sup>1</sup> GILOTRIF* <sup>1</sup> LUNSUMIO <sup>1</sup>	AVASTIN <sup>1</sup>	GILOTRIF*1	
AYVAKIT*1 GLEEVEC¹ LYNPARZA¹	AYVAKIT*1	GLEEVEC <sup>1</sup>	
azacitidine GLEOSTINE <sup>1</sup> MARGENZA <sup>1</sup>	azacitidine	GLEOSTINE 1	
BALVERSA <sup>1</sup> HALAVEN <sup>1</sup> MEKINIST <sup>1</sup>	BALVERSA <sup>1</sup>	HALAVEN <sup>1</sup>	
BAVENCIO <sup>1</sup> HERCEPTIN <sup>1</sup> MEKTOVI <sup>1</sup>	BAVENCIO <sup>1</sup>	HERCEPTIN <sup>1</sup>	
BELEODAQ¹ HERCEPTIN HYLECTA¹ MVASI¹	BELEODAQ <sup>1</sup>	HERCEPTIN HYLECTA <sup>1</sup>	
BELRAPZO <sup>1</sup> HERZUMA <sup>1</sup> MYLOTARG	BELRAPZO <sup>1</sup>	HERZUMA <sup>1</sup>	
bendamustine <sup>1</sup> HYCAMTIN NERLYNX <sup>1</sup>	bendamustine <sup>1</sup>	HYCAMTIN	
BENDEKA <sup>1</sup> IBRANCE <sup>1</sup> NEXAVAR <sup>1</sup>	BENDEKA <sup>1</sup>	IBRANCE <sup>1</sup>	NEXAVAR <sup>1</sup>
BESPONSA ICLUSIG*1 NINLARO1	BESPONSA	ICLUSIG*1	
BESREMI*1 IDHIFA1 NUBEQA1		IDHIFA <sup>1</sup>	
bexarotene <sup>1</sup> imatinib ODOMZO <sup>1</sup>			·
BLINCYTO <sup>1</sup> IMBRUVICA* <sup>1</sup> OGIVRI <sup>1</sup>		IMBRUVICA*1	
bortezomib <sup>1</sup> IMFINZI <sup>1</sup> ONIVYDE <sup>1</sup>	bortezomib <sup>1</sup>	IMFINZI <sup>1</sup>	
BOSULIF <sup>1</sup> IMJUDO <sup>1</sup> ONTRUZANT <sup>1</sup>		IMJUDO <sup>1</sup>	
BRAFTOVI <sup>1</sup> INLYTA <sup>1</sup> ONUREG <sup>1</sup>	BRAFTOVI <sup>1</sup>	INLYTA <sup>1</sup>	
BRUKINSA*1 INQOVI¹ OPDIVO¹	BRUKINSA*1	INQOVI <sup>1</sup>	
CABOMETYX <sup>1</sup> INREBIC <sup>1</sup> OPDUALAG <sup>1</sup>	CABOMETYX <sup>1</sup>	INREBIC <sup>1</sup>	
CALQUENCE*1 IRESSA <sup>1</sup> ORGOVYX*1	CALQUENCE*1	IRESSA <sup>1</sup>	
capecitabine ISTODAX <sup>1</sup>	capecitabine	ISTODAX <sup>1</sup>	paclitaxel protein-bound <sup>1</sup>
COLUMVI <sup>-</sup> IXEMPRA <sup>1</sup>		IXEMPRA <sup>1</sup>	
COMETRIQ¹ JAKAFI¹		JAKAFI <sup>1</sup>	
COPIKTRA <sup>1</sup> JAYPIRCA <sup>1</sup>		JAYPIRCA <sup>1</sup>	
COTELLIC <sup>1</sup> JEMPERLI <sup>1</sup> DIOPAV <sup>1</sup>		JEMPERLI <sup>1</sup>	
CYRAMZA <sup>1</sup> Medications on the PrudentRx specialty drug list may change at any time, with or without notice. Your plan may not cover certain medications even though they appear on the	ļ		

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POLIVY <sup>1</sup>	TEPADINA <sup>1</sup>	ZYNYZ¹
POMALYST <sup>1</sup>	THALOMID	ZYTIGA <sup>1</sup>
PORTRAZZA <sup>1</sup>	THYROGEN <sup>1</sup>	2.116/1
POTELIGEO <sup>1</sup>	TIBSOVO*1	OSTEOPOROSIS
PROLEUKIN	TIVDAK <sup>1</sup>	EVENITY <sup>1</sup>
PURIXAN	TORISEL	FORTEO <sup>1</sup>
QINLOCK*1	TRAZIMERA¹	PROLIA <sup>1</sup>
RETEVMO <sup>1</sup>	TREANDA <sup>1</sup>	RECLAST
REVLIMID <sup>1</sup>	TRUXIMA <sup>1</sup>	teriparatide¹
REZUROCK*1	TYKERB <sup>1</sup>	TYMLOS <sup>1</sup>
RIABNI <sup>1</sup>	valrubicin	zoledronic_ost
RITUXAN <sup>1</sup>	VALSTAR	
RITUXAN HYCELA <sup>1</sup>	VECTIBIX <sup>1</sup>	PAROXYSMAL NOCTURNAL
romidepsin	VEGZELMA <sup>1</sup>	<u>HEMOGLOBINURIA</u>
ROZLYTREK <sup>1</sup>	VELCADE	EMPAVELI*1
RUBRACA <sup>1</sup>	VENCLEXTA*1	SOLIRIS
RUXIENCE <sup>1</sup>	VERZENIO <sup>1</sup>	ULTOMIRIS <sup>1</sup>
RYBREVANT <sup>1</sup>	VIDAZA	
RYDAPT <sup>1</sup>	VITRAKVI <sup>1</sup>	<u>PHENYLKETONURIA</u> KUVAN <sup>1</sup>
RYLAZE <sup>1</sup>	VIZIMPRO <sup>1</sup>	
SARCLISA <sup>1</sup>	VOTRIENT <sup>1</sup>	PALYNZIQ <sup>1</sup>
SCEMBLIX <sup>1</sup>	VYXEOS	sapropterin <sup>1</sup>
	XALKORI <sup>1</sup>	PULMONARY ARTERIAL
sorafenib <sup>1</sup>	XELODA	HYPERTENSION
SPRYCEL <sup>1</sup>	XERMELO*1	ADCIRCA <sup>1</sup>
STIVARGA <sup>1</sup>	XGEVA <sup>1</sup>	ADEMPAS <sup>1</sup>
sunitinib <sup>1</sup>	XOSPATA <sup>1</sup>	$alyq^1$
SUTENT <sup>1</sup>	XPOVIO*1	ambrisentan
SYLVANT	XTANDI <sup>1</sup>	bosentan
SYNRIBO TABRECTA <sup>1</sup>	YERVOY <sup>1</sup>	epoprostenol
TAFINLAR <sup>1</sup>	YONDELIS <sup>1</sup>	FLOLAN
TAGRISSO <sup>1</sup>	YONSA	LETAIRIS <sup>1</sup>
	ZALTRAP	LIQREV <sup>1</sup>
TALZENNA <sup>1</sup>	ZEJULA <sup>1</sup>	OPSUMIT <sup>1</sup>
TARCEVA TARGRETIN <sup>1</sup>	ZELBORAF <sup>1</sup>	ORENITRAM <sup>1</sup>
TASIGNA <sup>1</sup>	ZEPZELCA <sup>1</sup>	REMODULIN <sup>1</sup>
	ZIRABEV <sup>1</sup>	REVATIO <sup>1</sup>
TECENTRIQ <sup>1</sup>	zoledronic_onc	sildenafil
TEMODAR (INJECTABLE)	ZOLINZA	tadalafil
TEMODAR (INJECTABLE) temozolomide	ZYDELIG <sup>1</sup>	TADLIQ <sup>1</sup>
temsirolimus	ZYKADIA <sup>1</sup>	TRACLEER <sup>1</sup>
-		1

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treprostinil
TYVASO<sup>1</sup>
UPTRAVI<sup>1</sup>
VELETRI
VENTAVIS<sup>1</sup>

<u>PULMONARY DISORDERS -</u> <u>OTHER</u>

ESBRIET<sup>1</sup>
OFEV<sup>1</sup>

pirfenidone

pirfenidone (534mg)1

**RARE DISORDERS - OTHER** 

clovique CRYSVITA<sup>1</sup> CUPRIMINE<sup>1</sup>

DEPEN TITRATABS

DOJOLVI<sup>1</sup>

ENSPRYNG<sup>1</sup> FIRDAPSE\*<sup>1</sup>

GAMIFANT<sup>1</sup>

penicillamine

SYPRINE<sup>1</sup>

*trientine* UPLIZNA<sup>1</sup>

VIJOICE<sup>1</sup>
ZOKINVY<sup>1</sup>

**RENAL DISEASE** 

cinacalcet

FILSPARI<sup>1</sup>
JYNARQUE\*<sup>1</sup>

PARSABIV<sup>1</sup> SENSIPAR tiopronin<sup>1</sup>

**RESPIRATORY SYNCYTIAL** 

VIRUS SYNAGIS<sup>1</sup>

SEIZURE DISORDERS

ACTHAR<sup>1</sup>

DIACOMIT\*1

EPIDIOLEX<sup>1</sup>

FINTEPLA\*1

SABRIL<sup>1</sup>

vigabatrin<sup>1</sup>

vigadrone\*1

SICKLE CELL DISEASE

ADAKVEO<sup>1</sup> ENDARI<sup>1</sup>

OXBRYTA1

**SLEEP DISORDER** 

LUMRYZ<sup>1</sup>

tasimelteon<sup>1</sup>

WAKIX<sup>1</sup>

XYREM\*<sup>1</sup>

XYWAV\*1

SYSTEMIC LUPUS ERYTHEMATOSUS

BENLYSTA<sup>1</sup>
SAPHNELO<sup>1</sup>

**THROMBOCYTOPENIA** 

DOPTELET<sup>1</sup>
MULPLETA<sup>1</sup>
NPLATE<sup>1</sup>
PROMACTA<sup>1</sup>

TAVALISSE\*1

**TRANSPLANT** 

ASTAGRAF<sup>1</sup> CELLCEPT<sup>1</sup>

cyclosporine ENVARSUS<sup>1</sup>

everolimus

(immunosuppressant)

gengraf

mycophenolic

MYFORTIC<sup>1</sup>

NEORAL NULOJIX<sup>1</sup>

PROGRAF<sup>1</sup>

RAPAMUNE<sup>1</sup>

SANDIMMUNE

sirolimus tacrolimus ZORTRESS<sup>1</sup>

**UREA CYCLE DISORDERS** 

BUPHENYL1

carglumic acid (burel mgf)

OLPRUVA<sup>1</sup>

RAVICTI1

sodium phenylbutyrate1

Medications on the PrudentRx specialty drug list may change at any time, with or without notice. Your plan may not cover certain medications even though they appear on the PrudentRx drug list. Payments made on your behalf for the medication on this list, including amounts paid by a manufacturer's copay assistance program, will not count toward your plan deductible or out-of-pocket maximum (if any), unless otherwise required by law.

<sup>1</sup>Payments made by you for a medication that does not qualify as an "essential health benefit" under the Affordable Care Act (ACA), will not count toward your deductible or out-of-pocket maximum (if any), unless otherwise required by law. If you are enrolled in a high-deductible health plan with a health savings account, payments made by you for medications covered by your plan will count toward your deductible

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covered by your plan will count toward your deductible.
\*If enrolled in a high-deductible health plan (HDHP) with a health savings account (HSA) these medications are not included in the PrudentRx program drug list. For all other plans, continue to fill these medications through approved pharmacy.