

# Provider News & Updates

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## Medical Preferred Drug Update

Updates effective June 1, 2025

At CareFirst BlueCross BlueShield (CareFirst), our mission to advance affordable, accessible, equitable, high-quality healthcare guides every decision we make. We understand that affordability is a significant concern for everyone, especially for the people we serve together.

Starting June 1, 2025, adjustments will be made to our preferred drug list, which will include more medications in the preferred status. This change is designed to enhance accessibility and affordability for our members by expanding the range of clinically and cost-effective medications available.

Starting June 1, 2025, we will update the list of preferred medications covered under the medical benefit. When medically appropriate, patients will need to try the preferred medications listed in the chart below before a non-preferred medication can be covered.  
\*Indicates update for June 1, 2025.

Drug Class	Non-Preferred Medication(s)	Preferred Medication(s)
Alpha-1 proteinase inhibitors	Prolastin-C	Zemaira Glassia Aralast NP
Amyloidosis	Tegsedi Wainua	Onpattro Amvuttra
Autoimmune (excluding multiple sclerosis)	Actemra Cimzia Cosentyx Ilumya Infliximab Orencia Renflexis Remicade Tofidence Tyenne Tysabri	Avsola Entyvio* Inflectra Simponi Aria Stelara Skyrizi*
Bevacizumab (oncology)	Avastin Vegzelma Alymsys	Mvasi Zirabev
Complement Inhibitors	Soliris Rystiggo	Vygart Vygart Hytrulo

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	Piasky	Ultomiris
Erythropoietin	Epogen Mircera	Aranesp Retacrit Procrit
Filgrastim	Granix Leukine Neupogen Releuko	Nivestym Zarxio
Gaucher's Disease	Elelyso Cerdegla	Cerezyme Vpriv
Gonadotropin releasing hormone (GnRH) – (central precocious puberty)	Lupron Depot-PED	Fensolvi Supprelin Triptodur
Hemophilia A (short acting)	Advate Kogenate Kovaltry Recombinate Afstyla Novoeight Roctavian	Nuwig Xyntha/Solofuse
Hemophilia A (long acting)	Adynovate Altuviio Jivi Esperoct	Eloctate Hemlibra
Hemophilia B	Ixinity Rebinyn Rixubis Alphanine Profilnine	Alprolix Benefix Idelvion
Infertility	Follistim AQ Fyremadel cetorelix acetate Novarel chorionic gonadotropin	Gonal-F cetorelix acetate (Cetrotide) ganirelix acetate Ovidrel Pregnyl
Ocular VEGF	Lucentis Susvimo Beovu	Avastin Byooviz Cimerli Vabysmo
Pulmonary Arterial Hypertension	Remodulin	treprostinil
Pegfilgrastim	Neulasta/Onpro Ziextenzo Rolvedon Stimufend Fylnetra Udenyca	Nyvepria Fulphila
Rituximab	Rituxan Rituxan Hycela Riabni	Truxima Ruxience

Toxins	Botox Myobloc Daxxify	Dysport Xeomin
Trastuzumab	Herceptin Herceptin Hylecta Herzuma Ogivri Ontruzant	Kanjinti Trazimera
Viscosupplements	Gel-One Genvisc 850 Hyalgan Hymovis Monovisc Orthovisc Sodium Hyaluronate SupartzFX Synojoynt Synvisc Synvisc-One Triluron Trivisc Visco-3	Durolane Euflexxa Gelsyn-3

## How to Request Approvals

The [Specialty Drug List](#) includes all medications covered under the medical benefit that require approval and/or site of care management. This list is updated monthly.

Providers can submit an approval request online by logging in to the [Provider Portal](#) and navigating to the **Pre-Auth/Notifications** tab. If you need assistance, resources are available on our [Learning and Engagement Center](#).

## What This Means for Patients

- Patients currently taking a non-preferred medication can continue using it until the current approval expires.
  - Providers can request a new approval when the current one expires if the patient needs to continue with the non-preferred medication.
    - The new approval request might suggest an alternative, preferred medication.
      - Refer to drug-specific policies to understand how this strategy may impact patients on an active treatment plan.
    - If the provider believes the non-preferred medication should be continued, they can submit supporting information with the approval request to obtain a medical necessity exception.