

2025 Specialty Drug List

Specialty medicines treat complex and chronic (long-term) conditions. Examples include multiple sclerosis, hepatitis C, HIV and cancer. Depending on the condition and prescribed therapy, these drugs may be taken by mouth, through a vein, or by injection. Specialty medicines often require specialty handling such as refrigeration. The following specialty medications are covered by WellDyne. This list is not all-inclusive and is subject to change without notice.

ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS	XOLAIR ^{PA}	CALQUENCE ^{PA, QL}	LENVIMA (12 MG DAILY DOSE) ^{PA, QL}
	ANTICONVULSANTS	capecitabine ^{PA}	LENVIMA (14 MG DAILY DOSE) ^{PA, QL}
	EPIDIOLEX ^{PA}	CAPRELSA ^{PA, QL}	LENVIMA (18 MG DAILY DOSE) ^{PA, QL}
	FINTEPLA ^{PA, QL}	COMETRIQ (100 MG DAILY DOSE) ^{PA, QL}	LENVIMA (20 MG DAILY DOSE) ^{PA, QL}
	vigabatrin ^{PA, QL}	COMETRIQ (140 MG DAILY DOSE) ^{PA, QL}	LENVIMA (24 MG DAILY DOSE) ^{PA, QL}
	vigadron ^{PA, QL}	COMETRIQ (60 MG DAILY DOSE) ^{PA, QL}	LENVIMA (4 MG DAILY DOSE) ^{PA, QL}
	vigpoder ^{PA, QL}	COPIKTRA ^{PA, QL}	LENVIMA (8 MG DAILY DOSE) ^{PA, QL}
	ANTIDEPRESSANTS	COTELLIC ^{PA, QL}	LEUPROLIDE ACETATE (3 MONTH) ^{PA, QL}
	SPRAVATO (56 MG DOSE) ^{PA, QL}	CYCLOPHOSPHAMIDE	leuprolide acetate ^{PA}
	SPRAVATO (84 MG DOSE) ^{PA, QL}	DARZALEX FASPRO ^{PA}	LONSURF ^{PA}
	ANTIDIABETICS	dasatinib ^{PA, QL}	LORBRENA ^{PA, QL}
	mifepristone ^{PA, QL}	DATROWAY ^{PA, QL}	LUMAKRAS ^{PA, QL}
	ANTIDOTES AND SPECIFIC ANTAGONISTS	DAURISMO ^{PA, QL}	LUPRON DEPOT (1-MONTH) ^{PA, QL}
	ANDEXXA	ELIGARD ^{PA, QL}	LUPRON DEPOT (3-MONTH) ^{PA, QL}
	deferasirox granules ^{PA}	EMCYT	LYNPARZA ^{PA, QL}
	deferasirox ^{PA}	ERIVEDGE ^{PA, QL}	LYSODREN ^{PA, QL}
	deferiprone ^{PA}	ERLEADA ^{PA, QL}	MATULANE ^{PA}
	deferoxamine mesylate ^{PA}	erlotinib hcl ^{PA, QL}	MEKINIST ^{PA, QL}
	FERRIPROX TWICE-A-DAY ^{PA, QL}	ETOPOSIDE	MEKTOVI ^{PA, QL}
	FERRIPROX ^{PA}	everolimus ^{PA, QL}	MELPHALAN ^{PA}
	VIVITROL ^{PA, QL}	FARYDAK ^{PA, QL}	mercaptopurine
		FIRMAGON (240 MG DOSE) ^{PA, QL}	mesna
	ANTIHYPERLIPIDEMICS	FIRMAGON ^{PA, QL}	MVASI ^{PA}
	JUXTAPID ^{PA, QL}	FOTIVDA ^{PA, QL}	MYLERAN ^{PA}
	REPATHA PUSHTRONEX SYSTEM ^{PA, QL}	GAVRETO ^{PA, QL}	NERLYNX ^{PA, QL}
	REPATHA SURECLICK ^{PA, QL}	GAZYVA ^{PA}	nilotinib hcl ^{PA, QL}
	REPATHA ^{PA, QL}	gefitinib ^{PA, QL}	NINLARO ^{PA, QL}
	ANTIHYPERTENSIVES	GILOTrif ^{PA, QL}	NUBEQA ^{PA, QL}
	metyrosine ^{PA, QL}	GLEOSTINE ^{PA}	ODOMZO ^{PA, QL}
	ANTIMYASTHENIC/CHOLINERGIC AGENTS	GLIADEL WAFER	pazopanib hcl ^{PA, QL}
	RUZURGI ^{PA, QL}	HYCAMTIN ^{PA}	PEMAZYRE ^{PA, QL}
	ANTIMYCOBACTERIAL AGENTS	IBRANCE ^{PA, QL}	PHESGO ^{PA, QL}
	SIRTURO ^{PA, QL}	ICLUSIG ^{PA, QL}	PIQRAY (200 MG DAILY DOSE) ^{PA, QL}
	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES	IDHIFA ^{PA, QL}	PIQRAY (250 MG DAILY DOSE) ^{PA, QL}
	abiraterone acetate ^{PA, QL}	imatinib mesylate ^{PA, QL}	PIQRAY (300 MG DAILY DOSE) ^{PA, QL}
	abirtega ^{PA, QL}	IMBRUVICA ^{PA, QL}	POMALYST ^{PA, QL}
	ALECENSA ^{PA, QL}	INLYTA ^{PA, QL}	QINLOCK ^{PA, QL}
	ALFERON N	INQOVI ^{PA, QL}	RETEVMO ^{PA, QL}
	ALUNBRIG ^{PA, QL}	INREBIC ^{PA, QL}	ROZLYTREK ^{PA, QL}
	AVMAPKI FAKZYNJA CO-PACK ^{PA, QL}	INTRON A ^{PA}	RUBRACA ^{PA, QL}
	AYVAKIT ^{PA, QL}	JAKAFI ^{PA, QL}	RUXIENCE ^{PA}
	BALVERSA ^{PA, QL}	JAYPIRCA ^{PA, QL}	RYDAPT ^{PA, QL}
	BESREMI ^{PA, QL}	KISQALI (200 MG DOSE) ^{PA, QL}	SCEMBLIX ^{PA, QL}
	bexarotene ^{PA}	KISQALI (400 MG DOSE) ^{PA, QL}	sorafenib tosylate ^{PA, QL}
	BOSULIF ^{PA, QL}	KISQALI (600 MG DOSE) ^{PA, QL}	STIVARGA ^{PA, QL}
	BRAFTOVI ^{PA, QL}	KISQALI FEMARA (200 MG DOSE) ^{PA, QL}	sunitinib malate ^{PA, QL}
	BRUKINSA ^{PA, QL}	KISQALI FEMARA (400 MG DOSE) ^{PA, QL}	SYNRIBO ^{PA}
	CABOMETYX ^{PA, QL}	KISQALI FEMARA (600 MG DOSE) ^{PA, QL}	TABLOID
		KOSELUGO ^{PA, QL}	TABRECTA ^{PA, QL}
		lapatinib ditosylate ^{PA, QL}	TAFINLAR ^{PA, QL}
		LENVIMA (10 MG DAILY DOSE) ^{PA, QL}	TAGRISSO ^{PA, QL}
			TALZENNA ^{PA, QL}
			TAZVERIK ^{PA, QL}
			temozolomide ^{PA}
			TEPMETKO ^{PA, QL}

(Continued)

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TIBSOVO^{PA, QL}
 torpenz^{PA, QL}
 TRUSELTIQ (100MG DAILY DOSE)^{PA, QL}
 TRUSELTIQ (125MG DAILY DOSE)^{PA, QL}
 TRUSELTIQ (50MG DAILY DOSE)^{PA, QL}
 TRUSELTIQ (75MG DAILY DOSE)^{PA, QL}
 TUKYSA^{PA, QL}
 TURALIO^{PA, QL}
 UKONIQ^{PA, QL}
 VABRINTY^{PA, QL}
 VANTAS^{PA, QL}
 VENCLEXTA STARTING PACK^{PA, QL}
 VENCLEXTA^{PA, QL}
 VERZENIO^{PA, QL}
 VITRAKVI^{PA, QL}
 VIZIMPRO^{PA, QL}
 WELIREG^{PA, QL}
 XALKORI^{PA, QL}
 XOSPATA^{PA, QL}
 XTANDI^{PA, QL}
 YONSA^{PA, QL}
 ZEJULA^{PA, QL}
 ZELBORAF^{PA, QL}
 ZIRABEV^{PA}
 ZOLADEX^{PA, QL}
 ZOLINZA^{PA, QL}
 ZYDELIG^{PA, QL}
 ZYKADIA^{PA, QL}

ANTIPARKINSON AND RELATED THERAPY AGENTS

DUOPA
 INBRIJA^{PA, QL}

ANTIPSYCHOTICS/ANTIMANIC AGENTS

NUPLAZID^{PA, QL}

ANTIVIRALS

abacavir sulfate-lamivudine^{QL}
 abacavir sulfate^{QL}
 abacavir-lamivudine-zidovudine^{QL}
 adefovir dipivoxil^{PA, QL}
 APRETUDE^{PA, QL}
 APTIVUS^{QL}
 atazanavir sulfate^{QL}
 BARACLUDE^{PA, QL}
 BIKTARVY^{QL}
 CABENUVA^{PA, QL}
 CIMDUO^{QL}
 DESCovy^{QL}
 DOVATO^{QL}
 EDURANT PED^{QL}
 EDURANT^{QL}
 efavirenz-emtricitab-tenofo d^{QL}
 EFAVIRENZ-LAMIVUDINE-TENOFOVIR^{QL}
 EFAVIRENZ^{QL}
 emtricitabine-tenofovir d^{QL}
 emtricitabine^{QL}

EMTRIVA^{QL}
 entecavir^{PA, QL}
 EPCLUSIA^{PA, QL}
 etravirine^{QL}
 EVOTAZ^{QL}
 fosamprenavir calcium^{QL}
 FUZEON^{PA, QL}
 GENVOYA^{QL}
 HARVONI^{PA, QL}
 INTELENCE^{QL}
 ISENTRESS HD^{QL}
 ISENTRESS^{QL}
 JULUCA^{QL}
 lamivudine-zidovudine^{QL}
 lamivudine^{QL}
 LIVTENCY^{PA, QL}
 lopinavir-ritonavir^{QL}
 maraviroc^{QL}
 MAVYRET^{PA, QL}
 NEVIRAPINE ER^{QL}
 NEVIRAPINE^{QL}
 NORVIR^{QL}
 ODEFSEY^{QL}
 PEGASYS^{PA, QL}
 PREVYMIS^{PA, QL}
 PREZISTA^{QL}
 REYATAZ^{QL}
 RIBAVIRIN^{PA, QL}
 ritonavir^{QL}
 RUKOBIA^{PA, QL}
 SELZENTRY^{QL}
 STAVUDINE^{QL}
 SYMFI LO^{QL}
 SYMFI^{QL}
 SYMTUZA^{QL}
 TEMIXYS^{QL}
 tenofovir disoproxil fumarate^{QL}
 TIVICAY PD^{QL}
 TIVICAY^{QL}
 TRIUMEQ PD^{QL}
 TRIUMEQ^{QL}
 TYBOST^{QL}
 VIRACEPT^{QL}
 VIREAD^{QL}
 VOSEVI^{PA, QL}
 zidovudine^{QL}

CARDIOVASCULAR AGENTS - MISC.

ADEMPAS^{PA, QL}
 alyq^{PA, QL}
 ambrisentan^{PA, QL}
 bosentan^{PA, QL}
 epoprostenol sodium^{PA}
 OPSUMIT^{PA, QL}
 ORENITRAM^{PA, QL}
 sildenafil citrate^{PA, QL}
 tadalafil (pah)^{PA, QL}
 treprostinil^{PA}
 TYVASO DPI INSTITUTIONAL KIT^{PA, QL}

TYVASO DPI MAINTENANCE KIT^{PA, QL}
 TYVASO DPI TITRATION KIT^{PA, QL}
 TYVASO REFILL^{PA}
 TYVASO STARTER^{PA}
 TYVASO^{PA}
 UPTRAVI^{PA, QL}
 VENTAVIS^{PA, QL}
 VYNDAMAX^{PA, QL}
 VYNDAQEL^{PA, QL}

CORTICOSTEROIDS

deflazacort^{PA}
 TARPEYO^{PA, QL}

DERMATOLOGICALS

ADBRY^{PA, QL}
 CIBINQO^{PA, QL}
 DUPIXENT^{PA, QL}
 SCENESSE^{PA, QL}
 SELARSIDI^{PA, QL}
 SKYRIZI (150 MG DOSE)^{PA, QL}
 SKYRIZI PEN^{PA, QL}
 SKYRIZI^{PA, QL}
 SOTYKTU^{PA, QL}
 STELARA^{PA, QL}
 TALTZ^{PA, QL}
 TREMFYA ONE-PRESS^{PA, QL}
 TREMFYA PEN^{PA, QL}
 TREMFYA^{PA, QL}
 VALCHLOR^{PA}

DIURETICS

dichlorphenamide^{PA, QL}
 ormalvi^{PA, QL}

ENDOCRINE AND METABOLIC AGENTS - MISC.

BRINEURA^{PA, QL}
 caglumic acid^{PA}
 cetrorelix acetate^{PA}
 CHORIONIC GONADOTROPIN
 cinacalcet hcl^{PA}
 CRYSVITA^{PA, QL}
 EVENITY^{PA, QL}
 fyremadel^{PA}
 GALAFOLD^{PA, QL}
 ganirelix acetate^{PA}
 GENOTROPIN MINIQUICK^{PA}
 GENOTROPIN^{PA}
 GONAL-F RFF REDIRECT
 GONAL-F RFF
 ibandronate sodium^{PA, QL}
 javygtor^{PA}
 LUPANETA PACK^{PA, QL}
 LUPRON DEPOT-PED (1-MONTH)^{PA, QL}
 LUPRON DEPOT-PED (3-MONTH)^{PA, QL}

MYALEPT^{PA}
 nitisinone^{PA}
 NITYR^{PA}
 NOVAREL

OCTREOTIDE ACETATE^{PA}

OMNITROPE^{PA}
 ORFADIN^{PA}
 ORILISSA^{PA, QL}
 OVIDREL^{PA}
 PALYNZIQ^{PA}
 PARSABIV^{PA}
 PREGNYL^{PA}
 PROLIA^{PA, QL}
 RAVICTI^{PA, QL}
 RECORLEV^{PA, QL}
 sapropterin dihydrochloride^{PA}
 SEROSTIM^{PA}
 SIGNIFOR^{PA, QL}
 SKYTROFA^{PA, QL}
 sodium phenylbutyrate^{PA}
 SOGROYA^{PA}
 SOMAVERT^{PA}
 STRENSIQ^{PA}
 SUPPRELIN LA^{PA, QL}
 SYNAREL^{PA}
 TERIPARATIDE^{PA, QL}
 TOLVAPTAN^{PA, QL}
 TRIPTODUR^{PA, QL}
 TYMLOS^{PA, QL}
 VOXZOGO^{PA, QL}
 XGEVA^{PA, QL}
 XURIDEN^{PA, QL}
 ZOLEDRONIC ACID^{PA, QL}
 ZORBTIVE^{PA}

ESTROGENS

MYFEMBREE^{PA, QL}
 ORIAHNN^{PA, QL}

GASTROINTESTINAL AGENTS - MISC.

BYLVAY (PELLETS)^{PA, QL}
 BYLVAY^{PA, QL}
 CHOLBAM^{PA}
 CIMZIA (2 SYRINGE)^{PA, QL}
 CIMZIA-STARTER^{PA, QL}
 CIMZIA^{PA, QL}
 ENTYVIO PEN^{PA, QL}
 GATTEX^{PA}
 INFLECTRA^{PA}
 OCALIVA^{PA, QL}
 TREMFYA CROHNS INDUCTION^{PA, QL}
 VELSIPITY^{PA, QL}
 XERMELO^{PA, QL}
 ZYMFENTRA (1 PEN)^{PA, QL}
 ZYMFENTRA (2 PEN)^{PA, QL}
 ZYMFENTRA (2 SYRINGE)^{PA, QL}

GENITOURINARY AGENTS - MISCELLANEOUS

CYSTAGON^{PA}
 OXLUMO^{PA}
 PROCYSBI^{PA}
 tiopronin^{PA}
 venxxiva^{PA}

GOUT AGENTS

(Continued)

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HEMATOLOGICAL AGENTS - MISC.

ADYNOVATE
AFSTYLA
ALPHANATE
ALPHANINE SD
ALPROLIX
ALTUVIPIO^{PA}
BERINERT^{PA}
CABLIVI^{PA, QL}
CINRYZE^{PA}
COAGADEX
CORIFACT
ELOCTATE
EMPAVELI^{PA, QL}
GIVLAARI^{PA}
HAEGARD^{PA}
HEMLIBRA^{PA}
HUMATE-P
icatibant acetate^{PA}
IXINITY
JIVI^{PA}
KCENTRA
KOGENATE FS
MONONINE
NOVOEIGHT
NUWIQ
OBIZUR
ORLADEYO^{PA, QL}
PROFILNINE
REBINYN
RECOMBIMATE
RIXUBIS
RUCONEST^{PA}
sajazir^{PA}
SEVENFACT
SOLIRIS^{PA}
TAKHZYRO^{PA, QL}
TAVALISSE^{PA, QL}
TRETEN
ULTOMIRIS^{PA, QL}
VONVENDI
WILATE
XYNTHA SOLOFUSE
XYNTHA

HEMATOPOIETIC AGENTS

CERDELGA^{PA, QL}
DOPTELET^{PA, QL}
eltrombopag olamine^{PA, QL}
FULPHILA^{PA, QL}
GRANIX^{PA}
l-glutamine^{PA, QL}
LEUKINE^{PA}
miglustat^{PA, QL}
MULPLETA^{PA, QL}

NEULASTA ONPRO^{PA}
NEULASTA^{PA}
NEUPOGEN^{PA, QL}
NPLATE^{PA}
OXBRYTA^{PA, QL}
PROCIT^{PA}
REBLOZYL^{PA}
RETACRIT^{PA}
RYZNEUTA^{PA, QL}
STIMUFEND^{PA, QL}
yargesa^{PA, QL}
ZIEXTENZO^{PA}

HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS

tasimelteon^{PA, QL}

MIGRAINE PRODUCTS

AIMOVIG^{PA, QL}
AJOVY^{PA, QL}
EMGALITY (300 MG DOSE)^{PA, QL}
EMGALITY^{PA, QL}
NURTEC^{PA, QL}
QULIPTA^{PA, QL}
UBRELVY^{PA, QL}
VYEPTI^{PA, QL}

MISCELLANEOUS THERAPEUTIC CLASSES

BENLYSTA^{PA, QL}
clovique^{PA, QL}
ENSPRYNG^{PA, QL}
lenalidomide^{PA, QL}
LUPKYNIS^{PA, QL}
penicillamine^{PA, QL}
REVLIMID^{PA, QL}
REZUROCK^{PA, QL}
SOLESTA^{PA}
THALOMID^{PA}
TRIENTINE HCL^{PA, QL}
XIAFLEX^{PA}
ZOKINVY^{PA, QL}

MUSCULOSKELETAL THERAPY AGENTS

DUROLANE^{PA, QL}
EUFLEXXA^{PA, QL}
GELSYN-3^{PA, QL}
MONOVISC^{PA, QL}
ORTHOVISC^{PA, QL}

NASAL AGENTS - SYSTEMIC AND TOPICAL

SINUVA^{PA, QL}

NEUROMUSCULAR AGENTS

EVRYSDI^{PA, QL}

NUTRIENTS

OPHTHALMIC AGENTS

CYSTARAN^{PA, QL}
DEXLENZA^{PA, QL}
DEXYCU^{PA, QL}
EYLEA HD^{PA, QL}
EYLEA^{PA}
ILUVIEN^{PA}
OXERVATE^{PA, QL}
OZURDEX^{QL}
RETISERT^{PA}
VISCOAT

PASSIVE IMMUNIZING AND TREATMENT AGENTS

ASCENIV^{PA}
BIVIGAM^{PA}
CUVITRU^{PA}
CYTOGAM
FLEBOGAMMA DIF^{PA}
GAMASTAN^{PA}
GAMMAGARD S/D LESS IGA^{PA}
GAMMAGARD^{PA}
GAMMAPLEX^{PA}
GAMUNEX-C^{PA}
HYPERRHO S/D
HYQVIA^{PA}
MICRHOGAM ULTRA-FILTERED PLUS
RHOGAM ULTRA-FILTERED PLUS
RHOPHYLAC
SYNAGIS^{PA}
WINRHO SDF
XEMBIFY^{PA}

PROGESTINS

hydroxyprogesterone caproate^{PA, QL}
MAKENA^{PA, QL}

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

AUSTEDO XR PATIENT TITRATION^{PA, QL}

AUSTEDO XR^{PA, QL}
AUSTEDO^{PA, QL}
AVONEX PEN^{PA, QL}
AVONEX PREFILLED^{PA, QL}
BAFIERTAM^{PA, QL}
BETASERON^{PA, QL}
dalfampridine er^{PA, QL}
dimethyl fumarate starter pack^{PA, QL}
dimethyl fumarate^{PA, QL}
 fingolimod hcl^{PA, QL}
 glatiramer acetate^{PA, QL}
glatopa^{PA, QL}
INGREZZA^{PA, QL}
KESIMPTA^{PA, QL}
LUMRYZ STARTER PACK^{PA, QL}

LUMRYZ^{PA, QL}

MAVENCLAD (10 TABS)^{PA, QL}

MAVENCLAD (4 TABS)^{PA, QL}

MAVENCLAD (5 TABS)^{PA, QL}

MAVENCLAD (6 TABS)^{PA, QL}

MAVENCLAD (7 TABS)^{PA, QL}

MAVENCLAD (8 TABS)^{PA, QL}

MAVENCLAD (9 TABS)^{PA, QL}

MAYZENT^{PA, QL}

OCREVUS^{PA, QL}

PLEGRIDY STARTER PACK^{PA, QL}

PLEGRIDY^{PA, QL}

REBIF REBIDOSE TITRATION PACK^{PA}

REBIF REBIDOSE^{PA, QL}

REBIF TITRATION PACK^{PA, QL}

REBIF^{PA, QL}

SODIUM OXYBATE^{PA, QL}

TASCENO ODT^{PA, QL}

TEGSEDI^{PA, QL}

teriflunomide^{PA, QL}

tetraabenazine^{PA, QL}

TYSAKRI^{PA, QL}

XYWAV^{PA, QL}

ZEPOSIA 7-DAY STARTER PACK^{PA, QL}

ZEPOSIA STARTER KIT^{PA, QL}

ZEPOSIA^{PA, QL}

RESPIRATORY AGENTS - MISC.

ARALAST NP^{PA}

GLASSIA^{PA}

KALYDECO^{PA, QL}

OFEV^{PA, QL}

ORKAMBI^{PA, QL}

PIRFENIDONE^{PA, QL}

PROLASTIN-C^{PA}

PULMOZYME^{PA, QL}

SYMDEKO^{PA, QL}

TRIKAFTA^{PA, QL}

ZEMAIRA^{PA}

VASOPRESSORS

droxidopa^{PA, QL}

Products covered by a member's prescription benefit plan may change from time to time. Preferred brand products are listed in UPPERCASE LETTERS, generic products are listed in lower-cased italics, and other products listed are non-preferred. Specialty medications are covered based on member's benefit plan design, regardless of their appearance on this document. Additionally, medications listed in this document may require prior authorization.

PA = Prior Authorization Required

ST = Step Therapy Required

QL = Quantity Level Required