

Specialty medication cost share drug list by therapeutic class

This list contains specialty medications included in the Specialty Medication Cost Share1 (SMCS) drug list and is updated three times per year. This list applies to large group SMCS plans on the July 2021 rider and later and small group SMCS plans on the January 2022 rider and later. SMCS cost share applies to tiers 2,3, and 4 for the Advantage PDL and applies to tier 4 on the Essential PDL. For the most up-to-date drug coverage information, please call Customer Care at the toll-free member phone number on your health plan ID card; or log in to myuhc.com[®] to learn more about your pharmacy benefit and medication pricing.

Therapeutic Class	Drug Name	Therapeutic Class	Drug Name	Therapeutic Class	Drug Name
Anemia	Aranesp SL	Cancer continued	Cotellic PA SL	Cancer continued	Kisqali PA SL ST
	Epogen SL E		Daurismo PA SL		Krazati PA SL
	Procrit SL E		Eligard PA		Koselugo PA SL
	Retacrit SL		Erivedge PA SL		Lapatinib PA SL
Asthma	Fasenra PA SL		Erleada PA SL		Lenalidomide PA SL
	Nucala PA SL		Erlotinib PA SL		Lenvima PA SL
	Xolair PA SL		Etoposide		Leuprolide PA
Cancer	Abiraterone 250mg PA SL		Everolimus PA SL		Lonsurf PA SL
	Abiraterone 500mg PA SL E		Exkivity PA SL		Lorbrena PA
	Afinitor PA E		Farydak PA SL		Lumakras PA SL
	Afinitor Dis PA SL	Fotivda PA SL	Lynparza PA SL		
	Alecensa PA SL	Gavreto PA SL	Lytgobi PA SL		
	Alkeran	Gefitinib PA SL	Matulane		
	Alunbrig PA SL	Gilotrif PA SL	Mekinist PA SL		
	Ayvakit PA SL	Gleevec PA SL E	Mektovi PA SL ST		
	Balversa PA SL	Gleostine	Melphalan		
	Bexarotene E	Hycamtin PA SL	Mesnex		
	Bosulif PA SL ST	Ibrance PA SL	Nerlynx PA SL		
	Braftovi PA SL ST	Iclusig PA SL	Nexavar PA SL		
	Brukinsa PA SL	Idhifa PA SL	Nilandron		
	Cabometyx PA SL	Imatinib PA SL	Nilutamide		
	Calquence PA SL	Imbruvica PA SL	Ninlaro PA SL		
	Capecitabine SL	Inlyta PA SL	Nubeqa PA SL		
	Caprelsa PA SL	Inqovi PA SL	Odomzo PA SL		
	Cometriq PA SL	Inrebic PA SL ST	Onureg PA SL		
	Copiktra PA SL	Intron A PA	Orgovyx PA SL		
		Iressa PA SL	Orserdu PA SL		
		Jakafi PA SL	Pemazyre PA SL		
		Jaypirca PA SL			

Bold = Brand Drug Name

E - May be excluded from coverage

PA - Notification/Prior Authorization required*

SL - Supply Limit

ST - Step Therapy

continued

Therapeutic Class	Drug Name	Therapeutic Class	Drug Name	Therapeutic Class	Drug Name		
Cancer continued	Piqray PA SL	Cancer continued	Yonsa PA SL ST E	Cystic Fibrosis continued	Tobramycin Nebulized Solution 300 mg/5mL PA SL E		
	Pomalyst PA SL		Zejula PA SL		Trikafta PA SL		
	Purixan PA		Zelboraf PA SL				
	Pyrukynd PA SL		Zolinza PA SL		Endocrine	Betaine Anhydrous	
	Qinlock PA SL		Zydelig PA SL			Buphenyl PA E	
	Retevmo PA SL		Zykadia PA SL			Chenodal	
	Revlimid PA SL		Zytiga PA SL E			Clovique PA E	
	Rezlidhia PA SL		Cardiovascular			Camzyos PA SL	Cortrophin PA SL ST
	Rozlytrek PA SL					Droxidopa PA SL	Cuprimine E
	Rubraca PA SL ST					Northera PA SL E	Cuvrior PA SL E
	Rydapt PA SL		Vyndamax PA SL			Cystadane	
	Scemblix PA SL		Vyndaqel PA SL			Depen Titratabs	
	Sorafenib PA, SL		Cholesterol/ Lipid Lowering			Juxtapid PA SL ST	Dichlorphenamide PA SL
	Sprycel PA SL ST				CNS Agents	Austedo PA SL	Egrifta PA
	Stivarga PA SL		Austedo XR PA SL			Firmagon	
	Sunitinib PA SL	Daybue PA SL	Gattex PA SL				
	Sutent PA SL	Enspryng PA SL	H.P. Acthar PA SL ST				
	Synribo PA SL	Exservan PA E	Imcivree [†] PA				
	Tabloid	Firdapse PA SL	Isturisa PA SL				
	Tabrecta PA SL	Hetlioz PA SL	Javygtor PA SL E				
	Tafinlar PA SL	Hetlioz LQ PA SL	Jynarque PA SL				
	Tagrisso PA SL	Ingrezza PA SL ST	Keveyis PA SL				
	Talzenna PA SL ST	Radicava ORS PA SL	Korlym PA				
	Tarceva PA SL E	Relyvrio PA SL	Kuvan PA SL E				
	Targretin Capsules	Rilutek	Lanreotide E				
	Targretin Gel SL	Riluzole	Myalept PA SL				
	Tasigna PA SL ST	Sabril Powder Pack PA SL E	Mycapssa PA SL E				
	Tazverik PA SL	Sabril Tablets PA SL	Natpara PA SL				
	Temodar PA E	Skyclarys PA SL	Octreotide PA				
	Temozolomide PA	Sod Oxybate PA ST SL	Penicillamine				
	Tepmetko PA SL	Tasimelteon PA SL	Pheburane PA				
	Thalomid PA SL	Tetrabenazine PA	Procsybi PA ST				
Tibsovo PA SL	Tiglutik PA	Ravicti PA SL ST					
Tretinoin Capsules SL	Vigabatrin PA SL	Recorlev PA SL E					
Truseltiq PA SL	Vigadrone PA SL	Samsca PA SL					
Tukysa PA SL	Xenazine PA E	Sandostatin PA E					
Turalio PA SL	Cystic Fibrosis	Sapropterin PA SL					
Tykerb PA SL		Bethkis PA SL E	Signifor PA SL				
Valchlor PA SL		Bronchitol PA SL ST	Sodium				
Venclexta PA SL		Cayston PA ST	Phenylbutyrate PA				
Verzenio PA SL		Kalydeco PA SL	Somatuline Depot				
Vitrakvi PA SL		Kitabis Pak PA SL E	Somavert PA SL				
Vizimpro PA SL		Orkambi PA SL	Syprine PA E				
Vonjo PA SL		Pulmozyme PA SL	Thiola				
Votrient PA SL		Symdeko PA SL	Thiola EC				
Welireg PA SL		TOBI Nebulized Solution PA SL E	Tiopronin				
Xalkori PA SL	TOBI Podhaler PA SL	Tolvaptan PA SL					
Xeloda SL E	Tobramycin Nebulized Solution 300 mg/4 mL PA SL	Trientine PA					
Xospata PA SL		Voxzogo PA SL					
Xpovio PA SL		Xermelo PA SL					
Xtandi PA SL ST		Xuriden PA SL					

Therapeutic Class	Drug Name	Therapeutic Class	Drug Name	Therapeutic Class	Drug Name
Enzyme Deficiency	Carbaglu	Hemophilia continued	Esperoct PA ST E	Hereditary Angioedema continued	Icatibant PA SL E
	Carglumic		Feiba		Orladeyo PA SL E
	Cerdelga PA		Hemlibra PA		Ruconest PA SL
	Cholbam PA SL		Hemofil M	Takhzyro PA SL	
	Cystagon		Humate-P	Immune Disorders	Joenja PA SL
	Galafold PA SL		Idelvion		Actimmune PA SL
	Miglustat		Ixinity PA ST E		Arcalyst PA SL
	Nitisinone PA E		Jivi PA	Tavneos PA SL	
	Nityr PA E		Koate	Immunotherapy	Palforzia PA SL
	Orfadin PA		Koate-DVI		Infections
	Palynziq PA SL		Kogenate FS	Arikayce PA SL	
	Strensiq PA SL		Kovaltry	Daraprim PA	
	Sucraid PA		Mononine	Livtency SL	
	Tegsedi PA SL		Novoeight	Pyrimethamine PA	
	Zavesca E		Novoseven RT	Infertility†	Cetorelix PA ST SL
	Genetic Disorder		Nuwiq		Cetrotide PA ST SL
Dojolvi PA		Profilnine	Chorionic Gonadotropin		
Vijoice PA SL		Rebinyn E	Follistim AQ		
Zokinvy PA SL	Recombinate	Fyremadel			
Growth Hormone†	Rixubis	SevenFACT E	Ganirelix Acetate		
	Genotropin PA SL E	Tretten	Gonal-F ST		
	Humatrope PA SL E	Vonvendi	Gonal-F RFF ST		
	Increlex PA SL	Wilate	Menopur		
	Norditropin PA SL	Xyntha PA ST	Novarel		
	Nutropin AQ PA SL	Hepatitis B	Ovidrel		
	Omnitrope PA SL E		Adefovir	Pregnyl	
	Saizen PA SL E		Baraclude Solution	Inflammatory Conditions	
	Serostim PA SL		Baraclude Tablets E		
	Skytrofa PA SL E		Entecavir		
	Sogroya PA SL E		Epivir HBV		
Zomacton PA SL E	Hepsera				
Zorbtive PA SL	Lamivudine				
Hematologic	Vemlidy ST		Hepatitis C		
	Cablivi PA SL		Epclusa PA SL		
	Doptelet PA SL ST		Harvoni Tab PA SL ST		
	Empaveli PA SL	Ledipasvir/Sofosbuvir PA SL ST			
	Mozobil	Mavyret PA SL			
	Mulpleta PA SL	Pegasys PA SL			
	Oxbryta PA SL	Pegintron PA SL			
	Promacta PA	Sofosbuvir/			
	Rezurock PA SL	Velpatasvir PA SL			
	Sajazir	Sovaldi PA SL ST			
Tavalisse PA SL ST	Viekira Pak PA SL ST				
Hemophilia	Zepatier PA SL	Hereditary Angioedema	Vosevi PA SL		
	Advate		Berinert PA SL ST		
	Adynovate PA		Cinryze PA SL E		
	Afstyla PA		Firazyr PA SL		
	Alphanate		Haegarda PA SL		
	Alphanine SD				
	Alprolix				
	Altuviio PA				
	Benefix				
	Coagadex				
	Corifact				
Eloctate PA					

Therapeutic Class	Drug Name	Therapeutic Class	Drug Name	Therapeutic Class	Drug Name
Inflammatory Conditions continued	Orencia PA SL ST	Multiple Sclerosis continued	Extavia PA SL ST E	Osteoporosis	Forteo PA ST E
	Otezla PA SL		Fingolimod PA SL		Teriparatide PA
	Ridaura		Gilenya PA SL E		Tymlos PA
	Rinvoq PA SL		Glatiramer PA SL	Parkinson's Disease	Apokyn PA SL
	Siliq PA SL ST E		Glatopa PA SL		Apomorphine PA SL
	Simponi PA SL		Kesimpta PA SL		Inbrija PA SL
	Skyrizi PA SL		Mavenclad PA SL ST	Pulmonary Fibrosis	Kynmobi PA SL
	Sotyktu PA SL		Mayzent PA SL		Esbriet PA SL E
	Stelara PA SL		Plegridy PA SL		Ofev PA SL
	Taltz PA SL ST E		Ponvory PA SL E	Pulmonary Hypertension	Pirfenidone PA SL
	Tremfya PA SL		Rebif PA SL ST		Adcirca PA SL E
	Xeljanz PA SL ST		Tascenso ODT PA SL E		Adempas PA SL
	Xeljanz XR PA SL ST		Tecfidera PA SL ST E	Alyq PA SL	Seizures
	Yuflyma PA SL E		Teriflunomide PA SL	Ambrisentan PA SL	
	Yusimry PA SL E		Vumerity PA SL ST E	Bosentan PA SL	
Iron Overload	Deferasirox PA	Zeposia PA SL	Letairis PA SL E		
	Deferiprone PA	Narcolepsy	Liqrev PA SL E		
	Exjade PA E		Lumryz PA SL E		
	Ferriprox PA		Wakix PA SL		
	Jadenu PA E		Xyrem PA SL		
Jadenu Sprinkle PA E	Xywav PA SL				
Kidney Disease	Filspari PA SL	Neutropenia	Fulphila E		
	Tarpeyo PA SL		Fylnetra E		
Liver Disease	Bylvay PA SL		Granix E	Leukine	
	Livmarli PA SL		Leukine	Neulasta	
	Ocaliva PA SL ST		Neupogen E	Neupogen E	
Lupus	Benlysta PA SL		Nivestym E	Nivestym E	
	Lupkynis PA SL		Nyvepria	Nyvepria	
Mental Health	Spravato PA SL		Releuko E	Releuko E	
Multiple Sclerosis	Ampyra PA SL E		Stimufend E	Stimufend E	
	Aubagio PA SL		Udenyca E	Udenyca E	
	Avonex PA SL		Zarxio	Zarxio	
	Bafiertam PA SL		Ziextenzo	Ziextenzo	
	Betaseron PA SL		Ophthalmic Agents	Cystadrops PA SL	
	Copaxone PA SL E			Cystaran PA SL	
	Dalfampridine PA SL			Oxervate PA SL	
	Dimethyl Fumarate PA SL				
	SL				
			Spinal Muscular Atrophy		

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This list is intended to be general and is subject to variation due to state law or mandate. Drugs may be added or removed. Please refer to your benefit plan materials provided by your employer or health plan to determine which medications may be covered or limited under your plan.

* Depending on your benefit, you may have notification or prior authorization requirements for select medications. Your doctor is required to provide additional information to us to determine coverage.

† Coverage is set by the consumer's prescription drug benefit plan. Please consult plan documents regarding benefit coverage and cost-share. Prior authorization (sometimes referred to as precertification) may be required for Oxford plans or where a state mandates infertility drug coverage.

CALIFORNIA HMO ONLY: For California HMO plans, certain injectable drugs are covered under the medical benefit. To understand your specific coverage for injectable and other specialty medications, please review the PDL booklet on myuhc.com, or call Customer Service at the number on the back of your card.

Not all plan designs cover all listed medications. Please refer to your benefit plan materials provided by your employer or health plan to determine which medications may be covered under your plan and to determine coverage limitations. Medications may also require sourcing through a Designated Specialty Pharmacy. Some medications are noted with the symbols below. Your benefit plan determines how these medications may be covered for you. All branded medications are trademarks or registered trademarks of their respective owners. This list does not apply to SignatureValue business administered by OptumRx®.

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Oxford Level Funded:

Administrative services provided by Oxford Health Plans LLC. Stop-loss insurance is underwritten by All Savers Insurance Company in CT, UnitedHealthcare Life Insurance Company in NJ, and UnitedHealthcare Insurance Company of New York in NY.