

Specialty Preferred Drug Step Therapy List

The step therapy program encourages utilization of clinically appropriate and lowest net cost medications within the following therapeutic categories.

Drug Class	Targeted Product(s)	Preferred Product(s)
Autoimmune – Ankylosing spondylitis	Cimzia, Simponi	Cosentyx, Enbrel, Humira
Crohn's	Entyvio, Stelara	Cimzia, Humira (first)
Psoriasis	Cosentyx, Enbrel, Otezla, Siliq, Tremfya	Humira (first), Stelara, Taltz
Psoriatic arthritis	Cimzia, Orencia SQ/IV/Click, Simponi, Stelara	Cosentyx, Enbrel, Humira, Otezla
Rheumatoid arthritis	Actemra, Cimzia, Kineret, Orencia (Infused), Simponi, Xeljanz/XR	Enbrel, Humira, Kevzara, Orencia SQ/Click
Ulcerative colitis	Entyvio	Humira (first), Simponi
All other	Actemra, Kineret, Orencia SQ/IV/Click	Enbrel, Humira
Fertility	Bravelle Follistim AQ	Gonal-f
Growth Hormone	Genotropin Nutropin/Nutropin AQ Omnitrope Saizen Zomacton	Humatrope Norditropin
Hepatitis C	Daklinza Mavyret Olysio Sovaldi Technivie Viekira Pak Viekira XR Zepatier	Epclusa (genotypes 1,2,3,4,5,6) Harvoni (genotypes 1, 4, 5, 6) Vosevi* *For plan members who previously were treated with a hepatitis C regimen containing an NS5A inhibitor (for genotypes 1-6) or sofosbuvir without an NS5A inhibitor (for genotypes 1a or 3)

This list indicates the common uses for which the drug is prescribed. Some medicines are prescribed for more than one condition. This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Caremark®. Listed products are for informational purposes only and are not intended to replace the clinical judgment of the prescriber. Targeted therapeutic classes and specific drug targets are subject to change based on new drug launches, product approvals, drug withdrawals and other market changes. Plan member privacy is important to us. Our employees are trained regarding the appropriate way to handle members' private health information.

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Drug Class	Targeted Product(s)	Preferred Product(s)
Multiple Sclerosis	Copaxone 20 mg Extavia Zinbryta	Aubagio Betaseron Copaxone 40 mg Glatopa Gilenya Rebif Tecfidera