

# Specialty drugs requiring precertification

As of January 1, 2026, this list applies to Independence Blue Cross Medicare Advantage. All listed brands and their generic equivalents or biosimilars require precertification. This list is subject to change.

## Alzheimer's disease agents

- Kisunla™
- Leqembi®

## Amyotrophic lateral sclerosis agents

- debamestrocel\*
- Qalsody®

## Antineoplastic agents

- Abraxane®
- Adcetris®
- Adstiladrin®
- Alymsys® §
- Avastin® ‡ §
- Anktiva®
- Avzivi®
- Azedra® †
- Blenrep®
- Blinicyto®
- Bizengri®
- Columvi®
- Cyramza®
- Darzalex®
- Darzalex Faspro™
- Datroway
- Elahere™
- Enhertu
- Emrelis®
- epcoritamab\*
- Epkinly®
- Erbitux®
- Herceptin® ‡
- Herceptin Hylecta™
- Hercessi™
- Herzuma®
- Imjudo®
- Jobevne™
- Kadcyca®
- Kimmtrak®
- Kyprolis®
- Lunsumio™
- Lynozyfic®
- Margenza™
- Monjuvi®
- odronextamab\*
- Opdualag™
- Padcev™
- patritumab
- deruxtecán\*
- Pemfexy™
- Perjeta® ‡
- Phesgo™

- Pluvicto™ †
- Polivy™
- Poteligeo™
- Provenge®
- Rituxan® ‡
- Rituxan Hycela™
- Rybrevant™
- Rylaze™
- Sarclisa®
- Talvey™
- Taclantis\*
- Tecvayli™
- telisotuzumab vedotin\*
- Tivdak™
- trastuzumab duocarmazine\*
- Trazimera™
- Trodelvy™
- Vegzelma® §
- vusolimogene oderparepvec\*
- Vyloxy®
- Xofigo® †
- Yervoy™
- Zepzelca™
- Ziihera®
- Zynlonta™

## Anti PD-1/PD-L1 human monoclonal antibodies\*\*

- balstilimab\*
- Bavencio®
- camrelizumab\*
- cosibelimab\*
- Imfinzi™
- Jemperli
- Keytruda®
- Keytruda Qlex®
- Libtayo®
- Loqtorzi®
- Opdivo®
- Opdivo Qvantig™
- penpulimab\*
- Tecentriq™
- Tecentriq Hybreza™
- Tevimbra®
- Zynzyz®

## Bone-modifying agents

- Aukelso™
- Bildyos®
- Bilprevda®
- Bomyontra®

- Bosaya™
- Connexence®
- Enoby®
- Evenity®
- Ospomyv®
- Prolia®
- Xbryk®
- Xgeva®
- Xtrenbo®

## Botulinum toxin agents

- Botox®

## Chemotherapy-induced nausea and vomiting (CINV) agents

## Chimeric antigen receptor (CAR-T) therapies\*\*

- Abecma™
- Aucatzyl®
- Breyanzi®
- Carvykti™
- Kymriah™
- Tecartus™
- Yescarta™

## Duchenne Muscular Dystrophy

- Amondys 45
- Exondys 51
- Vyondys 53

## Endocrine/metabolic agents

- Acthar H.P.®
- cosyntropin depot\*
- Lutathera® †
- Sandostatin® LAR
- Somatuline® depot

## Enzyme replacement agents\*\*

- Adzynma
- Aldurazyme®
- Brineura™
- Cerezyme®
- cipaglucosidase alfa\*
- Elaprase®
- Elelyso®
- Elfabrio®
- Fabrazyme®
- Kanuma®
- Lamzede®
- Lumizyme®
- Mepsevii™
- Naglazyme®

- Nexviazyme®
- pegzilarginase\*
- Pombiliti™
- Revcovi™
- tividenufosp alfa\*
- Vimizim™
- VPRIV®
- Xenpozyme®

## Gene replacement/gene editing therapies\*\*

- Casgevy®
- clemidogene lanparvovec\*
- Elevidys
- etuvetidigene autotemcel\*
- Hemgenix®
- Kebilidi™
- Lenmeldy™
- Luxturna™
- Lyfgenia™
- marnetegrage autotemcel\*
- Papzimeos®
- rebisufligene etisparvovec\*
- Roctavian®
- Skysona™
- Vyjuvek®
- Zevaskyn™
- Zolgensma®
- Zynteglo®

## Hemophilia/Coagulation factors\*\*

## Hyaluronate acid products

- Cingal\*
- Durolane®
- Euflexxa™
- Gel-One®
- Gelsyn-3™
- GenVisc 850®
- Hyalgan®
- Hymovis®
- Supartz®
- Synjoynt™
- Trilon™
- TriVisc™
- VISCO-3®

## Immunological agents

- Actemra<sup>®</sup> IV
- Avsola<sup>™</sup>
- Avtozma
- Benlysta<sup>®</sup> IV
- Cosentyx<sup>®</sup> IV
- Entyvio<sup>™</sup> IV
- Ilumya<sup>™</sup>
- Inflectra<sup>™</sup>
- Infliximab (unbranded)
- Ixifi<sup>™</sup>
- Omvoh<sup>™</sup> IV
- Orenicia<sup>®</sup> IV
- Pyzchiva<sup>®</sup>
- Remicade<sup>®</sup> ‡
- Renflexis<sup>™</sup>
- Saphnelo<sup>™</sup>
- Selarsdi<sup>™</sup>
- Simponi<sup>®</sup> Aria
- Skyrizi<sup>®</sup> IV
- Spevigo<sup>®</sup>
- Starjemza<sup>®</sup>
- Stelara<sup>®</sup> ‡
- Tofidence<sup>™</sup>
- Tremfya<sup>®</sup> IV
- Tyenne<sup>®</sup> IV
- Wezlana<sup>™</sup>
- Yesintek<sup>™</sup>

## Intravenous immune globulin/subcutaneous immune globulin (IVIG/SCIG)\*\*

### Multiple sclerosis agents\*\*

- Briumvi<sup>™</sup>
- Lemtrada<sup>®</sup>
- Ocrevus<sup>™</sup>

- Tyruko
- Tysabri<sup>®</sup>

### Myasthenia gravis agents\*\*

- Imaavy<sup>®</sup>
- Rystiggo<sup>®</sup>
- Vyvgart<sup>®</sup>
- Vyvgart<sup>®</sup> Hytrulo

### Neutropenia agents

- Fylnetra<sup>™</sup>
- Granix<sup>\*</sup>
- Grastofil<sup>\*</sup>
- Lapelga<sup>\*</sup>
- Neupogen<sup>®</sup> ‡
- Nypozi<sup>™</sup>
- Releuko<sup>™</sup>
- Rolvedon<sup>®</sup>
- Stimufend<sup>®</sup>
- Udenyca<sup>®</sup>
- Udenyca<sup>®</sup> OnBody
- Ziextenzo<sup>®</sup>

### Ophthalmic agents

- Ahzantive<sup>®</sup>
- Beovu<sup>®</sup>
- bevacizumab-vikg<sup>\*</sup>
- Bmab-100<sup>\*</sup>
- Byooviz<sup>™</sup>
- Cimerli<sup>™</sup>
- Enzeevu<sup>®</sup>
- Eydenzelt<sup>®</sup>
- Eylea<sup>®</sup> ‡
- Eylea HD
- Lucentis<sup>®</sup> ‡
- Opuviz<sup>\*</sup>
- PavBlu<sup>™</sup>
- revakinagene taroretcel<sup>\*</sup>

- Susvimo<sup>™</sup>
- Tepezza<sup>™</sup>
- Vabysmo<sup>®</sup>
- Xlucane<sup>\*</sup>
- Yesafili<sup>™</sup>

### Pulmonary arterial hypertension agents\*\*

- Flolan<sup>®</sup>
- Remodulin<sup>®</sup>
- Revatio<sup>®</sup>
- Trevyent<sup>\*</sup>
- Tyvaso<sup>®</sup>
- Upravi IV
- Veletri<sup>®</sup>
- Ventavis<sup>®</sup>

### Respiratory agents

- Cinqair<sup>®</sup>
- depemokimab<sup>\*</sup>
- Omlyclo
- Synagis<sup>®</sup>
- Xolair<sup>®</sup>

### Respiratory enzymes (Alpha-1 antitrypsin)\*\*

- Aralast
- Glassia<sup>™</sup>
- Prolastin<sup>®</sup>
- Zemaira<sup>®</sup>

### Tumor-infiltrating lymphocyte (TIL) and T-cell therapies\*\*

- Amtagvi<sup>™</sup>
- Imdelltra<sup>™</sup>
- linvoseltamab<sup>\*</sup>
- Tecelra<sup>®</sup>

## Miscellaneous therapeutic agents

- Adakveo<sup>®</sup>
- Amvuttra<sup>™</sup>
- apitegromab<sup>\*</sup>
- Bkembv<sup>™</sup>
- Cosela<sup>®</sup>
- Crysvita<sup>®</sup>
- deramiocel<sup>\*</sup>
- Enjaymo<sup>™</sup>
- Epysqli<sup>®</sup>
- Evkeeza<sup>™</sup>
- Gamifant<sup>®</sup>
- Givlaari<sup>®</sup>
- Ilaris<sup>®</sup>
- Injectafer<sup>®</sup>
- Krystexxa<sup>®</sup>
- Leqvio<sup>®</sup>
- Monoferric<sup>®</sup>
- narsoplimab<sup>\*</sup>
- Niktimvo<sup>™</sup>
- olezarsen<sup>\*</sup>
- Onpattro<sup>™</sup>
- Oxlumo<sup>®</sup>
- Panhemitin<sup>®</sup>
- PiaSky<sup>®</sup>
- pozelimab<sup>\*</sup>
- Reblozyl<sup>®</sup>
- Rethymic<sup>™</sup>
- Rytelo<sup>™</sup>
- Soliris<sup>®</sup> ‡
- Spinraza<sup>™</sup>
- Tab-cel<sup>®</sup>
- Tzield<sup>™</sup>
- Ultomiris<sup>™</sup> IV
- Uplizna<sup>™</sup>
- Vyepiti<sup>™</sup>
- Xiaflex<sup>®</sup>

\* Pending FDA approval.

\*\* All drugs that can be classified under this header require precertification. This includes any unlisted brand or generic names or biosimilars, as well as new drugs that are approved by the FDA in that class during the course of the benefit year.

† Precertification review for this drug is provided by CareCore National, LLC d/b/a eviCore healthcare.

‡ Precertification requirements apply to all FDA-approved biosimilars to this reference product.

§ Except for ophthalmological conditions.

This is not a complete list of drugs covered by our plan. For a complete listing, please call the Keystone 65 Member Help Team at 1-800-645-3965 or the Personal Choice 65<sup>SM</sup> Member Help Team at 1-888-718-3333 (TTY/TDD: 711), 8 a.m. - 8 p.m., seven days a week, or visit [ibxmedicare.com](http://ibxmedicare.com). Please note that on weekends and holidays from April 1 to September 30, your call may be sent to voicemail.

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