



# MedicalRx Rebate Drug List

Effective January 2022 (Updated March 22, 2022)

## Understanding the MedicalRx Rebate Drug List

This list is not based upon the terms of your particular benefit plan. Each benefit plan contains its own specific provisions for coverage and exclusions. Check your plan documents.

Absence from this list does not imply non-coverage; drugs in listed categories, in addition to other categories may be eligible per the benefit plan.

Unless stated otherwise within the plan documents, coverage is predicated on use being medically necessary and the medication being used within an FDA-approved dosing regimen as stated within the FDA product labeling.

Check your plan documents for benefit coverage information and any coverage requirements.

**Status:** P = Preferred NP = Non Preferred

Drug Name	Drug Status	Drug Name	Drug Status	Drug Name	Drug Status
<b>Hormonal Agents — Contraceptives</b>		<b>Hemophilia Agents (cont.)</b>		<b>Hemophilia Agents (cont.)</b>	
Implanon	P	Esperoct	P	Wilate	P
Kyleena	P	Helixate FS	P	Xyntha	P
Liletta	P	Hemophil M	P	Xyntha Solofuse	P
Mirena	P	Humate-P	P	<b>Immunomodulators</b>	
Nexplanon	P	Hemlibra	P	Cimzia	P
Paragard	P	Jivi	P	Entyvio	P
Skylla	P	Koate	P	Orencia IV	P
<b>Hemophilia Agents</b>		Kogenate FS	P	Simponi Aria	P
Advate	P	Kovaltry	P	Stelara IV	P
Adynovate	P	Monoclate-P	P	Stelara SC	P
Afstyla	P	Novoeight	P	<b>Analgesics, Opioid Partial Agonist</b>	
Alphanate	P	Nuwiq	P	Sublocade	P
Eloctate	P	Recombinant	P		

*This list may change at any time without advance notice.*

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Drug Name	Drug Status	Drug Name	Drug Status	Drug Name	Drug Status
<b>Monoclonal Antibodies/ Antineoplastics – bevacizumab products</b>		<b>HER2 Inhibitors – trastuzumab products</b>		<b>Monoclonal Antibodies – NMOSD Agents</b>	
Avastin	P	Herceptin	P	Enspryng	P
Mvasi	P	Herceptin Hylecta	P	Soliris	P
Zirabev	P	Herzuma	P	Ultomiris	P
<b>Long acting G-CSF – pegfilgrastim</b>		Kanjinti	P	Uplizna	P
Fulphila	P	Ogivri	P	<b>VEGF</b>	
Neulasta	P	Ontruzant	P	Beovu	P
Neulasta Onpro	P	Trazimera	P	Eylea	P
Nyvepria	P	<b>HER2 Inhibitors – other</b>		Lucentis	P
Udenyca	P	Perjeta	P	<b>Multiple Sclerosis</b>	
Ziextenzo	P	Phesgo	P	Aubagio	P
<b>Monoclonal Antibodies – rituximab products</b>		<b>Hormone Replacement</b>		Avonex	P
Rituxan	P	Makena	P	Betaseron	P
Rituxan Hycela	P	<b>Gonadotropin-releasing hormone agonists</b>		Extavia	P
Ruxience	P	Fensolvi	P	Gilenya	P
Truxima	P	Lupron Ped	P	Lemtrada	P
<b>Immunological Modifiers – infliximab products</b>		Supprelin LA	P	Kesimpta	P
Avsola	P	Triptodur	P	Mavenclad	P
Inflectra	P	<b>Somatostatin Agonists</b>		Mayzent	P
Remicade	P	Sandostatin LAR	P	Ocrevus	P
Renflexis	P	Somatuline Depot	P	Plegridy	P
<b>Erythropoiesis-stimulating agents (ESA)</b>		<b>Colony-stimulating Factor</b>		Rebif	P
Aranesp	P	Nplate	P	Zeposia	P
Mircera	P	<b>Spinal Muscular Atrophy</b>		Tysabri	P
Procrit	P	Spinraza	P	<b>Asthma Biologics</b>	
Retacrit	P	Zolgensma	P	Xolair	P

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