



2025 Service Benefit Plan Medical Benefit Prior Approval Drug List

The Blue Cross and Blue Shield Service Benefit Plan needs prior approval for select drugs when using your medical benefits. The coverage and out-of-pocket costs for drugs on this list may be different depending on whether you have FEP Blue Standard[®], FEP Blue Basic[®], or FEP Blue Focus[®].

The drug list can change and may be updated quarterly. You can find the list of drugs that need prior approval on page 2 of this document.

Abecma
Adstiladrin
Alymsys
Amtagvi (lifileucel)
Amvuttra
Avastin
Avsola
Beovu
Beqvez
Breyanzi
Byooviz
Carvykti
Casgevy
Cimerli
Eylea
Fulphila
Fylnetra
Givlaari
Granix
Hemgenix
Herceptin
Herceptin Hylecta
Imlygic
Inflectra
Kanjinti
Kymriah
Lantidra
Lenmeldy
Lucentis
Luxturna
Lyfgenia
Mvasi

Neulasta
Neulasta/Onpro
Neupogen
Nivestym
Nyvepria
Ocrevus
Ogivri
Omisirge
Onpattro
Ontruzant
Oxlumo
Procrit/Epogen
Provence
Releuko
Remicade
Renflexis
Retacrit
Rethymic
Riabni
Rituxan Hycela
Roctavian
Rolvedon
Ruxience
Simponi Aria
Skyrizi
Skysona
Soliris
Stelara IV
Stelara SQ
Stimufend
Tecartus
Tecelra

Tegsedi
Trazimera
Truxima
Udenyca
Ultomiris
Unbranded Inflix
Vabysmo
Vegzelma
Vyjuvek
Vyvgart
Vyvgart Hytrulo
Yescarta
Zarxio
Ziextenzo
Zirabev
Zolgensma
Zynteglo