

## Specialty Pharmacy Drug List

If you are a plan member or health care provider, please contact Specialty Customer Care at (800) 237-2767, or visit [CVSspecialty.com](http://CVSspecialty.com).

| Drug Name                  | Drug Form    | GEHA Coverage | Non-Formulary/<br>GEHA Excluded | Preauth<br>Required | Preauth<br>Reviewer | Limited<br>Distribution | Exclusive to<br>CVS Specialty |
|----------------------------|--------------|---------------|---------------------------------|---------------------|---------------------|-------------------------|-------------------------------|
| <i>abacavir tab</i>        | Oral         | Preferred     |                                 |                     |                     |                         | X                             |
| <i>abiraterone acetate</i> | Oral         | Preferred     |                                 | X                   | Eviti               |                         | X                             |
| Actemra                    | IV/Injection | Non-Preferred | Non Formulary                   | X                   | CVS                 |                         | X                             |
| Actimmune                  | Injection    | Non-Preferred |                                 | X                   | CVS/Eviti           |                         | X                             |
| Adagen                     | Injection    | Preferred     |                                 | X                   | CVS                 | X                       |                               |
| Adcetris                   | IV           | Non-Preferred |                                 | X                   | Eviti               |                         | X                             |
| Adcirca                    | Oral         | Non-Preferred | Non Formulary                   | X                   | CVS                 |                         | X                             |
| <i>adefovir</i>            | Oral         | Preferred     | Non Formulary                   |                     |                     |                         | X                             |
| Adempas                    | Oral         | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| Advate                     | IV           | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| Adynovate                  | IV           | Preferred     | GEHA Excluded                   | X                   | CVS                 |                         | X                             |
| Afinitor                   | Oral         | Preferred     |                                 | X                   | Eviti               |                         | X                             |
| Afstyla                    | IV           | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| Aldurazyme                 | IV           | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| Alferon N                  | Injection    | Non-Preferred |                                 | X                   | CVS/Eviti           |                         | X                             |
| Aliqopa                    | Injection    | Preferred     |                                 | X                   | Eviti               | X                       |                               |
| Alphanate                  | IV           | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| AlphaNine SD               | IV           | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| Alprolix                   | IV           | Non-Preferred | Non Formulary                   | X                   | CVS                 |                         | X                             |
| Alunbrig                   | Oral         | Non-Preferred |                                 | X                   | Eviti               |                         | X                             |
| Ampyra                     | Oral         | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| Apligraf                   | Topical      | Preferred     |                                 |                     |                     | X                       |                               |
| Apokyn                     | Injection    | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| Aptivus                    | Oral         | Preferred     |                                 |                     |                     |                         | X                             |
| Aralast NP                 | IV           | Preferred     |                                 | X                   | CVS                 |                         | X                             |
| Aranesp                    | IV/Injection | Non-Preferred |                                 | X                   | CVS/Eviti           |                         | X                             |
| Arcalyst                   | Injection    | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| Arzerra                    | IV           | Non-Preferred |                                 | X                   | Eviti               |                         | X                             |
| Astagraf X                 | Oral         | Preferred     |                                 |                     |                     |                         | X                             |
| <i>atazanavir sulfate</i>  | Oral Powder  | Preferred     |                                 |                     |                     |                         | X                             |
| Atripla                    | Oral         | Preferred     |                                 |                     |                     |                         | X                             |
| Aubagio                    | Oral         | Preferred     |                                 | X                   | CVS                 |                         | X                             |
| Austedo                    | Oral         | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| Avastin                    | IV           | Non-Preferred |                                 | X                   | Eviti/CVS           |                         | X                             |
| Aveed                      | Injection    | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| Avonex                     | Injection    | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| <i>azacitidine</i>         | IV/Injection | Preferred     |                                 | X                   | Eviti               |                         | X                             |
| Baraclude                  | Oral         | Non-Preferred |                                 |                     |                     |                         | X                             |
| Bebulin                    | IV           | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| Beleodaq                   | IV           | Non-Preferred |                                 | X                   | Eviti               |                         | X                             |
| BeneFIX                    | IV           | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| Benlysta                   | IV           | Non-Preferred | GEHA Excluded                   | X                   | CVS                 |                         | X                             |
| Berinert                   | IV           | Non-Preferred | Non Formulary                   | X                   | CVS                 |                         | X                             |
| Besponsa                   | IV           | Preferred     |                                 | X                   | Eviti               | X                       |                               |
| Betaseron                  | Injection    | Preferred     |                                 | X                   | CVS                 |                         | X                             |
| Bethkis                    | Inhalent     | Preferred     |                                 | X                   | CVS                 |                         | X                             |
| <i>bexarotene</i>          | Oral         | Preferred     |                                 | X                   | Eviti               |                         | X                             |
| Biktarvy                   | Oral         | Preferred     |                                 |                     |                     |                         | X                             |
| Bivigam                    | Injection    | Non-Preferred |                                 | X                   | CVS                 |                         | X                             |
| Blincyto                   | IV           | Non-Preferred |                                 | X                   | Eviti               |                         | X                             |
| <i>bortezomib</i>          | IV           | Non-Preferred |                                 | X                   | Eviti               |                         | X                             |
| Bosulif                    | Oral         | Preferred     |                                 | X                   | Eviti               |                         | X                             |
| Braftovi                   | Oral         | Preferred     | GEHA Excluded                   | X                   | Eviti               | X                       |                               |
| Buphenyl                   | Oral         | Non-Preferred | Non Formulary                   | X                   | CVS                 |                         | X                             |
| Cabometyx                  | Oral         | Preferred     |                                 | X                   | CVS                 |                         | X                             |
| Cablivi                    | IV/SQ        | Non-Preferred | GEHA Excluded                   | X                   | CVS                 |                         | X                             |
| <i>capecitabine</i>        | Oral         | Preferred     |                                 | X                   | Eviti               |                         | X                             |

|                            |                |               |               |   |           |   |   |
|----------------------------|----------------|---------------|---------------|---|-----------|---|---|
| Caprelsa                   | Oral           | Preferred     |               | X | Eviti     | X |   |
| Carbaglu                   | Oral           | Preferred     |               | X | CVS       | X |   |
| Carimune NF                | IV             | Non-Preferred |               | X | CVS       |   | X |
| Cayston                    | Inhalant       | Preferred     |               | X | CVS       | X |   |
| CellCept                   | Oral/IV        | Non-Preferred |               |   |           |   | X |
| Ceprotin                   | IV             | Non-Preferred |               | X | CVS       |   | X |
| Cerdelga                   | Oral           | Preferred     |               | X | CVS       |   | X |
| Cerezyme                   | IV             | Preferred     |               | X | CVS       |   | X |
| Cholbam                    | Oral           | Non-Preferred |               | X | CVS       | X |   |
| Cimduo                     | Oral           | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Cimzia                     | Injection      | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Cinqair                    | IV             | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Cinryze                    | IV             | Non-Preferred |               | X | CVS       |   | X |
| Coagadex                   | Injection      | Preferred     |               | X | CVS       |   | X |
| Combivir                   | Oral           | Non-Preferred |               |   |           |   | X |
| Cometriq                   | Oral           | Non-Preferred |               | X | Eviti     | X |   |
| Complera                   | Oral           | Preferred     |               |   |           |   | X |
| Copaxone                   | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Copegus                    | Oral           | Non-Preferred |               | X | CVS       |   | X |
| Corifact                   | IV             | Preferred     |               | X | CVS       |   | X |
| Cosentyx                   | Injection      | Preferred     |               | X | CVS       |   | X |
| Cotellic                   | Oral           | Non-Preferred |               | X | Eviti     |   | X |
| Crixivan                   | Oral           | Preferred     |               |   |           |   | X |
| Crysvita                   | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Cuvitru                    | Injection      | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| <i>cyclosporine</i>        | Oral           | Preferred     |               |   |           |   | X |
| Cyramza                    | Injection      | Preferred     |               | X | Eviti     | X |   |
| Cystadane                  | Oral           | Preferred     |               |   |           | X |   |
| Cystagon                   | Oral           | Non-Preferred |               | X | CVS       |   | X |
| Cystaran                   | Ophthalmic     | Preferred     |               | X | CVS       | X |   |
| Cytogam                    | IV             | Non-Preferred |               | X | CVS       |   | X |
| Dacogen                    | IV             | Non-Preferred |               | X | Eviti     |   | X |
| Daklinza                   | Oral           | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Darzalex                   | IV             | Non-Preferred |               | X | Eviti     |   | X |
| Daurismo                   | Oral           | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| <i>decitabine</i>          | IV             | Preferred     |               | X | Eviti     |   | X |
| <i>deferoxamine</i>        | IV             | Preferred     |               | X | CVS       |   | X |
| Delstrigo                  | Oral           | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Descovy                    | Oral           | Preferred     |               |   |           |   | X |
| Desferal                   | Injection      | Non-Preferred |               | X | CVS       |   | X |
| <i>didanosine</i>          | Oral           | Preferred     |               |   |           |   | X |
| <i>dofetilide</i>          | Oral           | Preferred     |               | X | CVS       |   | X |
| Doptelet                   | Oral           | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Duopa                      | Oral           | Preferred     |               |   |           | X |   |
| Dupixent                   | IV             | Preferred     | GEHA Excluded | X | CVS       |   | X |
| Edurant                    | Oral           | Preferred     |               |   |           |   | X |
| <i>efavirenz</i>           | Oral           | Preferred     |               |   |           |   | X |
| Egrifta                    | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Elaprase                   | IV             | Non-Preferred |               | X | CVS       |   | X |
| Elelyso                    | Injection      | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Eligard                    | Injection      | Preferred     |               | X | CVS/Eviti |   | X |
| Eloctate                   | IV             | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Emflaza                    | Oral           | Preferred     | GEHA Excluded | X | CVS       | X |   |
| Empliciti                  | IV             | Non-Preferred |               | X | Eviti     |   | X |
| Emtriva                    | Oral           | Preferred     |               |   |           |   | X |
| Enbrel                     | Injection      | Preferred     |               | X | CVS       |   | X |
| <i>entecavir</i>           | Oral           | Preferred     |               |   |           |   | X |
| Entyvio                    | IV             | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Envarsus XR                | Oral/Injection | Non-Preferred |               |   |           |   | X |
| Epclusa                    | Oral           | Preferred     |               | X | CVS       |   | X |
| Epidiolex                  | Oral           | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Epivir                     | Oral           | Non-Preferred |               |   |           |   | X |
| Epivir HBV                 | Oral/Solution  | Non-Preferred |               |   |           |   | X |
| Epogen                     | IV             | Non-Preferred | GEHA Excluded | X | CVS/Eviti |   | X |
| <i>epoprostenol sodium</i> | IV             | Preferred     |               | X | CVS       |   | X |

|                                     |                |               |               |   |           |   |   |
|-------------------------------------|----------------|---------------|---------------|---|-----------|---|---|
| Epzicom                             | Oral           | Non-Preferred |               |   |           |   | X |
| Erbitux                             | IV             | Non-Preferred |               | X | Eviti     |   | X |
| Erivedge                            | Oral           | Non-Preferred |               | X | Eviti     |   | X |
| Erleada                             | Oral           | Preferred     | GEHA Excluded | X | Eviti     |   | X |
| Erwinaze                            | Injection      | Preferred     |               | X | Eviti     | X |   |
| Esbriet                             | Oral           | Preferred     |               | X | CVS       |   | X |
| Evomela                             | IV             | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Evotaz                              | Oral           | Preferred     |               |   |           |   | X |
| Exjade                              | Oral           | Non-Preferred |               | X | CVS       |   | X |
| Exondys 51                          | Injection      | Preferred     |               | X | CVS       | X |   |
| Extavia                             | Injection      | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Eylea                               | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Fabrazyme                           | IV             | Non-Preferred |               | X | CVS       |   | X |
| Farydak                             | Oral           | Non-Preferred | GEHA Excluded | X | Eviti     |   | X |
| Fasenra                             | Injection      | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Feiba NF                            | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Ferriprox                           | Oral           | Preferred     |               | X | CVS       | X |   |
| Fibryga                             | IV             | Non-Preferred |               | X | CVS       |   | X |
| Firazyr                             | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Firmagon                            | Injection      | Non-Preferred |               | X | Eviti     |   | X |
| Flebogamma                          | IV             | Non-Preferred |               | X | CVS       |   | X |
| Flebogamma DIF                      | IV             | Non-Preferred |               | X | CVS       |   | X |
| Flolan                              | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Folotyn                             | IV             | Non-Preferred |               | X | Eviti     |   | X |
| Forteo                              | Injection      | Preferred     |               | X | CVS       |   | X |
| <i>fosamprenavir</i>                | Oral           | Preferred     |               |   |           |   | X |
| Fulphila                            | Injection/IV   | Non-Preferred | GEHA Excluded | X | CVS/Eviti |   | X |
| Fusilev                             | IV             | Non-Preferred |               | X | Eviti     |   | X |
| Fuzeon                              | Injection      | Preferred     |               | X | CVS       |   | X |
| GamaSTAN                            | Injection      | Non-Preferred |               | X | CVS       |   | X |
| GamaSTAN S/D                        | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Gammagard Liquid                    | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Gammagard S/D                       | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Gammaked                            | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Gammaplex                           | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Gamunex C                           | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Gattex                              | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Gazyva                              | IV             | Non-Preferred |               | X | Eviti     |   | X |
| Gengraf                             | Oral           | Preferred     |               |   |           |   | X |
| Genotropin                          | Injection      | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Genvoya                             | Oral           | Preferred     |               |   |           |   | X |
| Gilenya                             | Oral           | Preferred     |               | X | CVS       |   | X |
| Gilotrif                            | Oral           | Non-Preferred |               | X | Eviti     | X |   |
| Glassia                             | IV             | Preferred     |               | X | CVS       |   | X |
| <i>glatiramer acetate</i>           | Injection      | Preferred     |               | X | CVS       |   | X |
| GLATOPA                             | Injection      | Preferred     |               | X | CVS       |   | X |
| Gleevec                             | Oral           | Non-Preferred | Non Formulary | X | Eviti     |   | X |
| Granix                              | Injection      | Non-Preferred | GEHA Excluded | X | CVS/Eviti |   | X |
| H.P. Acthar Gel                     | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Haegarda                            | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Halaven                             | Injection      | Non-Preferred |               | X | Eviti     |   | X |
| Harvoni                             | Oral           | Preferred     |               | X | CVS       |   | X |
| Helixate FS                         | IV             | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Hemlibra                            | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Hemofil M                           | IV             | Non-Preferred |               | X | CVS       |   | X |
| HepaGam B                           | Injection      | Non-Preferred |               |   |           |   | X |
| Hepsera                             | Oral           | Non-Preferred |               |   |           |   | X |
| Herceptin                           | Injection      | Non-Preferred |               | X | Eviti     |   | X |
| Hetlioz                             | Oral           | Preferred     |               | X | CVS       | X |   |
| Hizentra                            | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Humate-P                            | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Humatrope                           | Injection      | Preferred     |               | X | CVS       |   | X |
| Humira                              | Injection      | Preferred     |               | X | CVS       |   | X |
| Hycamtin                            | Oral/Injection | Non-Preferred |               | X | CVS/Eviti |   | X |
| <i>hydroxyprogesterone caproate</i> | Injection      | Preferred     |               | X | CVS       |   | X |

|                                   |           |               |               |   |           |   |   |
|-----------------------------------|-----------|---------------|---------------|---|-----------|---|---|
| HyperHEP B                        | Injection | Non-Preferred |               |   |           |   | X |
| HyperRHO S/D                      | Injection | Non-Preferred |               |   |           |   | X |
| HyQvia                            | Injection | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Ibrance                           | Oral      | Preferred     |               | X | Eviti     |   | X |
| Iclusig                           | Oral      | Preferred     |               | X | Eviti     | X |   |
| Idelvion                          | IV        | Non-Preferred |               | X | CVS       |   | X |
| Idhifa                            | Oral      | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Ilaris                            | Injection | Non-Preferred |               | X | CVS       |   | X |
| Ilumya                            | Injection | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Iluvien                           | Injection | Non-Preferred |               |   |           |   | X |
| <i>imatinib mesylate</i>          | Oral      | Preferred     |               | X | Eviti     |   | X |
| Imbruvica                         | Oral      | Preferred     |               | X | Eviti     | X |   |
| Imfinzi                           | IV        | Non-Preferred |               | X | Eviti     |   | X |
| Imlygic                           | Injection | Non-Preferred |               | X | Eviti     | X |   |
| Inbrija                           | Inhalant  | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Increlex                          | Injection | Non-Preferred |               | X | CVS       |   | X |
| Inflectra                         | IV        | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Inlyta                            | Oral      | Non-Preferred |               | X | Eviti     |   | X |
| Intelence                         | Oral      | Preferred     |               |   |           |   | X |
| Intron A                          | Injection | Non-Preferred |               | X | CVS/Eviti |   | X |
| Invirase                          | Oral      | Non-Preferred |               |   |           |   | X |
| Iressa                            | Oral      | Preferred     |               | X | Eviti     |   | X |
| Isentress                         | Oral      | Preferred     |               |   |           |   | X |
| Istodax                           | Injection | Non-Preferred |               | X | Eviti     |   | X |
| Ixempra                           | Injection | Non-Preferred |               | X | Eviti     |   | X |
| Ixinity                           | Inection  | Non-Preferred |               | X | CVS       |   | X |
| Jadenu                            | Oral      | Non-Preferred |               | X | CVS       |   | X |
| Jakafi                            | Oral      | Non-Preferred |               | X | Eviti     |   | X |
| Jetrea                            | Injection | Preferred     |               |   |           | X |   |
| Jevtana                           | Injection | Non-Preferred |               | X | Eviti     |   | X |
| Jivi                              | Injection | Preferred     |               | X | CVS       |   | X |
| Juluca                            | Oral      | Non-Preferred |               |   |           |   | X |
| Juxtapid                          | Oral      | Non-Preferred |               | X | CVS       | X |   |
| Jynarque                          | Oral      | Preferred     |               | X | CVS       | X |   |
| Kadcyla                           | Injection | Non-Preferred |               | X | Eviti     |   | X |
| Kalbitor                          | Injection | Non-Preferred |               | X | CVS       |   | X |
| Kaletra                           | Oral      | Non-Preferred |               |   |           |   | X |
| Kalydeco                          | Oral      | Non-Preferred |               | X | CVS       | X |   |
| Kanuma                            | Injection | Non-Preferred |               |   |           |   | X |
| Keveyis                           | Oral      | Preferred     |               | X | CVS       | X |   |
| Kevzara                           | Injection | Preferred     |               | X | CVS       |   | X |
| Keytruda                          | Injection | Non-Preferred |               | X | Eviti     |   | X |
| Kineret                           | Injection | Non-Preferred | Non Formulary | X | CVS       | X |   |
| Kisqali                           | ORAL      | Preferred     |               | X | Eviti     |   | X |
| Kisqali Femara                    | ORAL      | Preferred     |               | X | Eviti     |   | X |
| Kitabis Pak                       | Inhalant  | Non-Preferred |               | X | CVS       |   | X |
| Koate-DVI                         | IV        | Non-Preferred |               | X | CVS       |   | X |
| Kogenate FS                       | IV        | Preferred     |               | X | CVS       |   | X |
| Korlym                            | Oral      | Preferred     |               | X | CVS       | X |   |
| Kovaltry                          | IV        | Non-Preferred |               | X | CVS       |   | X |
| Krystexxa                         | Injection | Non-Preferred |               | X | CVS       |   | X |
| Kuvan                             | Oral      | Non-Preferred |               | X | CVS       |   | X |
| Kynamro                           | Injection | Non-Preferred |               | X | CVS       | X |   |
| Kyprolis                          | Injection | Non-Preferred |               | X | Eviti     |   | X |
| <i>lamivudine zidovudine</i>      | Oral      | Non-Preferred |               |   |           |   | X |
| <i>lamivudine/ lamivudine HBV</i> | Oral      | Non-Preferred |               |   |           |   | X |
| Lartruvo                          | Injection | Preferred     |               | X | CVS       | X |   |
| <i>ledipasvir/sofosbuvir</i>      | Oral      | Preferred     | GEHA Excluded | X | CVS       |   | X |
| Lemtrada                          | IV        | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Lenvima                           | Oral      | Preferred     |               | X | Eviti     |   | X |
| Letairis                          | Oral      | Preferred     |               | X | CVS       |   | X |
| Leukine                           | Injection | Non-Preferred |               | X | CVS/Eviti |   | X |
| <i>leuprolide acetate</i>         | Injection | Preferred     | GEHA Excluded | X | CVS/Eviti |   | X |
| <i>levoleucovorin calcium</i>     | Injection | Non-Preferred | GEHA Excluded | X | Eviti     |   | X |
| Lexiva                            | Oral      | Non-Preferred |               |   |           |   | X |

|                                |              |               |               |   |           |   |   |
|--------------------------------|--------------|---------------|---------------|---|-----------|---|---|
| Lonsurf                        | Oral         | Non-Preferred |               | X | Eviti     |   | X |
| <i>lopinavir ritonavir</i>     | Oral         | Preferred     |               |   |           |   | X |
| Lorbrena                       | Oral         | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Lucentis                       | Injection    | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Lumizyme                       | IV           | Non-Preferred |               | X | CVS       |   | X |
| Lumoxiti                       | Injection    | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Lupaneta Pack                  | Injectable   | Non-Preferred |               | X | CVS       |   | X |
| Lupron                         | Injection    | Preferred     |               | X | Eviti/CVS |   | X |
| Lupron Depot 11.25mg           | Injection    | Non-Preferred |               | X | Eviti/CVS |   | X |
| Lupron Depot 22.5mg            | Injection    | Non-Preferred | Non Formulary | X | Eviti/CVS |   | X |
| Lupron Depot 3.75mg            | Injection    | Non-Preferred |               | X | Eviti/CVS |   | X |
| Lupron Depot 30mg              | Injection    | Non-Preferred | Non Formulary | X | Eviti/CVS |   | X |
| Lupron Depot 45mg              | Injection    | Non-Preferred | Non Formulary | X | Eviti/CVS |   | X |
| Lupron Depot 7.5mg             | Injection    | Non-Preferred | Non Formulary | X | Eviti/CVS |   | X |
| Lynparza                       | Oral         | Non-Preferred |               | X | Eviti     |   | X |
| Macugen                        | IV           | Non-Preferred |               |   |           |   | X |
| Makena                         | Injection    | Non-Preferred |               | X | CVS       |   | X |
| Marqibo                        | Injection    | Preferred     |               |   |           | X |   |
| Mavyret                        | Oral         | Non-Preferred |               | X | CVS       |   | X |
| Mekinist                       | Oral         | Non-Preferred |               | X | Eviti     |   | X |
| Mepsevii                       | IV/Injection | Preferred     |               | X | CVS       | X |   |
| MICRhoGAM                      | IV           | Non-Preferred |               |   |           |   | X |
| Mircera                        | Injection    | Non-Preferred |               | X | CVS       | X |   |
| <i>mitoxantrone</i>            | IV           | Preferred     |               | X | Eviti     |   | X |
| Moderiba                       | Oral         | Non-Preferred |               | X | CVS       |   | X |
| Monoclate-P                    | IV           | Non-Preferred |               | X | CVS       |   | X |
| Mononine                       | IV           | Non-Preferred |               | X | CVS       |   | X |
| Mozobil                        | Injection    | Non-Preferred |               | X | Eviti     |   | X |
| Mugard                         | Oral         | Non-Preferred |               |   |           |   | X |
| Mulpleta                       | Oral         | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Myalept                        | Injection    | Preferred     |               | X | CVS       | X |   |
| <i>mycophenolate mofetil</i>   | Oral         | Non-Preferred |               |   |           |   | X |
| <i>mycophenolate sodium DR</i> | Oral         | Preferred     |               |   |           |   | X |
| Myfortic                       | Oral         | Non-Preferred |               |   |           |   | X |
| Mylotarg                       | Injection    | Preferred     |               | X | CVS       | X |   |
| Myozyme                        | Injection    | Non-Preferred |               | X | CVS       |   | X |
| Nabi-HB                        | Injection    | Non-Preferred |               |   |           |   | X |
| Naglazyme                      | Injection    | Non-Preferred |               | X | CVS       |   | X |
| Natpara                        | Injection    | Non-Preferred |               | X | CVS       |   | X |
| Neoral                         | Oral         | Non-Preferred |               |   |           |   | X |
| Nerlynx                        | Oral         | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Neulasta                       | Injection    | Non-Preferred |               | X | CVS/Eviti |   | X |
| Neumega                        | Injection    | Non-Preferred |               | X | CVS/Eviti |   | X |
| Neupogen                       | Injection    | Non-Preferred | Non Formulary | X | CVS/Eviti |   | X |
| <i>nevirapine</i>              | Oral         | Preferred     |               |   |           |   | X |
| Nexavar                        | Oral         | Preferred     |               | X | Eviti     |   | X |
| Ninlaro                        | Oral         | Non-Preferred |               | X | Eviti     |   | X |
| Nivestym                       | Injection    | Non-Preferred | GEHA Excluded | X | CVS/Eviti |   | X |
| Norditropin                    | Injection    | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Northera                       | Oral         | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Norvir                         | Oral         | Non-Preferred |               |   |           |   | X |
| NovoEight                      | Injection    | Non-Preferred |               | X | CVS       |   | X |
| NovoSeven RT                   | Injection    | Non-Preferred |               | X | CVS       |   | X |
| Nplate                         | Injection    | Non-Preferred |               | X | CVS       |   | X |
| Nucala                         | Injection    | Preferred     |               | X | CVS       |   | X |
| Nulojix                        | Injection    | Non-Preferred |               |   |           |   | X |
| Nuplazid                       | Oral         | Non-Preferred |               | X | CVS       |   | X |
| Nutropin                       | Injection    | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Nuwiq                          | Injection    | Non-Preferred |               | X | CVS       |   | X |
| Obizur                         | Injection    | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Ocaliva                        | Oral         | Non-Preferred |               | X | CVS       |   | X |
| Ocrevus                        | IV           | Non-Preferred |               | X | CVS       |   | X |
| Octagam                        | Injection    | Non-Preferred |               | X | CVS       |   | X |
| <i>octreotide Acetate</i>      | Injection    | Preferred     |               | X | CVS       |   | X |
| Odefsey                        | Oral         | Preferred     |               |   |           |   | X |
| Odomzo                         | Oral         | Non-Preferred |               | X | Eviti     |   | X |

|                              |                |               |               |   |           |   |   |
|------------------------------|----------------|---------------|---------------|---|-----------|---|---|
| Ofev                         | Oral           | Preferred     |               | X | CVS       |   | X |
| Olumiant                     | Oral           | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Olysio                       | Oral           | Non-Preferred | Non Formulary | X | CVS       | X |   |
| Omnitrope                    | Injection      | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Omontys                      | Injection      | Non-Preferred |               | X | CVS       | X |   |
| Oncaspar                     | Injection      | Non-Preferred |               | X | Eviti     |   | X |
| Onivyde                      | Injection      | Preferred     |               | X | Eviti     | X |   |
| Onpattro                     | IV             | Preferred     | GEHA Excluded | X | CVS       | X |   |
| Opdivo                       | Injection      | Non-Preferred |               | X | Eviti     |   | X |
| Opsumit                      | Oral           | Preferred     |               | X | CVS       |   | X |
| Orencia                      | Injection/IV   | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Orenitram                    | Oral           | Non-Preferred |               | X | CVS       |   | X |
| Orfadin                      | Oral           | Preferred     |               | X | CVS       | X |   |
| Orkambi                      | Oral           | Non-Preferred |               | X | CVS       | X |   |
| Otezla                       | Oral           | Preferred     |               | X | CVS       |   | X |
| Otrexup                      | Injection      | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Ozurdex                      | Injection      | Non-Preferred |               |   |           |   | X |
| Panzyga                      | Injection      | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Parsabiv                     | Injection      | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Pegasys                      | Injection      | Non-Preferred | Non Formulary | X | CVS       |   | X |
| PegIntron                    | Injection      | Preferred     |               | X | CVS       |   | X |
| Perjeta                      | Injection      | Non-Preferred |               | X | Eviti     |   | X |
| <i>phenylbutyrate sodium</i> | Oral           | Preferred     |               | X | CVS       |   | X |
| Pifeltro                     | Oral           | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Plegridy                     | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Pomalyst                     | Oral           | Non-Preferred |               | X | Eviti     |   | X |
| Portrazza                    | Injection      | Preferred     |               | X | CVS       |   | X |
| Poteligeo                    | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Praluent                     | Injection      | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Prezcobix                    | Oral           | Preferred     |               |   |           |   | X |
| Prezista                     | Oral           | Preferred     |               |   |           |   | X |
| Prialt                       | Injection      | Preferred     |               | X | CVS       | X |   |
| Privigen                     | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Procrit                      | Injection      | Non-Preferred | GEHA Excluded | X | CVS/Eviti |   | X |
| Procysbi                     | Oral           | Non-Preferred | GEHA Excluded | X | CVS       | X |   |
| Profilnine SD                | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Prograf                      | Oral           | Non-Preferred | Non Formulary |   |           |   | X |
| Prolastin                    | Injection      | Preferred     |               | X | CVS       | X |   |
| Prolastin-C                  | Injection      | Preferred     |               | X | CVS       | X |   |
| Proleukin                    | Injection      | Non-Preferred |               | X | Eviti     |   | X |
| Prolia                       | Injection      | Preferred     |               | X | CVS       |   | X |
| Promacta                     | Oral           | Non-Preferred |               | X | CVS       |   | X |
| Pulmozyme                    | Inhalant       | Non-Preferred |               | X | CVS       |   | X |
| Purixan                      | Oral           | Non-Preferred |               | X | Eviti     |   | X |
| Qutenza                      | Topical        | Preferred     |               |   |           | X |   |
| Radicava                     | IV             | Non-Preferred |               | X | CVS       | X |   |
| Rapamune                     | Oral           | Non-Preferred |               |   |           |   | X |
| Rasuvo                       | Injection      | Preferred     |               | X | CVS       |   | X |
| Ravicti                      | Oral           | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Rebetol                      | Oral           | Non-Preferred |               | X | CVS       |   | X |
| Rebif                        | Injection      | Preferred     |               | X | CVS       |   | X |
| Rebiny                       | IV             | Preferred     |               | X | CVS       |   | X |
| Reclast                      | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Recombinate                  | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Remicade                     | Injection      | Preferred     |               | X | CVS       |   | X |
| Remodulin                    | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Renflexis                    | IV             | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Repatha                      | Injection      | Preferred     |               | X | CVS       |   | X |
| Rescriptor                   | Oral           | Non-Preferred |               |   |           |   | X |
| Retacrit                     | Injection      | Preferred     |               | X | CVS/Eviti |   | X |
| Retisert                     | Ophthalmic     | Non-Preferred |               |   |           |   | X |
| Retrovir                     | Injection/Oral | Preferred     |               |   |           |   | X |
| Revatio                      | Oral           | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Revlimid                     | Oral           | Preferred     |               | X | Eviti     |   | X |
| Reyataz                      | Oral           | Preferred     |               |   |           |   | X |

|                               |                |               |               |   |           |   |   |
|-------------------------------|----------------|---------------|---------------|---|-----------|---|---|
| RhoGAM                        | Injection      | Non-Preferred |               |   |           |   | X |
| Rhophylac                     | Injection      | Non-Preferred |               |   |           |   | X |
| RiaSTAP                       | Injection      | Non-Preferred |               | X | CVS       |   | X |
| RibaPak                       | Oral           | Non-Preferred |               | X | CVS       |   | X |
| Ribasphere                    | Oral           | Non-Preferred |               | X | CVS       |   | X |
| Ribatab                       | Oral           | Non-Preferred |               | X | CVS       |   | X |
| <i>ribavirin</i>              | Oral           | Non-Preferred |               | X | CVS       |   | X |
| <i>ritonavir</i>              | Oral           | Preferred     |               |   |           |   | X |
| Rituxan                       | IV             | Non-Preferred |               | X | CVS/Eviti |   | X |
| Rituxan Hycela                | IV             | Non-Preferred |               | X | CVS/Eviti |   | X |
| Rixubis                       | Injection      | Non-Preferred |               | X | CVS       |   | X |
| <i>romidepsin</i>             | Injectable     | Non-Preferred |               | X | Eviti     |   | X |
| Rubraca                       | Oral           | Non-Preferred |               | X | Eviti     |   | X |
| Ruconest                      | Injection      | Preferred     |               | X | CVS       |   | X |
| Rydapt                        | Oral           | Preferred     |               | X | Eviti     |   | X |
| Sabril                        | Oral           | Non-Preferred |               | X | CVS       |   | X |
| Sabril pwd                    | Oral           | Non-Preferred |               | X | CVS       |   | X |
| Saizen                        | Injection      | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Samsca                        | Oral           | Non-Preferred |               | X | CVS       |   | X |
| Sandimmune                    | Oral           | Non-Preferred |               |   |           |   | X |
| Sandostatin                   | Injection      | Non-Preferred |               | X | CVS/Eviti |   | X |
| Sandostatin LAR               | Injection      | Non-Preferred | Non Formulary | X | CVS/Eviti |   | X |
| Selzentry                     | Oral           | Non-Preferred |               |   |           |   | X |
| Sensipar                      | Oral           | Non-Preferred |               | X | CVS       |   | X |
| Serostim                      | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Signifor                      | Injection      | Preferred     |               | X | CVS       | X |   |
| Signifor LAR                  | Injection      | Non-Preferred |               | X | CVS       | X |   |
| Siklos                        | Oral           | Preferred     | GEHA Excluded | X | CVS       | X |   |
| <i>sildenafil citrate</i>     | Oral/Injection | Preferred     |               | X | CVS       |   | X |
| Siliq                         | Solution       | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Simponi                       | Injection      | Preferred     |               | X | CVS       |   | X |
| Simponi ARIA                  | Injection      | Preferred     |               | X | CVS       |   | X |
| <i>sirolimus tab</i>          | Oral           | Preferred     |               |   |           |   | X |
| <i>sofosbuvir/velpatasvir</i> | Oral           | Preferred     | GEHA Excluded | X | CVS       |   | X |
| Solesta                       | Injection      | Non-Preferred |               |   |           |   | X |
| Soliris                       | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Somatuline Depot              | Injection      | Preferred     |               | X | CVS/Eviti |   | X |
| Somavert                      | Injection      | Preferred     |               | X | CVS       |   | X |
| Sovaldi                       | Oral           | Non-Preferred |               | X | CVS       |   | X |
| Sprycel                       | Oral           | Preferred     |               | X | Eviti     |   | X |
| <i>stavudine</i>              | Oral           | Preferred     |               | X | CVS       |   | X |
| Stelara                       | Injection      | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Stelara IV                    | IV             | Preferred     |               | X | CVS       |   | X |
| Stimate                       | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Stivarga                      | Oral           | Non-Preferred |               | X | Eviti     |   | X |
| Strensiq                      | Injection      | Preferred     |               | X | CVS       | X |   |
| Stribild                      | Oral           | Preferred     |               |   |           |   | X |
| Sublocade                     | Injection      | Preferred     |               | X | CVS       | X |   |
| Supprelin LA                  | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Sustiva                       | Oral           | Non-Preferred |               |   |           |   | X |
| Sutent                        | Oral           | Preferred     |               | X | Eviti     |   | X |
| Sylatron                      | Injection      | Non-Preferred |               | X | Eviti     |   | X |
| Sylvant                       | Injection      | Preferred     |               | X | Eviti     |   | X |
| Symfi Lo                      | Oral           | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Synagis                       | Injection      | Non-Preferred |               | X | CVS       |   | X |
| Synribo                       | Injection      | Preferred     |               | X | Eviti     | X |   |
| Syntuza                       | Oral           | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| <i>tacrolimus</i>             | IV/Oral        | Preferred     |               |   |           |   | X |
| Tafinlar                      | Oral           | Non-Preferred |               | X | Eviti     |   | X |
| Tagrisso                      | Oral           | Non-Preferred |               | X | Eviti     |   | X |
| Takhzyro                      | Injection      | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Taltz                         | Injection      | Preferred     |               | X | CVS       |   | X |
| Talzenna                      | Oral           | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Tarceva                       | Oral           | Preferred     |               | X | Eviti     |   | X |
| Targretin                     | Oral           | Non-Preferred |               | X | Eviti     |   | X |

|                                    |            |               |               |   |           |   |   |
|------------------------------------|------------|---------------|---------------|---|-----------|---|---|
| Tasigna                            | Oral       | Non-Preferred | Non Formulary | X | Eviti     |   | X |
| Tavalisse                          | Oral       | Non-Preferred | GEHA Excluded | X | CVS       | X |   |
| Tecentriq                          | Injection  | Non-Preferred |               | X | Eviti     |   | X |
| Tecfidera                          | Oral       | Preferred     |               | X | CVS       |   | X |
| Technivie                          | Oral       | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Tegsedi                            | Injection  | Preferred     | GEHA Excluded | X | CVS       |   | X |
| Temodar                            | Oral       | Non-Preferred |               | X | Eviti     |   | X |
| <i>temozolomide</i>                | Injection  | Preferred     |               | X | Eviti     |   |   |
| <i>temsirolimus</i>                | Injection  | Preferred     |               | X | CVS/Eviti |   | X |
| <i>tenofovir disoproxil fumate</i> | ORAL       | Preferred     |               |   |           |   | X |
| Tepadina                           | IV         | Non-Preferred |               | X | Eviti     |   | X |
| <i>tetrabenazine</i>               | Oral       | Preferred     |               | X | CVS       |   | X |
| Tev-Tropin                         | Injection  | Non-Preferred |               | X | CVS       |   | X |
| Thalomid                           | Oral       | Preferred     |               | X | Eviti     |   | X |
| Thyrogen                           | Injection  | Non-Preferred |               | X | CVS/Eviti |   | X |
| Tikosyn                            | Oral       | Non-Preferred |               | X | CVS       |   | X |
| Tivicay                            | Oral       | Preferred     |               |   |           |   | X |
| TOBI                               | Inhalant   | Non-Preferred | Non Formulary | X | CVS       |   | X |
| TOBI Podhaler                      | Inhalant   | Non-Preferred | Non Formulary | X | CVS       |   | X |
| <i>tobramycin nebulizer</i>        | Inhalant   | Preferred     |               | X | CVS       |   | X |
| Torisel                            | Injection  | Non-Preferred |               | X | Eviti     |   |   |
| Tracleer                           | Oral       | Preferred     |               | X | CVS       |   | X |
| Treanda                            | Injection  | Non-Preferred |               | X | CVS       |   | X |
| Trelstar                           | Injection  | Non-Preferred |               | X | Eviti     |   | X |
| Tremfya                            | Injection  | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Tretten                            | Injection  | Non-Preferred |               | X | CVS       |   | X |
| Triumeq                            | Oral       | Preferred     |               |   |           |   | X |
| Trizivir                           | Oral       | Non-Preferred |               |   |           |   | X |
| Trogarzo                           | IV         | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Truvada                            | Oral       | Preferred     |               |   |           |   | X |
| Tybost                             | Oral       | Non-Preferred |               |   |           |   | X |
| Tykerb                             | Oral       | Preferred     |               | X | Eviti     |   | X |
| Tymlos                             | Injection  | Preferred     |               | X | CVS       |   | X |
| Tysabri                            | Injection  | Preferred     |               | X | CVS       |   | X |
| Tyvaso                             | Inhalant   | Non-Preferred |               | X | CVS       |   | X |
| Udenyca                            | Injection  | Non-Preferred |               | X | Eviti     |   | X |
| Unituxin                           | IV         | Preferred     |               | X | Eviti     | X |   |
| Valchlor                           | Topical    | Preferred     |               | X | Eviti     | X |   |
| Valstar                            | Injection  | Non-Preferred |               | X | Eviti     |   | X |
| Vantas                             | Injection  | Non-Preferred |               | X | Eviti     |   | X |
| Varithena                          | IV         | Preferred     |               |   |           | X |   |
| Varizig                            | Injection  | Non-Preferred |               |   |           |   | X |
| Vectibix                           | Injection  | Non-Preferred |               | X | Eviti     |   | X |
| Velcade                            | Injection  | Non-Preferred |               | X | Eviti     |   | X |
| Veletri                            | Injection  | Non-Preferred |               | X | CVS       |   | X |
| Vemlidy                            | Oral       | Preferred     |               |   |           |   | X |
| Venclexta                          | Oral       | Preferred     |               | X | Eviti     | X |   |
| Ventavis                           | Inhalation | Non-Preferred |               | X | CVS       |   | X |
| Verzenio                           | Oral       | Non-Preferred |               | X | CVS       |   | X |
| Vidaza                             | Injection  | Non-Preferred |               | X | Eviti     |   | X |
| Videx                              | Oral       | Non-Preferred |               |   |           |   | X |
| Videx EC                           | Oral       | Non-Preferred |               |   |           |   | X |
| Viekira Pak                        | Oral       | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Viekira XR                         | Oral       | Non-Preferred | Non Formulary | X | CVS       |   | X |
| <i>vigabatrin Powder</i>           | Powder     | Preferred     |               | X | CVS       |   | X |
| Vigadrone                          | Oral       | Preferred     |               | X | CVS       |   | X |
| Vimizim                            | Injection  | Non-Preferred |               | X | CVS       |   | X |
| Viracept                           | Oral       | Non-Preferred |               |   |           |   | X |
| Viramune                           | Oral       | Non-Preferred |               |   |           |   | X |
| Viramune XR                        | Oral       | Non-Preferred |               |   |           |   | X |
| Viread                             | Oral       | Preferred     |               |   |           |   | X |
| Vistogard                          | Oral       | Non-Preferred |               | X | CVS       | X |   |
| Visudyne                           | Injection  | Non-Preferred |               |   |           |   | X |
| Vitrakvi                           | Oral       | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Vivitrol                           | Injection  | Non-Preferred |               | X | CVS       |   | X |
| Vizimpro                           | Oral       | Non-Preferred | GEHA Excluded | X | CVS       |   | X |



|                        |                 |               |               |   |           |   |   |
|------------------------|-----------------|---------------|---------------|---|-----------|---|---|
| Vonvendi               | Injection       | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Vosevi                 | Oral            | Preferred     |               | X | CVS       |   | X |
| Votrient               | Oral            | Preferred     |               | X | Eviti     |   | X |
| VPRIV                  | Injection       | Non-preferred |               | X | CVS       |   | X |
| Vyxeos                 | Injection       | Preferred     |               | X | Eviti     | X |   |
| Wilate                 | Injection       | Non-preferred |               | X | CVS       |   | X |
| WinRho SDF             | Injection       | Non-preferred |               |   |           |   | X |
| Xalkori                | Oral            | Non-preferred |               | X | Eviti     |   | X |
| Xeljanz                | Oral            | Preferred     |               | X | CVS       |   | X |
| Xeljanz XR             | Oral            | Preferred     |               | X | CVS       |   | X |
| Xeloda                 | Oral            | Non-preferred |               | X | Eviti     |   | X |
| Xenazine               | Oral            | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Xermelo                | Oral            | Preferred     |               |   |           | X |   |
| Xgeva                  | Injection       | Non-preferred |               | X | Eviti     |   | X |
| Xiaflex                | Injection       | Preferred     |               | X | CVS       | X |   |
| Xolair                 | Injection       | Non-preferred |               | X | CVS       |   | X |
| Xospata                | Oral            | Preferred     | GEHA Excluded | X | Eviti     | X |   |
| Xtandi                 | Oral            | Preferred     |               | X | Eviti     |   | X |
| Xuriden                | Oral            | Preferred     |               |   |           | X |   |
| Xyntha                 | IV              | Non-preferred |               | X | CVS       |   | X |
| Xyrem                  | Oral            | Preferred     |               | X | CVS       | X |   |
| Yervoy                 | Injection       | Non-preferred |               | X | Eviti     |   | X |
| Yondelis               | Injection       | Non-preferred |               | X | Eviti     |   | X |
| Yonsa                  | Oral            | Non-Preferred |               | X | Eviti     |   | X |
| Zaltrap                | Injection       | Non-Preferred |               | X | Eviti     |   | X |
| Zarxio                 | Injection       | Preferred     |               | X | CVS/Eviti |   | X |
| Zavesca                | Oral            | Preferred     |               | X | CVS       | X |   |
| Zejula                 | Oral            | Preferred     |               | X | Eviti     | X |   |
| Zelboraf               | Oral            | Non-preferred |               | X | Eviti     |   | X |
| Zemaira                | Injection       | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Zepatier               | Oral            | Non-Preferred | Non Formulary | X | CVS       |   | X |
| Zerit                  | Oral            | Non-preferred |               |   |           |   | X |
| Ziagen                 | Oral            | Non-preferred |               |   |           |   | X |
| <i>zidovudine</i>      | Oral/ Injection | Non-preferred |               |   |           |   | X |
| Zinbryta               | Injection       | Preferred     | GEHA Excluded | X | CVS       |   | X |
| Zoladex                | Injection       | Non-Preferred |               | X | CVS/Eviti |   | X |
| <i>zoledronic acid</i> | Injection       | Preferred     |               | X | CVS/Eviti |   | X |
| Zolinza                | Oral            | Non-preferred |               | X | Eviti     |   | X |
| Zomacton               | Injection       | Non-Preferred | GEHA Excluded | X | CVS       |   | X |
| Zometa                 | Injection       | Non-preferred |               | X | CVS/Eviti |   | X |
| Zorbtive               | Injection       | Non-preferred |               | X | CVS       |   | X |
| Zortress               | Oral            | Non-preferred |               |   |           |   | X |
| Zydelig                | Oral            | Non-Preferred |               | X | Eviti     |   | X |
| Zykadia                | Oral            | Non-preferred |               | X | Eviti     |   | X |
| Zytiga                 | Oral            | Non-Preferred | GEHA Excluded | X | Eviti     |   | X |

Preferred & Non-Preferred: Medication is on the CVS Caremark formulary.

Non-Formulary: Medications are not on the CVS Caremark formulary and require medical necessity review for coverage.

Plan Exclusion: GEHA Non-Covered Medication.

Limited Distribution: CVS Specialty does not have access to dispense the medication.

This is a listing of specialty medications for GEHA. It does not guarantee coverage. Due to the large number of available medicines, this list may not be all inclusive and may change without notice. Medications may or may not reflect the appropriate formulary tier or coverage logic depending upon the specific diagnoses, regardless of their appearance on this document. Recurring oral medications are to be processed through the pharmacy benefit. Listed products are for informational purposes only and are not intended to replace the clinical judgment of the prescriber. This document contains confidential and proprietary information of CVS Specialty and may not be reproduced, distributed or printed without written permission from CVS Specialty. This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Specialty. Please reference the GEHA Benefit Plan Brochure, Section 5(f) Prescription Drug Benefits, for benefit information.