Medicare Part B Prescription Drugs – Step Therapy

Starting **October 1, 2026**, Step Therapy will be required for the non-preferred drugs listed in the table below. These requirements are in addition to the Step Therapy requirements which went into effect on July 1, 2026, and January 1, 2026. Part B Step Therapy Preferred Drug list applies to all SCAN plans in California and SCAN Embrace (HMO POS I-SNP), SCAN Embrace Together (HMO POS I-SNP) in Maricopa and Pima Counties. This list is subject to change. To see the most up-to-date prior authorization information, please visit SCAN Prior Authorization Requirements and SCAN Prior Authorization Requirement Changes Effective 8/1/2026. These policies can also be found at Medical Policies and Guidelines | SCAN Health Plan.

Therapeutic Class	Effective Date	Preferred	Non-Preferred
GnRH/LHRH Agents for ADT in Prostate Cancer PBP0334 - Part B Step Therapy Criteria for GnRH/LHRH Agents for ADT in Prostate Cancer	**10/1/2026**	Eligard (J9217), Lupron Depot (J9217), Trelstar (J3315)	Camcevi (J1952), Firmagon (J9155), Lutrate (J1954), Vabrinty (J9217), Zoladex/Zoladex LA (J9202)
Evenity for osteoporosis (revised) PBP0311 - Part B Step Therapy Criteria for Evenity	**10/1/2026**	Zoledronic acid (J3489) Jubbonti (Q5136) Prolia (J0897)	Evenity (J3111)
Interleukin Inhibitors for IBD, Psoriasis, and Psoriatic arthritis PBP0335 - Part B Step Therapy Criteria for Interleukin Inhibitors in IBD, Psoriasis, and Psoriatic Arthritis	**10/1/2026**	Cosentyx (J3247 for PsO and PsA)[1], Otulfi (Q9999),Pyzchiva (Q9997), Selarsdi (Q9998), Skyrizi (J2327), Tremfya (J1628), Yesintek (Q5100)	Ilumya (J3245), Imuldosa (Q5098), Omvoh (J2267), Stelara (J3358), Steqeyma (Q5099), Wezlana (Q5138)
Zusduri for LG-IR-NMIBC with prior TURBT PBP0347 - Part B Step Therapy Criteria for Zusduri	**10/1/2026**	Gemcitabine (J9201, J9196), Gemcitabine/Docetaxel (sequential) (J9201, J9196/J9171), Mitomycin C, generic (J9280), TICE BCG (J9030)	Zusduri (J9282)
Anti-CD20 monoclonal antibody for Multiple Sclerosis PBP0321 - Part B Step Therapy Criteria for Anti-CD20 Monoclonal Antibody for Multiple Sclerosis	7/1/2026	Briumvi (J2329) Ocrevus (J2350) Ocrevus Zunobo (J2351)	Lemtrada (J0202) Tysabri (J2323) Tyruko (Q5134)
Anti-integrin monoclonal antibody (α4β7 inhibitor) for Inflammatory Bowel Disease (IBD) PBP0322 - Part B Step Therapy Criteria for Anti-integrin monoclonal antibody (α4β7 inhibitor) for Inflammatory Bowel Disease (IBD)	7/1/2026	Entyvio (J3380)	Tysabri (J2323) Tyruko (Q5134)
Antifolate Antimetabolite (pemetrexed) for Non Small Cell Lung Cancer (NSCLC) PBP0323 - Part B Step Therapy Criteria for Antifolate Antimetabolite (pemetrexed) for Non Small Cell Lung Cancer (NSCLC)	7/1/2026	Generic Alimta (J9305) pemetrexed Accord (J9296) pemetrexed ditromethamine (J9323) pemetrexed Hospira (J9294) pemetrexed Sandoz (J9297)	Axtle (J9292) Pemfexy (J9304) Pemrydi RTU (J9324)

		pemetrexed Teva (J9314)	
Botulinum Toxins A and B PBP0324 - Part B Step Therapy Criteria for Botulinum Toxins A and B	7/1/2026	**Cervical Dystonia:** Daxxify (J0589) Myobloc (J0587) Xeomin (J0588) **Sialorrhea**: Myobloc (J0587) **Spasticity:** Xeomin (J0588)	Botox (J0585) Dysport (J0586)
C1 inhibitors for Hereditary Angioedema – Acute PBP0325 - Part B Step Therapy Criteria for C1 inhibitors for Hereditary Angioedema – Acute	7/1/2026	Icatibant acetate, generic (J1744)	Berinert (J0597) Kalbitor (J1290) Ruconest (J0596)
C1 inhibitors for Hereditary Angioedema – Prophylaxis PBP0326 - Part B Step Therapy Criteria for C1 inhibitors for Hereditary Angioedema – Prophylaxis	7/1/2026	Cinryze IV (J0598) Haegarda IV (J0599) Takhzyro (J0593)	Dawnzera (J3590)
Complement C5 inhibitors and FcRn antagonists for Myasthenia Gravis PBP0327 - Part B Step Therapy Criteria for Complement C5 inhibitors and FcRn antagonists for Myasthenia Gravis	7/1/2026	Epysqli (Q5151) Uplizna (J1823) Vyvgart (J9332) Vyvgart Hytrulo (J9334)	Bkemv (Q5152) Imaavy (J9256) Rystiggo (J9333) Soliris (J1299) Ultomiris (J1303)
Complement inhibitors for Atypical Hemolytic Uremic Syndrome (aHUS), Paroxysmal Nocturnal Hemoglobinuria (PNH), and Neuromyelitis Optica Spectrum Disorder (NMOSD) PBP0329 - Part B Step Therapy Criteria for Complement inhibitors for aHUS, PNH, and NMOSD	7/1/2026	**aHUS:** Epysqli (Q5151) Ultomiris IV (J1303) **NMOSD:** Epysqli (Q5151) Ultomiris IV (J1303) Uplizna (J1823) **PNH:** Epysqli (Q5151) Ultomiris IV (J1303)	Bkemv IV (Q5152) Soliris (J1299)
Erythropoiesis-Stimulating Agents (ESA) PBP0330 - Part B Step Therapy Criteria for Erythropoiesis Stimulating Agents (ESA)	7/1/2026	Retacrit (Q5106) Procrit/Epogen (J0885)	Aranesp (J0881) Mircera (J0888)
Factor VIII products and Bispecific Factor IX and X for Hemophilia A without inhibitors PBP0332 - Part B Step Therapy Criteria for Factor VIII products and Bispecific Factor IX and X for Hemophilia A without inhibitors	7/1/2026	Advate/Recombinate (J7192) Afstyla (J7210) Alphanate (J7186) Koate (J7190) Nuwiq (J7209) Xyntha (J7185)	Alhemo (J7173) Altuviiio (J7214) Adynovate (J7207) Alprolix (J7201) Eloctate (J7205) Esperoct (J7204) Hemlibra (J7170) Hympavzi (J7172) Jivi (J7208) Kovaltry (J7211) Novoeight (J7182) Qfitlia (J7174)
Folate analog for chemoprotectant & rescue therapy PBP0333 - Part B Step Therapy Criteria for Leucovorin/Levoleucovorin	7/1/2026	Leucovorin calcium (J0640) Generic Levoleucovorin (J0641)	Khapzory (J0642)

Interleukins (IL-6) inhibitors for RA and neuromyelitis optica (Tocilizumab and biosimilars) PBP0338 - Part B Step Therapy Criteria for Actemra and Tocilizumab Biosimilars	7/1/2026	Avtozma IV (Q5156) Tyenne IV (Q5135)	Actemra IV (J3262) Tofidence IV (Q5133)
Hyaluronic acids (viscosupplementation) for osteoarthritis of the knee PBP0336 - Part B Step Therapy Criteria for Hyaluronic acids (viscosupplementation) for osteoarthritis of the knee	7/1/2026	**Single Dose:** Durolane (J7318) Synvisc One (J7325) **Multi-Dose:** Hyalgan (J7321) Euflexxa (J7323) Supartz (J7321) Synvisc (J7325) Trivisc (J7329) Visco-3 (J7333)	**Single Dose:** Gel-One (J7326) Hymovis One (J7322 Monovisc (J7327) **Multi-Dose:** Gelsyn (J7328) Genvisc (J7320) Hymovis (J7322) Orthovisc (J7324) Triluron (J7332)
Parenteral iron replacement therapy PBP0339 - Part B Step Therapy Criteria for Parenteral Iron replacement therapy	7/1/2026	Ferrlicit (J2916) Infed (J1750) Venofer (J1756)	Feraheme (Q0138) Injectafer (J1439) Monoferric (J1437)
Monoclonal antibody for severe eosinophilic asthma PBP0340 - Part B Step Therapy Criteria for Severe Eosinophilic Asthma	7/1/2026	Cinqair IV (J2786) Fasenra prefilled syringe (J0517) Xolair vial (J2357)	Exdensur (J3590) Nucala vial (J2182) Tezspire vial or pre-filled syringe (J2356)
Monoclonal antibody for systemic lupus erythematosus (SLE) PBP0341 - Part B Step Therapy Criteria for Monoclonal antibody for systemic lupus erythematosus (SLE)	7/1/2026	Benlysta IV (J0490)	Saphnelo (J0491)
PD-1 inhibitors for Head and Neck Cancer PBP0342 - Part B Step Therapy Criteria for PD 1 inhibitors for Head and Neck Cancer	7/1/2026	Loqtorzi (J3263)	Keytruda (J9271) Keytruda Qlex (J3590/C9399) Opdivo (J9299) Opdivo Qvantiq (J9289)
PD-1 inhibitors for non-small cell lung cancer (NSCLC) PBP0343 - Part B Step Therapy Criteria for PD 1 inhibitors for non small cell lung cancer (NSCLC)	7/1/2026	Libtayo (J9119) Keytruda (J9271) Keytruda Qlex (J3590/C9399) Tecentriq (J9022) Tecentriq Hybreza (J9024)	Imfinzi (J9173) Imjudo (J9347) Opdivo (J9299) +Yervoy (J9228) Opdivo Qvantiq (J9289) +Yervoy (J9228)
RANK-L inhibitors for oncologic indications PBP0344 - Part B Step Therapy Criteria for RANK L inhibitors for oncologic indications	7/1/2026	Step1: Pamidronate (J2320), or Zoledronic Acid (J3489) Then, Step 2: Bomyntra (Q5158) Wyost (Q5136) Xgeva (J0897) Xtrenbo (J3590)	Aukelso (J0897) Bilprevda (J3590) Osenvelt (Q5157) Xbryk (Q5159)
siRNA therapy (TTR silencing) for hereditary ATTR-PN amyloidosis PBP0345 - Part B Step Therapy Criteria for siRNA therapy (TTR silencing) for hereditary ATTR PN amyloidosis	7/1/2026	Amvuttra (J0225)	Onpattro (J0222)
Somatostatin analogs PBP0346 - Part B Step Therapy Criteria for Somatostatin Analogs	7/1/2026	Somatuline depot (J1930)	Octreotide acetate depot/Sandostatin/ Sandostatin LAR (J2353) Signifor/Signifor LAR (J2502)

Bevacizumab for cancer PBP0318 - Part B Step Therapy Criteria for Bevacizumab Products	1/1/2026	Alymsys® (Q5126) Mvasi® (Q5107) Zirabev® (Q5118)	Avastin® (J9035) Vegzelma® (Q5129)
Granulocyte Colony Stimulating Factors (G-CSF), Long-Acting (Pegfilgrastim to boost white blood cells) PBP0320 - Part B Step Therapy Criteria for Long-Acting G-CSF	1/1/2026	Fulphila® (Q5108) Nyvepria™ (Q5122) Udenyca® (Q5111)	Fylnetra® (Q5130) Neulasta® (J2506) Neulasta Onpro® (J2506) Rolvedon™ (J1449) Stimufend® (Q5127) Ziextenzo® (Q5120)
Granulocyte Colony Stimulating Factors (G-CSF), Short-Acting (Filgrastim to boost white blood cells) PBP0319 - Part B Step Therapy Criteria for Short Acting G-CSF	1/1/2026	Nivestym® (Q5110) Releuko® (Q5125)	Granix® (J1447) Neupogen® (J1442) Nypozi (Q5148) Zarxio® (Q5101)
Immunoglobulin, intravenous (IVIG) for immune deficiency or neurological disorders PBP0317- Part B Step Therapy Criteria for Intravenous Immunoglobulin IVIG	1/1/2026	Gammagard® (J1569) GamunexC® (J1561)	Alyglo™ (J1552) Asceniv™ (J1554) Bivigam® (J1556) Gammaplex® (J1557) Octagam® (J1568) Panzyga® (J1576) Privigen® (J1459)
Immunoglobulin, subcutaneous (SCIG) for immune deficiency or neurological disorders PBP0316 - Part B Step Therapy Criteria for Subcutaneous Immunoglobulin (SCIG)	1/1/2026	Cutaquig® (J1551) Hizentra® (J1559) Xembify® (J1558)	Cuvitru® (J1555) HyQvia® (J1575)
Infliximab for autoimmune diseases PBP0313 - Part B Step Therapy Criteria for Infliximab Products	1/1/2026	Avsola® (Q5121) Inflectra® (Q5103)	Remicade® (J1745) Renflexis® (Q5104)
Osteoporosis Treatments PBP0311 PBP0311- Part B Step Therapy Criteria for Evenity	1/1/2026; revised, effective 10/1/2026	Zoledronic acid (J3489) Jubbonti® (Q5136) Prolia® (J0897)	Evenity® (J3111)
Rituximab for cancer and autoimmune diseases PBP0314 - Part B Step Therapy Criteria for Rituximab Products	1/1/2026	Riabni™ (Q5123) Ruxience® (Q5119) Truxima® (Q5115)	Rituxan® (J9312) Rituxan Hycela® (J9311)
Trastuzumab for Cancer PBP0312 - Part B Step Therapy Criteria for Trastuzumab Products	1/1/2026	Kanjinti® (Q5117) Ogivri® (Q5114) Ontruzant® (Q5112) Trazimera® (Q5116)	Herceptin® (J9355) Herceptin Hylecta™ (J9356) Hercessi™ (Q5146) Herzuma® (Q5113)
Vascular Endothelial Growth Factor (VEGF) Inhibitors for macular degeneration and other eye conditions PBP0315 - Part B Step Therapy Criteria for Ophthalmologic VEGF Inhibitors	1/1/2026	Bevacizumab, Intravitreal Inj (C9257, J9035), then Beovu® (J0179) Byooviz™ (Q5124), Eylea® (J0178) Eylea® HD (J0177)	Cimerli® (Q5128) Lucentis® (J2778) Pavblu™ (Q5147) Susvimo™ (J2779) Vabysmo® (J2777)