

Part B: List of Covered Drugs Requiring a Prior Authorization



To receive coverage for the Part B drugs listed in the below table, you must receive approval from the plan. Requests must be made at least three (3) business days in advance. This list does not guarantee eligibility or coverage; drugs must be medically necessary and available under your plan. The provider is responsible for obtaining the prior authorization. Providers should utilize the Medical Prior Authorization Request form located at align.sanfordhealthplan.com/help.

Members should refer to their plan documents located at align.sanfordhealthplan.com/help for the complete prior authorization information. **Additional questions? Please refer to the customer service information on the back of your ID card for more information.**

Effective: January 1, 2026

ABECMA	INJ	ANKTIVA	SOL	AZMIRO	INJ	BORUZU	INJ
ABRAXANE	INJ	ARALAST NP	INJ	BAVENCIO	INJ	BOTOX	INJ
ACTEMRA	INJ	ARSENIC TRIO	INJ	BELEODAQ	INJ	BREYANZI	INJ
ACTIMMUNE	INJ	ARZERRA	CON	BELRAPZO	SOL	BRINEURA	KIT
ADAKVEO	INJ	ASCENIV	INJ	BENDAMUSTINE	INJ	BRIUMVI	INJ
ADCETRIS	INJ	ASPARLAS	INJ	BENDEKA	INJ	BUSULFAN	INJ
ADRIAMYCIN	INJ	AUCATZYL	INJ	BENLYSTA	INJ	BUSULFEX	INJ
ADSTILADRIN	SUS	AUGTYRO	CAP	BERINERT	INJ	CABLIVI	KIT
ADZYNMA	KIT	AURLUMYN	INJ	BESPONSA	INJ	CAMCEVI	INJ
ALDURAZYME	INJ	AVASTIN	INJ	BESREMI	SOL	CAMPTOSAR	INJ
ALFERON N	INJ	AVEED	INJ	BICNU	INJ	CAPECITABINE	TAB
ALHEMO	INJ	AVGEMSI	INJ	BIVIGAM	INJ	CARBOPLATIN	INJ
ALIMTA	INJ	AVMAPKI	PAK	BIZENGRI	INJ	CARMUSTINE	INJ
ALIQOPA	INJ	FAKZYNJA		BKEMV	INJ	CARVYKTI	INJ
ALYGLO	INJ	AVSOLA	INJ	BLEOMYCIN	INJ	CASGEVY	INJ
ALYMSYS	SOL	AXTLE	INJ	BLINCYTO	INJ	CEREZYME	INJ
AMTAGVI	INJ	AZACITIDINE	INJ	BOMYNTRA	INJ	CIMZIA	KIT
AMVUTTRA	SOL	AZEDRA DOSIM	INJ	BORTEZOMIB	INJ	CINQAIR	INJ

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CINRYZE	SOL	DARZALEX	SOL	EPKINLY	INJ	GAMIFANT	INJ
CISPLATIN	INJ	FASPRO		EPOPROSTENOL	INJ	GAMMAGARD	INJ
CLADRIBINE	INJ	DATROWAY	INJ	ERBITUX	INJ	GAMMAGARD SD	INJ
CLOFARABINE	INJ	DAUNORUBICIN	INJ	ERIBULIN	INJ	GAMMAKED	INJ
CLOLAR	INJ	DAXXIFY	INJ	ETOPOPHOS	INJ	GAMMAPLEX	INJ
COLUMVI	INJ	DECITABINE	INJ	ETOPOSIDE	CAP	GAMUNEX-C	INJ
CONEXXENCE	INJ	DEPO-TESTOST	INJ	EULEXIN	CAP	GAZYVA	INJ
CORTROPHIN	GEL	DOCETAXEL	INJ	EVENITY	INJ	GEFITINIB	TAB
COSENTYX	INJ	DOXIL	INJ	EVKEEZA	INJ	GEMCITABINE	INJ
COSMEGEN	INJ	DOXORUBICIN	INJ	EVOMELA	INJ	GIVLAARI	INJ
CRYSVITA	INJ	DYSPORT	INJ	FABRAZYME	INJ	GLASSIA	INJ
CUTAQUIG	SOL	ELAHERE	INJ	FARESTON	TAB	GLEEVEC	TAB
CUVITRU	INJ	ELAPRASE	INJ	FASENRA	INJ	GLEOSTINE	CAP
CYCLOPHOSPH	CAP	ELELYSO	INJ	FENSOLVI	INJ	GRAFAPEX	INJ
CYCLOPHOSPH	INJ	ELIGARD	INJ	FIRMAGON	INJ	H.P. ACTHAR	INJ
CYCLOPHOSPH	TAB	ELREXFIO	INJ	FLEBOGAMMA	INJ	HAEGARDA	INJ
CYCLOPHOSPH	INJ	ELZONRIS	SOL	FLOLAN	INJ	HALAVEN	INJ
CYRAMZA	INJ	EMPAVELI	INJ	FLOXURIDINE	INJ	HEMGENIX	INJ
CYTARABINE	INJ	EMPLICITI	INJ	FLUDARABINE	INJ	HEMLIBRA	INJ
DACARBAZINE	INJ	EMRELIS	INJ	FLUOROURACIL	INJ	HEPZATO/50MM	INJ
DACTINOMYCIN	INJ	ENHERTU	INJ	FOLOTYN	INJ L	HEPZATO/62MM	INJ
DANYELZA	INJ	ENSACOVE	CAP	FRUZAQLA	CAP	HERCEP HYLEC	SOL
DANZITEN	TAB	ENTYVIO	INJ	FYARRO	SUS	HERCEPTIN	INJ
DARZALEX	SOL	EPIRUBICIN	INJ	GAMASTAN	INJ	HERCESSI	INJ

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HERZUMA	INJ	JELMYTO	INJ	LOQTORZI	INJ	NIPENT	INJ
HIZENTRA	INJ	JEMPERLI	SOL	LUMIZYME	INJ	NPLATE	INJ
HIZENTRA	SOL	JOBEVNE	INJ	LUMOXITI	SOL	NUCALA	INJ
HYCAMTIN	CAP	JEVTANA	INJ	LUNSUMIO	INJ	NULIBRY	INJ
HYQVIA	INJ	KADCYLA	INJ	LUPR DEP-PED	INJ	OCREVUS	INJ
IBTROZI	CAP	KALBITOR	INJ	LUPRON DEPOT	INJ	OCREVUS	INJ
IDAMYCIN PFS	INJ	KANJINTI	INJ	MARGENZA	INJ	ZUNOVO	
IDARUBICIN	INJ	KANUMA	INJ	MATULANE	CAP	OCTAGAM	INJ
IFEX	INJ	KEYTRUDA	INJ	MELPHALAN	INJ	OGIVRI	INJ
IFOSFAMIDE	INJ	KIMMTRAK	SOL	MELPHALAN	TAB	OGSIVEO	TAB
ILARIS	INJ	KISUNLA	INJ	MEPSEVII	INJ	OJEMDA	SUS
ILUMYA	SOL	KRYSTEXXA	INJ	MITOMYCIN	INJ	OJEMDA	TAB
IMATINIB MES	TAB	KYAXTA	INJ	MITOXANTRON	INJ	OMISIRGE	SUS
IMDELLTRA	INJ	KYMRIAH	SUS	MONJUVI	INJ	OMVOH	INJ
IMFINZI	INJ	KYPROLIS	SOL	MUTAMYCIN	INJ	ONCASPAR	INJ
IMJUDO	INJ	LAMZEDE	INJ	MVASI	INJ	ONIVYDE	INJ
IMLYGIC	INJ	LAZCLUZE	TAB	MYLERAN	TAB	ONPATTRO	SOL
INFLECTRA	INJ	LEMTRADA	INJ	MYLOTARG	INJ	ONTRUZANT	INJ
IRESSA	TAB	LENMELDY	INJ	MYOBLOC	INJ	OPDIVO	INJ
IRINOTECAN	INJ	LEQEMBI	SOL	NAGLAZYME	INJ	OPDIVO	INJ
ISTODAX OVR	INJ	LEQVIO	SOL	NELARABINE	SOL	QVANTIG	
ITOVEBI	TAB	LEUKERAN	TAB	NEXVIAZYME	INJ	OPDUALAG	SOL
IWILFIN	TAB	LEUPROLIDE	INJ 1	NIKTIMVO	INJ	OPFOLDA	CAP
IXEMPRA KIT	INJ	LIBTAYO	INJ	NILOTINB TAR	CAP	ORENCIA	INJ

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OUTLFI	INJ	PROVENGE	INJ	SCENESSE	IMP	TEPADINA	INJ
OXALIPLATIN	INJ	QFITLIA	INJ	SIGNIFOR LAR	INJ	TEPEZZA	INJ
OXLUMO	INJ	RADICAVA	INJ	SIMPONI ARIA	SOL	TEPYLUTE	INJ
PACLITAXEL	INJ	REBLOZYL	INJ	SKYRIZI	SOL	TESTONE CIK	KIT
PADCEV	INJ	REBYOTA SUS FECAL		SOLIRIS	INJ	TESTOPEL	MIS PELLETS
PANZYGA	SOL	REMICADE	INJ	SPEVIGO	INJ	TESTOST CYP	INJ
PAPZIMEOS	SUSP	REMODULIN	INJ	SPINRAZA	INJ	TESTOST ENAN	INJ
PEMETREXED	INJ	RENFLEXIS	INJ	SPRAVATO	SOL	TEVIMBRA	INJ
PEMETREXED	SOL	REVUFORJ	TAB	STELARA	INJ	TEZSPIRE	SOL
PEMFEXY	SOL	RIABNI	SOL	STEQEYMA	INJ	THIOTEPA	INJ
PEMRYDI RTU	SOL	RITUXAN	INJ	SYLVANT	SOL	TICE BCG	INJ
PERJETA	INJ	RITUXAN	INJ	SYNAGIS	INJ	TIVDAK	INJ
PHESGO	SOL	HYCELA		SYNRIBO	INJ	TOFIDENCE	INJ
PHOTOFRIN	INJ	ROMIDEPSIN	INJ	TAKHZYRO	INJ	TOPOTECAN	INJ
PIASKY	INJ	ROMVIMZA	CAP	TALVEY	INJ	TORISEL	SOL
PLUVICTO	INJ	RUCONEST	INJ	TECARTUS	SUS	TRAZIMERA	INJ
POLIVY	INJ	RUXIENCE	INJ	TECELRA	SUS	TREANDA	INJ
POMBILITI	SOL	RYBREVANT	SOL	TECENTRIQ	INJ	TRELSTAR MIX	INJ
PORTRAZZA	INJ	RYLAZE	INJ	TECENTRIQ	INJ	TREPROSTINIL	INJ
POTELIGEO	INJ	RYONCIL	KIT	HYBREZA		TRISENOX	INJ
PRALATREXATE	INJ	RYTELO	INJ	TECVAYLI	INJ	TRODELVY	SOL
PRIVIGEN	INJ	RYZNEUTA	INJ	TEMODAR	CAP	TRUQAP	TAB
PROLASTIN-C	INJ	SAPHNELO	SOL	TEMOZOLOMIDE	CAP	TRUXIMA	INJ
PROLEUKIN	INJ	SARCLISA	SOL	TEMSIROLIMUS	SOL		

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TYENNE	INJ	VEOPOZ	INJ	XELODA	TAB	ZANOSAR	INJ
TYSABRI	INJ	VIDAZA	INJ	XEMBIFY	INJ	ZEMAIRA	INJ
TZIELD	INJ	VIMIZIM	INJ	XENPOZYME	SOL	ZEPZELCA	SOL
ULTOMIRIS	INJ	VINBLASTINE	INJ	XEOMIN	INJ	ZEVALIN	KIT Y-90
UNITUXIN	INJ	VINORELBINE	INJ	XIAFLEX	INJ	ZIIHERA	INJ
UNLOXCYT	SOL	VIVIMUSTA	INJ	XOFIGO	INJ	ZIRABEV	
UPLIZNA	SOL	VORANIGO	TAB	XOLAIR	INJ	ZOLADEX	IMP
VALRUBICIN	SOL	VPRIV	INJ	XOLAIR	SOL	ZOLGENSMA	INJ
VALSTAR	SOL	VYEPTI	INJ	YERVOY	INJ	ZUSDURI	INJ
VECTIBIX	INJ	VYLOY	INJ	YESCARTA	INJ	ZYNLONTA	SOL
VEGZELMA	SOL	VYVGART	INJ	YESINTEK	INJ	ZYNTEGLO	INJ
VELCADE	INJ	VYXEOS	INJ 4	YONDELIS	INJ	ZYNYZ	INJ
VELETRI	INJ	WEZLANA	INJ	ZALTRAP	INJ		

Sanford Health Plan, Sanford Health Plan of Minnesota, and Great Plains Medicare Advantage have HMO, PPO, I-SNP and D-SNP plans with a Medicare contract and contracts with state Medicaid programs. Enrollment in these plans depends on contract renewal. Sanford Health complies with applicable federal civil rights laws and does not discriminate, exclude or treat people differently based on race, color, national origin, religion, pregnancy and related conditions, sex (including sexual orientation, gender identity, sex stereotypes, sex characteristics and intersex traits), age, disability, health status, marital status, arrest or conviction record or military participation in the administration of the plan, including enrollment and benefit determinations.

Free interpretation services are available to you. Additional services and resources necessary to provide information on accessible formats are also available at no cost. Call Great Plains Medicare Advantage: (877) 492-5189 (TTY: 711) or Sanford Health: (877) 509-4979 (TTY: 711) or speak with your healthcare provider. Spanish: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al Great Plains Medicare Advantage: (877) 492-5189 (TTY: 711) or Sanford Health: (877) 509-4979 (TTY: 711) o hable con su proveedor. Oromo: Yoo afaan Oromoo dubbattu ta'e, tajaajilli gargaarsa afaanii bilisaa siniif ni argama. Gargaarsi gargaaraa fi tajaajilli sirrii ta'ee fi odeeffannoo bifa dhaqqabamaa ta'een kennuunis bilisaan ni argama. Bililaa Great Plains Medicare Advantage (877) 492-5189 (TTY: 711) or Sanford Health (877) 509-4979 (TTY: 711) yookiin dhiyeessaa kee waliin haasa'aa.

If you require large-print materials, please call Great Plains Medicare Advantage at: (877) 492-5189 (TTY: 711) or Sanford Health at: (877) 509-4979 (TTY: 711).