



## MassHealth Supplemental Rebate/ Preferred Drug List

This page lists those drugs for which MassHealth has entered into a supplemental rebate agreement with drug manufacturers, allowing MassHealth the ability to provide medications at the lowest possible costs.

The items are listed alphabetically by therapeutic class, then by the name of the drug or drug ingredients. Please note that MassHealth may still require prior authorization for clinical reasons. Drugs that require additional prior authorization requirements are noted with PA on this list.

In general, MassHealth requires a trial of the preferred drug or clinical rationale for prescribing a non-preferred drug within a therapeutic class.

### **Anti-Hemophilia Agents:**

- Benefix (factor IX human recombinant)
- Xyntha (antihemophilic factor, recombinant)

### **Anti-Hypoglycemic Agent:**

- Baqsimi (glucagon nasal powder)

### **Antiretroviral/HIV Agents:**

[See Therapeutic Class Table 38 on the MassHealth Drug List for Antiretroviral/HIV Agents.](#)

- Biktarvy (bictegravir/emtricitabine/tenofovir alafenamide)
- Cabenuva (cabotegravir/rilpivirine)
- Delstrigo (doravirine/lamivudine/tenofovir disoproxil fumarate)
- Descovy (emtricitabine/tenofovir alafenamide)
- Dovato (dolutegravir/lamivudine)
- Genvoya (elvitegravir/cobicistat/emtricitabine/tenofovir alafenamide)
- Juluca (dolutegravir/rilpivirine)
- Norvir (ritonavir tablet)
- Odefsey (emtricitabine/rilpivirine/tenofovir alafenamide)
- Pifeltro (doravirine)
- Prezcobix (darunavir/cobicistat)
- Prezista (darunavir)
- Rukobia (fostemsavir) – **PA**
- Symtuza (darunavir/cobicistat/emtricitabine/tenofovir alafenamide)
- Triumeq (abacavir/dolutegravir/lamivudine)

## Anti-TNF Agents:

[See Therapeutic Class Table 5 on the MassHealth Drug List for Anti-TNF Agents.](#)

- Enbrel (etanercept) – PA
- Humira (adalimumab) – PA

## Asthma and Allergy Agent:

[See Therapeutic Class Table 64 on the MassHealth Drug List for Asthma/Allergy Monoclonal Antibodies.](#)

- Dupixent (dupilumab) – PA

## Calcitonin Gene-Related Peptide Inhibitors:

[See Therapeutic Class Table 14 on the MassHealth Drug List for Calcitonin Gene-Related Peptide Inhibitors.](#)

- Ajoovy (fremanezumab-vfrm) – PA
- Emgality (galcanezumab-gnlm) – PA
- Nurtec (rimegepant) – PA

## Cystic Fibrosis Agents:

[See Therapeutic Class Table 21 on the MassHealth Drug List for Cystic Fibrosis Agents.](#)

- Kalydeco (ivacaftor) – PA
- Orkambi (lumacaftor/ivacaftor) – PA
- Symdeko (tezacaftor/ivacaftor) – PA
- Trikafta (elexacaftor/tezacaftor/ivacaftor) – PA

## Drug and Alcohol Cessation Agents:

[See Therapeutic Class Table 36 on the MassHealth Drug List for Drug and Alcohol Cessation Agents.](#)

- Sublocade (buprenorphine extended-release injection)
- Suboxone (buprenorphine/naloxone film  $\leq$  24 mg/day)
- Suboxone (buprenorphine/naloxone film) – PA > 90 days (> 24 mg/day and  $\leq$  32 mg/day)
- Suboxone (buprenorphine/naloxone film) – PA > 32 mg/day

## Glucagon-Like Peptide-1 (GLP-1) Receptor Agonist:

[See Therapeutic Class Table 26 on the MassHealth Drug List for GLP-1 Receptor Agonists.](#)

- Trulicity (dulaglutide)

## Growth Hormone:

[See Therapeutic Class Table 9 on the MassHealth Drug List for Growth Hormones.](#)

- Genotropin (somatropin) – PA

## Hepatitis Antivirals:

[See Therapeutic Class Table 44 on the MassHealth Drug List for Hepatitis Antiviral Agents.](#)

- ledipasvir/sofosbuvir – **PA**
- Mavyret (glecaprevir/pibrentasvir) – **PA**
- sofosbuvir/velpatasvir – **PA**

## Interleukin Antagonists:

[See Therapeutic Class Table 5 on the MassHealth Drug List for Interleukin Antagonist.](#)

- Stelara (ustekinumab) – **PA**
- Taltz (ixekizumab) – **PA**

## Janus Kinase (JAK) Inhibitors:

[See Therapeutic Class Table 5 on the MassHealth Drug List for Janus Kinase \(JAK\) Inhibitors.](#)

- Xeljanz (tofacitinib) – **PA**
- Xeljanz XR (tofacitinib extended-release) – **PA**

## Long-Acting Aripiprazole Agents:

[See Therapeutic Class Table 24 on the MassHealth Drug List for Long-Acting Aripiprazole and Second Generation \(Atypical\) Antipsychotic Agents.](#)

- Aristada (aripiprazole lauroxil 441 mg, 662 mg, 882 mg) – **PA < 6 years and PA > 1 injection/month**
- Aristada (aripiprazole lauroxil 1,064 mg) – **PA < 6 years and PA > 1 injection/2 months**
- Aristada Initio (aripiprazole lauroxil 675 mg) – **PA < 6 years and PA > 1 injection/month**

## Long-Acting Paliperidone Agents:

[See Therapeutic Class Table 24 on the MassHealth Drug List for Long-Acting Paliperidone and Second Generation \(Atypical\) Antipsychotic Agents.](#)

- Invega Hafyera (paliperidone extended-release 6-month injection) – **PA < 6 years and PA > 1 injection/6 months**
- Invega Sustenna (paliperidone extended-release 1-month injection) – **PA < 6 years, PA > 2 injections/month within the first 30 days of therapy and PA > 1 injection/month after 30 days of therapy**
- Invega Trinza (paliperidone extended-release 3-month injection) – **PA < 6 years and PA > 1 injection/3 months**

## Long-Acting Cerebral Stimulants:

[See Therapeutic Class Table 31 on the MassHealth Drug List for Cerebral Stimulants and Miscellaneous Agents.](#)

*Long-Acting Methylphenidate Agent*

- Focalin XR (dexmethylphenidate extended-release) – **PA < 3 years and PA > 60 units/month**

## **Multiple Sclerosis Agent:**

[See Therapeutic Class Table 52 on the MassHealth Drug List for Multiple Sclerosis Agents.](#)

- Tecfidera (dimethyl fumarate) – **PA**

## **Oncology Agents:**

[See Therapeutic Class Table 57 on the MassHealth Drug List for Oncology Agents.](#)

- Bosulif (bosutinib) – **PA**
- Ibrance (palbociclib) – **PA**
- Inlyta (axitinib) – **PA**
- Sutent (sunitinib) – **PA**

## **Opioid Reversal Agent:**

[See Therapeutic Class Table 36 on the MassHealth Drug List for Drug and Alcohol Cessation Agents.](#)

- Kloxxado (naloxone 8 mg nasal spray)

## **Small Interfering RNA Agents:**

[See Therapeutic Class Table 72 on the MassHealth Drug List for Agents not Otherwise Classified.](#)

- Givlaari (givosiran) – **PA**
- Onpattro (patisiran) – **PA**

## **Spinal Muscular Atrophy Agent:**

[See Therapeutic Class Table 76 on the MassHealth Drug List for Spinal Muscular Atrophy Agents.](#)

- Zolgensma (onasemnogene abeparvovec-xioi) – **PA**

## **Topical Immune Suppressant:**

[See Therapeutic Class Table 42 on the MassHealth Drug List for Immune Suppressants – Topical.](#)

- Eucrisa (crisaborole) – **PA**