

Medical benefit specialty medication update bulletin – November 2025

Specialty medication program updates for UnitedHealthcare Commercial, Community Plan, Medicare Advantage and Individual & Family Plans

Specialty medical injectable medications added to Review at Launch									
Medication Name	HCPCs Code(s)	UHC Commercial	UHC Community Plan	UHC Medicare Advantage	UHC Individual & Family				
Avtozma® (tocilizumab-anoh) Biosimilar to Actemra®	Q5156			Х					
Bildyos [®] (denosumab-nxxp) Biosimilar to Prolia [®]	J3490/J3590/C9399	Х	Х		Х				
Bosaya [®] (denosumab-kyqq) Biosimilar to Prolia	J3490/J3590/C9399	Х	Х		Х				
Enoby [™] (denosumab-qbde) <i>Biosimilar to Prolia</i>	J3490/J3590/C9399	Х	Х		Х				
Ospomyv [®] (denosumab-dssb) Biosimilar to Prolia	Q5159			Х					
Papzimeos® (zopapogene imadenovec-drba)	J3490/J3590/C9399			Х					



Note: Medications added to Review at Launch may not yet be available in the marketplace.



To view the **UnitedHealthcare Commercial Plan** Review at Launch Medication List, visit <u>UHCprovider.com</u> > Coverage and Payments > Policies and protocols > For Commercial Plans > Medical & Drug Policies for UnitedHealthcare Commercial Plans > Review at Launch for New to Market Medications – Commercial Medical Benefit Drug Policy > **Review at Launch Medication List**.

To view the **UnitedHealthcare Community Plan** Review at Launch Medication List, visit <u>UHCprovider.com</u> > Coverage and Payments > Policies and protocols > For Community Plans > Medical & Drug Policies for Community Plan > Review at Launch for New to Market Medications – Community Plan Medical Benefit Drug Policy > Review at Launch Medication List.

For **UnitedHealthcare Medicare Advantage**, Review at Launch medications are added as Review at Launch Part B Medications in the *Medications/Drugs (Outpatient/Part B) Medical Policy*. To view the policy, visit <u>UHCprovider.com</u> > Coverage and Payments > Policies and protocols > For Medicare Advantage Plans > Medical Policies for Medicare Advantage Plans > *Medications/Drugs (Outpatient/Part B) Medical Policy* > Supporting Information > **Other Examples of Specific Drugs/Medications**.

To view the **UnitedHealthcare Individual & Family Plan** Review at Launch Medication List, visit <u>UHCprovider.com</u> > Coverage and Payments > Policies and protocols > For Individual Exchange Plans > Medical & Drug Policies for UnitedHealthcare Individual Exchange Plans > Review at Launch for New to Market Medications – Individual Exchange Medical Benefit Drug Policy > Review at Launch Medication List.

Updates to medication program requirements and drug policies – Effective February 1, 2026									
Medication Name	HCPCs Code(s)	UHC Commercial	UHC Community Plan	UHC Medicare Advantage	UHC Individual & Family	Summary of Changes			
Dimenhydrinate	J1240		X Pennsylvania Only			Add prior authorization/ notification			
Tecelra® (afamitresgene autoleucel)	Q2057		X Maryland Only			Add prior authorization/ notification Will be managed by Optum Transplant			
Tyenne [®] (tocilizumab-aazg) <i>Biosimilar to Actemra</i>	Q5135		X Michigan Only			Add prior authorization/ notification			



UnitedHealthcare will honor all approved prior authorizations/notifications on file until the earlier of the end date on the authorization/notification or the date the member's eligibility changes. Upon prior authorization/notification renewal, the updated policy will apply.

