



**Definition of specialty medications:** Specialty medications are generally prescribed for people with complex or ongoing medical conditions such as multiple sclerosis, hemophilia, hepatitis C and rheumatoid arthritis. These high-cost medications also have one or more of the following characteristics: injected or infused, but some may be taken by mouth; unique storage or shipment requirements; additional education and support required from a healthcare professional; and usually not stocked at retail pharmacies.

**This list of specialty drugs is updated monthly, and is subject to change without notice. Not all listed specialty drugs may be covered under all plan drug lists (formularies). Please refer to your plan drug list for drug specific coverage information.**

**Note:** Some employer groups may have specific drug coverage requirements for their employees that are not included in the criteria below.

### Anti-infective

ARIKAYCE (PA)\*  
LIVTENCITY\*  
SIRTURO\*

### Autoimmune

ACTEMRA SC (PA)  
ADALIMUMAB-AACF (PA)  
ADALIMUMAB-ADAZ (PA)  
ADALIMUMAB-ADBM (PA)  
ADALIMUMAB-FKJP (PA)  
ADBRY (PA)  
AMJEVITA (PA)  
ARCALYST (PA)  
BENLYSTA SC (PA)  
CIBINQO (PA)  
CIMZIA (PA)  
COSENTYX (PA)  
CYLTEZO (PA)  
DUPIXENT (PA)  
ENBREL (PA)  
FIRDAPSE\*  
HADLIMA (PA)  
HULIO (PA)  
HUMIRA (PA)  
IDACIO (PA)  
ILARIS (PA)  
KEVZARA (PA)  
KINERET\* (PA)  
LUPKYNIS (PA)  
OLUMIANT\* (PA)  
ORENCIA SQ (PA)  
OTEZLA\* (PA)  
RINVOQ (PA)  
RUZURGI\*  
SILIQ (PA)  
SIMPONI (PA)  
STELARA (PA)  
SKYRIZI (PA)  
TALTZ (PA)  
TEZSPIRE (PA)  
TREMIFYA (PA)  
VTAMA (PA)  
XELJANZ (PA)  
YUFLYMA (PA)  
YUSIMRY (PA)  
ZORYVE (PA)

### Blood Modifiers

ARANESP  
CABLIVI\*  
DOPTELET (PA)  
EPOGEN  
GRANIX  
LEUKINE  
MOZOBI  
MULPLETA (PA)  
NEULASTA

NEULASTA ONPRO KIT  
NEUPOGEN  
NIVESTYM  
NYVEPRIA (PA)  
OXBRYTA  
plerixafor  
PROCRIT  
PROMACTA (PA)  
RELEUKO  
RETACRIT  
STIMUFEND (PA)  
UDENYCA  
ZARXIO

### Cancer – Injectable

BESREMI\* (PA)  
ELIGARD  
FIRMAGON  
SYNRIBO\*

### Cancer - Oral

abiraterone acetate (PA)  
AFINITOR / DISPERZ (PA)  
ALECENSA (PA)  
ALUNBRIG\* (PA)  
AYVAKIT\*  
BALVERSA\* (PA)  
bexarotene (PA)  
BOSULIF (PA)  
BRAFTOVI (PA)  
BRUKINSA\* (PA)  
CABOMETYX (PA)  
CALQUENCE\* (PA)  
capecitabine (PA)  
CAPRELSA\* (PA)  
COMETRIQ (PA)  
COPIKTRA\* (PA)  
COTELLIC (PA)  
DAURISMO (PA)  
ERIVEDGE (PA)  
ERLEADA (PA)  
erlotinib hydrochloride  
everolimus (PA)  
EXKIVITY\* (PA)  
FARYDAK (PA)  
FOTIVDA\* (PA)  
GAVRETO  
GILOTRIF (PA)  
GLEEVEC (PA)  
HYCAMTIN (PA)  
IBRANCE (PA)  
IDHIFA (PA)  
ICLUSIG\* (PA)  
imatinib mesylate (PA)  
IMBRUVICA\* (PA)  
INLYTA (PA)  
INREBIC (PA)  
INQOVI

IRESSA (PA)  
JAKAFI (PA)  
KISQALI (PA)  
KISQALI FEMARA (PA)  
KOSELUGO\*  
KRAZATI\* (PA)  
lapatinib ditosylate  
lenalidomide\* (PA)  
LENVIMA (PA)  
LONSURF (PA)  
LORBRENA (PA)  
LUMAKRAS (PA)  
LYNPARZA (PA)  
LYSODREN\* (PA)  
MATULANE\* (PA)  
MEKINIST (PA)  
MEKTOVI (PA)  
NERLYNX (PA)  
NEXAVAR (PA)  
NINLARO (PA)  
NUBEQA  
ODOMZO (PA)  
ONUREG  
ORGOVYX\* (PA)  
PEMAZYRE\* (PA)  
PIQRAY (PA)  
POMALYST (PA)  
PURIXAN\*  
QINLOCK\*  
RETEVMO  
REVLIMID (PA)  
REZLIDHIA\* (PA)  
ROZLYTREK (PA)  
RUBRACA (PA)  
RYDAPT (PA)  
SCEMBLIX (PA)  
sorafenib (PA)  
SPRYCEL (PA)  
STIVARGA (PA)  
sunitinib (PA)  
SUTENT (PA)  
TABRECTA (PA)  
TAFINLAR (PA)  
TAGRISSO (PA)  
TALZENNA (PA)  
TARCEVA (PA)  
TARGRETIN (PA)  
TASIGNA (PA)  
TAZVERIK\*  
TEMODAR (PA)  
temozolomide (PA)  
TEPMETKO\* (PA)  
THALOMID (PA)  
TIBSOVO\* (PA)  
tretinoin (PA)  
TRUSELTIQ\* (PA)  
TUKYSA\*

TURALIO\*  
TYKERB (PA)  
UKONIQ\* (PA)  
VENCLEXTA\* (PA)  
VERZENIO (PA)  
VITRAKVI (PA)  
VIZIMPRO (PA)  
VONJO\* (PA)  
VOTRIENT (PA)  
WELIREG\* (PA)  
XALKORI (PA)  
XELODA (PA)  
XOSPATA (PA)\*  
XPOVIO (PA)\*  
XTANDI (PA)  
YONSA (PA)  
ZEJULA\* (PA)  
ZELBORAF (PA)  
ZOLINZA (PA)  
ZYDELIG (PA)  
ZYKADIA (PA)  
ZYTIGA (PA)

### Cystic Fibrosis

BETHKIS (PA)  
CAYSTON (PA)  
KALYDECO (PA)  
ORKAMBI (PA)  
PULMOZYME  
SYMDEKO (PA)  
TOBI (PA)  
tobramycin (PA)  
TRIKAFTA

### Endocrine

ACTHAR (PA)  
BYNFEZIA\*  
FORTEO (PA)  
H.P. ACTHAR (PA)  
ISTURISA\*  
JYNARQUE\*  
LANREOTIDE (PA)  
LUPANETA KIT  
LUPRON DEPOT/ PED  
MYCAPSSA\*  
NATPARA (PA)  
octreotide acetate  
RECORLEV\*  
SAMSCA  
SANDOSTATIN/ LAR  
SIGNIFOR\* (PA)  
SOMATULINE DEPOT  
SOMAVERT  
tolvaptan  
TRIPTODUR\*  
TYMLOS (PA)  
VOXOGO (PA)  
XURIDEN\*

### Enzyme Deficiencies

betaine anhydrous  
BUPHENYL\* (PA)  
CARBAGLU (PA)  
carglumic\*  
CERDELGA (PA)  
CYSTAGON\*  
GALAFOLD  
javygtor\*  
KUVAN (PA)  
miglustat (PA)  
MYALEPT (PA)

*(Continued on Page 2)*

### Key

- (DT) Duplicate Therapy
- (PA) Requires Prior Authorization
- (ST) Requires Step Therapy process

\* Limited Distribution

Limited distribution drugs are medications that may have special dosing requirements or lab monitoring that need to be followed very closely. Because of this, the manufacturer or Food and Drug Administration sometimes chooses to limit the distribution of their drug to only a few pharmacies.

Brand-name products are capitalized (e.g. FLOLAN).

Generic products are in lower-case (e.g. epoprostenol sodium).

Retail benefits are pharmacy benefits offered at a local retail pharmacy.

Products on this list may need to be obtained through the participating specialty pharmacy network, unless otherwise noted. Individual benefits may vary.

**Enzyme Deficiencies**

NITYR  
 nitisinone  
 ORFADIN\*  
 PALYNZIQ (PA)  
 phenylbutyra\* (PA)  
 PRYUKYND (PA)  
 RAVICTI (PA)  
 sapropterin dihydrochloride  
 sodium phenylbutyrate\* (PA)  
 STRENSIQ\* (PA)  
 SUCRAID\*  
 ZAVESCA (PA)

**Fertility & Pregnancy**

CETROTIDE  
 chorionic gonadotropin  
 FOLLISTIM AQ  
 FYREMADEL  
 GANIRELIX ACETATE  
 GONAL-F/ RFF  
 MENOPUR  
 NOVAREL  
 OVIDREL  
 PHEBURANE (PA)  
 PREGNYL

**Growth Hormones**

GENOTROPIN (PA)  
 HUMATROPE (PA)  
 INCRELEX  
 NORDITROPIN (PA)  
 NUTROPIN/ AQ (PA)  
 OMNITROPE (PA)  
 SAIZEN (PA)  
 SEROSTIM (PA)  
 SKYTROFA\* (PA)  
 ZOMACTON (PA)  
 ZORBTIVE (PA)

**HAE**

KALBITOR (PA)  
 TAKHZYRO (PA)

**Hematological**

BERINERT (PA)  
 FIRAZYR (PA)  
 HAEGARDA (PA)  
 KALBITOR (PA)  
 ORLADEYO\* (PA)  
 PYRUKYND\* (PA)  
 RUCONEST (PA)  
 TAKHZYRO (PA)  
 TAVNEOS\* (PA)

**Hemophilia**

ADVATE (PA)  
 ADYNOVATE (PA)  
 AFSTYLA (PA)  
 ALPHANATE (PA)  
 ALPHANINE SD (PA)  
 ALPROLIX (PA)  
 ALTUVIIIIO (PA)  
 BENEFIX (PA)  
 COAGADEX\* (PA)  
 CORIFACT (PA)  
 ELOCTATE (PA)  
 ESPEROCT (PA)  
 FEIBA (PA)  
 FIBRYGA (PA)  
 HEMLIBRA (PA)  
 HEMOFIL M (PA)  
 HUMATE-P (PA)  
 IDELVION (PA)  
 IXINITY (PA)  
 JIVI (PA)

KOATE-DVI (PA)  
 KOGENATE FS (PA)  
 KOVALTRY (PA)  
 MONONINE (PA)  
 NOVOEIGHT (PA)  
 NOVOSEVEN/ RT (PA)  
 NUWIQ (PA)  
 OBIZUR\* (PA)  
 PROFILNINE SD (PA)  
 RECOMBINATE (PA)  
 REBINYN (PA)  
 RIXUBIS (PA)  
 SEVENFACT(PA)  
 TRETEN (PA)  
 VONVENDI (PA)  
 WILATE (PA)  
 XYNTHA (PA)

**Hepatitis C**

EPCLUSA (PA)  
 HARVONI (PA)  
 INTRON-A  
 LEDIPASVIR SOFOSBUVIR  
 MAVYRET (PA)  
 PEGASYS (PA)  
 PEG-INTRON (PA)  
 RIBAVIRIN  
 SOFOSBUVIR/ VELPATAS-VIR  
 SOVALDI (PA)  
 VIEKIRA (PA)  
 VOSEVI (PA)  
 ZEPATIER\* (PA)

**HIV**

FUZEON  
 SUNLENCA\* (PA)

**Immune Globulins**

CUTAQUIG (PA)  
 CUVITRU (PA)  
 GAMMAGARD LIQUID (PA)  
 GAMMAKED (PA)  
 GAMUNEX-C (PA)  
 HIZENTRA (PA)  
 HYQVIA (PA)  
 XEMBIFY (PA)

**Immunosuppressants**

ENSPRYNG  
 NUCALA AUTO-INJECT (PA)

**Insomnia**

HETLIOZ

**Lung Disorders**

ACTIMMUNE  
 ESBRIET (PA)  
 FASENRA (PA)  
 GLASSIA  
 NUCALA (PA)  
 OFEV (PA)  
 pirfenidone (PA)

**Multiple Sclerosis**

AMPYRA (PA)  
 AUBAGIO  
 AVONEX  
 BAFIERTAM  
 BETASERON  
 COPAXONE  
 dalfampridine (PA)  
 dimethyl fumarate  
 EXTAVIA  
 fingolimod  
 GILENYA  
 glatiramer  
 GLATOPA  
 HIZENTRA (PA)

KESIMPTA  
 MAVENCLAD (PA)  
 MAYZENT (PA)  
 PLEGRIDY  
 PONVORY (PA)  
 REBIF  
 TASCENSO ODT (PA)  
 TECFIDERA  
 VUMERITY  
 ZEPOSIA (PA)

**Pulmonary Hypertension**

ADCIRCA (PA)  
 ADEMPAS (PA)  
 Alyq\*  
 ambrisentan (PA)  
 bosentan (PA)  
 epoprostenol sodium  
 FLOLAN  
 LETAIRIS (PA)  
 OPSUMIT (PA)  
 ORENITRAM (PA)  
 REMODULIN  
 REVATIO (PA)  
 sildenafil citrate tabs  
 tadalafil (PA)  
 TRACLEER (PA)  
 treprostinil (PA)  
 TYVASO (PA)  
 UPTRAVI (PA)  
 VENTAVIS (PA)

**Sleep Disorders**

HETLIOZ  
 Sodium oxybate (PA)  
 tasimelteon  
 WAKIX (PA)  
 XYREM (PA)  
 XYWAV (PA)

**Others**

ALFERON N\*  
 APOKYN  
 apomorphine\*  
 ALUSTEDO  
 CAMZYOS (PA)  
 CHENODAL\*  
 CHOLBAM\*  
 clovique\*  
 CUPRIMINE  
 CUVITRU (PA)  
 CYSTADANE\*  
 CYSTADROPS\*  
 CYSTARAN\*  
 deferasirox  
 deferiprone\*  
 DEPEN TITRATABS  
 DIACOMIT\*  
 DROXIA  
 droxidopa  
 ENDARI\* (PA)  
 EXJADE  
 EPIDIOLEX (PA)  
 EMFLAZA (PA)  
 EVRYSDI (PA)  
 EXSERVAN\*  
 FENSOLVI\*  
 FERRIPROX\*  
 FINTEPLA\*  
 FUROSCIX (PA)  
 GAMUNEX-C (PA)  
 GATTEX (PA)  
 GOCOVRI\* (PA)  
 HYFTOR (PA)  
 HYQVIA (PA)

IMCIVREE\* (PA)  
 INBRIJA\*  
 INGREZZA\*  
 JADENU  
 JUXTAPID (PA)  
 KLISYRI (PA)  
 KORLYM\* (PA)  
 leuprolide acetate  
 NEXLETOL (PA)  
 NORTHERA  
 NOURIANZ\*  
 OCALIVA (PA)  
 OXERVATE (PA)  
 penicillamine  
 PROCYSBI  
 RADICAVA (PA)  
 RELYVRIO (PA)  
 RILUTEK  
 riluzole  
 SIKLOS  
 SYMPAZAN\*  
 SYPRINE  
 TARPEYO (PA)  
 TAVALISSE\* (PA)  
 TEGSEDI (PA)  
 TERIPARATIDE\*  
 tetrabenazine  
 THROMBATE III  
 TIGLUTIK\*  
 trientine hydrochloride  
 VALCHLOR  
 VECAMYL\*  
 VIJOICE (PA)  
 VISTOGARD\*  
 VOXZOGO (PA)  
 VYLEESI (PA)\*  
 VYNDAMAX (PA)  
 VYNDAQEL (PA)  
 XENAZINE  
 XENLETA\*  
 XERMELO\* (PA)  
 ZOKINIVY\* (PA)  
 ZTALMY\* (PA)

**Key**

(DT) Duplicate Therapy  
 (PA) Requires Prior Authorization  
 (ST) Requires Step Therapy process  
 \* Limited Distribution

Limited distribution drugs are medications that may have special dosing requirements or lab monitoring that need to be followed very closely. Because of this, the manufacturer or Food and Drug Administration sometimes chooses to limit the distribution of their drug to only a few pharmacies.

Brand-name products are capitalized (e.g. FLOLAN).

Generic products are in lower-case (e.g. epoprostenol sodi-um).

Retail benefits are pharmacy benefits offered at a local retail pharmacy.

Products on this list may need to be obtained through the participating specialty pharmacy network, unless otherwise noted. Individual benefits may vary.

**This list is subject to change without notice.**

Neither this Specialty Pharmacy Drug Management List, nor the successful adjudication of a pharmacy claim, is guarantee of payment. Prime Therapeutics LLC is an independent company contracted by Credence Blue Cross and Blue Shield to provide pharmacy benefit management services.

Product names are the property of their respective owners.

Source: Prime Therapeutics, LLC



# CREDENCE

An Independent Licensee of the Blue Cross and Blue Shield Association