



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.

FOR PEEHIP Members Only: Coverage excludes the provider-administered medications outlined in this drug policy from being accessed through a specialty pharmacy. It must be obtained through buy and bill. Lemtrada, Synagis, and Spravato are exceptions to this policy. Lemtrada will require the use of a specialty pharmacy. Synagis and Spravato may be obtained through buy and bill or specialty pharmacy.

Note: In order for a member to receive in-network benefits for the following specialty drugs, the specialty pharmacy filing the claim must contract with the Blue Cross and Blue Shield Plan where the provider is located. The in-network specialty pharmacies are Accredo Health Group, Inc. (1-888-608-9010) and CVS/Caremark (1-800-237-2767). However, please check member benefits for a complete list of in-network pharmacies available.

Androgens

AVEED* (PA)
TESTOPEL* (PA)

Autoimmune

ACTEMRA (PA)
AVSOLA* (PA)
BENLYSTA IV (PA)
CIMZIA (PA)
COSENTYX IV (PA)
ENTYVIO (PA)
ILUMYA (PA)
IMULDOSA (PA)
INFLECTRA (PA)
INFLIXIMAB (PA)
OMVOH (PA)
ORENCIA (PA)
OTULFI (PA)
PYZCHIVA (PA)
REMICADE (PA)
RENFLEXIS (PA)
SAPHNELO* (PA)
SELARSDI (PA)
SIMPONI ARIA (PA)
SKYRIZI IV (PA)
SPEVIGO (PA)
STELARA (PA)
STEQEYMA (PA)
TOFIDENCE (PA)
TREMIFYA (PA)
TYENNE (PA)
USTEKINUMAB (PA)
WEZLANA (PA)
YESINTEK (PA)

Blood Modifiers

ADAKVEO*
ADZYNMA (PA)
CABLVI*
ENJAYMO
FULPHILA (PA)
FYLNETRA (PA)
GIVLAARI (PA)
GRANIX (PA)
LEQEMBI (PA)
LEUKINE (PA)
NEULASTA (PA)
NEULASTA ONPRO KIT (PA)
NEUPOGEN (PA)
NIVESTYM (PA)
NPLATE (PA)
NYVEPRIA (PA)
REBLOZYL* (PA)
RELEUKO (PA)
RYZNEUTA (PA)
STIMUFEND (PA)

UDENYCA (PA)
ZARXIO (PA)
ZIEXTENZO (PA)
ZYNTGLO (PA)

Enzyme Deficiencies

ALDURAZYME (PA)
BRINEURA* (PA)
CEREZYME (PA)
ELAPRASE (PA)
ELELYSO (PA)
ELFABRIO* (PA)
FABRAZYME (PA)
KANUMA (PA)
LAMZEDE* (PA)
LUMIZYME (PA)
MEPSEVII (PA)
NAGLAZYME (PA)
NEXVIAZYME (PA)
POMBILITI (PA)
REVCovi*
VIMIZIM (PA)
VPRIV (PA)
XENPOZYME (PA)

Endocrine

BONIVA
CRYSVITA (PA)
EVENITY
H.P. ACTHAR (PA)
LUPRON DEPOT/ PED
PROLIA
RECLAST
SANDOSTATIN LAR DEPOT
SIGNIFOR LAR*
SOMATULINE DEPOT
SUPPRELIN LA
TEPEZZA (PA)
TRIPTODUR*
XGEVA
zoledronic acid

Hematological

BEQVEZ (PA)
BERINERT (PA)
BKEMV (PA)
CINRYZE (PA)
FIRAZYR (PA)
HAEGARDA (PA)
HEMGENIX (PA)
KALBITOR (PA)
ROCTAVIAN
RUCONEST (PA)
SOLIRIS (PA)
TAKHZYRO (PA)
ULTOMIRIS (PA)

Immune Globulins

ALYGLO (PA)
ASCENIV (PA)
BIVIGAM (PA)
CARIMUNE (PA)
CUTAQUIG (PA)
CUVITRU (PA)
CYTOGAM
FLEBOGAMMA DIF (PA)
GAMASTAN S/D (PA)
GAMMAGARD LIQUID (PA)
GAMMAGARD S/D (PA)
GAMMAKED (PA)
GAMMAPLEX (PA)
GAMUNEXC (PA)
HIZENTRA (PA)
HYQVIA (PA)
OCTAGAM (PA)
PANZYGA (PA)
PRIVIGEN (PA)
XEMBIFY (PA)

Immunosuppressants

ATGAM
ENJAYMO (PA)
GAMIFANT* (PA)
NULOJIX
SIMULECT

Lung Disorders

ARALAST NP
CINQAIR*
FASENRA (PA)
GLASSIA
NUCALA (PA)
PROLASTIN/C*
SYNAGIS (PA)
TEZSPIRE
XOLAIR (PA)
ZEMAIRA

Macular Degeneration

BEovu (PA)
BYOOVIZ (PA)
CIMERLI (PA)
EYLEA (PA)
EYLEA HD (PA)
LUCENTIS (PA)
MACUGEN (PA)
VABYSMO (PA)
VISUDYNE (PA)

Multiple Sclerosis

BRIUMVI (PA)
LEMTRADA (PA) ♦
OCREVUS (PA)
OCREVUS ZUNOVO (PA)
TYRUKO (PA)
TYSABRI (PA)

Ophthalmic

ILUVIEN
IZERVAY (PA)
LUXTURN A (PA)
OZURDEX
SUSVIMO (PA)
SYFOVRE (PA)

Oncology

ABECMA* (PA)
ABRAXANE (PA)
ADCETRIS (PA)
ADRIAMYCIN
ADRUCIL*
ADSTILADRIN*
ALIMTA (PA)
ALIQOPA*
ALKERAN
ALOXI
ALYMSYS*
AMTAGVI* (PA)
Anktiva (PA)
ARRANON
arsenic
ARZERRA (PA)
ASPARLAS
AUCATZYL (PA)
AVASTIN (PA)

azacitidine
BAVENCIO* (PA)
BELEODAQ*
BELRAPZO
bendamustine (PA)
BENDEKA (PA)
BESPONS A (PA)
BICNU
BIZENGRI (PA)
BLINCYTO* (PA)
bortezomib*
BREYANZI (PA)
CAMPTOSAR
carmustine
CARVYKTI (PA)
cladribine
CLOLAR
CLOFARABINE*
COLUMVI (PA)
COSMEGEN
CYRAMZA
CYTARABINE/AQ
DACARBAZINE
DACOGEN
dactinomycin
DANYELZA* (PA)
DARZALEX (PA)
DARZALEX FASPRO (PA)
DATROWAY (PA)

daunorubicin
decitabine
docetaxel
DOXIL
DOXORUBICIN HCL
ELAHERE (PA)
ELITEK* (PA)
ELLENC E
ELREXFIO (PA)
ELZONRIS
EMPLICITI (PA)
ENHERTU (PA)
EPKINLY (PA)
ERBITUX (PA)
ERWINASE*
ERWINAZE*
ETHYOL
ETOPOPHOS
EVOMELA (PA)
FASLODEX (PA)
fludarabine phosphate*
FOLOTYN
fulvestrant
FYARRO
GAZYVA (PA)
HALAVEN (PA)
HERCEPTIN

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Key

(PA) Requires Prior Authorization

♦ Drug must be obtained and billed by an in-network medical specialty pharmacy

* 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.

Oncology

HERCEPTIN HYLECTA (PA)
 HERCESSI (PA)
 HERZUMA (PA)
 HYCAMTIN
 HYDROXYPROGESTERONE
 CAPROATE
 IDAMYCIN PFS
 IFEX
 IMDELLTRA (PA)
 IMFINZI (PA)
 IMJUDO (PA)
 irinotecan*
 ISTODAX
 IXEMPRA (PA)
 JELMYTO* (PA)
 JEMPERLI (PA)
 JEVTANA (PA)
 KADCYLA (PA)
 KANJINTI (PA)
 KEYTRUDA* (PA)
 KHAPZORY
 KIMMTRAK (PA)
 KYMRIAH
 KYPROLIS* (PA)
 LARTRUVO (PA)
 LEUCOVORIN CALCIUM
 LIBTAYO
 LUMOXITI
 LUNSUMIO (PA)
 LUTATHERA
 LYMPHIR (PA)
 MARGENZA* (PA)
 MARQIBO*
 melphalan*
 mesna
 MESNEX
 mitomycin
 mitoxantrone
 MONJUVI (PA)
 MVASI (PA)
 MYLOTARQ
 NAVELBINE
 nelarabine
 NIPENT
 OGIVRI (PA)
 ONCASPAR
 ONIVYDE*
 ONIVYDE (PA)
 ONTRUZANT* (PA)
 OPDIVO (PA)
 OPDIVO QVANTIG (PA)
 OPDUALAG (PA)

PACLITAXEL
 PADCEV (PA)
 PEDMARK (PA)
 pemetrexed (PA)
 PEMFEXY
 PERJETA (PA)
 PHESGO (PA)
 PHOTOFRIN*
 POLIVY (PA)
 PORTRAZZA (PA)
 POSFREA (PA)
 POTELIGEO*
 PROLEUKIN
 PROVENGE* (PA)
 RELEUKO (PA)
 RIABNI (PA)
 RITUXAN (PA)
 RITUXAN HYCELA (PA)
 ROLVEDON (PA)
 romidepsin*
 RUXIENCE (PA)
 RYBRENT* (PA)
 RYLAZE (PA)
 RYTELO (PA)
 SARCLISA* (PA)
 SYNTRIBO*
 TALVEY (PA)
 TAXOTERE
 TECARTUS (PA)
 TECELRA (PA)
 TECENTRIQ (PA)
 TECENTRIQ HYBREZA (PA)
 TECVAYLI (PA)
 temsirolimus
 TENIPOSIDE
 THIOTEPA
 THYROGEN
 TICE BCG
 TIVDAK (PA)
 topotecan
 TORISEL
 TRAZIMERA (PA)
 TREANDA (PA)
 TRELSTAR DEPOT/LA
 TRISENOX
 TRODELVY*
 TRUXIMA (PA)
 UNITUXIN*
 UNLOXCYT (PA)
 VALSTAR
 VANTAS
 VECTIBIX (PA)
 VEGZELMA

VELCADE
 VIDAZA
 vincristine sulfate*
 VIVIMUSTA
 VYLOY* (PA)
 VYXEOS*
 YERVOY (PA)
 YESCARTA
 YONDELIS* (PA)
 ZALTRAP (PA)
 ZANOSAR
 ZEPZELCA (PA)
 ZIIHERA (PA)
 ZIRABEV (PA)
 ZOLADEX
 ZYNLONTA* (PA)
 ZYNYZ*

Pulmonary Hypertension

UPTRAVI
 VELETRI

Viscosupplements

HYALGAN
 ORTHOVISC (PA)
 SODIUM HYALURONATE* (PA)
 SYNVISC (PA)
 SYNVISC ONE (PA)

Others

AKYNZEO (PA)
 AMVUTTRA (PA)
 APRETUDE
 BCG VACCINE
 BOTOX (PA)
 BRIXADI
 CABENUVA
 CASGEVY (PA)
 CINVANTI
 DOJOLVI
 DYSPORT
 EMEND IV
 EPOETIN ALFA (PA)
 EPOGEN (PA)
 EVKEEZA (PA)
 FENSOLVI*
 FERAHEME
 FOCINVEZ
 ILARIS (PA)
 IMLYGIC (PA)
 INJECTAFER (PA)
 JETREA* (PA)
 KEBILIDI (PA)
 KISUNLA (PA)

KRYSTEXXA (PA)
 KYLEENA*
 LENMELDY (PA)
 LEQVIO
 LYFGENIA (PA)
 MICRHOGAM ULTRA-
 FILTERED
 MIRENA*
 MONOFERRIC (PA)
 MYOBLOC (PA)
 NEXPLANON
 NIKTIMVO (PA)
 NULIBRY (PA)
 OMISIRGE (PA)
 ONPATTRO* (PA)
 OXLUMO* (PA)
 PIASKY (PA)
 PROCIT (PA)
 QALSODY (PA)
 RADICAVA* (PA)
 RETACRIT (PA)
 RETHYMIC (PA)
 REBOYTA
 RHOGAM
 RHOPHYLAC
 RYONCIL (PA)
 RYSTIGGO* (PA)
 SCENESSE* (PA)
 SKYLA*
 SKYSONA (PA)
 SPINRAZA (PA)
 SPRAVATO* (PA)
 SUBLOCADE (PA)
 SUSTOL (PA)
 SYLVANT (PA)
 TEVIMBRA (PA)
 TROGARZO (PA)
 TZIELD (PA)
 UPLIZNA* (PA)
 VEOPOZ (PA)
 VILTEPSO*
 VIVITROL (PA)
 VYEPTI* (PA)
 VYJUVEK (PA)
 VYVGART (PA)
 VYVGART HYTRULO (PA)
 WINRHO SDF*
 XEOMIN
 XIAFLEX* (PA)
 ZOLGENSMA* (PA)

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- ◆ Drug must be obtained and billed by an in-network medical specialty pharmacy
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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. Accredo Health Group, Inc. is an independent specialty pharmacy serving eligible Credence Blue Cross and Blue Shield members as well as physicians in the Blue Cross network. CVS/Caremark is an independent company providing specialty pharmacy services to eligible Credence Blue Cross and Blue Shield members.

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Source: Prime Therapeutics, LLC



CREDENCE

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