

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
MOZOBIL
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 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.

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)
 ALTUVILIO (PA)
 BENEFIX (PA)
 COAGADDEX* (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)
 TRETTEEN (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*
 AUSTEDO
 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)
 ZOKINVY* (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 Blue Cross and Blue Shield of Minnesota to provide pharmacy benefit management services.

Product names are the property of their respective owners.

Source: Prime Therapeutics, LLC

