

State Employee Health Plan Special Case Medications

| Drug | Available through Specialty Rx Program | Drug | Available through Specialty Rx Program |
|---------------------|---|------------------|---|
| ACTIMMUNE | √ | FUZEON | √ |
| ACTIQ | * | GANCICLOVIR | * |
| ADCIRCA | √ | GASTROCROM | * |
| AFINITOR | √ | GENGRAF | * |
| AGRYLIN | * | GLEEVEC | √ |
| AMNESTEEM | * | HEPARIN | * |
| APTIVUS | * | HEXALEN | * |
| ARANESP | √ | HUMATIN | * |
| ARIXTRA | * | HUMIRA | √ |
| AROMASIN | * | ILARIS | √ |
| ATRIPLA | * | INFERGEN | √ |
| BETASERON | √ | INNOHEP | * |
| CASODEX | * | INTRON A | * |
| CELLCEPT | * | INVIRASE | * |
| CLARAVIS | * | INTELENCE | * |
| COLY-MYCIN M INJECT | * | ISENTRESS | * |
| COMBIVIR | * | KADIAN | * |
| COPAXONE | √ | KALETRA | * |
| COPEGUS | √ | KINERET | √ |
| CREON | * | KYTRIL | * |
| CRIXIVAN | * | LEUKINE | √ |
| CYCLOSPORINE | * | LOTRONEX | * |
| CYTOVENE | * | LOVENOX | * |
| DIASTAT | * | MARINOL | * |
| DIBENZYLINE | * | MIACALCIN INJECT | * |
| DIFLUCAN 200 MG | * | MOZOBIL | √ |
| DURAGESIC | * | MS CONTIN | * |
| EMCYT | * | NEORAL | * |
| EMTRIVA | * | NEULASTA | √ |
| ENTOCORT EC | * | NEUPOGEN | √ |
| EPIVIR | * | NEXAVAR | √ |
| EPIVIR-HBV | * | NIMOTOP | * |
| EPOGEN | √ | NORDITROPIN | √ |
| ETOPOSIDE | * | NORVIN | * |
| EXTAVIA | √ | ORAMORPH SR | * |
| FASLODEX | * | OXSORALEN-ULTRA | * |
| FIRMAGON | √ | PANCREAZE | * |
| FORTEO | √ | PANCREASE MT | * |
| FRAGMIN | * | PAROMOMYCIN | * |

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|-----------------|--|----------------|--|
| PEGASYS | √ | TARCEVA | √ |
| PEGINTRON | √ | TARGRETIN | * |
| PREZISTA | * | TASIGNA | √ |
| PROCRIT | √ | TEMODAR | √ |
| PROGRAF | * | THALOMID | √ |
| PROMACTA | √ | TOBI | √ |
| PROVIGIL | * | TRACLEER | √ |
| PULMOZYME | √ | TRETINOIN 10MG | * |
| RAPAMUNE | * | TRIZIVIR | * |
| REBETOL | √ | TYKERB | √ |
| REBIF | √ | TYVASO | √ |
| RESCRIPTOR | * | VALCYTE | * |
| RETROVIR | * | VANCOCIN | * |
| REYATAZ | * | VEPESID | * |
| RILUTEK | * | VFEND | * |
| RISPERDAL | * | VIDEX EC | * |
| SABRIL | √ | VIDEX SOLUTION | * |
| SANDIMMUNE | * | VIRACEPT | * |
| SANDOSTATIN | √ | VIRAMUNE | * |
| SANDOSTATIN LAR | √ | VIREAD | * |
| SENSIPAR | √ | XELODA | √ |
| SEROQUEL | * | XOLAIR | √ |
| SEROSTIM | √ | XYREM | * |
| SOMAVERT | √ | ZERIT | * |
| SORIATANE | * | ZIAGEN | * |
| SPRYCEL | √ | ZORTRESS | * |
| STALEVO | * | ZYFLO CR | * |
| STELARA | √ | ZYPREXA | * |
| SUSTIVA | * | ZYVOX | * |
| SUTENT | √ | | |

√ Available through CVS Caremark Specialty Pharmacy

* Available through CVS Caremark Mail Service Pharmacy or contracted network retail pharmacies

Effective 06/2011