

2017 Service Benefit Plan Specialty Drug List

If you are a member or health care provider, please contact us toll-free at 1-888-346-3731 or visit the Pharmacy section on www.fepblue.org

With over 30 years of specialty pharmacy experience, CVS Caremark Specialty Pharmacy provides proactive quality care and service. We have a network of pharmacies which includes those with Joint Commission and URAC accreditation. The Joint Commission and URAC are nationally-recognized symbols of quality which reflects an organization's commitment to meet high standards of quality and safety.

This is not an all-inclusive list and is subject to change. Changes may appear prior to their effective date. To determine the benefit tier of your medication, please contact the Specialty Pharmacy Program toll-free at 1-888-346-3731.

Please Note: The self-injectable formulation of the drugs with an asterisk are only covered under the pharmacy benefit.

A	ARANESP ¹	C	Cyclophosphamide	ELELYSO ¹
ABRAXANE	ARCALYST ¹ *	CABOMETYX ¹	CYCLOSPORINE INJ	ELIGARD ¹
ACTEMRA ¹	ARRANON	CAMPTOSAR	CYSTAGON	ELITEK
ACTHAR HP ¹ *	ARZERRA ¹	Capecitabine	Cytarabine	ELLENC
ACTIMMUNE ¹ *	AUBAGIO ¹	Carboplatin	CYTOGAM	ELOCTATE
ADCETRIS ¹	AVASTIN ¹	CARIMUNE NF ¹	CYTOVENE	EMPLICITI ¹
ADCIRCA ¹	AVEED ¹	CEPROTIN ¹	D	ENBREL ¹ *
Adefovir Dipivoxil	AVONEX ¹ *	CERDELGA ¹	Dacarbazine	Entecavir
ADEMPAS ¹	Azacitidine	CEREDASE	DACOGEN	ENTYVIO ¹
ADRIAMYCIN	B	CEREZYME ¹	Dactinomycin	EPCLUSA ¹
ADRUCIL	BARACLUDE	CETROTIDE ¹	DAKLINZA ¹	Epirubicin
ADVATE	BCG VACCINE (TICE STRAIN)	Chorionic Gonadotropin¹	DARZALEX ¹	EPOGEN ¹
ADYNOVATE	BEBULIN	CIMZIA ¹ *	Daunorubicin	ERBITUX ¹
AFINITOR ¹	BENDEKA ¹	CINQAIR ¹	DAUNOXOME	ERIVEDGE ¹
AFSLYTA	BENEFIX	CINRYZE ¹	Decitabine	ESBRIET ¹
ALDURAZYME ¹	BENLYSTA ¹	Cisplatin	Deferoxamine	ETHYOL
ALECENSA ¹	BERINERT ¹	Cladribine	DEPOCYT	ETOPOPHOS
ALFERON N ¹	BETASERON ¹ *	Clofarabine	DESFERAL	Etoposide
ALIMTA	BETHKIS	CLOLAR	Dexrazoxane	EUFLEXXA ¹
ALKERAN	Bevacizumab¹	COPAXONE ¹ *	Docetaxel	EVOMELA ¹
ALPHANATE	Bexarotene	COPEGUS ¹	Dofetilide	EXJADE ¹
ALPHANINE SD	BICNU	CORIFACT	DOXIL	EXTAVIA ¹ *
ALPROLIX	BIVIGAM ¹	CORTICOTROPHIN ¹	Doxorubicin	EYLEA ¹
ALUNBRIG ¹	Bleomycin	COSENTYX ¹	DUPIXENT ¹	F
AMEVIVE	BOSULIF ¹	COSMEGEN	DYSPORT ¹	FABRAZYME ¹
Amifostine	BOTOX ¹	COTELLIC ¹	E	FARYDAK ¹
AMPYRA ¹	BRAVELLE ¹	CUVITRU ¹	EGRIFTA ¹	FASLODEX
APOKYN*	BUPHENYL ¹		ELAPRASE ¹	FEIBA
ARALAST NP ¹				FIRAZYR ¹ *

¹ Prior Approval Required

*covered only under pharmacy benefits

Products distributed by CVS Caremark Specialty Pharmacy, as well as products covered by a plan member's prescription benefit plan, may change from time to time. In addition, a plan member's specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance on this document at any time.

FIRMAGON	HYCAMTIN	L	NPLATE ¹	REBIF ^{1*}
FLEBOGAMMA ¹	Hydroxy progesterone¹	LEMTRADA ¹	NUCALA ¹	RECLAST
FLOLAN ¹	HYMOVIS ¹	LETAIRIS ¹	NULOJIX	RECOMBINATE
Floxuridine	HYPERHEP B S/D	LEUKINE ¹	NUPLAZID ¹	REMICADE ¹
Fludarabine	HYPERRHO S/D	Leuprolide¹	NUTROPIN AQ ^{1*}	REMODULIN ¹
Fluorouracil Inj	HYQVIA ¹	LILETTA	NUWIQ	RENFLEXIS ¹
FOLLISTIM/ ANTAGON ¹	I	LIPODOX	O	REPATHA ¹
FOLOTYN	IBRANCE ¹	LONSURF ¹	OCALIVA ¹	REVATIO ¹
FORTEO*	IDAMYCIN	LUCENTIS ¹	OCREVUS ¹	REVLIMID ¹
FUDR	Idarubicin	LUMIZYME ¹	OCTAGAM ¹	RHOGAM PLUS
FUSILEV	Idelvion	LUPANETA	Octreotide	RHOPHYLAC
FUZEON*	IDHIFA ¹	LUPRON DEPOT ¹	ODOMZO ¹	RIASTAP
G	IFEX	M	OFEV ¹	Ribapak¹
GAMASTAN S/D ¹	lfosfamide	MACUGEN	OLYSIO ¹	Ribasphere¹
GAMMAGARD ¹	lfosfamide-Mesna	MAKENA	OMNITROPE ^{1*}	Ribatab¹
GAMMAKED ¹	ILARIS ¹	MAVYRET ¹	ONCASPARG	Ribavirin¹
GAMMAPLEX ¹	Imatinib¹	MEKINIST ¹	ONIVYDE ¹	RITUXAN ¹
GAMUNEX-C ¹	IMFINZI ¹	Melphalan	OPDIVO ¹	RIXUBIS
Ganciclovir	IMLYGIC ¹	MENOPUR ¹	OPSUMIT ¹	RUBRACA ¹
Ganirelix¹	IMPLANON	MESNA	ORALAIR ¹	RUCONEST ¹
GATTEX ¹	INCRELEX ^{1*}	MESNEX	ORENCIA ^{1*}	RYDAPT ¹
GAZYVA ¹	INFLECTRA ¹	MICRHOGAM	ORENITRAM ¹	S
GEL-ONE ¹	INLYTA ¹	MIRENA	ORTHOVISC ¹	SABRIL ¹
GELSYN ¹	INTRON-A ¹	Mitomycin	OTEZLA ¹	SAIZEN ^{1*}
Gemcitabine	IRESSA ¹	Mitoxantrone	OVIDREL ¹	SAMSCA
GEMZAR	Irinotecan	MONOCLATE-P	Oxaliplatin	SANDOSTATIN ¹
GENOTROPIN ^{1*}	ISTODAX ¹	MONONINE	P	SENSIPAR ¹
GENVISC ¹	IXEMPRA	MONOVISC ¹	Paclitaxel	SEROSTIM ^{1*}
GILENYA ¹	IXINITY	MOZOBIL	Pamidronate	Sildenafil¹
GLASSIA ¹	J	MUSTARGEN	PEGASYS ¹	SILIQ ¹
Glatopa^{1*}	JADENU ¹	MYOBLOC ¹	PEG-INTRON ¹	SIMPONI ^{1*}
GLEEVEC ¹	JAKAFI ¹	MYOZYME ¹	PERJETA ¹	SKYLA
GONAL-F ¹	JEVTANA ¹	N	PHOTOFRIN	Sodium Phenylbutyrate
GRANIX ¹	K	Nabi-hb	PLEGRIDY ¹	SOLESTA
H	KADCYLA ¹	NAGLAZYME ¹	POMALYST ¹	SOLIRIS ¹
HAEGARDA ¹	KALBITOR ¹	NATPARA ¹	PRALUENT ¹	SOMATULINE
HALAVEN ¹	KEPIVANCE ¹	NAVELBINE	Pregnyl¹	SOMAVERT
HARVONI ¹	KEVZARA ¹	NERLYNX ¹	PRIVIGEN ¹	SOVALDI ¹
HELIXATE	KEYTRUDA ¹	NEULASTA ¹	PROCRIT ¹	SPRYCEL ¹
HEMOFIL M	KISQALI ¹	NEUMEGA	PROFILNINE	STELARA ^{1*}
HEPAGAM B	KITABIS PAK	NEUPOGEN ¹	PROLASTIN C ¹	STIMATE
HEPSERA	KOATE-DVI	NEXAVAR ¹	PROLEUKIN	STIVARGA ¹
HERCEPTIN ¹	KOGENATE FS	NINLARO ¹	PROLIA ¹	SUPARTZ ¹
HEXILATE	KOVALTRY	NIPENT	PROMACTA ¹	SUPPRELIN LA ¹
HIZENTRA ¹	KRYSTEXXA ¹	NORDITROPIN ^{1*}	PULMOZYME ¹	SUTENT
HUMATE-P	KUVAN ¹	NORTHERA ¹	PURIXAN	SYLATRON ¹
HUMATROPE ^{1*}	KYLEENA	Novarel¹	R	SYNAGIS ¹
HUMIRA ^{1*}	KYNAMRO ¹	NOVOEIGHT	RAVICTI ¹	SYNVISC ¹
HYALGAN ¹	KYPROLIS ¹	NOVOSEVEN	REBETOL ¹	T

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Products distributed by CVS Caremark Specialty Pharmacy, as well as products covered by a plan member's prescription benefit plan, may change from time to time. In addition, a plan member's specific prescription benefit plan design may not cover certain products or categories, regardless of their appearance on this document at any time.

TAFINLAR ¹	VIEKIRA ¹
TAGRISSO ¹	VIMIZIM ¹
TALTZ ¹	Vinblastine
TARCEVA ¹	VINCASAR
TARGRETIN ¹	Vincristine
TASIGNA ¹	Vinorelbine
TAXOTERE	VISUDYNE
TECENTRIQ ¹	VIVITROL
TECFIDERA ¹	VONVENDI
TECHNIVIE ¹	VOSVEI ¹
TEMODAR	VOTRIENT ¹
Temozolomide	VPRIV ¹
TEPADINA	W
Tetrabenazine¹	WILATE
THALOMID	WINRHO SD/SDF
THERACYS	X
THIOTEPA	XALKORI ¹
THYROGEN	XELJANZ ¹
TIKOSYN	XELODA
TOBI	XENAZINE ¹
Tobramycin	XEOMIN ¹
TOPOSAR	XGEVA ¹
Topotecan	XOLAIR ¹
TORISEL	XTANDI ¹
TOTECT	XYNTHA
TRACLEER ¹	Y
TREANDA ¹	YERVOY ¹
TRELSTAR ¹	YONDELIS ¹
TREMFYA ¹	Z
TRETTEN	ZALTRAP ¹
TRISENOX	ZANOSAR
TYKERB ¹	ZARXIO ¹
TYMLOS ¹	ZELBORAF ¹
TYSABRI ¹	ZEMAIRA ¹
TYVASO ¹	ZEPATIER ¹
TYZEKA	ZINBRYTA ¹
U	ZINECARD
UPTRAVI ¹	ZOLADEX ¹
UVADEX	Zoledronic Acid
V	ZOLINZA ¹
VALSTAR	ZOMACTON ¹
VANTAS ¹	ZOMETA
VARIZIG	ZORBTIVE ^{1*}
VECTIBIX ¹	ZORTRESS
VELCADE ¹	ZYKADIA ¹
VELETRI ¹	ZYTIGA ¹
VEMLIDY	
VENTAVIS ¹	
VIDAZA	

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Limited Distribution Drug List

Due to manufacturer restrictions, a small number of specialty drugs used to treat rare or uncommon conditions may be available only through specific Preferred retail pharmacies, and are referred to as Limited Distribution Drugs. The following list of current Limited Distribution Specialty drugs may be obtained through a specific Preferred retail pharmacy with the Specialty Drug Pharmacy Program copayments under Standard Option and Basic Option. Please contact Caremark Specialty Pharmacy at 1-888-346-3731 for assistance with finding the appropriate pharmacy. Please read the Specialty Drug Pharmacy Program section of your Plan Benefit Brochure.

A	E	KANUMA ¹	R
ADAGEN	EMFLAZA	KINERET ¹	RADICAVA ¹
APLIGRAF	ERWINAZE ¹	KORLYM ¹	S
AUSTEDO ¹	EXONDYS 51 ¹	L	SIGNIFOR ¹
B	F	LARTRUVO	STRENSIQ ¹
BELEODAQ ¹	FERRIPROX ¹	LYNPARZA ¹	SYNBRIO ¹
BEVENCIO ¹	G	M	V
BLINCYTO ¹	GILOTRIF ¹	MATULANE	VALCHLOR ¹
C	H	MIRCERA ¹	VENCLEXTA ¹
CAMPATH	HETLIOZ ¹	MYALEPT ¹	VORAXAZE
CAPRELSA ¹	I	MARQIBO ¹	X
CARBAGLU ¹	IMBRUVICA ¹	O	XERMELO ¹
CAYSTON	ICLUSIG ¹	ORFADIN	XIAFLEX ¹
CHOLBAM ¹	INGREZZA ¹	ORKAMBI ¹	Z
COAGADEX ¹	J	P	ZAVESCA ¹
COMETRIQ ¹	JETREA ¹	PRIALT	ZEJULA ¹
CYRAMZA ¹	JUXTAPID ¹	PROCYSBI ¹	ZYDELIG ¹
CYSTADANE	K	PROLASTIN	
CYSTARAN	KALYDECO ¹	PROVENGE ¹	

Limited Distribution Drugs (LDD) are medications the manufacturer chooses to limit the distribution of their medication to only a few pharmacies, or the Food and Drug Administration (FDA) may require this restriction during the drug approval process. This type of restricted distribution helps the manufacturer keep track of drug inventory, may have special dosing or lab monitoring requirements that need to be followed very closely and ensure that any risks that are associated with the LDD are minimized.