

Provider Medical Specialty Pharmacy Drug List

Provider Medical Specialty Pharmacy Drug List - The following is a list for providers (health care professionals) to view specialty medications that are typically provided under the medical benefit. Our home infusion network providers are not able to administer these medications for members. Listed medications would need to be provided from a medical specialty pharmacy network provider, if the administering physician is not supplying the specialty medication.

ANTICOAGULANT	Zevalin	Alphanine SD / Mononine	Rho(D) Immune Globulin (RhigIV), human, for intravenous use	OSTEOARTHRITIS
Fondaparinux Sodium	Zoladex	Alprolix		Euflexxa
ANTI-INFECTIVE	CHEMICAL DEPENDENCE	Bebulin / Proflinine	INFERTILITY	Gel-One
Pentamidine Isethionate	Vivitrol	Corifact	Bravelle	Genvisc 850
ASTHMA	CNS/AUTONOMIC DISORDERS	Eloctate	Chorionic Gonadotropin	Gel-Syn
Xolair	Acthar H.P.	Factor IX (Recombinant)	Follistim AQ	Hyalgan
BLOOD CELL DEFICIENCY	CONTRACEPTIVES	Factor VIII (Human)	Follitropin Alfa	Monovisc
Granix	Nexplanon	Factor VIII (Recombinant)	Ganirelix Acetate	Orthovisc
Mozobil	Levonorgestrel (IUD)	Factor VIII/VWF Complex	Leuprolide Acetate	Supartz
Neumega	Medroxyprogesterone (contraceptive)	Feiba NF	Menopur / Repronex	Synvisc
Zarxio	COSMETIC	Idelvion		Synvisc-One
BLOOD MODIFYING	Botox Cosmetic	Novoseven RT	INFLAMMATORY CONDITIONS	OSTEOPOROSIS
Antithrombin (Human)	Dysport	Nuwiq	Alefacept	Forteo
Antithrombin (Human) (Recombinant)	Myobloc	Obizur	Arcalyst	Miacalcin
Ceprotrin	Xeomin	Riastap	Benlysta	Prolia
BONE CONDITIONS	CYSTIC FIBROSIS	Tretten	Cimzia	Xgeva
Prolia	Pulmozyme	Vonvendi	Enbrel	PAIN/INFLAMMATION
Xgeva	Tobramycin Inh.	Xyntha / Xyntha Solofuse	Ilaris	Qutenza
CANCER	ENDOCRINE DISORDERS	HEPATITIS C	MULTIPLE SCLEROSIS	PARKINSONS DISEASE
Actimmune	Aveed	Pegasys / Pegasys Proclick	Avonex	Apokyn
Depocyt	Leuprolide Acetate	Peg-Intron	Betaseron / Extavia	PULMONARY HYPERTENSION
Elitek	Signifor LAR	HIV	Rebif / Rebif Rebidose	Tyvaso
Faslodex	Somatuline Depot	Fuzeon	MUSCULOSKELETAL	Ventavis
Firmagon	Supprelin LA	Retrovir	Miacalcin	URINARY DISORDERS
Leucovorin Calcium Inj	Testopel	HORMONAL	Xiaflex	Dimethyl Sulfoxide
Leuprolide Acetate	ENZYME DEFICIENCIES	Caverject Impulse	NEUROMUSCULAR	VIRAL INFECTIONS
Medroxyprogesterone acetate (antineoplastic)	Adagen	Thyrogen	Botox	Aferon N
Mitomycin	GROWTH DEFICIENCY	IMMUNE DEFICIENCY	Dysport	
Radium ra-223 dichloride, therapeutic	Increlex	Cytogam	Myobloc	
Provenge	HEART DISEASE	Hep B Immune Globulin (Human)	Xeomin	
Synribo	Natrecor	HyperRab S-D / Imogam		
Vantas	HEMOPHILIA	Rabies-HT		
Theracys/Tice BCG	Adynovate	Hyqvia		
Trelstar LA	Afstyla	Rho(D) Immune Globulin (Rhig), human, for intramuscular use		
Valstar			OPHTHALMIC CONDITIONS	
Yervoy			Eylea	
Zaltrap			Iluvien / Retisert	
			Jetrea	
			Lucentis	
			Macugen	
			Ozurdex	
			Visudyne	

*Factor products may still be provided by Hemophilia Treatment Centers.

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And Its Affiliate HealthKeepers, Inc.

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This list may change without notice which may affect your benefit coverage. To be sure your specialty drug is covered, call the customer service number located on your member id card.

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Get help in your language

Curious to know what all this says? We would be too. Here's the English version:

You have the right to get this information and help in your language for free. Call the Member Services number on your ID card for help. (TTY/TDD: 711)

Separate from our language assistance program, we make documents available in alternate formats for members with visual impairments. If you need a copy of this document in an alternate format, please call the customer service telephone number on the back of your ID card.

Spanish

Tiene el derecho de obtener esta información y ayuda en su idioma en forma gratuita. Llame al número de Servicios para Miembros que figura en su tarjeta de identificación para obtener ayuda. (TTY/TDD: 711)

Chinese

您有權使用您的語言免費獲得該資訊和協助。請撥打您的 ID 卡上的成員服務號碼尋求協助。(TTY/TDD: 711)

Vietnamese

Quý vị có quyền nhận miễn phí thông tin này và sự trợ giúp bằng ngôn ngữ của quý vị. Hãy gọi cho số Dịch Vụ Thành Viên trên thẻ ID của quý vị để được giúp đỡ. (TTY/TDD: 711)

Korean

귀하에게는 무료로 이 정보를 얻고 귀하의 언어로 도움을 받을 권리가 있습니다. 도움을 얻으려면 귀하의 ID 카드에 있는 회원 서비스 번호로 전화하십시오. (TTY/TDD: 711)

Tagalog

May karapatan kayong makuha ang impormasyon at tulong na ito sa ginagamit ninyong wika nang walang bayad. Tumawag sa numero ng Member Services na nasa inyong ID card para sa tulong. (TTY/TDD: 711)

Russian

Вы имеете право получить данную информацию и помощь на вашем языке бесплатно. Для получения помощи звоните в отдел обслуживания участников по номеру, указанному на вашей идентификационной карте. (TTY/TDD: 711)

Arabic

يحق لك الحصول على هذه المعلومات والمساعدة بلغتك مجاناً. اتصل برقم خدمات الأعضاء الموجود على بطاقة التعريف الخاصة بك للمساعدة. (TTY/TDD: 711)

Armenian

Ձեր իրավունք ունեք Ձեր լեզվով անվճար ստանալ այս տեղեկատվությունը և ցանկացած օգնություն: Օգնություն ստանալու համար զանգահարեք Անդամների սպասարկման կենտրոն՝ Ձեր ID քարտի վրա նշված համարով: (TTY/TDD: 711)

Farsi

شما این حق را دارید که این اطلاعات و کمکها را به صورت رایگان به زبان خودتان دریافت کنید. برای دریافت کمک به شماره مرکز خدمات اعضاء که بر روی کارت شناساییتان درج شده است، تماس بگیرید. (TTY/TDD: 711)

French

Vous avez le droit d'accéder gratuitement à ces informations et à une aide dans votre langue. Pour cela, veuillez appeler le numéro des Services destinés aux membres qui figure sur votre carte d'identification. (TTY/TDD: 711)

Japanese

この情報と支援を希望する言語で無料で受けることができます。支援を受けるには、IDカードに記載されているメンバーサービス番号に電話してください。(TTY/TDD: 711)

Haitian

Ou gen dwa pou resevwa enfòmasyon sa a ak asistans nan lang ou pou gratis. Rele nimewo Manm Sèvis la ki sou kat idantifikasyon ou a pou jwenn èd. (TTY/TDD: 711)

Italian

Ha il diritto di ricevere queste informazioni ed eventuale assistenza nella sua lingua senza alcun costo aggiuntivo. Per assistenza, chiami il numero dedicato ai Servizi per i membri riportato sul suo libretto. (TTY/TDD: 711)

Polish

Masz prawo do bezpłatnego otrzymania niniejszych informacji oraz uzyskania pomocy w swoim języku. W tym celu skontaktuj się z Działem Obsługi Klienta pod numerem telefonu podanym na karcie identyfikacyjnej. (TTY/TDD: 711)

Punjabi

ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਇਹ ਜਾਣਕਾਰੀ ਅਤੇ ਮਦਦ ਮੁਫਤ ਵਿੱਚ ਪ੍ਰਾਪਤ ਕਰਨ ਦਾ ਅਧਿਕਾਰ ਹੈ। ਮਦਦ ਲਈ ਆਪਣੇ ਆਈਡੀ ਕਾਰਡ ਉੱਤੇ ਮੈਂਬਰ ਸਰਵਿਸਿਜ਼ ਨੰਬਰ ਤੇ ਕਾਲ ਕਰੋ। (TTY/TDD: 711)

Navajo

Bee ná ahoót'í t'áá ni nizaad k'ehjí níká a'doowoł t'áá jík'e. Naaltsoos bee atah nilínígíí bee né'cho'dólzingo nanitínígíí bé'esh bee hane'í bikáá' áá'j'í' hodiilnih. Naaltsoos bee atah nilínígíí bee né'cho'dólzingo nanitínígíí bé'esh bee hane'í bikáá' áá'j'í' hodiilnih. (TTY/TDD: 711)

It's important we treat you fairly

That's why we follow federal civil rights laws in our health programs and activities. We don't discriminate, exclude people, or treat them differently on the basis of race, color, national origin, sex, age or disability. For people with disabilities, we offer free aids and services. For people whose primary language isn't English, we offer free language assistance services through interpreters and other written languages. Interested in these services? Call the Member Services number on your ID card for help (TTY/TDD: 711). If you think we failed to offer these services or discriminated based on race, color, national origin, age, disability, or sex, you can file a complaint, also known as a grievance. You can file a complaint with our Compliance Coordinator in writing to Compliance Coordinator, P.O. Box 27401, Mail Drop VA2002-N160, Richmond, VA 23279. Or you can file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at 200 Independence Avenue, SW; Room 509F, HHH Building; Washington, D.C. 20201 or by calling 1-800-368-1019 (TDD: 1-800-537-7697) or online at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.