

# Specialty drugs not covered under the pharmacy benefit

This is a list of clinician-administered specialty drugs not covered under the pharmacy benefit for certain groups. Members should talk with the prescribing physician about determination of coverage under the member's medical benefit.

## ANTICOAGULANT

Refludan

## BLOOD MODIFYING

Ceprothin  
Soliris

## BONE CONDITIONS

Boniva  
ibandronate sodium  
Miacalcin  
pamidronate disodium  
Prolia  
Reclast  
Xgeva  
zoledronic acid  
Zometa

## CANCER

Abraxane  
Adcetris  
adriamycin  
Adrucil  
Alimta  
Aliqopa  
Alkeran  
amifostine  
Arranon  
Arzerra  
Avastin  
azacitidine  
Bavencio  
Beleodaq  
Bendeka  
Besponsa  
Bexxar  
Bicnu  
bleomycin sulfate  
Blinicyto  
Bortezomib  
Busulfex  
Campath  
Camptosar  
carboplatin  
cerubidine  
cisplatin  
cladribine  
clofarabine  
Clolar  
Cosmegen

cyclophosphamide

Cyramza  
cytarabine  
dacarbazine  
Dacogen  
dactinomycin  
Darzalex  
daunorubicin hcl  
daunoxome  
decitabine  
Depocyt  
dexrazoxane  
Docefrez  
docetaxel  
Doxil  
doxorubicin hcl  
doxorubicin hcl liposomal  
Elitek  
Ellence  
Eloxatin  
Elspar  
Empliciti  
epirubicin hcl  
Erbitux  
Erwinaze  
Ethyol  
Etopophos  
etoposide  
Evomela  
Faslodex  
Firmagon  
floxuridine  
fludarabine phosphate  
fluorouracil  
Folotyn  
Fusilev  
Gazyva  
gemcitabine hcl  
Gemzar  
Halaven  
Herceptin  
Hycamtin  
idamycin PFS  
idarubicin hcl  
Ifex  
ifosfamide  
ifosfamide-mesna  
Imfinzi

irinotecan hcl  
Istodax  
Ixempra  
Jevtana  
Kadcyla  
Kepivance  
Keytruda  
Kyprolis  
Lartruvo  
levoleucovorin calcium  
Lipodox  
Marqibo  
melphalan hcl  
mitomycin  
mitoxantrone  
Mustargen  
Mylotarg  
Navelbine  
Nipent  
Oncaspar  
Onivyde  
Opdivo  
oxaliplatin  
paclitaxel  
pentostatin  
Perjeta  
Photofrin  
Portrazza  
Proleukin  
Provence  
Rituxan  
Romidepsin  
Synribo  
taxotere  
Temodar  
teniposide  
Tepadina  
Theracys  
Thiotepa  
Tice Bcg  
Toposar  
topotecan hcl  
Torisel  
Totect  
Treanda  
Trelstar LA  
Triptodur  
Trisenox  
Unituxin

Valstar  
Vectibix  
Velcade  
Vidaza  
vinblastine sulfate  
Vincasar PFS  
vincristine sulfate  
vinorelbine tartrate  
Voraxaze  
Vyxeos Liposome  
Xofigo  
Yervoy  
Yondelis  
Zaltrap  
Zanosar  
Zevalin  
Zinecard  
Zoladex

## CANCER/ENDOCRINE DISORDERS

Hydroxyprogesterone Caproate  
Lupron Depot  
Lupron Depot-Ped  
Supprelin LA  
Vantas

## CHEMICAL DEPENDENCE

Sublocade  
Vivitrol

## CONTRACEPTIVES

Implanon  
Kyleena  
Liletta  
Mirena  
Nexplanon  
Skyla

## DIAGNOSTIC AIDS

Thyrogen

## ENDOCRINE DISORDERS

Parsabiv  
Sandostatin LAR Depot  
Somatuline Depot

## ENZYME DEFICIENCIES

Adagen  
Aldurazyme  
Cerezyme  
Elaprase  
Elelyso  
Fabrazyme  
Kanuma  
Lumizyme  
Mepsevii  
Myozyme  
Naglazyme  
Vimizim  
Vpriv

## EYE CONDITIONS

Amvisc  
Amvisc Plus  
Eylea  
Iluvien  
Jetrea  
Lucentis  
Macugen  
Ozurdex  
Provisc  
Retisert  
Visudyne

## GI DISORDERS

Solesta

## GOUT

Krystexxa

## HEART DISEASE

Natrecor

## ANTIHEMOPHILIC FACTORS AND CLOTTING FACTORS

Advate  
Advate H  
Advate L  
Advate M  
Advate SH  
Advate UH  
Adynovate  
Alphanate  
Alphanine SD  
Aprolix

# Specialty drugs not covered under the pharmacy benefit

Bebulin  
Benefix  
Coagadex  
Corifact  
Eloctate  
Feiba NF  
Fibryga  
Helixate FS  
Hemlibra  
Hemofil-M  
Humate-P  
Idelvion  
Ixinity  
Koate-DVI  
Kogenate FS  
Kovaltry  
Monoclalte-P  
Mononine  
Novoeight  
Novoseven RT  
Nuwiq  
Obizur  
Profilnine SD  
Rebinyn  
Recombinate  
Riastap  
Rixubis  
Tretten  
Wilate  
Xyntha  
Xyntha Solofuse

## HEREDIATARY ANGIOEDEMA

Berinert  
Cinryze  
Kalbitor  
Ruconest

## HORMONAL SUPPLEMENTATION

Aveed  
Makena  
Testopel

## IMMUNE SERUMS

Bivigam  
Carimune NF  
Cytogam  
Flebogamma DIF  
Gamastan S-D  
Gammagard Liquid  
Gammagard S-D

Gammaked  
Gammaplex  
Gamunex  
Gamunex-C  
Hepagam B  
Hizentra  
Hyperhep B S-D  
Hyperrab S-D  
Hyperrho S-D  
Hyqvia  
Imogam Rabies-HT  
MicRhogam  
MicRhogam Plus  
Nabi-HB  
Octagam  
Privigen  
Rhogam  
Rhogam Plus  
Rhophylac  
Varizig  
WinRho SDF

## INFLAMMATORY CONDITIONS

Actemra  
Benlysta  
Entyvio  
Ilaris  
Inflectra  
Orencia  
Remicade  
Renflexis  
Simponi Aria  
Stelara (IV Infusion)

## IRON TOXICITY

deferoxamine mesylate  
Desferal

## MISC CONDITIONS

Botox  
Botox Cosmetic  
Dysport  
Myobloc  
Sylvant  
Xeomin  
Xiaflex

## MISC SPECIALTY CONDITIONS

Defitelio  
Exondys51  
Prialt

Radicava  
Spinraza

## MULTIPLE SCLEROSIS

Lemtrada  
Ocrevus  
Tysabri

## OSTEOARTHRITIS

Durolane  
Euflexxa  
Gel-One  
Gelsyn-3  
Genvisc 850  
Hyalgan  
Hymovis  
Monovisc  
Orthovisc  
Supartz  
Supartz FX  
Synvisc  
Synvisc-One  
Visco-3  
Zilretta

## PAIN

Qutenza

## PAIN/CRAMPS

Gablofen  
Lioresal

## PULMONARY HYPERTENSION

epoprostenol sodium  
Flolan  
Remodulin  
Revatio  
sildenafil citrate  
Veletri

## RESPIRATORY CONDITIONS

Aralast NP  
Glassia  
Prolastin C  
Zemaira

## RSV PREVENTION

Synagis

## TRANSPLANT

Atgam  
Cellcept

cyclosporine  
mycophenolate mofetil  
Nulojix  
Prograf  
Sandimmune  
Simulect  
Thymoglobulin

## VIRAL INFECTIONS

Alferon N  
cidofovir  
Cytovene  
foscarnet sodium  
Foscavir  
ganciclovir sodium  
Prevymis  
Retrovir  
Vistide

## MEDICAL ONLY

Carticel  
Maci

## EOSINOPHILIC CONDITIONS

Cinqair  
Fasenra

# Specialty drugs not covered under the pharmacy benefit



*Only the clinician administered injectable dosage forms of the above medications will be covered under the medical benefit. All oral, inhaled or other self-administered dosage formulations of the drugs listed above will continue to be covered under the pharmacy benefit.*

*Generic drugs are lowercase and brand name drugs are capitalized.*

*This list may change without notice which may affect benefit coverage.*

*To look up drug coverage under the pharmacy benefit, log on to [anthem.com/ca](http://anthem.com/ca). Enter username and password in Member Login box. Click on 'Prescription Benefits' to reach the Pharmacy page. Click on 'Price a medication' to learn more about drug cost and coverage.*

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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 ਸਰਵਿਸਜ਼ ਨੰਬਰ ਤੇ ਕਾਲ ਕਰੋ। (TTY/TDD: 711)

#### Navajo

Bee ná ahoót'í t'áá ni nizaad k'ehjí níká a'doowół 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>.