

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 | cyclophosphamide | irinotecan hcl | Valstar | ENZYME DEFICIENCIES |
| Refludan | Cyramza | Istodax | Vectibix | Adagen |
| BLOOD MODIFYING | cytarabine | Ixempra | Velcade | Aldurazyme |
| Ceprotrin | dacarbazine | Jevtana | Vidaza | Cerezyme |
| Soliris | Dacogen | Kadcyla | vinblastine sulfate | Elaprase |
| BONE CONDITIONS | dactinomycin | Kepivance | Vincasar PFS | Elelyso |
| Boniva | Darzalex | Keytruda | vincristine sulfate | Fabrazyme |
| ibandronate sodium | daunorubicin hcl | Kyprolis | vinorelbine tartrate | Kanuma |
| Miacalcin | daunoxome | Lartruvo | Voraxaze | Lumizyme |
| pamidronate disodium | decitabine | levoleucovorin calcium | Vyxeos Liposome | Mepsevii |
| Prolia | Depocyt | Lipodox | Xofigo | Myozyme |
| Reclast | dexrazoxane | Marqibo | Yervoy | Naglazyme |
| Xgeva | Docefrez | melphalan hcl | Zandelis | Vimizim |
| zoledronic acid | docetaxel | mitomycin | Zaltrap | Vpriv |
| Zometa | Doxil | mitoxantrone | Zanosar | EYE CONDITIONS |
| CANCER | doxorubicin hcl | Mustargen | Zevalin | Amvisc |
| Abraxane | doxorubicin hcl | Mylotarg | Zinecard | Amvisc Plus |
| Adcetris | liposomal | Navelbine | Zoladex | Eylea |
| adriamycin | Elitek | Nipent | CANCER/ENDOCRINE DISORDERS | Iluvien |
| Adrucil | Ellence | Oncaspar | Hydroxyprogesterone | Jetrea |
| Alimta | Eloxatin | Onivyde | Caproate | Lucentis |
| Aliqopa | Elspar | Opdivo | Lupron Depot | Macugen |
| Alkeran | Empliciti | oxaliplatin | Lupron Depot-Ped | Ozurdex |
| amifostine | epirubicin hcl | paclitaxel | Supprelin LA | Provisc |
| Arranon | Erbitux | pentostatin | Vantas | Retisert |
| Arzerra | Erwinaze | Perjeta | CHEMICAL DEPENDENCE | Visudyne |
| Avastin | Ethyol | Photofrin | Sublocade | GOUT |
| azacitidine | Etopophos | Portrazza | Vivitrol | Krystexxa |
| Bavencio | etoposide | Proleukin | CONTRACEPTIVES | HEART DISEASE |
| Beleodaq | Evomela | Provence | Implanon | Natrecor |
| Bendeka | Faslodex | Rituxan | Kyleena | ANTIHEMOPHILIC FACTORS AND CLOTTING FACTORS |
| Besponsa | Firmagon | Romidepsin | Liletta | Advate |
| Bexxar | floxuridine | Synribo | Mirena | Advate H |
| Bicnu | fludarabine phosphate | taxotere | Nexplanon | Advate L |
| bleomycin sulfate | fluorouracil | Temodar | Skylla | Advate M |
| Blinicyto | Folotyn | teniposide | DIAGNOSTIC AIDS | Advate SH |
| Bortezomib | Fusilev | Tepadina | Thyrogen | Advate UH |
| Busulfex | Gazyva | Theracys | ENDOCRINE DISORDERS | Adynovate |
| Campath | gemcitabine hcl | Thiotepa | Parsabiv | Alphanate |
| Camptosar | Gemzar | Tice Bcg | Sandostatin LAR Depot | Alphanine SD |
| carboplatin | Halaven | Toposar | Somatuline Depot | Aprolix |
| cerubidine | Herceptin | topotecan hcl | | |
| cisplatin | Hycamtin | Torisel | | |
| cladribine | idamycin PFS | Totect | | |
| clofarabine | idarubicin hcl | Treanda | | |
| Clolar | Ifex | Trelstar LA | | |
| Cosmegen | ifosfamide | Triptodur | | |
| | ifosfamide-mesna | Trisenox | | |
| | Imfinzi | Unituxin | | |

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
Rhopylac
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



And Its Affiliate HealthKeepers, Inc.

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. 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' áájí' hodiílnih. Naaltsoos bee atah nilínígíí bee né'cho'dólzingo nanitínígíí bé'esh bee hane'í bikáá' áájí' hodiílnih. (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>.