Blue Cross and Blue Shield of Oklahoma

BlueCross BlueShield of Oklahoma

Triessent® Specialty Pharmacy Program Drug List

Definition of specialty medications: Specialty medications are generally prescribed for people with complex or ongoing medical conditions such as multiple sclerosis, hemophilia, hepatitis C and rheumatoid arthritis. These high cost medications also have one or more of the following characteristics: injected or infused, but some may be taken by mouth; unique storage or shipment requirements; additional education and support required from a health care professional; and usually not stocked at retail pharmacies.

Autoimmune Inflammatory Disorders	**ROA**
ACTEMRA	IV
AMEVIVE	IM
ARCALYST*	SC
CIMZIA RECONSTITUTION (M)	SC
CIMZIA PREFILLED SYRINGE	SC
ENBREL	**SC**
HUMIRA	**SC**
ILARIS* (M)	SC
KINERET	SC
ORENCIA	IV
REMICADE	IV
SIMPONI	SC
STELARA (M)	SC

Blood Modifiers	**ROA**
ARANESP	**IJ**
EPOGEN	**IJ**
LEUKINE	IJ/IV
NEULASTA	**SC**
NEUMEGA	SC
NEUPOGEN	**IJ**
NPLATE (M)	SC
PROCRIT	**IJ**
PROMACTA	OR

Cancer – Oral	**ROA**
AFINITOR	**OR**
GLEEVEC	OR
HEXALEN	OR
HYCAMTIN	OR
LYSODREN	OR
MATULANE	OR
NEXAVAR	OR
OFORTA	OR
REVLIMID	OR
SPRYCEL	OR
SUTENT	OR
TARCEVA	OR
TARGRETIN	OR/EX
TASIGNA	OR
TEMODAR	OR
THALOMID	OR
TRETINOIN	**OR**
TYKERB	OR
VESANOID	OR
VOTRIENT	OR
XELODA	OR
ZOLINZA	OR

Clotting Disorders (M) ♦♦♦	**ROA**
ADVATE	IV
ALPHANATE	IV
ALPHANINE SD	IV
BEBULIN VH	IV
BENEFIX	IV
FEIBA VH	IV
HELIXATE FS	IV
HEMOFIL M	IV
HUMATE-P	IV
KOATE-DVI	IV
KOGENATE FS	IV
MONOCLATE-P	IV
MONONINE	IV
NOVOSEVEN RT	IV
PROFILNINE SD	IV
RECOMBINATE	IV
REFACTO	IV
WILATE	IV
XYNTHA	IV

Cystic Fibrosis	**ROA**
CAYSTON*	IN
PULMOZYME	**IN**
TOBI	**IN**

Enzyme Deficiencies	**ROA**
ALDURAZYME	IV
CARBAGLU*	OR
CEREDASE	IV
CEREZYME	IV
CINRYZE* (M)	IV
ELAPRASE*	IV
FABRAZYME	IV
KUVAN	OR
LUMIZYME	IV
MYOZYME	IV
NAGLAZYME	IV
ORFADIN*	OR
SOLIRIS	IV
VPRIV	IV
ZAVESCA*	OR

Growth Hormones	**ROA**
GENOTROPIN	IJ/SC
HUMATROPE	IJ/SC
INCRELEX	**IJ/SC**
NORDITROPIN	IJ/SC
NUTROPIN/AQ	IJ/SC
OMNITROPE	**IJ/SC**
SAIZEN	IJ/SC
SEROSTIM	IJ/SC
TEV-TROPIN	IJ/SC
ZORBTIVE	IJ/SC

Hepatitis C	**ROA**
COPEGUS	OR
INFERGEN	SC
INTRON-A	**IJ/SC**
PEGASYS	**SC**
PEG-INTRON	**SC**
REBETOL	OR
RIBASPHERE	OR
RIBATAB	OR
ribavirin	**OR**

HIV	**ROA**
EGRIFTA	SC
FUZEON	**SC**

Infertility ♦	**ROA**
BRAVELLE	IJ
CETROTIDE	SC
chorionic gonadotropin	IM
FOLLISTIM AQ	SC
GANIRELIX ACETATE	SC
GONAL-F	IJ/SC
LUVERIS	SC
MENOPUR	SC
NOVAREL	IM
OVIDREL	SC
PREGNYL	IM
REPRONEX	IJ

Lung Disorders	**ROA**
ACTIMMUNE	SC
ARALAST	IV
ARALAST NP	IV
GLASSIA	IV
PROLASTIN C*	IV
SYNAGIS (M)	IM
XOLAIR	SC
ZEMAIRA*	IV

Macular Degeneration	**ROA**
LUCENTIS	IO
MACUGEN	IO
VISUDYNE	IV

Multiple Sclerosis	**ROA**
AMPYRA	OR
AVONEX	**IM**
BETASERON	SC
COPAXONE	**SC**
EXTAVIA	SC
GILENYA	OR
REBIF	**SC**
TYSABRI	IV

Pulmonary Hypertension	**ROA**
ADCIRCA	**OR**
epoprostenol sodium	**IV**
FLOLAN*	IV
LETAIRIS	OR
REMODULIN*	IJ
REVATIO	OR
TRACLEER*	**OR**
TYVASO	IN
VELETRI*	IV
VENTAVIS*	IN

Others	**ROA**
ALFERON N	IJ
APOKYN*	**SC**
CHENODAL*	OR
ELIGARD	SC
EXJADE*	OR
FIRMAGON (M)	SC
FORTEO	SC
H.P. ACTHAR GEL	IJ/SC
KRYSTEXXA	IV
leuprolide acetate	**IJ**
LUPRON DEPOT ♦♦ (M)	IM
octreotide acetate	**IJ**
SAMSCA	OR
SANDOSTATIN/LAR	IJ/IM
SOMATULINE DEPOT (M)	SC
SOMAVERT*	SC
THROMBATE III	IV
TRELSTAR DEPOT/LA	IM
VIVITROL	IM
XENAZINE*	OR
XGEVA	SC
XIAFLEX	IJ
XYREM*	OR
ZOMETA	IV

Key

* Limited distribution

(M) Medical benefit

♦ Standard benefits typically exclude coverage for infertility and drugs administered by the following routes of administration: IA, IL, IM, IO, IT, ITV & IV. Check your benefit booklet for coverage and exclusions.

♦♦ Provided through Pharmacy Solutions 800.859.0220

♦♦♦ Provided through Coram 800.388. 2273

Drugs that are BOLD are preferred

Brand-name products are capitalized (e.g. FLOLAN)

Generic products are in lowercase (e.g. epoprosetenol sodium)

Routes of Administration (ROA) codes:

EX	external
IA	intraarticular
IJ	injection
IL	intralesional
IM	intramuscular
IN	inhalation
IO	intraocular
IT	intrathecal
ITV	intravesicule
IV	intravenous
OR	oral
SC	subcutaneous
TP	topical

For more information, call

888.216.6710

This list is subject to change without notice.

Prime Therapeutics LLC is the independent company chosen by the Blue Cross and Blue Shield of Oklahoma to manage your prescription drug benefit. Blue Cross and Blue Shield of Oklahoma is a Division of Health Care Service Corporation, A Mutual Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association.

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