

Prime Therapeutics Specialty Pharmacy Drug Management 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.

Antihyperlipidemic

PRALUENT
REPATHA

Autoimmune

ACTEMRA
ARCALYST*
BENLYSTA
CIMZIA
COSENTYX
DUPIXENT
ENBREL
ENTYVIO
HUMIRA
ILARIS*
INFLECTRA
KEVZARA
KINERET*
ORENCIA
OTEZLA
REMICADE
RENFLEXIS
SILIQ
SIMPONI
SIMPONI ARIA
STELARA
TALTZ
TREMFYA
XELJANZ

Blood Modifiers

ARANESP
EPOGEN
GRANIX
LEUKINE
MOZOBIL
NEULASTA
NEUMEGA
NEUPOGEN
NPLATE
PROCRIT
PROMACTA
RETACRIT
ZARXIO

Cancer – Injectable

ELIGARD
FIRMAGON
HYDROXYPROGESTERONE
CAPROATE
MEPSEVII*
RITUXAN HYCELA
SYLATRON
SYNRIBO
TRELSTAR DEPOT/ LA

Cancer - Oral

AFINITOR / DISPERZ
ALECENSA*
ALUNBRIG*
bexarotene
bicalutamide
BOSULIF
CABOMETYX*
CALQUENCE*
capecitabine
CAPRELSA*
CASODEX
COMETRIQ*
COTELLIC
cyclophosphamide
EMCYT
ERIVEDGE*
FARESTON
FARYDAK*
FASLODEX
flutamide
GILOTRIF*
GLEEVEC
GLEOSTINE
HEXALEN
HYCAMTIN
HYDREA
hydroxyurea
IBRANCE
ICLUSIG*
IDHIFA
imatinib mesylate
IMBRUVICA*
INLYTA
IRESSA*
JAKAFI*
KISQALI
KISQALI FEMARA
LENVIMA*
LEUKERAN
lomustine
LONSURF*
LYNPARZA*
LYSODREN
MATULANE*
MEKINIST
NERLYNX*
NEXAVAR
NILANDRON
nilutamide
NINLARO*
ODOMZO
POMALYST*
PURIXAN*
REVLIMID*
RUBRACA*

RYDAPT
SPRYCEL
STIVARGA
SUTENT
TABLOID
TAFINLAR
TAGRISSO*
TARCEVA
TARGRETIN
TASIGNA
TEMODAR
temozolomide
THALOMID
tretinoin
TYKERB
VENCLEXTA*
VERZENIO*
VOTRIENT
XALKORI
XELODA
XTANDI
ZEJULA*
ZELBORAF
ZOLINZA
ZYDELIG*
ZYKADIA*
ZYTIGA

Cystic Fibrosis

BETHKIS
CAYSTON*
KALYDECO*
KITABIS PAK
ORKAMBI*
PULMOZYME
TOBI
tobramycin

Enzyme Deficiencies

ALDURAZYME
BUPHENYL
CARBAGLU*
CERDELGA
CEREZYME
ELAPRASE
ELELYSO*
FABRAZYME
KANUMA*
KUVAN*
LUMIZYME
Miglusta
MYOZYME
NAGLAZYME*
NITYR*
ORFADIN*
RAVICITI*

sodium phenylbutyrate
STRENSIQ*
SUCRAID*
VIMIZIM*
VPRIV
ZAVESCA*

Fertility&Pregnancy

BRAVELLE
CETROTIDE
chorionic gonadotropin
FOLLISTIM AQ
GANIRELIX ACETATE
GONAL-F/ RFF
MENOPUR
NOVAREL
OVIDREL
PREGNYL
REPRONEX

Growth Hormones

GENOTROPIN
HUMATROPE
INCRELEX*
NORDITROPIN
NUTROPIN/AQ
OMNITROPE
SAIZEN
SEROSTIM
TEV-TROPIN
ZOMACTON
ZORBIVE

Hemophilia

ADVATE
ADYNOVATE
AFSTYLA
ALPHANATE
ALPHANINE SD
ALPROLIX
BEBULIN/ VH
BENEFIX
COAGADEX*
CORIFACT*
ELOCTATE
FEIBA NF/ VH
HELIXATE FS
HEMLIBRA
HEMOFIL M
HUMATE-P
IDELVION
IXINITY
KOATE-DVI
KOGENATE FS
KOVALTRY

MONOCLATE-P
MONONINE
NOVOEIGHT
NOVOSEVEN/ RT
NUWIQ
OBIZUR
PROFILNINE SD
REBINYN
RECOMBINATE
RIXUBIS
TRETEN*
VONVENDI*
WILATE
XYNTHA

Hepatitis C

COPEGUS
DAKLINZA
EPLUSA
HARVONI
INCIVEK
INFERGEN
INTRON-A
MAVYRET
MODERIBA
OLYSIO
PEGASYS
PEG-INTRON
REBETOL
RIBAPAK
RIBASPHERE
RIBATAB
ribavirin
SOVALDI
TECHNIVIE
VICTRELIS
VIEKIRA
VOSEVI
ZEPATIER

(Continued on Page 2)

Key

* Limited distribution

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

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

For more information, call
877.627.6337

This list is subject to change without notice.

Blue Cross and Blue Shield of Wyoming is an independent licensee of the Blue Cross and Blue Shield Association. BLUE CROSS®, BLUE SHIELD® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans. Prime Therapeutics has an ownership interest in AllianceRx Walgreens Prime, a central specialty pharmacy and mail service company. Blue Cross and Blue Shield of Wyoming contracts with Prime to provide pharmacy benefit management and specialty pharmacy services.

Prime Therapeutics LLC (Prime) is an independent company that manages pharmacy benefits for Blue Cross Blue Shield of Wyoming members.

Prime Therapeutics Specialty Pharmacy Drug Management List

HIV

EGRIFTA
FUZEON
TROGARZO

Lung Disorders

ACTIMMUNE*
ARALAST/NP
CINQAIR*
ESBRIET
FASENRA
GLASSIA
NUCALA
OFEV*
PROLASTIN/ C*
SYNAGIS
XOLAIR
ZEMAIRA*

Macular Degeneration

EYLEA*
LUCENTIS*
MACUGEN*
VISUDYNE*

Multiple Sclerosis

AMPYRA
AUBAGIO
AVONEX
BETASERON
COPAXONE
EXTAVIA
GILENYA
glatopa
LEMTRADA
OCREVUS
PLEGRIDY
REBIF
TECFIDERA
TYSABRI*
ZINBRYTA

Pulmonary

Hypertension

ADCIRCA
ADEMPAS*
epoprostenol sodium*
FLOLAN*
LETAIRIS*
OPSUMIT*
ORENITRAM*
REMODULIN*

REVATIO
TRACLEER*
TYVASO*
UPTRAVI*
VELETRI*
VENTAVIS*

Others

ALFERON N
APOKYN*
AUSTEDO
BERINERT*
BONIVA
CHENODAL*
CHOLBAM *
CINRYZE*
CRYSVITA*
CUPRIMINE
CYSTAGON*
CYSTARAN*
DEPEN TITRATABS
DROXIA
EMFLAZA*
ENDARI*
EXJADE
EXONDYS 51*
FERRIPROX*
FIRAZYR
FORTEO
GATTEX*
HAEGARDA*
H.P. ACTHAR GEL*
INGREZZA*
JADENU
JETREA*
JUXTAPID*
IPRIVASK
KALBITOR*
KORLYM*
KRYSTEXXA*
KYNAMRO*
leuprolide acetate
LUPANETA KIT
LUPRON DEPOT/ PED
MYALEPT*
NATPARA*
OCALIVA*
octreotide acetate
PROCYSBI*
PROLIA
RADICAVA*
RECLAST
RUCONEST*
SAMSCA

SANDOSTATIN / LAR
SIGNIFOR / LAR*
SIKLOS
SOLIRIS
SOMATULINE DEPOT
SOMAVERT*
SPINRAZA*
SYPRINE
TAVALISSE*
THROMBATE III
TRIPTODUR*
TYMLOS
VALCHLOR*
VISTOGARD*
VIVITROL
XENAZINE*
XERMELO*
XGEVA
XIAFLEX*
XURIDEN*
XYREM*
zoledronic acid
ZOMETA

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This Notice is Being Provided as Required by the Affordable Care Act Translation Services

If you, or someone you're helping, has questions about Blue Cross Blue Shield of Wyoming, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 800-442-2376.

Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca de Blue Cross Blue Shield of Wyoming, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 800-442-2376.

如果您，或是您正在協助的對象，有關於[插入SBM項目的名稱 Blue Cross Blue Shield of Wyoming 方面的問題，您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員，請撥電話 [在此插入數字800-442-2376。

Falls Sie oder jemand, dem Sie helfen, Fragen zum Blue Cross Blue Shield of Wyoming haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 800-442-2376.

Kung ikaw, o ang iyong tinutulangan, ay may mga katanungan tungkol sa Blue Cross Blue Shield of Wyoming, may karapatan ka na makakuha ng tulong at impormasyon sa iyong wika ng walang gastos. Upang makausap ang isang tagasalin, tumawag sa 800-442-2376.

Si vous, ou quelqu'un que vous êtes en train d'aider, a des questions à propos de Blue Cross Blue Shield of Wyoming, vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, appelez 800-442-2376.

만약 귀하 또는 귀하가 돕고 있는 어떤 사람이 Blue Cross Blue Shield of Wyoming 에 관해서 질문이 있다면 귀하는 그러한 도움과 정보를 귀하의 언어로 비용 부담없이 얻을 수 있는 권리가 있습니다. 그렇게 통역사와 얘기하기 위해서는 800-442-2376 로 전화하십시오.

Nếu quý vị, hay người mà quý vị đang giúp đỡ, có câu hỏi về Blue Cross Blue Shield of Wyoming, quý vị sẽ có quyền được giúp và có thêm thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, xin gọi 800-442-2376.

Se tu o qualcuno che stai aiutando avete domande su Blue Cross Blue Shield of Wyoming, hai il diritto di ottenere aiuto e informazioni nella tua lingua gratuitamente. Per parlare con un interprete, puoi chiamare 800-442-2376.

Если у вас или лица, которому вы помогаете, имеются вопросы по поводу Blue Cross Blue Shield of Wyoming, то вы имеете право на бесплатное получение помощи и информации на вашем языке. Для разговора с переводчиком позвоните по телефону 800-442-2376.

Jika Anda, atau seseorang yang Anda tolong, memiliki pertanyaan tentang Blue Cross Blue Shield of Wyoming, Anda berhak untuk mendapatkan pertolongan dan informasi dalam Bahasa Anda tanpa dikenakan biaya. Untuk berbicara dengan seorang penerjemah, hubungi 800-442-2376.

ご本人様、またはお客様の身の回りの方でも、Blue Cross Blue Shield of Wyoming についてご質問がございましたら、ご希望の言語でサポートを受けたり、情報を入手したりすることができます。料金はかかりません。通訳とお話される場合、800-442-2376 までお電話ください。

यदि तपाईं आफ्ना लागि आफैँ आवेदनको काम गर्दै, वा कसैलाई मद्दत गर्दै हुनुहुन्छ, Blue Cross Blue Shield of Wyoming बारे प्रश्नहरू छन् भने आफ्नो मातृभाषामा निःशुल्क सहायता वा जानकारी पाउने अधिकार छ। दोभाषे (इन्टरप्रेटर) सँग कुरा गर्नुपरे 800-442-2376 मा फोन गर्नुहोस्।

اگر شما، یا کسی که شما به او کمک میکنید، سوال در مورد Blue Cross Blue Shield of Wyoming، داشته باشید حق این را دارید که کمک و اطلاعات به زبان خود را به طور رایگان دریافت نمایید. 800-442-2376 تماس حاصل نمایید.

જો તમે અથવા તમે કોઇને મદદ કરી રહ્યાં તેમાંથી કોઇને [એસબીએમ કાર્યક્રમનું નામ મુકો] વિશે પ્રશ્નો હોય તો તમને મદદ અને માહિતી મેળવવાનો અધિકાર છે. તે અર્થ વિના તમારી ભાષામાં પ્રાપ્ત કરી શકાય છે. દુભાષિયો વાત કરવા માટે, આ [અહીં દાખલ કરો નંબર] પર કોલ કરો.

Dii kwe'ê atah nilinigiî Blue Cross Blue Shield of Wyoming haada yit'éeego bina'idilkidgo éi doodago háida biká anilyeedigiî t'áadoo le'ê yina'idilkidgo beehaz'áanii hólo' dii t'áa hazaadk'ehji háká a'doowolgo bee haz'á doo báh ilinígóó. Ata' halne'igii koji' bich'í' hodiilniil 800-442-2376.



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Non-Discrimination Notices

Blue Cross Blue Shield of Wyoming (BCBSWY) does not discriminate on the basis of race, color, national origin, sex, age, or disability in its health programs and activities.

BCBSWY provides appropriate auxiliary aids and services, including qualified interpreters for individuals with disabilities and information in alternate formats, free of charge and in a timely manner, when such aids and services are necessary to ensure an equal opportunity to participate to individuals with disabilities.

BCBSWY provides language assistance services, including translated documents and oral interpretation, free of charge and in a timely manner, when such services are necessary to provide meaningful access to individuals with limited English proficiency.

In order to obtain the interpretation services listed in paragraphs two (2) and three (3), Participants may call (800) 442-2376 or use BCBSWY's Telecommunications Device for the Deaf (TDD) at (800) 696-4710.

Participants have the right to file a grievance regarding potential discrimination. To file a grievance, please call BCBSWY at (307) 634-1393 or (800) 442-2376 and request the Grievance Officer in the Legal Department or mail a letter describing the grievance to 4000 House Avenue, Cheyenne, WY 82001 to the attention of the Legal Department.

If a Participant believes they have been discriminated against because of their race, color, national origin, disability, age, sex or religion, the Participant may file a discrimination complaint with the Office of Civil Rights. Please visit www.hhs.gov/ocr for directions to file a complaint.