



Specialty Drug Program

Pharmacy Benefit Member Guide

Specialty drugs are used to treat complex conditions

Specialty drugs are prescription medications that require special handling, administration or monitoring. These drugs treat complex and chronic conditions, including:

- Cancer
- Chronic kidney failure
- Multiple sclerosis
- Organ transplants
- Rheumatoid arthritis

There are two ways to fill specialty drug prescriptions

You can fill prescriptions for specialty drugs at a retail pharmacy, but not all pharmacies will dispense specialty drugs. Call your pharmacy in advance to verify that it can fill your prescription.

Blue Cross Blue Shield of Michigan and Blue Care Network also offer mail order service and support programs through AllianceRx Walgreens Prime, an independent company that provides specialty pharmacy services for Blue Cross and BCN members.

If you have questions about Blue Cross' and BCN's specialty drug programs, please call AllianceRx Walgreens Prime at 1-866-515-1355 or visit the website at alliancerxwp.com*

Ordering specialty drugs is easy

You can order your specialty drugs through AllianceRx Walgreens Prime, and your medication will arrive right at your home. Just have your doctor fax your specialty medication prescription to AllianceRx Walgreens Prime at 1-866-515-1356.

Some members must use our exclusive pharmacy network for specialty drugs administered by AllianceRx Walgreens Prime. To find out if your plan requires you to use AllianceRx Walgreens Prime:

- Go to bcbsm.com
- Log in to your member account. If you don't have an account, just click on *Login* then *Register Now* to start one.
- Click on *My coverage*
- Click on *Prescription*

*Blue Cross and BCN do not control this website or endorse its general content.

If you order your specialty medication through AllianceRx Walgreens Prime mail order pharmacy, you can get the following support services anywhere in the United States.

- Personal attention from a patient-care coordinator will do all of the following:
 - Discuss the best way for you to take your medicine
 - Explain possible side effects
 - Call to remind you when you need a refill
- Ancillary supplies, if they're appropriate, to administer your medication. They are free with each new order and then as needed if you request them. These include syringes, alcohol swabs and sharps containers.
- A dedicated customer service staff, which is available Monday through Saturday at 1-866-515-1355. Automated ordering and emergency clinical support are available 24 hours a day, seven days a week.

If you have any questions, call the Customer Service phone number on the back of your Blue Cross or BCN member ID card.

Limited distribution specialty drugs

Some manufacturers limit the distribution of specialty drugs. These drugs are only available through designated pharmacies. Blue Cross and BCN have been able to secure access to these drugs through the following:

- Accredo Specialty Pharmacy: 1-800-803-2523
- Diplomat Specialty Pharmacy: 1-877-977-9118
- Onco360° Oncology Pharmacy: 1-877-662-6633
- PANTHERx Specialty Pharmacy: 1-855-726-8479

Please talk to your doctor about filling prescriptions for exclusive limited distribution drugs.

Specialty drug guide

Members can receive specialty drugs through the mail from AllianceRx Walgreens Prime or get them at a retail specialty network pharmacy. They aren't available through Express Scripts Home Delivery. For the most up-to-date list, please see the *Specialty Drug Program Rx Benefit Member Guide* on bcbsm.com or call the Customer Service number on the back of your Blue Cross or BCN member ID card.

Self-administered drugs**

Our specialty pharmacy mail order vendor is AllianceRx Walgreens Prime, 1-866-515-1355. Coverage for these drugs will vary based on your pharmacy benefits. See your plan's drug list for specific coverage details.

Antineoplastics (cancer drugs)

Actimmune®
Afinitor® (pa)
Afinitor Disperz® (pa)
Alecensa® (pa)
Bosulif® (pa)
Cabometyx™ (pa)
Cotellic™ (pa)
Daurismo™ (pa)
Eligard®
Erivedge™ (pa)
Erleada™ (pa)
Farydak® (pa)
Gleevec® (g)
Hycamtin®
Ibrance® (pa)
Idhifa® (pa)
Intron® A (pa)
Inlyta® (pa)
Jakafi™ (pa)
Kisqali® (pa)
Kisqali Femara
Co-Pack® (pa)
Lorbrena® (pa)
Lonsurf® (pa)
Lupron Depot® (g)
Matulane®
Mekinist™ (pa)
Nexavar® (pa)
Ninlaro® (pa)
Odomzo® (pa)
Pomalyst® (pa)
Purixan® (pa)
Revlimid®
Rydapt® (pa)
Sandostatin® (pa)(g)
Sandostatin LAR® (pa)
Sandostatin LAR®
Depot (pa)
Sprycel® (pa)
Stivarga® (pa)
Sutent® (pa)

Antineoplastics (cancer drugs)

continued
Sutent® (pa)
Sylatron®
Tafinlar® (pa)
Talzenna® (pa)
Tarceva® (pa)(g)
Targretin® (pa)(g)
Tasigna® (pa)
Temodar® (g)
Thalomid®
Trelstar®
Tykerb® (pa)
Verzenio™ (pa)
Vizimpro® (pa)
Votrient™ (pa)
Xalkori® (pa)
Xeloda® (g)
Xtandi® (pa)
Yonsa™ (pa)
Zelboraf™ (pa)
Zoladex™
Zolanza® (pa)
Zykadia™ (pa)
Zytiga™ (g)

Antineoplastics support medication (chemotherapy)

Aranesp® (pa)
Epogen® (pa)
Granix™
Leukine®
Neulasta®
Neumega®
Neupogen®
Procrit® (pa)
Xatmep™
Zarxio®

Antivirus/hepatitis

Baraclude® (g)
Copegus® (g)
Daklinza™ (pa)
Epclusa® (pa)(g)
Harvoni® (pa)(g)
Hepsera® (g)
Intron® A (pa)
Moderiba™
Mavyret™ (pa)
Pegasy® (pa)
PegIntron® (pa)
Rebetol® (g)
Ribasphere® (g)
Ribasphere Ribapak®
Ribatab®
Sovaldi™ (pa)
Tyzeka®
Vemlidy®
Viekira Pak™ (pa)
Viekira XR™ (pa)
Vosevi® (pa)
Zepatier™ (pa)

Chronic kidney failure/dialysis

Aranesp® (pa)
Epogen® (pa)
Procrit® (pa)
Retacrit™ (pa)
Sensipar(g)

Cystic fibrosis

Bethkis® (pa)
Cayston® (pa)
Kalydeco™ (pa)
Kitabis Pak® (g)
Orkambi™ (pa)
Pulmozyme® (pa)
Symdeko® (pa)
Tobi® (g)
Tobi® Podhaler (pa)

Enzyme Replacement Therapy

Cerdelga™ (pa)
Kynamro™ (pa)
Vimizim™ (pa)

Growth disorders

Genotropin® (pa)
Humatrope® (pa)
Increlex® (pa)
Norditropin®
(all forms) (pa)
Nutropin®
(all forms) (pa)
Omnitrope® (pa)
Saizen® (pa)
Sandostatin® (pa) (g)
Sandostatin LAR® (pa)
Sandostatin LAR®
Depot (pa)
Serostim® (pa)
Somatuline® Depot (pa)
Somavert® (pa)
Zomacton® (pa)
Zorbitive® (pa)

Hematological (Blood disorder)

Doptelet® (pa)
Jynarque™ (pa)
Kuvan® (pa)
Mircera® (pa)
Mulpleta® (pa)
Promacta® (pa)
Samsca™

Hereditary angioedema

Firazyr® (pa)(g)
Haegarda® (pa)
Ruconest® (pa)

Hyperlipidemia

Praluent® (pa)
Repatha™ (pa)

Idiopathic pulmonary fibrosis

Esbriet® (pa)
Ofev® (pa)

Immune globulin

Cutaquig® (pa)
Gammagard®
Liquid* (pa)
Gammaked™* (pa)
Gamunex®-C* (pa)
Hizentra™* (pa)
Hyqvia™ (pa)

Inflammatory diseases

Actemra® (pa)
Cimzia® (pa)
Cosentyx™ (pa)
Enbrel® (pa)
Humira® (pa)
Kevzara® (pa)
Olumiant® (pa)
Orencia® (pa)
Otezla® (pa)
Otrexup™ (pa)
Rasuvo™ (pa)
Simponi™ (pa)
Stelara® (pa)
Xatmep™
Xeljanz™ (pa)
Xeljanz™ XR (pa)

Infertility

Bravelle® (pa)
Cetrotide® (pa)
Chorionic Gonadotropin
(pa)
Follistim AQ® (pa)
Ganirelix Acetate® (pa)
Gonal-F® (pa)
Menopur® (pa)
Novarel® (pa)
Ovidrel® (pa)
Pregnyl® (pa)
Repronex® (pa)

Iron overload

Exjade® (pa) (g)
Jadenu® (pa)
Jadenu® Sprinkles (pa)

Miscellaneous

Actimmune®
Austedo® (pa)
Benlysta® (pa)
Cystaran™ (pa)
Daraprim® (pa)
Dupixent® (pa)
Egrifta™ (pa)
Galafold™ (pa)
Glassia® (pa)
Lupaneta Pack™
Natpara® (pa)
Northera™ (pa)
Ocaliva™ (pa)
Ravicti® (pa)
Stimate®
Syprine® (pa)(g)
Xenazine® (pa)(g)

Multiple sclerosis

Avonex®
Ampyra™ (g)
Aubagio®
Betaseron®
Copaxone® (g)
Extavia®
Gilenya®
Glatopa™ (g)
Mavenclad® (pa)
Mayzent® (pa)
Plegridy™
Rebif®
Tecfidera™

Organ transplant/ anti-rejection

Astagraf XL™ (pa)
Cellcept® (g)
Cyclosporine (oral)
Envarsus® XR
Gengraf® (g)
Hecoria™
Myfortic® (g)
Neoral® (g)
Prograf® (g)
Rapamune® (g)
Sandimmune® (g)
Zortress®

Osteoporosis

Forteo™ (pa)
Tymlos™ (pa)

Psoriasis

Cosentyx™ (pa)
Enbrel® (pa)
Humira® (pa)
Stelara® (pa)
Skyrizi™ (pa)
Taltz® (pa)
Tremfya® (pa)

Pulmonary arterial hypertension

Adcirca™ (pa)(g)
Letairis™ (pa)(g)
Opsumit® (pa)
Tracleer® (pa)(g)

Seizure disorders

Acthar H.P.® (pa)*
Epidiolex® (pa)
Sabril® (g)

* Not covered under the BCN pharmacy benefit.

**All BCN members and some Blue Cross members are limited to 30-day supplies of these drugs.

(g) Generic available, brand-name version may not be covered under certain plans

(pa) May require prior authorization

(LD) Limited distribution drug

Limited distribution**

Must be ordered through Accredo Specialty Pharmacy at 1-800-803-2523

Adempas® (pa) (LD)	Juxtapid® (pa) (LD)	Tagrisso™ (pa) (LD)
Alunbrig™ (pa) (LD)	Lenvima™ (pa) (LD)	Takhzyro™ (pa) (LD)
Apokyn® (LD)	Lynparza® (pa) (LD)	Tegsedi™ (pa) (LD)
Arcalyst® (pa) (LD)	Myalept™ (pa) (LD)	Tyvaso® (pa) (LD)
Carbaglu® (pa) (LD)	Oxervate™ (pa) (LD)	Uptravi® (pa) (LD)
Cuvitru™ (pa) (LD)	Palynziq™ (pa) (LD)	Valchlor™ (pa) (LD)
Duopa™ (pa) (LD)	Orenitram ER™ (pa) (LD)	Ventavis® (pa) (LD)
Gattex® (pa) (LD)	Procysbi™ (pa) (LD)	Vitrakvi® (pa) (LD)
Gilotrif™ (pa) (LD)	Remodulin® (g) (LD)	Xyrem® (pa) (LD)
Hetlioz™ (pa) (LD)	Signifor® (pa) (LD)	Zavesca® (pa) (LD)
Iressa® (pa) (LD)	Signifor LAR® (pa) (LD)	

Limited distribution**

Must be ordered through Diplomat Specialty Pharmacy at 1-877-977-9118.

Cometriq® (pa) (LD)	Venclexta™ (pa) (LD)	Zejula™ (pa) (LD)
Imbruvica® (pa) (LD)	Xermelo™ (pa) (LD)	Zydelig™ (pa) (LD)
Nityr™ (pa) (LD)		

Limited distribution**

Must be ordered through Onco360° Oncology Pharmacy at 1-877-662-6633.

Braftovi™ (pa) (LD)	Mektovi® (pa) (LD)	Xospata® (pa) (LD)
Calquence® (pa) (LD)	Nerlynx® (pa) (LD)	Zydelig™ (pa) (LD)
Imbruvica® (pa) (LD)	Venclexta™ (pa) (LD)	

Limited distribution**

Must be ordered through PANTHERx Specialty Pharmacy at 1-855-726-8479.

Arikayce® (pa) (LD)	Ruzurgi™ (pa) (LD)	Strensiq® (pa) (LD)
Ingrezza® (pa) (LD)		

Exclusive limited distribution**

Balversa™ (pa)	Diacomit® (pa)	Orfadin®
Cablivi® (pa)	Emflaza® (pa)	Rubraca® (pa)
Caprelsa® (pa)	Ferriprox® (pa)	Sucraid®
Chenodal™ (pa)	Firdapse® (pa)	Tavalisse™ (pa)
Cholbam® (pa)	Iclusig™ (pa)	Tibsovo® (pa)
Copiktra™ (pa)	Keveyis™ (pa)	Tiglutik™ (pa)
Cystadane®	Kineret® (pa)	Vistogard®
Cystagon®	Korlym® (pa)	Xuriden® (pa)

* Not covered under the BCN pharmacy benefit.

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(pa) May require prior authorization

(LD) Limited distribution drug

We speak your language

If you, or someone you're helping, needs assistance, you have the right to get help and information in your language at no cost. To talk to an interpreter, call the Customer Service number on the back of your card.

Si usted, o alguien a quien usted está ayudando, necesita asistencia, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al número telefónico de Servicio al cliente, que aparece en la parte trasera de su tarjeta.

إذا كنت أنت أو شخص آخر تساعدته بحاجة لمساعدة، فلديك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك دون أية تكلفة. للتحدث إلى مترجم اتصل برقم خدمة العملاء الموجود على ظهر بطاقتك.

如果您，或是您正在協助的對象，需要協助，您有權利免費以您的母語得到幫助和訊息。要洽詢一位翻譯員，請撥在您的卡背面的客戶服務電話。

كيسلوف، ني ني في نفة تساعده لمساعدة، هيلبر ملوف، نينيف،
كيسلوف، كيهلوف، نينيف، نينيف، نينيف، نينيف، نينيف،
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كيسلوف، نينيف، نينيف، نينيف، نينيف، نينيف، نينيف،

Nếu quý vị, hay người mà quý vị đang giúp đỡ, cần trợ giúp, 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 số Dịch vụ Khách hàng ở mặt sau thẻ của quý vị.

Nëse ju, ose dikush që po ndihmoni, ka nevojë për asistencë, keni të drejtë të merrni ndihmë dhe informacion falas në gjuhën tuaj. Për të folur me një përkthyes, telefononi numrin e Shërbimit të Klientit në anën e pasme të kartës tuaj.

만약 귀하 또는 귀하가 돕고 있는 사람이 지원이 필요하다면, 귀하는 도움과 정보를 귀하의 언어로 비용 부담 없이 얻을 수 있는 권리가 있습니다. 통역사와 대화하려면 귀하의 카드 뒷면에 있는 고객 서비스 번호로 전화하십시오.

যদি আপনার, বা আপনি সাহায্য করছেন এমন কারো, সাহায্য প্রয়োজন হয়, তাহলে আপনার ভাষায় বিনামূল্যে সাহায্য ও তথ্য পাওয়ার অধিকার আপনার রয়েছে। কোনো একজন দোভাষীর সাথে কথা বলতে, আপনার কার্ডের পেছনে দেওয়া গ্রাহক সহায়তা নম্বরে কল করুন।

Jeśli Ty lub osoba, której pomagasz, potrzebujecie pomocy, masz prawo do uzyskania bezpłatnej informacji i pomocy we własnym języku. Aby porozmawiać z tłumaczem, zadzwoń pod numer działu obsługi klienta, wskazanym na odwrocie Twojej karty.

Falls Sie oder jemand, dem Sie helfen, Unterstützung benötigt, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer des Kundendienstes auf der Rückseite Ihrer Karte an.

Se tu o qualcuno che stai aiutando avete bisogno di assistenza, hai il diritto di ottenere aiuto e informazioni nella tua lingua

gratuitamente. Per parlare con un interprete, rivolgiti al Servizio Assistenza al numero indicato sul retro della tua scheda.

ご本人様、またはお客様の身の回りの方で支援を必要とされる方で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はお持ちのカードの裏面に記載されたカスタマーサービスの電話番号までお電話ください。

Если вам или лицу, которому вы помогаете, нужна помощь, то вы имеете право на бесплатное получение помощи и информации на вашем языке. Для разговора с переводчиком позвоните по телефону отдела обслуживания клиентов, указанному на обратной стороне вашей карты.

Ukoliko Vama ili nekome kome Vi pomažete treba pomoć, imate pravo da besplatno dobijete pomoć i informacije na Vašem jeziku. Da biste razgovarali sa prevodiocem, pozovite broj korisničke službe sa zadnje strane kartice.

Kung ikaw, o ang iyong tinutulungan, ay nangangailangan ng tulong, may karapatan ka na makakuha ng tulong at impormasyon sa iyong wika ng walang gastos. Upang makausap ang isang tagasalin, tumawag sa numero ng Customer Service sa likod ng iyong tarheta.

Important disclosure

Blue Cross Blue Shield of Michigan and Blue Care Network comply with Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex. Blue Cross Blue Shield of Michigan and Blue Care Network provide free auxiliary aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and information in other formats. If you need these services, call the Customer Service number on the back of your card. If you believe that Blue Cross Blue Shield of Michigan or Blue Care Network has failed to provide services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance in person, by mail, fax, or email with: Office of Civil Rights Coordinator, 600 E. Lafayette Blvd., MC 1302, Detroit, MI 48226, phone: 888-605-6461, TTY: 711, fax: 866-559-0578, email: CivilRights@bcbsm.com. If you need help filing a grievance, the Office of Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health & Human Services Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail, phone, or email at: U.S. Department of Health & Human Services, 200 Independence Ave, S.W., Washington, D.C. 20201, phone: 800-368-1019, TTD: 800-537-7697, email: OCRComplaint@hhs.gov. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.



Nonprofit corporations and independent licensees
of the Blue Cross and Blue Shield Association