July 2013

Specialty Drug List

MedImpact® Delivering · Flexible · Choice

Benefit Options Formulary

The Benefit Options Formulary keeps prescription medications affordable. We monitor our formulary to make sure you receive the most clinically effective medications at the lowest cost. The formulary is updated regularly and is subject to change without advance notice.

Specialty Drug List

The Benefit Options Specialty Drug List is monitored to ensure that you receive the most clinically effective medications at the lowest cost. The Specialty Drug List is updated regularly and is subject to change without advance notice. All Specialty medications are provided through Walgreens Specialty Pharmacy. Members may enroll in services by calling 1-888-782-8443 and following the prompts. Once enrolled, Walgreens will coordinate delivery. Physicians may also call or fax prescriptions to 1-800-334-5504. Walgreens Specialty Pharmacy hours of operation are Monday through Friday 9am – 10pm PST.

The following list includes the most common Specialty medications. Some medications may require prior authorization (PA), step therapy (ST) or have a quantity limit (QL). For a complete listing, you can access the entire comprehensive formulary at www.benefitoptions.az.gov. Click on the Pharmacy tab and then click MedImpact Member Portal. For specific questions, please contact the Customer Contact Center at 1-888-648-6769. It is available 24 hours a day, 7 days a week.

MOST COMMON SPECIALTY DRUGS			
Asthma	**Immunosuppressives**	**STRIBILD**	**SPRYCEL (PA)**
XOLAIR (PA)	**RAPAMUNE**	**TRUVADA**	**TASIGNA (PA)**
Endocrine Agents	**tacrolimus**	**VIREAD**	**VOTRIENT (PA)**
ACTHAR	**Hypertension**	**Inflammatory Disease**	**XELODA (PA)**
CARBAGLU	**LETAIRIS (PA)**	ENBREL (PA)	**Neurological Disease**
FORTEO (QL)	**TRACLEER (PA)**	**HUMIRA (PA)**	AMPYRA (PA)
NORDITROPIN FLEXPRO (PA)	**Infectious Disease**	SIMPONI (PA)	**AVONEX (ST)**
SENSIPAR	**ATRIPLA**	STELARA	**AVONEX PEN (ST)**
VPRIV	**CAYSTON (PA)**	**Lower Gastrointestinal**	**BETASERON (ST)**
Hematological Disorder	**EPZICOM**	**CIMZIA (PA)**	**COPAXONE**
ADVATE	**ISENTRESS**	**Neoplastic Disease**	**REBIF**
ADVATE H	**INCIVEK (PA)**	**AFINITOR (PA)**	GILENYA (PA)
ADVATE SH	**PEGASYS (PA)**	**GLEEVEC (PA)**	**Respiratory Disorder**
enoxaparin (QL)	**PEGINTRON REDIPEN (PA)**	**NEXAVAR (PA)**	**PULMOZYME (PA)**
HUMATE-P	**REYATAZ**	**REVLIMID (QL)**	**SYNAGIS**
			TOBI (PA)

Please note, generic medications are in bolded lower case, formulary brands are in bolded upper case and nonformulary brands are in regular upper case.