

SPECIALTY PHARMACY

MEDICATION LIST

For plans that use the:

- Blue Cross Blue Shield of Massachusetts Formulary
- Standard Control with Advanced Control Specialty Formulary



UNLOCK THE POWER OF YOUR PLAN

MyBlue is your key to more features and savings. Once you sign in or create an account, you can see all of your benefits, all in one place, such as:



COVERAGE, CLAIMS,
AND DEDUCTIBLES



REIMBURSEMENTS
AND SAVINGS



FIND A DOCTOR &
ESTIMATE COSTS



MEDICATION
LOOKUP

Download the MyBlue app or create an account at bluecrossma.org.

COVERED SPECIALTY MEDICATIONS

The following list includes medications that are usually used to treat complex health conditions. Specialty medications are limited to a 30-day supply.

This isn't a complete list of covered medications, and inclusion on this list doesn't guarantee coverage.¹ You must have a valid prescription from a licensed health provider to receive coverage for these medications. Some medications may also be subject to pharmacy management programs, such as step therapy, prior authorization, or quality care dosing, or have other coverage requirements.

NOTE: Some medications on this list may be considered non-covered, including new medications under review by Blue Cross. Your doctor may request an exception for a non-covered medication when medically necessary.²

WHERE TO FILL SPECIALTY PHARMACY MEDICATIONS

Members are required to fill medications on this list at one of the available in-network specialty pharmacies on the following pages. However, if a highly specialized medication isn't available at one of our specialty pharmacies, we'll cover the cost of the medication when it's filled at another in-network pharmacy.

Learn more about your coverage

For more information about coverage for these medications, sign in to MyBlue at bluecrossma.org or open the MyBlue app, then go to **Medication Lookup Tool** under **My Medications**.

If you're not a member, you can get more information by visiting bluecrossma.org/medication.

1. Not all medications listed are covered by all prescription plans. Check your benefit materials for details.
2. If approved, you'd pay the highest-tier cost.

FERTILITY MEDICATIONS

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY		
	ENCOMPASS FERTILITY™	FREEDOM FERTILITY PHARMACY	VILLAGE FERTILITY PHARMACY
BRAVELLE	✓	✓	✓
CETROTIDE	✓	✓	✓
CLOMID	✓	✓	✓
CLOMIPHENE	✓	✓	✓
CRINONE	✓	✓	✓
ENDOMETRIN	✓	✓	✓
FOLLISTIM AQ	✓	✓	✓
FYREMADEL	✓	✓	✓
GANIRELIX	✓	✓	✓
GONAL-F/GONAL-F RFF	✓	✓	✓
GONAL-F RFF REDI-JECT	✓	✓	✓
HUMAN CHORIONIC GONADOTROPIN [hCG]	✓	✓	✓
LEUPROLIDE ACETATE	✓	✓	✓
LUPRON DEPOT	✓	✓	✓
LUPRON DEPOT PED	✓	✓	✓
LUVERIS	✓	✓	✓
MENOPUR	✓	✓	✓
NOVAREL	✓	✓	✓
OVIDREL	✓	✓	✓
PREGNYL	✓	✓	✓
SEROPHENE	✓	✓	✓

INJECTABLE MEDICATIONS

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDITO®	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY™	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
ABRILADA	✓		✓	✓	
ACETADOTE					✓
ACTEMRA	✓	✓	✓	✓	
ACTHAR		✓	✓	✓	
ACTIMMUNE		✓	✓	✓	
ADAKVEO	✓		✓	✓	
ADALIMUMAB-ADAZ	✓	✓	✓	✓	
ADALIMUMAB-ADBM	✓	✓	✓	✓	
ADALIMUMAB-FKJP	✓	✓	✓	✓	
ADBRY		✓	✓	✓	
ALFERON N					✓
ALKERAN			✓	✓	
AMJEVITA	✓	✓	✓	✓	
AMONDYS 45					✓
APOKYN		✓		✓	
APOMORPHINE	✓		✓	✓	
ARANESP	✓	✓	✓	✓	
ARCALYST			✓	✓	
ARIKAYCE					✓
ASCENIV		✓	✓	✓	
ASPARLAS					✓
AVEED			✓	✓	
AVONEX	✓	✓	✓	✓	
AVSOLA	✓	✓	✓	✓	
BELEODAQ			✓	✓	
BERINERT		✓	✓	✓	
BESPONSA	✓	✓	✓	✓	
BESREMI					✓

INJECTABLE MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
BETASERON	✓	✓	✓	✓	
BICILLIN	✓		✓		
BICNU	✓		✓	✓	
BIMZELX	✓	✓	✓	✓	
BIVIGAM		✓	✓	✓	
BLEOMYCIN SULFATE	✓		✓	✓	
BLINCYTO			✓	✓	
BONIVA				✓	
BORTEZOMIB	✓	✓	✓	✓	
BOTOX	✓	✓	✓		
BRIUMVI	✓	✓	✓	✓	
BRIXADI	✓	✓	✓	✓	
BUSULFEX			✓	✓	
BYNFEZIA				✓	
CABLIVI					✓
CAMPTOSAR	✓		✓	✓	
CARBOPLATIN	✓		✓	✓	
CARMUSTINE			✓	✓	
CEFTAZIDIME	✓		✓		
CEREZYME	✓	✓	✓	✓	
CIMZIA	✓	✓	✓	✓	
CINQAIR	✓		✓	✓	
CINRYZE		✓		✓	
CISPLATIN	✓		✓	✓	
CLADRIBINE	✓		✓	✓	
COPAXONE	✓	✓	✓	✓	
CORTROPHIN	✓	✓	✓	✓	
COSENTYX	✓	✓	✓	✓	

INJECTABLE MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDITO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
COSMEGEN	✓		✓	✓	
CRYSVITA		✓		✓	
CUTAQUIG	✓	✓		✓	
CUVITRU		✓	✓	✓	
CYCLOPHOSPHAMIDE	✓		✓	✓	
CYLTEZO	✓	✓	✓	✓	
CYTARABINE	✓		✓	✓	
CYTOGAM		✓	✓	✓	
DACARBAZINE	✓		✓	✓	
DACTINOMYCIN	✓		✓	✓	
DAUNORUBICIN HCL	✓		✓	✓	
DAXXIFY			✓		
DDAVP		✓	✓	✓	
DEFEROXAMINE MESYLATE			✓	✓	
DESFERAL			✓	✓	
DESMOPRESSIN ACETATE	✓	✓	✓		
DEXRAZOXANE	✓			✓	
DOCETAXEL	✓		✓	✓	
DUPIXENT	✓	✓	✓	✓	
DYSPORT	✓	✓	✓	✓	
EGRIFTA	✓	✓	✓	✓	
ELIGARD	✓	✓	✓	✓	
ELLENCE	✓		✓	✓	
EMPAVELI					✓
ENBREL	✓	✓	✓	✓	
ENJAYMO				✓	
ENSPRYNG	✓	✓	✓	✓	
ENTYVIO	✓	✓	✓	✓	

INJECTABLE MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
EPIRUBICIN				✓	
EPOGEN	✓	✓	✓	✓	
ETHYOL			✓	✓	
ETOPOPHOS			✓	✓	
ETOPOSIDE	✓		✓	✓	
EVENITY	✓	✓	✓	✓	
EVKEEZA					✓
EVOMELA			✓	✓	
EXONDYS					✓
EXTAVIA	✓	✓	✓	✓	
FASENRA	✓	✓	✓	✓	
FASLODEX	✓		✓	✓	
FENSOLVI	✓	✓		✓	
FINTEPLA					✓
FIRAZYR	✓	✓	✓	✓	
FIRMAGON	✓	✓	✓	✓	
FLEBOGAMMA	✓		✓	✓	
FLOXURIDINE			✓	✓	
FLUDARABINE PHOSPHATE			✓	✓	
FLUOROURACIL	✓		✓	✓	
FORTAZ					✓
FORTEO	✓	✓	✓	✓	
FULPHILA	✓	✓	✓	✓	
FULVESTRANT	✓		✓	✓	
FUZEON	✓	✓	✓	✓	
FYLNETRA	✓		✓	✓	
GAMASTAN	✓	✓	✓	✓	
GAMIFANT					✓

INJECTABLE MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDITO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
GAMMAGARD	✓	✓	✓	✓	
GAMMAGARD LIQUID	✓	✓	✓	✓	
GAMMAKED		✓	✓	✓	
GAMMAPLEX		✓	✓	✓	
GAMUNEX	✓	✓	✓	✓	
GATTEX		✓		✓	
GEMCITABINE	✓		✓	✓	
GENOTROPIN	✓	✓	✓	✓	
GIVLAARI		✓			
GLATIRAMER	✓	✓	✓	✓	
GLATOPA	✓	✓	✓	✓	
GRANIX	✓	✓	✓	✓	
HADLIMA	✓	✓	✓	✓	
HAEGARDA		✓	✓	✓	
HIZENTRA	✓	✓	✓	✓	
HULIO	✓		✓	✓	
HUMATROPE	✓	✓	✓	✓	
HUMIRA	✓	✓	✓	✓	
HYCAMTIN	✓	✓	✓	✓	
HYQVIA	✓	✓	✓	✓	
HYRIMOZ	✓	✓	✓	✓	
IBANDRONATE		✓	✓	✓	
ICATIBANT	✓	✓	✓	✓	
IDACIO	✓		✓	✓	
IDAMYCIN PFS	✓		✓	✓	
IDARUBICIN			✓	✓	
IFEX			✓	✓	
IFOSFAMIDE			✓	✓	

INJECTABLE MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
IFOSFAMIDE/MESNA			✓	✓	
ILARIS	✓	✓	✓	✓	
ILUMYA	✓	✓	✓	✓	
INCRELEX		✓	✓	✓	
INFLECTRA	✓	✓	✓	✓	
INFILIXIMAB	✓		✓	✓	
INTRON A			✓	✓	
IRINOTECAN	✓		✓	✓	
ISTODAX	✓	✓	✓	✓	
KALBITOR		✓		✓	
KANUMA		✓	✓	✓	
KEMOPLAT			✓	✓	
KESIMPTA	✓	✓	✓	✓	
KEVZARA	✓	✓	✓	✓	
KINERET					✓
LANREOTIDE	✓	✓	✓	✓	
LEMTRADA		✓	✓	✓	
LEQVIO	✓		✓		
LEUCOVORIN CALCIUM	✓		✓	✓	
LEUKINE	✓	✓	✓	✓	
LEUPROLIDE ACETATE	✓	✓	✓	✓	
LEVOLEUCOVORIN					✓
LIBTAYO					✓
LIQREV	✓	✓	✓	✓	
LUMOXITI			✓	✓	
LUPRON DEPOT	✓	✓	✓	✓	
LUPRON DEPOT-PED	✓	✓	✓	✓	
MAKENA			✓		

INJECTABLE MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
MARQIBO					✓
MELPHALAN	✓		✓	✓	
MEPSEVII		✓			
MESNA			✓	✓	
MESNEX	✓		✓	✓	
METHOTREXATE	✓		✓	✓	
MITOMYCIN	✓		✓	✓	
MITOXANTRONE	✓	✓	✓	✓	
MOZOBIL	✓	✓	✓	✓	
MUTAMYCIN			✓	✓	
MYLOTARG		✓	✓	✓	
MYOBLOC	✓	✓	✓	✓	
NATPARA		✓	✓		
NAVELBINE	✓			✓	
NEULASTA	✓	✓	✓	✓	
NEULASTA ONPRO	✓	✓	✓	✓	
NEUPOGEN	✓	✓	✓	✓	
NGENLA	✓		✓	✓	
NIPENT	✓		✓	✓	
NIVESTYM	✓	✓	✓	✓	
NORDITROPIN	✓	✓	✓	✓	
NORDITROPIN FLEXPRO	✓	✓	✓	✓	
NORDITROPIN REDIFLEX	✓	✓	✓	✓	
NPLATE	✓	✓	✓	✓	
NUCALA	✓	✓	✓	✓	
NULIBRY					✓
NUTROPIN AQ NUSPIN	✓	✓	✓	✓	
NYVEPRIA	✓	✓	✓	✓	

INJECTABLE MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDITO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
OCREVUS	✓	✓	✓	✓	
OCTAGAM	✓	✓	✓	✓	
OCTREOTIDE	✓	✓	✓	✓	
OMNITROPE	✓	✓	✓	✓	
OMVOH	✓	✓	✓	✓	
ONPATTRO		✓		✓	
ORENCIA	✓	✓	✓	✓	
OTREXUP	✓		✓	✓	
OXALIPLATIN	✓		✓	✓	
OXLUMO					✓
PALYNZIQ		✓		✓	
PAMIDRONATE DISODIUM	✓		✓	✓	
PANZYGA	✓	✓	✓	✓	
PARAPLATIN			✓	✓	
PEG-INTRON				✓	
PEGASYS	✓	✓	✓	✓	
PEGASYS PROCLICK	✓	✓	✓	✓	
PHOTOFRIN			✓	✓	
PLEGRIDY	✓	✓	✓	✓	
PLERIXAFOR	✓	✓	✓	✓	
PORTRAZZA		✓	✓	✓	
PRIVIGEN	✓	✓	✓	✓	
PROCRIT	✓	✓	✓	✓	
PROLIA	✓	✓	✓	✓	
RADICAVA	✓	✓	✓	✓	
REBIF REBIDOSE	✓	✓	✓	✓	
REBLOZYL	✓		✓	✓	
REDITREX	✓		✓	✓	

INJECTABLE MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
RELEUKO	✓	✓	✓	✓	
REMICADE	✓	✓	✓	✓	
RENFLEXIS	✓	✓	✓	✓	
RETACRIT	✓	✓	✓	✓	
REVATIO	✓	✓	✓	✓	
REVCovi					✓
RIABNI	✓	✓	✓	✓	
RIMSO-50	✓		✓		
RITUXAN	✓	✓	✓	✓	
ROLVEDON	✓		✓	✓	
ROMIDEPSIN					✓
RUCONEST		✓		✓	
RUXIENCE	✓	✓	✓	✓	
RYPLAZIM					✓
RYSTIGGO				✓	
SAIZEN	✓	✓	✓	✓	
SAIZENPREP		✓	✓	✓	
SAJAZIR		✓			
SANDOSTATIN	✓	✓	✓	✓	
SANDOSTATIN LAR	✓	✓	✓	✓	
SAPHNELO				✓	
SEROSTIM	✓	✓	✓	✓	
SIGNIFOR					✓
SIGNIFOR LAR					✓
SILDENAFIL ANTIHYPERTENSIVE	✓	✓	✓	✓	
SILIQ	✓	✓	✓	✓	
SIMPONI	✓	✓	✓	✓	
SIMPONI ARIA	✓	✓	✓	✓	

INJECTABLE MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDITO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
SKYRIZI	✓	✓	✓	✓	
SKYTROFA	✓	✓	✓	✓	
SOGROYA	✓	✓	✓	✓	
SOMATULINE	✓	✓	✓	✓	
SOMAVERT		✓	✓	✓	
SPEVIGO		✓			
SPINRAZA		✓			
STELARA	✓	✓	✓	✓	
STIMUFEND	✓	✓	✓	✓	
STRENSIQ					✓
SUBLOCADE	✓	✓	✓	✓	
SYLVANT		✓	✓	✓	
SYNAGIS	✓	✓	✓	✓	
SYNRIBO					✓
TAKHYRO		✓		✓	
TALTZ	✓	✓	✓	✓	
TAZICEF					✓
TEGSEDI		✓			
TEMODAR	✓	✓	✓		
TENIPOSIDE					✓
TEPADINA			✓	✓	
TEPEZZA		✓		✓	
TERIPARATIDE	✓	✓	✓	✓	
TEZSPIRE	✓	✓	✓	✓	
THIOTEPA			✓	✓	
THYROGEN	✓	✓	✓	✓	
TOPOSAR			✓	✓	
TOPOTECAN	✓		✓	✓	

INJECTABLE MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
TOTECT				✓	
TRELSTAR	✓		✓	✓	
TRELSTAR DEPOT	✓		✓	✓	
TRELSTAR LA	✓		✓	✓	
TREMFYA	✓	✓	✓	✓	
TRIPTODUR					✓
TRUXIMA	✓	✓	✓	✓	
TYMLOS	✓	✓	✓	✓	
TYSABRI	✓	✓	✓	✓	
TZIELD					✓
UDENYCA	✓	✓	✓	✓	
UNITUXIN					✓
UPTRAVI		✓		✓	
VALRUBICIN		✓	✓	✓	
VALSTAR	✓		✓	✓	
VELCADE	✓	✓	✓	✓	
VENTAVIS		✓		✓	
VILTEPSO					✓
VIMIZIM		✓		✓	
VINBLASTINE	✓		✓	✓	
VINCASAR PFS	✓		✓	✓	
VINCRISTINE	✓		✓	✓	
VINORELBINE	✓		✓	✓	
VIVITROL	✓	✓	✓	✓	
VOXZOGO	✓	✓		✓	
VYEPTI			✓		
VYLEESI					✓
VYVGART	✓	✓	✓	✓	

INJECTABLE MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
VYXEOS	✓			✓	
XEMBIFY	✓	✓		✓	
XENPOZYME	✓	✓	✓	✓	
XEOMIN	✓	✓	✓	✓	
XGEVA	✓	✓	✓	✓	
XIAFLEX				✓	
XOLAIR	✓	✓	✓	✓	
YONDELIS			✓	✓	
YUFLYMA	✓		✓	✓	
YUSIMRY	✓		✓	✓	
ZALTRAP		✓	✓	✓	
ZANOSAR			✓	✓	
ZARXIO	✓	✓	✓	✓	
ZIEXTENZO	✓	✓		✓	
ZILRETTA	✓				
ZOLADEX	✓	✓	✓	✓	
ZOMACTON	✓	✓	✓	✓	
ZORBTIVE			✓	✓	

ORAL MEDICATIONS

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
ABIRATERONE	✓	✓	✓	✓	
ADCIRCA	✓	✓	✓	✓	
ADEMPAS		✓		✓	
AFINITOR	✓	✓	✓	✓	
AFINITOR DISPERZ	✓	✓	✓	✓	

ORAL MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
AKEEGA					✓
ALECensa	✓	✓	✓	✓	
ALKERAN			✓	✓	
ALUNBRIG					✓
ALYQ	✓		✓	✓	
AMBRISENTAN	✓	✓	✓	✓	
AMPYRA		✓	✓	✓	
AUBAGIO	✓	✓	✓	✓	
AUGTYRO		✓	✓	✓	
AUSTEDO	✓	✓	✓	✓	
AYVAKIT					✓
BAFIERTAM	✓	✓	✓	✓	
BALVERSA					✓
BETHKIS	✓	✓	✓	✓	
BOSENTAN	✓	✓	✓	✓	
BOSULIF	✓	✓	✓	✓	
BRAFTOVI	✓	✓	✓	✓	
BRONCHITOL		✓	✓	✓	
BRUKINSA					✓
BYLVAY		✓			
CABOMETYX		✓	✓	✓	
CALQUENCE					✓
CAMZYOS		✓	✓	✓	
CAPECITABINE	✓	✓	✓	✓	
CARBAGLU		✓			
CARGLUMIC ACID					✓
CAYSTON	✓	✓	✓	✓	
CERDELGA	✓	✓	✓	✓	

ORAL MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
CHENODAL					✓
CHOLBAM					✓
CIBINQO	✓	✓	✓	✓	
COMETRIQ		✓		✓	
COPIKTRA				✓	
COTELLIC	✓	✓	✓	✓	
CYCLOPHOSPHAMIDE	✓		✓	✓	
CYSTAGON				✓	
DALFAMPRIDINE	✓	✓	✓	✓	
DARAPRIM					✓
DAURISMO	✓	✓	✓	✓	
DAYBUE					✓
DDAVP		✓	✓	✓	
DEFERASIROX	✓	✓	✓	✓	
DIACOMIT					✓
DICHLORPHENAMIDE				✓	
DIMETHYL FUMARATE	✓	✓	✓	✓	
DOJOLVI		✓		✓	
DOPTELET		✓		✓	
DROXIDOPA	✓	✓	✓	✓	
DUOPA		✓		✓	
EMFLAZA		✓			
EPCLUSA	✓	✓	✓	✓	
ERIVEDGE	✓	✓	✓	✓	
ERLEADA	✓	✓	✓	✓	
ERLOTINIB	✓	✓	✓	✓	
ESBRIET	✓	✓	✓	✓	
ETOPOSIDE	✓		✓	✓	

ORAL MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
EVEROLIMUS	✓	✓	✓	✓	
EVRYSDI		✓			
EXJADE	✓	✓	✓	✓	
EXKIVITY					✓
EXSERVAN					✓
FARYDAK	✓		✓	✓	
FILSPARI		✓		✓	
FINGOLIMOD	✓	✓	✓	✓	
FIRDAPSE					✓
FOTIVDA					✓
GALAFOLD		✓	✓		
GAVRETO	✓	✓	✓	✓	
GEFITINIB	✓	✓	✓	✓	
GILENYA	✓	✓	✓	✓	
GILOTrif		✓	✓		
GLEEVEC	✓	✓	✓	✓	
GOCOVRI ER			✓		
HARVONI	✓	✓	✓	✓	
HETLIOZ		✓	✓		
HETLIOZ LQ		✓	✓		
HYCAMTIN	✓	✓	✓	✓	
IBRANCE	✓	✓	✓	✓	
ICLUSIG	✓				
IDHIFA		✓	✓	✓	
IMATINIB	✓	✓	✓	✓	
IMBRUVICA					✓
INBRIJA			✓		
INGREZZA			✓	✓	

ORAL MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
INLYTA	✓	✓	✓	✓	
INQOVI		✓	✓	✓	
INREBIC		✓	✓	✓	
IRESSA		✓	✓	✓	
ISTURISA					✓
JADENU	✓	✓	✓	✓	
JAKAFI		✓	✓	✓	
JAVYGTOR		✓			
JAYPIRCA		✓	✓	✓	
JOENJA					✓
JUXTAPID		✓			
JYNARQUE			✓		
KALYDECO	✓	✓	✓		
KEVEYIS					✓
KISQALI	✓	✓	✓	✓	
KISQALI FEMARA	✓	✓	✓	✓	
KITABIS PAK NEBULES	✓	✓	✓	✓	
KORLYM					✓
KOSELUGO					✓
KRAZATI					✓
KUVAN		✓		✓	
KYZATREX					✓
LAPATINIB	✓	✓	✓	✓	
LEDIPASVIR/SOFOSBUVIR		✓	✓	✓	
LENALIDOMIDE	✓	✓	✓	✓	
LENVIMA	✓	✓	✓	✓	
LETAIRIS	✓	✓	✓	✓	
LITFULO		✓	✓	✓	

ORAL MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
LIVMARLI					✓
LIVTENCY					✓
LONSURF		✓	✓	✓	
LORBRENA	✓	✓	✓	✓	
LUMAKRAS	✓	✓		✓	
LUMRYZ		✓		✓	
LUPKYNIS					✓
LYNPARZA		✓	✓		
LYTGOBI			✓		
MAVENCLAD		✓	✓	✓	
MAVYRET	✓	✓	✓	✓	
MAYZENT	✓	✓	✓	✓	
MEKINIST	✓	✓	✓	✓	
MEKTOVI	✓	✓	✓	✓	
MESNEX	✓		✓	✓	
MIGLUSTAT	✓	✓	✓	✓	
MULPLETA		✓	✓	✓	
MYCAPSSA	✓				
MYLERAN	✓		✓	✓	
NERLYNX	✓	✓		✓	
NEXAVAR	✓	✓	✓	✓	
NINLARO	✓	✓	✓	✓	
NITISINONE	✓	✓			
NITYR		✓			
NORTHERA		✓	✓	✓	
NOURIANZ		✓	✓	✓	
NUBEQA	✓	✓	✓	✓	
NUPLAZID		✓	✓	✓	

ORAL MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
OCALIVA		✓	✓	✓	
ODOMZO	✓	✓	✓	✓	
OFEV		✓	✓	✓	
OGSIVEO					✓
OJJAARA					✓
OLPRUVA				✓	
OLUMIANT	✓	✓	✓	✓	
ONUREG	✓	✓	✓	✓	
OPFOLDA		✓		✓	
OPSUMIT		✓		✓	
ORENITRAM		✓		✓	
ORFADIN					✓
ORKAMBI	✓	✓	✓		
ORSERDU					✓
OTEZLA	✓	✓	✓	✓	
OTEZLA STARTER PACK	✓	✓	✓	✓	
OXBRYTA		✓		✓	
PALFORZIA			✓	✓	
PAZOPANIB	✓	✓	✓	✓	
PEMAZYRE					✓
PHEBURANE		✓			
PIQRAY	✓	✓	✓	✓	
PIRFENIDONE	✓	✓	✓	✓	
POMALYST	✓	✓	✓	✓	
PONVORY	✓	✓	✓	✓	
PROCYSB		✓			
PROMACTA	✓	✓	✓	✓	
PULMOZYME	✓	✓	✓	✓	

ORAL MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
PYRIMETHAMINE	✓	✓	✓	✓	
PYRUKYND					✓
QINLOCK					✓
RADICAVA ORS	✓	✓		✓	
RAVICTI		✓	✓	✓	
RECORLEV					✓
RELYVRIOD		✓		✓	
RETEVMO		✓	✓	✓	
REVATIO	✓	✓	✓	✓	
REVLIMID	✓	✓	✓	✓	
REZLIDHIA					✓
REZUROCK					✓
RIBAVIRIN	✓	✓	✓	✓	
RILUTEK			✓	✓	
RILUZOLE			✓		
RINVOQ ER	✓	✓	✓	✓	
ROZLYTREK	✓	✓	✓	✓	
RUBRACA		✓		✓	
RUZURGI					✓
RYDAPT	✓	✓	✓	✓	
SABRIL		✓	✓	✓	
SAMSCA		✓	✓	✓	
SAPROPTERIN	✓	✓	✓	✓	
SCEMBLIX	✓	✓	✓	✓	
SILDENAFIL ANTIHYPERTENSIVE	✓	✓	✓	✓	
SKYCLARYS					✓
SODIUM OXYBATE					✓
SOFOSBUVIR/VELPATASVIR		✓	✓	✓	

ORAL MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
SOHONOS				✓	
SORAFENIB	✓	✓	✓	✓	
SOTYKTU	✓	✓	✓	✓	
SOVALDI	✓	✓	✓	✓	
SPRYCEL	✓	✓	✓	✓	
STIVARGA	✓	✓	✓	✓	
SUCRAID					✓
SUNITINIB	✓	✓	✓	✓	
SUTENT	✓	✓	✓	✓	
SYMDEKO	✓	✓	✓		
TABRECTA	✓	✓	✓	✓	
TADALAFIL ANTIHYPERTENSIVE	✓	✓	✓	✓	
TADLIQ	✓	✓	✓	✓	
TAFINLAR	✓	✓	✓	✓	
TAGRISSO		✓	✓	✓	
TALZENNA	✓	✓	✓	✓	
TARCEVA	✓	✓	✓	✓	
TASIGNA	✓	✓	✓	✓	
TASIMELTEON	✓	✓	✓	✓	
TAVALISSE					✓
TAVNEOS					✓
TAZVERIK					✓
TECFIDERA	✓	✓	✓	✓	
TEMODAR	✓	✓	✓		
TEMOZOLOMIDE	✓	✓	✓	✓	
TEPMETKO					✓
TERIFLUONOMIDE				✓	
TETRABENAZINE	✓	✓	✓	✓	

ORAL MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
THALOMID	✓	✓	✓	✓	
THIOLA					✓
TIGLUTIK					✓
TIOPRONIN	✓		✓	✓	
TOBI AMPULES	✓	✓	✓	✓	
TOBI PODHALER	✓	✓	✓	✓	
TOBRAMYCIN NEBULES	✓	✓	✓	✓	
TOLVAPTAN	✓	✓	✓	✓	
TRACLEER		✓	✓	✓	
TRIKAFTA	✓	✓	✓		
TRUQAP					✓
TRUSELTIQ					✓
TUKYSA					✓
TURALIO					✓
TYKERB	✓	✓	✓	✓	
TYVASO		✓		✓	
UKONIQ					✓
UPTRAVI		✓		✓	
VANFLYTA					✓
VELSIPITY	✓	✓	✓	✓	
VELTASSA	✓		✓		
VENCLEXTA					✓
VERZENIO		✓	✓	✓	
VIEKIRA PAK		✓	✓	✓	
VIEKIRA XR		✓	✓	✓	
VIGABATRIN	✓	✓	✓	✓	
VIGADRONE					✓
VIJOICE	✓		✓	✓	

ORAL MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
VISTOGARD					✓
VITRAKVI		✓		✓	
VIZIMPRO	✓	✓	✓	✓	
VONJO					✓
VOSEVI	✓	✓	✓	✓	
VOTRIENT	✓	✓	✓	✓	
VOWST					✓
VUMERITY DR	✓	✓	✓	✓	
VYNDAMAX		✓	✓	✓	
VYNDAQEL		✓	✓	✓	
WAKIX		✓		✓	
WELIREG					✓
XALKORI	✓	✓	✓	✓	
XELJANZ	✓	✓	✓	✓	
XELJANZ XR	✓	✓	✓	✓	
XELODA	✓	✓	✓	✓	
XENAZINE		✓	✓	✓	
XERMELO					✓
XOSPATA				✓	
XPHOZAH					✓
XPOVIO					✓
XTANDI	✓	✓	✓	✓	
XURIDEN					✓
XYREM					✓
XYWAV					✓
YARGESA					✓
YONSA	✓	✓	✓	✓	
ZAVESCA		✓			

ORAL MEDICATIONS (CONTINUED)

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
ZEJULA		✓		✓	
ZELBORAF	✓	✓	✓	✓	
ZEPATIER	✓	✓	✓	✓	
ZEPOSIA	✓	✓	✓	✓	
ZOLINZA	✓	✓	✓	✓	
ZURZUVAE		✓		✓	
ZYDELIG		✓		✓	
ZYKADIA	✓	✓	✓	✓	
ZYTIGA	✓	✓	✓	✓	

TOPICAL MEDICATIONS

MEDICATION NAME	SPECIALTY PHARMACY AVAILABILITY				
	ACARIAHEALTH	ACCREDO	ALLIANCERx WALGREENS PHARMACY	CVS SPECIALTY	CAN BE FILLED AT OTHER IN-NETWORK PHARMACIES
CYSTADROPS					✓
CYSTARAN			✓		
MUGARD			✓		
OXERVATE		✓			
PANRETIN			✓	✓	
QUTENZA			✓		
REBYOTA		✓			
SYNAREL	✓		✓		
VALCHLOR		✓			
VYJUVEK				✓	

PROFICIENCY OF LANGUAGE ASSISTANCE SERVICES

Spanish/Español: ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Llame al número de Servicio al Cliente que figura en su tarjeta de identificación (TTY: **711**).

Portuguese/Português: ATENÇÃO: Se fala português, são-lhe disponibilizados gratuitamente serviços de assistência de idiomas. Telefone para os Serviços aos Membros, através do número no seu cartão ID (TTY: **711**).

Chinese/简体中文: 注意：如果您讲中文，我们可向您免费提供语言协助服务。请拨打您 ID 卡上的号码联系会员服务部（TTY 号码：**711**）。

Haitian Creole/Kreyòl Ayisyen: ATANSYON: Si ou pale kreyòl ayisyen, sèvis asistans nan lang disponib pou ou gratis. Rele nimewo Sèvis Manm nan ki sou kat Idantitifikasyon w lan (Sèvis pou Malantandan TTY: **711**).

Vietnamese/Tiếng Việt: LƯU Ý: Nếu quý vị nói Tiếng Việt, các dịch vụ hỗ trợ ngôn ngữ được cung cấp cho quý vị miễn phí. Gọi cho Dịch vụ Hội viên theo số trên thẻ ID của quý vị (TTY: **711**).

Russian/Русский: ВНИМАНИЕ: если Вы говорите по-русски, Вы можете воспользоваться бесплатными услугами переводчика. Позвоните в отдел обслуживания клиентов по номеру, указанному в Вашей идентификационной карте (телефон: **711**).

Arabic/عرب:

انتهاء: إذا كنت تتحدث اللغة العربية، فتتوفر خدمات المساعدة اللغوية مجاناً بالنسبة لك. اتصل بخدمات الأعضاء على الرقم الموجود على بطاقة هويتك (جهاز الهاتف النصي للصم والبكم "TTY": **711**).

Mon-Khmer, Cambodian/ខ្មែរ: ការដំឡើងខ្លួនបៃអេកនិយាយភាសា ខ្លួន សេវាដំឡើងយកសាត់តគិតថ្មី សម្រាប់អ្នក។ ស្ថើមទូទៅស្ថើជាដំឡើងសេវាសមាជិកតាមលេខនៅលើបណ្តុះសម្រាប់អ្នក សម្រាប់អ្នក (TTY: **711**)។

French/Français: ATTENTION : si vous parlez français, des services d'assistance linguistique sont disponibles gratuitement. Appelez le Service adhérents au numéro indiqué sur votre carte d'assuré (TTY: **711**).

Italian/Italiano: ATTENZIONE: se parlate italiano, sono disponibili per voi servizi gratuiti di assistenza linguistica. Chiamate il Servizio per i membri al numero riportato sulla vostra scheda identificativa (TTY: **711**).

Korean/한국어: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 ID 카드에 있는 전화번호(TTY: **711**)를 사용하여 회원 서비스에 전화하십시오.

Greek/Λληνικά: ΠΡΟΣΟΧΗ: Εάν μιλάτε Ελληνικά, διατίθενται για σας υπηρεσίες γλωσσικής βοήθειας, δωρεάν. Καλέστε την Υπηρεσία Εξυπηρέτησης Μελών στον αριθμό της κάρτας μέλους σας (ID card) (TTY: **711**).

Polish/Polski: UWAGA: Osoby posługujące się językiem polskim mogą bezpłatnie skorzystać z pomocy językowej. Należy zadzwonić do Działu obsługi ubezpieczonych pod numer podany na identyfikatorze (TTY: **711**).

Hindi/हिन्दी: यदि आप हिन्दी बोलते हैं, तो भाषा सहायता सेवाएँ, आप के लिए निःशुल्क उपलब्ध हैं। सदस्य सेवाओं को आपके आई.डी. कार्ड पर दिए गए नंबर पर काल करें।(टी.टी.वाई.: **711**).

Gujarati/ગુજરાતી: ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો, તો તમને ભાષાકીય સહાયતા સેવાઓ વિના મૂલ્યે ઉપલબ્ધ છે. તમારા આઈડી કાર્ડ પર આપેલા નંબર (टી.ટી.વાઈ.: **711**).

Tagalog/Tagalog: PAUNAWA: Kung nagsasalita ka ng wikang Tagalog, mayroon kang magagamit na mga libreng serbisyo para sa tulong sa wika. Tawagan ang Mga Serbisyo sa Miyembro sa numerong nasa iyong ID card (TTY: **711**).

Japanese/日本語: お知らせ:日本語をお話しになる方は無料の言語アシスタンスサービスをご利用いただけます。IDカードに記載の電話番号を使用してメンバーサービスまでお電話ください(TTY: **711**).

German/Deutsch: ACHTUNG: Wenn Sie Deutsche sprechen, steht Ihnen kostenlos fremdsprachliche Unterstützung zur Verfügung. Rufen Sie den Mitgliederdienst unter der Nummer auf Ihrer ID-Karte an (TTY: **711**).

Persian/پارسیان:

توجه: اگر زبان شما فارسی است، خدمات کمک زبانی ب صورت رایگان در اختیار شما قرار می گیرد. با شمار تلفن مندرج بروی کارت شناسایی خود با بخش «خدمات اعضا» تماس بگیرید (TTY: **711**).

Lao/ລາວ: ຂໍ້ຄວນໃຫ້ໄຈ: ຖ້າມໍາລັດວິທີພາສາວາວໄດ້, ມີການບໍລິການຈ່ວຍເຫຼືອດ້ານພາສາໃຫ້ທ່ານໄດ້ລົບໜະລຸງ. ໂທທາງໆ ພົມບໍລິການຈະມາຊື່ກົມາລວມທະນະຫຼຸ່ມໃນບັດຂອງທ່ານ (TTY: **711**).

Navajo/Diné Bizaad: BAA ÁKOHWIINDZIN DOOÍGÍ: Diné k'ehjí yánílt'i'go saad bee yát'i' éí t'aájíík'e bee níká'a'doowołgo éí ná'ahoot'i'. Dií bee anítahígí ninaaltsoos bine'déé' nóomba biká'ígíiji' béésh bee hodíílnih (TTY: **711**).



MASSACHUSETTS

Blue Cross Blue Shield of Massachusetts complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity.

ATTENTION: If you don't speak English, language assistance services, free of charge, are available to you. Call Member Service at the number on your ID card (TTY: 711).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Llame al número de Servicio al Cliente que figura en su tarjeta de identificación (TTY: 711).

ATENÇÃO: Se fala português, são-lhe disponibilizados gratuitamente serviços de assistência de idiomas. Telefone para os Serviços aos Membros, através do número no seu cartão ID (TTY: 711).

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