



Specialty Drug List

Specialty drugs are used to treat serious or chronic medical conditions such as multiple sclerosis, hemophilia, hepatitis and rheumatoid arthritis. They're typically injectable and can be self-administered by a patient or family member. For questions about the program, please call the customer service number on the back of your member ID card.

The specialty drug benefit program offers you these choices in professional specialty drug suppliers:

Triessent
1-888-216-6710
1-866-203-6010 fax

Fairview Specialty Pharmacy, LLC*
1-800-595-7140
(612) 672-5262 fax

fairviewspecialtyrx.org

*Fairview can only fill prescriptions for Hemophilia medications, Growth Hormone medication, and Infertility medication.

Drug Name	FlexRx Formulary (Preferred)	GenRx Formulary (Preferred)	Prior authorization Required
AUTOIMMUNE INFLAMMATORY DISORDERS			
ACTEMRA	NO	NO	NO
AMEVIVE	NO	NO	NO
ARCALYST*	NO	NO	NO
CIMZIA	NO	NO	NO
ENBREL	YES	YES	NO
HUMIRA	YES	NO	NO
KINERT	NO	NO	NO
ORENCIA	NO	NO	NO
SIMPONI	NO	NO	NO
STELARA	NO	NO	NO
BLOOD MODIFIERS			
ARANSEP	YES	NO	NO
EPOGEN	NO	NO	NO
LEUKINE	NO	NO	NO
NEULASTA	YES	NO	NO
NEUMEGA	YES	NO	NO
NEUPOGEN	YES	YES	NO
PROCRIT	YES	YES	NO
PROMACTA	NO	NO	YES
CANCER – ORAL			
AFINITOR	YES	YES	NO
HYCAMTIN	YES	YES	NO
NEXAVAR	YES	YES	NO
OFORTA	YES	YES	NO
REVLIMID	YES	YES	NO
SUTENT	YES	YES	NO
THALOMID	YES	YES	NO
TYKERB	YES	YES	NO
VOTRIENT	YES	YES	NO
CYSTIC FIBROSIS			
CAYSTON	NO	NO	NO
PULMOZYME	YES	YES	NO
TOBI	YES	YES	NO
ENZYME DISORDERS			
ALDURAZYME	YES	NO	NO
CEREDASE	YES	NO	NO
CEREZYME	YES	NO	NO
ELAPRASE*	NO	NO	NO
FABRAZYME	YES	NO	NO
KUVAN*	NO	NO	NO
MYOZYME	NO	NO	NO
NAGLAZYME	YES	NO	NO
VPRIV	NO	NO	NO
ZAVESCA*	NO	NO	NO

* Designates products that have limited distribution channels

Generic drugs are shown in lowercase type. Brand name drugs are shown in capital letters. Coverage of prescription drugs included on the specialty drug listing is in accordance to your benefit plan's design and may be subject to Minnesota state coverage mandates. This list is subject to change without notice – updated as of 6/28/10



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GROWTH HORMONE			
GENOTROPIN	NO	NO	YES
HUMATROPE	NO	NO	YES
INCRELEX	YES	YES	YES
NORDITROPIN	NO	NO	YES
NUTROPIN	NO	NO	YES
NUTROPIN AQ	NO	NO	YES
OMNITROPE	YES	YES	YES
SAIZEN	NO	NO	YES
SEROSTIM	NO	NO	YES
TEV-TROPIN	NO	NO	YES
ZORBTIVE	NO	NO	YES
HEMOPHILIA			
ADVATE	YES	YES	NO
ALPHANATE	YES	YES	NO
ALPHANINE SD	YES	YES	NO
BEBULIN VH	YES	YES	NO
BENEFIX	YES	YES	NO
FEIBA VH	YES	YES	NO
HELIXATE FS	YES	YES	NO
HEMOFIL M	YES	YES	NO
HUMATE P	YES	YES	NO
KOATE DVI	YES	YES	NO
KOGENATE FS	YES	YES	NO
MONARC -M	YES	YES	NO
MONOCLATE-P	YES	YES	NO
MONONINE	YES	YES	NO
NOVOSEVEN	YES	YES	NO
PROFILNINE	YES	YES	NO
RECOMBINATE	YES	YES	NO
REFACTO	YES	YES	NO
THROMBATE III	YES	YES	NO
WILATE	YES	YES	NO
XYNTHA	YES	YES	NO
HEPATITIS			
ALFERON N	NO	NO	NO
COPEGUS	NO	NO	NO
INFERGEN	NO	NO	NO
INTRON-A	YES	YES	NO
PEGASYS	YES	NO	NO
PEG-INTRON	YES	YES	NO
REBETOL	NO	NO	NO
RIBAPAK	NO	NO	NO
RIBASPHERE	NO	NO	NO
ribavirin	YES	YES	NO
ROFERON-A	YES	YES	NO
HIV & IMMUNOSUPPRESSANTS			
FUZEON	YES	YES	NO

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INFERTILITY			
BRAVELLE	NO	NO	YES
CETROTIDE	YES	NO	YES
chorionic gonadotropin	YES	YES	NO
FOLLISTIM AQ	YES	YES	YES
ganirelix acetate	NO	NO	YES
GONAL-F	NO	NO	YES
LUVERIS	NO	NO	YES
MENOPUR	NO	NO	YES
NOVAREL	NO	NO	NO
OVIDREL	YES	YES	NO
PREGNYL	NO	NO	NO
REPRONEX	YES	NO	YES
LUNG DISORDERS			
ACTIMMUNE	YES	YES	NO
ARALAST	NO	NO	NO
PROLASTIN	YES	NO	NO
XOLAIR	NO	NO	YES
ZEMAIRA	NO	NO	NO
MULTIPLE SCLEROSIS			
ACTHAR HP	NO	NO	NO
AMPYRA	NO	NO	NO
AVONEX	YES	YES	NO
BETASERON	NO	NO	NO
COPAXONE	YES	YES	NO
EXTAVIA	NO	NO	NO
REBIF	YES	NO	NO
OTHERS			
APOKYN	YES	YES	NO
CHENODAL	NO	NO	NO
CINRYZE*	NO	NO	YES
ELIGARD	YES	NO	NO
EXJADE*	NO	NO	NO
FIRMAGON	YES	YES	NO
FORTEO	NO	NO	NO
LEUPROLIDE	YES	YES	NO
LUCENTIS	NO	NO	NO
LUPRON	NO	NO	NO
LUPRON-DEPOT	YES	YES	NO
MACUGEN	NO	NO	NO
SAMSCA	NO	NO	NO
SOMATULINE DEPOT	NO	NO	NO
TRELSTAR DEPOT	YES	NO	NO
TRELSTAR LA	YES	NO	NO
VISUDYNE	NO	NO	NO
XENAZINE*	NO	NO	NO

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PULMONARY HYPERTENSION			
ADCIRCA	NO	NO	YES
epoprostenol	YES	YES	NO
FLOLAN*	NO	NO	NO
LETAIRIS	NO	NO	NO
REMODULIN*	YES	NO	NO
REVATIO	YES	YES	YES
TRACLEER*	YES	NO	NO
TYVASO*	NO	NO	NO
VENTAVIS	YES	NO	NO

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