

## 2017 Specialty Medications Available through Accredo:

Call Accredo toll-free at 800-978-6227 to confirm that your medication is covered.

8-MOP	CARBAGLU	GLEEVEC (PA) (QL)
ACTHAR HP (PA)	CAYSTON (QL)	HAEGARDA
ACTIMMUNE	CELLCEPT	HARVONI (PA) (QL) (ST)
ADCIRCA (PA) (ST) (QL)	CERDELGA	HELIXATE FS
ADEMPAS (PA)	CHENODAL (PA)	HEMOFIL M
ADVATE	CHOLBAM	HETLIOZ (PA) (QL)
ADVATE H	CIMZIA (PA) (ST)	HUMATE-P
ADVATE L	COAGADEX	HUMATROPE (PA)
ADVATE M	COPAXONE (PA) (QL)	HUMIRA (PA) (QL)
ADVATE SH	COPEGUS (PA)	HUMIRA PEDIATRIC (PA) (QL)
ADVATE UH	COSENTYX (PA)	HYCAMTIN (ORAL)
ADYNOVATE	COTELLIC (PA) (QL)	HYQVIA (PA)
AFINITOR (PA) (QL)	CYCLOSPORINE	IBRANCE (PA) (QL)
AFSTYLA	CYSTAGON	ICLUSIG (PA) (QL)
ALECENSA (PA) (QL)	DACOGEN	IDELVION
ALFERON N	DAKLINZA (PA) (QL)	IDHIFA
ALPHANATE	DUOPA	ILARIS (PA)
ALPHANINE SD	DUPIXENT (QL)	IMBRUVICA (PA) (QL)
ALPROLIX	EGRIFTA (PA)	INCIVEK (PA)
ALUNBRIG (QL) (PA)	ELOCTATE	INCRELEX (PA)
AMPYRA (PA)	EMFLAZA (PA)	INFERGEN (PA)
APOKYN	ENBREL (PA) (QL)	INGREZZA (PA)
ARANESP (PA)	ENOXAPARIN SODIUM	INLYTA (PA) (QL)
ARCALYST (PA) (ST)	EPCLUSA (PA) (QL)	INNOHEP
ARIXTRA	EPOGEN (PA) (ST)	INTRON A (PA)
AUBAGIO (ST)	ERIVEDGE (PA) (QL)	IXINITY
AUSTEDO (PA)	ESBRIET (PA) (QL)	JADENU
AVADAMET (QL)	EXJADE	JAKAFI (PA) (QL)
AVANDARYL (QL)	EXTAVIA (PA) (QL)	JEVTANA FNL
AVANDIA (QL)	FARYDAK (PA)	KALYDECO (PA)
AVONEX (PA) (QL)	FEIBA NF	KEVEYIS (PA)
AVONEX ADMINISTRATION (PA)(QL)	FEIBA VH	KEVZARA (QL) (PA)
AVONEX PEN (PA) (QL)	FERRIPROX	KINERET (PA) (ST)
BEBULIN	FIRAZYR (PA)	KISQALI (QL) (PA)
BEBULIN VH	FIRMAGON (ST)	KISQALI FEMARA CO-PACK (QL) (PA)
BENEFIX	FONDAPARINUX SODIUM	KITABIS PAK (PA)
BENLYSTA	FORTEO (PA) (QL)	KOATE-DVI
BERINERT (PA)	FRAGMIN	KOGENATE FS
BETASERON (PA) (ST) (QL)	FUZEON	KOVALTRY
BETHKIS (QL)	GENOTROPIN (PA)	KUVAN (PA)
BOSULIF (PA) (QL)	GILENYA (ST)	LENVIMA (PA)
CABOMETYX (PA)	GILOTRIF (PA) (QL)	LETAIRIS (PA) (ST)
CAPECITABINE	GLATOPA (PA)(QL)	LEUCOVORIN CALCIUM (ORAL)

LEUKINE	PROCRIT (PA)	TALTZ (PA)
LONSURF (PA)	PROCYSBI	TARCEVA (PA) (QL)
LOVENOX	PROFILNINE SD	TASIGNA (PA) (QL)
LYNPARZA (PA)	PROGRAF	TECFIDERA (ST)
MAVYRET	PROMACTA (PA)	TECHNIVIE (PA)
MEKINIST (PA) (QL)	PULMOZYME	TEMODAR (ORAL) (PA)
MIRCERA (PA)	PURIXAN	TEV-TROPIN (PA) (ST)
MONOCLATE-P	QUTENZA	THALOMID (PA)
MYALEPT (PA)	REBETOL	TOBI (QL)
NATPARA	REBIF (PA) (QL)	TOBI PODHALER (QL)
NERLYNX	REBIF REBIDOSE (PA) (QL)	TRACLEER (PA)
NEUPOGEN (PA)	RECOMBINATE	TREMFYA
NEXAVAR (PA) (QL)	REPATHA (PA) (QL)	TRETEN
NINLARO (PA) (QL)	REVATIO (ORAL) (PA) (ST) (QL)	TYKERB (PA) (QL)
NITYR	REVLIMID (PA)	TYMLOS (QL) (PA)
NORDITROPIN (PA)	RIASTAP	TYVASO (PA)
NORDITROPIN FLEXPPO (PA)	RIBAPAK	UPTRAVI (PA)
NORDITROPIN NORDIFLEX (PA)	RIBASPHERE (PA)	VALCHLOR
NORTHERA (PA)	RIBATAB	VANDETANIB (PA)
NOVOEIGHT	RIBAVIRIN	VELTASSA
NOVOSEVEN	RILUTEK	VENCLEXTA (PA)(QL)
NOVOSEVEN RT	RITUXAN HYCELA	VENTAVIS (PA) (ST)
NUPLAZID	RIXUBIS	VICTRELIS (PA)
NUTROPIN (PA) (ST)	RUBRACA (QL) (PA)	VIEKIRA PAK (PA)
NUTROPIN AQ (PA) (ST)	RUCONEST (PA)	VIEKIRA XR (PA) (QL)
NUTROPIN AQ NUSPIN (PA) (ST)	RYDAPT (PA)	VONVENDI
NUWIQ	SABRIL	VOTRIENT (PA) (QL)
OBIZUR	SAIZEN (PA) (ST)	VOSEVI
OALIVA (PA) (QL)	SAMSCA (PA) (QL)	WILATE
OCTREOTIDE ACETATE	SANDIMMUNE	XALKORI (PA) (QL)
ODOMZO (QL)	SANDOSTATIN	XELJANZ (ST) (PA)
OFEV (PA) (QL)	SANDOSTATIN LAR	XELODA
OFORTA	SANDOSTATIN LAR DEPOT	XENAZINE (PA)
OLYSIO (PA)	SEROSTIM (PA)	XERMELO (QL) (PA)
OMNITROPE (PA) (ST)	SIGNIFOR LAR (PA)	XOLAIR (PA) (QL)
ONIVYDE	SILDENAFIL (PA) (QL)	XTANDI (PA) (ST) (QL)
ONSOLIS (PA) (QL)	SILIQ (QL) (PA) (ST)	XYNTHA
ORENCIA (PA) (ST)	SIMPONI (PA) (ST)	XYNTHA SOLOFUSE
ORENITRAM (PA)	SOMATULINE DEPOT	XYREM
ORFADIN (PA)	SOMAVERT (PA)	ZARXIO (PA)
ORKAMBI (QL)	SOVALDI (PA) (QL) (ST)	ZAVESCA
OTEZLA (PA)	SPRYCEL (PA) (QL)	ZELBORAF (PA) (QL)
OTREXUP (PA)	STELARA (PA) (ST)	ZEJULA (QL) (PA)
PANRETIN	STIVARGA (PA) (QL)	ZINBRYTA (PA)
PEGASYS (PA) (QL)	STRENSIQ	ZOLINZA (PA)
PEGASYS PROCLICK (PA) (QL)	SUCRAID	ZORBTIVE (PA)
PEGINTRON (PA) (ST) (QL)	SUTENT (PA) (QL)	ZOMACTON
PEGINTRON REDIPEN (PA)(ST)(QL)	SYLATRON (PA)	ZYDELIG (PA)
PLEGRIDY (QL)	SYNAGIS (PA)	ZYKADIA (PA) (QL)
POMALYST	TAFINLAR (PA) (QL)	ZYTIGA (PA) (QL)
PRALUENT (PA)	TAGRISSO (PA) (QL)	

This list is subject to change.



**Key:** The symbol **PA** next to a drug name indicates that a approval through a coverage review (prior authorization) is required for coverage. The symbol **QL** next to a drug name indicates that the drug has a quantity level limit on some or all strengths. The symbol **ST** next to a drug name indicates that step therapy may apply to some or to all strengths of the drug, which means that another medication may need to be tried first before that medication will be covered.

All rights in the product names of all third-party products listed, whether or not appearing with the trademark symbol, belong exclusively to their respective owners.

Copyright 2017 Accredo Health Group, Inc. | An Express Scripts Company

*accredo*®