

2009

Effective July 1, 2009



Blue Cross and Blue Shield
of New Mexico

Blue Cross and Blue Shield of New Mexico BlueSalud

Specialty Pharmacy (SP) Drugs

Specialty Pharmacy drugs are noted in the following list, which is not all-inclusive of Specialty drugs. Specialty Pharmacy drugs require Prior Authorization before a prescription may be filled. They are limited to a 30-day supply and must be filled at a Specialty Pharmacy supplier.

AVONEX
BETASERON
COPAXONE
ENBREL
EPOGEN
GENOTROPIN
GLEEVEC
INCRELEX
MATULANE
NEUPOGEN
NUTROPIN AQ
PEGASYS
PEG-INTRON
PROCRIT
PULMOZYME
REBIF
REVATIO
REVLIMID
ribavirin tabs (Copegus)
ribavirin caps (Rebetol)
SUTENT
TARCEVA
TEMODAR
THALOMID
TOBI
XELODA