



**Blue Care
Network**
of Michigan

3-Tier + Specialty Plan

January 2012 Quick Guide for Members

Prescription drug coverage that works with a member's medical coverage.

About 3-Tier + Specialty drug coverage

The 3-Tier + Specialty prescription drug benefit builds on the basic BCN drug formulary adding two copayment levels for specialty drugs. These drugs treat complex conditions, such as cancer, chronic kidney failure, multiple sclerosis, organ transplants and rheumatoid arthritis, and may require special handling and monitoring. Members pay a percentage of the cost of specialty drugs, up to a maximum copayment per prescription and an out-of-pocket limit per year.



How specialty coverage fits with our drug formulary

BCN's drug formulary is a regularly updated list of medications that may be covered under your drug benefit. The medications were selected by a group of Michigan physicians, pharmacists and other health care experts for their clinical effectiveness, safety and opportunity for cost savings. Only drugs that have been approved by the Food and Drug Administration are included.

Drugs in the formulary are assigned to "tiers" that help define the prescription copayment.

Lowest Highest			Lowest Highest	
Tier 1 Formulary Preferred	Tier 2 Formulary Options	Tier 3 Nonformulary	Tier 4 Specialty Formulary	Tier 5 Specialty Nonformulary
<ul style="list-style-type: none"> Mostly generic drugs. Safe and effective. Require the lowest copayment, making them the most cost-effective option for treatment. 	<ul style="list-style-type: none"> Brand-name drugs. Safe and effective. Require a higher copayment than Tier 1 drugs. 	<ul style="list-style-type: none"> May not have a proven record for safety or as high a clinical value as Tier 1 and Tier 2 drugs. Formulary alternatives available for many of these drugs. Require the highest copayment. 	<ul style="list-style-type: none"> Generics dispensed when available. Safe and effective. Require the lowest specialty drug copayment. 	<ul style="list-style-type: none"> May not have a proven record for safety or as high a clinical value as Tier 4 drugs. Require a higher specialty drug copayment.

For more information, check your Blue Care Network prescription drug rider, which describes the terms and conditions of this drug coverage and lists copayment responsibility as a dollar amount or as a percentage of the total prescription costs and indicates when the copayment applies.

Quantity limits and prior authorization

Specialty drugs are limited to a 30-day supply per fill. For certain specialty drugs, the first prescription is limited to a 15-day supply; your copayment will be reduced by half for these first-fill prescriptions. Some specialty drugs may have additional quantity limits to ensure you receive the right dose and drug for your condition. Our prior authorization program requires that certain clinical criteria be met before some drugs can be covered. These criteria, which vary with the drug and treatment, ensure that you receive the most affordable treatment.

Specialty Formulary (Tier 4)

Actimmune	Humira (PA, QL)	PEG-Intron (PA, QL)	Sensipar
Afinitor (PA, QL)†	Hycamtin (PA)	Pregnyl (g) (chorionic gonadotropin) (PA)	Somatuline Depot
Apokyn*	Incivek (PA, QL)	Procrit (PA)	Somavert*
Arcalyst (PA)*	Infergen (PA)	Profasi (g) (chorionic gonadotropin) (PA)	Sprycel (PA, QL)†
Arixtra (g) (fondaparinux)	Intron - A (PA)	Prograf (g) (tacrolimus anhydrous)	Sutent (PA, QL)†
Avonex	Iressa (PA)	Promacta (PA, QL)	Syprine
Baraclude	Kuvan (PA)	Pulmozyme	Tarceva (PA, QL)†
Bravelle (PA)	Letairis (PA, QL)	Rapamune	Tasigna (PA)
Carbaglu (PA)*	Leukine	Rebetol (g) (ribavirin capsules) (PA)	Temodar
Cellcept (g) (mycophenolate)	Lovenox (g) (enoxaparin sodium)	Rebif	Thalomid
Cetrotide (PA)	Lovenox 300mg/3ml	Remodulin*	Tobi (QL)
Copaxone	Lupron (g) (leuprolide)	Repronex (PA)	Tracleer (PA)
Copegus (g) (ribavirin tablets) (PA)	Lupron Depot	Revatio (PA, QL)	Trelstar Depot/Trelstar LA
Cyclosporine (oral) (g)	Neoral (g) (cyclosporine)	Ribapak (g) (ribavirin tablets) (PA)	Tykerb (PA)
Enbrel (PA, QL)	Neumega	Ribasphere (g) (ribavirin capsules) (PA)	Tyvaso (PA, QL)*
Fertinex (PA)	Neupogen	Sabril*	Ventavis (PA, QL)*
Fuzeon	Nexavar (PA, QL)†	Samsca	Victrelis (PA, QL)
Ganirelex acetate (PA)	Novarel (g) (chorionic gonadotropin) (PA)	Sandimmune (g) (cyclosporine)	Votrient (PA)†
Gengraf (g) (cyclosporine)	Nutropin (all forms) (PA)	Sandostatin (g) (octreotide)	Xalkori (PA, QL)
Genotropin (PA)	Oforta (QL)	Sandostatin LAR	Xeloda
Gleevec	Orfadin*		Xenazine (PA, QL)*
Gonal-F, RFF (PA)	Ovidrel (PA)		Zelboraf (PA, QL)
Heparin (g)	Pegasys, Proclick (PA, QL)		Zoladex (QL)
Hepsera			Zolinza (PA)
			Zortress (QL)

Specialty Nonformulary (Tier 5)

Adcirca (PA, QL)	Extavia	Luveris (PA)	Serostim (PA)
Ampyra (PA, QL)	Firazyr (PA, QL)	Menopur (PA)	Simponi (PA, QL)
Aranesp (PA)	Follistim/Follistim AQ (PA)	Myfortic	Sylatron (PA)
Betaseron (PA)	Forteo (PA, QL)	Neulasta (QL)	Targretin
Cayston (PA, QL)	Fragmin	Norditropin (all forms) (PA)	Tev-Tropin (PA)
Cimzia (PA, QL)	Gilenya (PA, QL)	Omnitrope (PA)	Tyzeka
Egrifta (PA, QL)	Humatrope (PA)	Orencia SC (PA, QL)	Zorbtive (PA)
Eligard	Increlex (PA)	Raptiva (PA)	Zytiga (PA, QL)†
Epogen (PA)	Innohep	Revlimid (PA, QL)	
Exjade (PA)*	Kineret (PA, QL)	Saizen (PA)	

(g) Generic version dispensed.

(PA) These medications may also require a prior-authorization before dispensing.

(QL) These medications may also have additional quantity limits.

†15 day first fill may be required.

*Limited distribution. Some manufacturers restrict the distribution of certain specialty drugs. BCN has secured access to these drugs through Accredo Specialty Pharmacy. Accredo can be contacted at 1-800-803-2523.

How to fill specialty drug prescriptions

You can fill prescriptions for specialty drugs at a contracted retail pharmacy, but not all pharmacies will dispense specialty drugs. Ask if your pharmacy will fill your prescription. BCN also offers mail order service for specialty drugs through Walgreens Specialty Pharmacy (not through Medco). If you have questions about BCN's specialty drug program, please call Walgreens Specialty Pharmacy at 1-866-515-1355 or visit **WalgreensHealth.com***.

*BCN does not control this website or endorse its general content

To have your specialty drugs sent to your home, have your doctor fax your specialty drug prescription to Walgreens Specialty Pharmacy at **1-866-515-1356**. Walgreens Specialty Pharmacy also offers the following support services to its customers in the U.S.

- Personal attention from a patient-care coordinator who will discuss the best way for you to take your medication, explain possible side effects, help you understand your condition, and call to remind you when you need a refill.
- Additional supplies, if they are appropriate to administer your medication (for example, syringes, alcohol swabs, and sharps containers), free with each new order and then on request.
- Customer service staff available Monday through Saturday at 1-866-515-1355. Automated ordering and emergency clinical support are available 24 hours a day, seven days a week.



**Blue Care
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of Michigan

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MiBCN.com/pharmacy

BCN Customer Service

1-800-662-6667

(Or the number on the back of your ID card)

TTY users: 1-800-257-9980

8 a.m. to 5:30 p.m.

Monday through Friday