**State of Wisconsin Group Health Insurance Program Formulary**
**Specialty Pharmacy Program**
**This program is not effective until 1/1/2013**

State of Wisconsin Group Health Insurance preferred specialty pharmacies help members who are taking medications for certain chronic illnesses or complex diseases by providing services that offer convenience and support. This program is part of your pharmacy benefit and is voluntary

The medications contained within this specialty list may be filled at any participating pharmacy for a Level 4 copay of $50; however, you can receive a reduced Level 4 copay of $15 by utilizing the following preferred specialty pharmacies: Diplomat

## Specialty Pharmacy Medications

abacavir tab
ACTIMMUNE INJ
ADCIRCA TAB
AFINITOR TAB
ALFERON N INJ
AMPYRA TAB
APTIVUS CAP
APTIVUS SOLN
ARANESP INJ
ATRIPLA TAB
AVONEX INJ
BETASERON INJ
CALCITRIOL INJ
CIMZIA INJ
COMBIVIR TAB
COMPLERA TAB
COPAXONE INJ
CRIXIVAN CAP
desmopressin acetate inj
didanosine cap
EDURANT TAB
EMTRIVA CAP
EMTRIVA SOLN
ENBREL INJ
EPIVIR SOLN
EPIVIR TAB
EPOGEN INJ
EPZICOM TAB
etoposide cap
FORTEO INJ
FUZEON INJ
FUZEON KIT
GILENYA CAP
GLEEVEC TAB
HEPSERA TAB
HYCAMTIN CAP
INCIVEK TAB
INCRELEX INJ
INFERGEN INJ
INTELENCE TAB
INTRON-A INJ
INVIRASE TAB
ISENTRESS TAB
JAKAFI TAB
KALETRA SOLN
KALETRA TAB
KALYDECO TAB
KINERET INJ
KUVAN TAB
lamivudine tab
lamivudine/ zidovudine tab
LEUKINE INJ
LEXIVA SUSP
LEXIVA TAB
LYSODREN TAB
MESNEX TAB
MIACALCIN INJ
NEULASTA INJ
NEUMEGA INJ
NEUPOGEN INJ
NEVIRAPINE SUSP
nevirapine tab
NEXAVAR TAB
NORDITROPIN INJ
NORVIR CAP
NORVIR ORAL SOLN
NORVIR TAB
octreotide inj
PEGASYS INJ
PEG-INTRON INJ
PREZISTA TAB
PROCRIT INJ
PROMACTA TAB
PULMOZYME INH SOLN
REBETOL SOLN
REBIF INJ
RELISTOR INJ
RESCRIPTOR TAB
REVLIMID CAP
REYATAZ CAP
RIBAPAK TAB
ribasphere cap
RIBATAB TAB
ribavirin tab
SANDOSTATIN INJ
SELZENTRY TAB
SENSIPAR TAB
SPRYCEL TAB
stavudine cap
stavudine soln
SUSTIVA CAP
SUSTIVA TAB
SUTENT CAP
TARCEVA TAB
TARGRETIN CAP
TARGRETIN GEL
TASIGNA CAP
TEMODAR CAP
THALOMID CAP
TOBI NEB SOLN
tretinoin cap
TRIZIVIR TAB
TRUVADA TAB
TYKERB TAB
VICTRELIS CAP
VIDEX SOLN
VIRACEPT POWDER
VIRACEPT TAB
VIRAMUNE SUSP
VIRAMUNE TAB
VIREAD TAB
VIVAGLOBIN INJ
VOTRIENT TAB
XALKORI CAP
XELODA TAB
ZIAGEN TAB
zidovudine cap
zidovudine syrup
zidovudine tab
ZOLINZA CAP
ZYTIGA TAB

Coverage of medications, including those not otherwise identified by qualifiers such as QL/PA/ST, may be subject to safety screenings and other clinical edits in the course of claims transaction processing.** Products listed may not be all inclusive and are subject to change.