Cost Relief Drug List
Drug List (excludes Infertility drugs)

Anthem

Medications listed below are part of the Cost Relief Program. Whether your drug is covered will depend upon coverage of the specialty medication under your plan.

This list includes only prescription products. Brand-name drugs are listed with a first capital letter. Non-brand drugs (generics) are in lowercase letters.

Please note: If you are a plan member, please call 877-638-4008 and a Cost Relief representative will be available to answer any questions and enroll you in the program. Representatives are available Monday through Friday from 8 a.m. to 8 p.m. ET.

ACROMEGALY
octreotide
Sandostatin
Sandostatin Lar Depot*
Signifor*
Signifor Lar*
Somatuline Depot*
Somavert*

ALPHA-1 ANTITRYPSIN DEFICIENCY
Aralast NP*
Glassia*
Prolastin-C*
Zemaira*

AMYLOIDOSIS
Amvuttra*
Onpattro*
Vyndamax*
Vyndaqel*

ANEMIA
Aranesp*
Enjaymo*
Epogen*
Procrit*
Reblozyl*
Retacrit

ASTHMA
Cinqair*
Dupixent*
Fasenra*
Nucala*
Tezspire*
Xolair*

ATOPIC DERMATITIS
Adbry*
Cibinqo*
Dupixent*

AUTOIMMUNE
Actemra*
Avsola*
Cimzia*
Cosentyx*
Enbrel*
Entyvio*
Humira*
Humira Pediatric*
Ilumya*
Inflectra*
Kevzara*
Kineret*
Olumiant*
Orencia/Clickject*
Otezla*
Otrexup*
Rasuvo*
Remicade*
Renflexis*
Rinvoq*
Siliq*
Simponi*
Simponi Aria*
Skyrizi*
Stelara*
Taltz*
Tremfya*
Xeljanz/XR*

BONE DISORDERS - OTHER
Voxzogo*

CARDIAC DISORDERS
Camzyos*

COAGULATION DISORDERS
Ceprotin

CRYOPYRIN-ASSOCIATED PERIODIC SYNDROMES
Arcalyst
Ilaris*

CYSTIC FIBROSIS
Bethkis
Bronchitol*
Bronchitol Tolerance Test*
Cayston*
Kalydeco*
Kitabis Pak
Orkambi*
Pulmozyme
Symdeko*
Tobi
Tobi Podhaler*
tobramycin
Trikafta*

DUPUYTREN'S CONTRACTURE
Xiaflex*

ELECTROLYTE DISORDERS
Jynarque*
Samsca*
tolvaptan*

ENZYME DEFICIENCY DISORDERS - OTHER
Sucraid*

GASTROINTESTINAL DISORDERS-OTHER
Gattex*
Ocaliva*
Solesta*

GOUT
Krystexxa*

GROWTH HORMONE AND RELATED DISORDERS
Genotropin*
Humatrope*
Increlex*
Norditropin*
Nutropin AQ*
Omnitrope*
Saizen*
Saizenprep*
Skytrofa*
Zomacton*
Zorbtive*

HEMATOPOIETICS
Mozobil

HEMOPHILIA
Advate*
Adynovate*
Afstyla*
Alphanate*
Alphanine/SD
Alprolix*
Benefix*
Coagadex*
Corifact
Eloctate*
Esperoct*
Feiba*
Fibryga
Hemlibra*
Hemofil M*
Humate-P*
Idelvion*
Ixinity*
Jivi
Koate*
Koate-DVI*
Kogenate FS*
Kovaltry*
Mononine
Novoeight
Novoseven RT*
Nuwiq
Obizur*
Profilnine/SD
Rebinyn*

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Anthem

Recombinate*
Riastap
Rixubis*
Sevenfact*
Tretten*
Vonvendi*
Wilate*
Xyntha/Solofuse

HEPATITIS C
Epclusa*
Harvoni*
Ledipasvir/Sofosbuvir*
Mavyret*
Pegasys*
ribavirin
Sofosbuvir/Velpatasvir*
Sovaldi
Viekira Pak*
Vosevi*
Zepatier*

HEREDITARY ANGIOEDEMA
Berinert*
Cinryze*
Firazyr*
Haegarda*
icatibant acetate*
Kalbitor*
Orladeyo*
Ruconest
sajazir*
Takhzyro*

HORMONAL THERAPIES
Aveed*
Eligard
Fensolvi
Firmagon
Leuprolide
Lupron Depot*
Lupron Depot-Pediatric*
Natpara*
Supprelin LA*
Trelstar Mixject*
Triptodur*
Zoladex*

IMMUNE DEFICIENCIES AND RELATED DISORDERS
Asceniv*
Bivigam*
Cutaquig*
Cuvitru*
Cytogam
Flebogamma Dif*
Gamastan*
Gammagard*
Gammagard S/D*
Gammaked*
Gammaplex*
Gamunex-C*
Hepagam B
Hepatitis B Immune Globulin
Hizentra*
Hyperhep B
Hyperrho S/D
Hyqvia*
Micrhogam Plus
Octagam*
Panzyga*
Privigen*
Rhogam Plus
Rhophylac
Winrho SDF
Xembify*

INFECTIOUS DISEASE - OTHER
Actimmune*
Alferon N
Arikayce*

IRON OVERLOAD
clovique
deferasirox
deferoxamine
Desferal*
Exjade*
Jadenu/Sprinkle*
Syprine*
trientine

LYSOSOMAL STORAGE DISORDER
Aldurazyme*
Cerdelga*
Cerezyme*
Cystagon
Elaprase*
Elelyso*
Fabrazyme*
Kanuma*
Lumizyme*
miglustat
Naglazyme
Nexviazyme*
Vimizim
Vpriv*
Xenpozyme*
Zavesca*

MENTAL HEALTH CONDITIONS
Zulresso*

METABOLIC MODIFIERS - HYPOPHOSPHATASIA
Strensiq*

MISCELLANEOUS
nitisinone
Orfadin*

MOVEMENT DISORDERS
Apokyn*
apomorphine*
Austedo*
droxidopa*
Duopa
Ingrezza*
Kynmobi*
Northera*
Nuplazid*
Radicava ORS*
Relyvrio*
tetrabenazine
Xenazine*

MULTIPLE SCLEROSIS
Ampyra*
Aubagio*
Avonex*
Bafiertam*
Betaseron*
Copaxone*
dalfampridine ER
dimethyl fumarate*
Extavia*
Gilenya*
glatiramer*
glatopa*
Kesimpta*
Lemtrada*
Mavenclad
Mayzent*
mitoxantrone
Ocrevus*
Plegridy*
Ponvory*
Rebif
Rebif Rebidose
Tecfidera*
Tecfidera Starter Pack*
Tysabri
Vumerity*
Zeposia*

MUSCULAR DYSTROPHIES
Evrysdi*

NEUROMUSCULAR
Vyvgart*

NEUTROPENIA
Fulphila*
Fylnetra*
Granix*
Leukine*
Neulasta/Onpro*
Neupogen*
Nivestym
Nyvepria*
Releuko*
Rolvedon*
Udenyca*
Zarxio*
Ziextenzo*

OCULAR DISORDERS
Beovu*
Byooviz*
Cimerli*
Eylea*
Iluvien*
Lucentis*
Ozurdex*
Retisert*
Susvimo*
Vabysmo*
Visudyne*

ONCOLOGY
abiraterone
Abraxane*
Adcetris*
Afinitor/Disperz*
Alecensa*

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Anthem

Alunbrig*
Alymsys*
Arzerra
Asparlas*
Avastin*
azacitidine
Balversa*
Beleodaq*
Belrapzo*
Bendamustine HCL*
Bendeka*
Besponsa
Besremi*
bexarotene
Blincyto*
Bortezomib*
Bosulif*
Braftovi*
Brukinsa*
Cabometyx*
Calquence*
capecitabine
Cometriq*
Cotellic*
Cyramza*
Dacogen
Darzalex*
Daurismo*
decitabine
Empliciti*
Enhertu*
Erbitux*
Erivedge*
Erleada*
erlotinib HCL
everolimus
Evomela*
Folotyn*
Gavreto*
Gazyva*
Gleevec*
Gleostine*
Halaven*
Herceptin*
Herceptin Hylecta*
Herzuma*
Hycamtin
Ibrance*
Iclusig*
Idhifa*
imatinib
Imbruvica*
Imfinzi*
Imjudo*
Inlyta*
Inqovi*
Inrebic*
Intron A
Iressa*
Istodax*
Ixempra Kit*
Jakafi*
Jemperli*
Jevtana*
Kadcyla*
Kanjinti*
Keytruda*
Khapzory*
Kisqali*
Kisqali and Femara*
Koselugo*
Kyprolis*
lapatinib*
lenalidomide
Lenvima*
Lonsurf*
Lorbrena*
Lumakras*
Lumoxiti*
Lynparza*
Margenza*
Mekinist*
Mektovi*
Mvasi*
Mylotarg
Nerlynx*
Nexavar*
Ninlaro*
Nubeqa*
Odomzo*
Ogivri*
Oncaspar
Onivyde*
Ontruzant*
Onureg*
Opdivo*
Opdualag*
Orgovyx*
Padcev*
Perjeta*
Phesgo*
Piqray*
Polivy*
Pomalyst
Portrazza*
Poteligeo*
Proleukin
Qinlock*
Retevmo*
Revlimid
Riabni*
Rituxan*
Rituxan Hycela*
romidepsin
Rozlytrek*
Rubraca*
Ruxience*
Rybrevant*
Rydapt*
Sarclisa*
Scemblix*
Sprycel*
Stivarga*
sunitinib*
Sutent*
Sylvant
Tabrecta*
Tafinlar*
Tagrisso*
Talzenna*
Tarceva
Targretin
Tasigna*
Tecentriq*
Temodar
temozolomide
temsirolimus
Tepadina*
Thalomid
Thyrogen*
Tivdak*
Torisel
Trazimera*
Treanda
Truxima*
Tykerb*
valrubicin
Valstar
Vectibix*
Velcade
Venclexta*
Verzenio*
Vidaza
Vitrakvi*
Vizimpro*
Votrient*
Vyxeos
Xalkori*
Xeloda
Xermelo*
Xgeva*
Xospata*
Xtandi*
Yervoy*
Yondelis*
Yonsa
Zaltrap
Zejula*
Zelboraf*
Zepzelca*
Zirabev*
Zoledronic Acid
Zolinza
Zydelig*
Zykadia*
Zytiga*

OSTEOPOROSIS
Evenity*
Forteo*
Prolia*
Reclast
Teriparatide*
Tymlos*
Zoledronic Acid

PAROXYSMAL NOCTURNAL HEMOGLOBINURIA
Soliris
Ultomiris*

PHENYLKETONURIA
Kuvan*
Palynziq*
sapropterin*

PRE-TERM BIRTH
hydroxyprogesterone
Makena

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
Aduhelm*

PULMONARY ARTERIAL HYPERTENSION
Adcirca*

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Anthem®

Adempas*
alyq*
ambrisentan
bosentan
epoprostenol
Flolan
Letairis*
Opsumit*
Orenitram*
Remodulin*
Revatio*
sildenafil
tadalafil
Tadliq*
Tracleer*
treprostinil
Tyvaso*
Uptravi*
Veletri
Ventavis*

PULMONARY DISORDERS - OTHER
Esbriet
Ofev*

RARE DISORDERS - OTHER
Crysvita*
Dojolvi*
Enspryng*
Firdapse*
Gamifant*
Vijoice*
Zokinvy*

RESPIRATORY SYNCYTIAL VIRUS
Synagis*

SEIZURE DISORDERS
Acthar*
Diacomit*
Epidiolex*
Fintepla*
Sabril*
vigabatrin*
vigadrone*

SICKLE CELL DISEASE
Adakveo*
Endari*
Oxbryta*

SLEEP DISORDER
Wakix*
Xyrem*
Xywav*

SYSTEMIC LUPUS ERYTHEMATOSUS
Benlysta*
Saphnelo*

THROMBOCYTOPENIA
Doptelet*
Mulpleta*
Nplate*
Promacta*
Tavalisse*

UREA CYCLE DISORDERS
Buphenyl*
Ravicti*
sodium phenylbutyrate*

Copayments for the medications on this list, whether made by your plan or a manufacturer's copay assistance program, will not count toward your plan deductible.
Drugs designated with an asterisk (*) are considered non-essential drugs, and member cost share payments for these medications, whether made by your plan or a manufacturer copay assistance program, do not count towards the plan's out-of-pocket maximum.
Medications on the Cost Relief specialty drug list may change at any time, with or without notice. Your plan may not cover certain medications even though they appear on the Cost Relief drug list. Some drugs may be excluded from your benefits. Please refer to your Certificate or Evidence for Coverage for coverage limitations and exclusions.

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Get help in your language

Curious to know what all this says? We would be too. Here's the English version:
You have the right to get this information and help in your language for free. Call the Member Services number on your ID card for help. (TTY/TDD: 711)

Separate from our language assistance program, we make documents available in alternate formats for members with visual impairments. If you need a copy of this document in an alternate format, please call the customer service telephone number on the back of your ID card.

Spanish
Tiene el derecho de obtener esta información y ayuda en su idioma en forma gratuita. Llame al número de Servicios para Miembros que figura en su tarjeta de identificación para obtener ayuda. (TTY/TDD: 711)

Chinese
您有權使用您的語言免費獲得該資訊和協助。請撥打您的 ID 卡上的成員服務號碼尋求協助。(TTY/TDD: 711)

Vietnamese
Quý vị có quyền nhận miễn phí thông tin này và sự trợ giúp bằng ngôn ngữ của quý vị. Hãy gọi cho số Dịch Vụ Thành Viên trên thẻ ID của quý vị để được giúp đỡ. (TTY/TDD: 711)

Korean
귀하에게는 무료로 이 정보를 얻고 귀하의 언어로 도움을 받을 권리가 있습니다. 도움을 얻으려면 귀하의 ID 카드에 있는 회원 서비스 번호로 전화하십시오. (TTY/TDD: 711)

Tagalog
May karapatan kayong makuha ang impormasyon at tulong na ito sa ginagamit ninyong wika nang walang bayad. Tumawag sa numero ng Member Services na nasa inyong ID card para sa tulong. (TTY/TDD: 711)

Russian
Вы имеете право получить данную информацию и помощь на вашем языке бесплатно. Для получения помощи звоните в отдел обслуживания участников по номеру, указанному на вашей идентификационной карте. (TTY/TDD: 711)

Arabic
يحق لك الحصول على هذه المعلومات والمساعدة بلغتك مجانًا. اتصل برقم خدمات الأعضاء الموجود على بطاقة التعريف الخاصة بك للمساعدة.
(711 :TDD/TTY)

Armenian
Դուք իրավունք ունեք Ձեր լեզվով անվճար ստանալ այս տեղեկատվությունը և ցանկացած օգնություն: Օգնություն ստանալու համար զանգահարեք Անդամների սպասարկման կենտրոն՝ Ձեր ID քարտի վրա նշված համարով: (TTY/TDD: 711)

Farsi
شما این حق را دارید که این اطلاعات و کمکها را به صورت رایگان به زبان خودتان دریافت کنید. برای دریافت کمک به شماره مرکز خدمات اعضاء که بر روی کارت شناسایی‌تان درج شده است، تماس بگیرید. (TTY/TDD: 711)

French
Vous avez le droit d'accéder gratuitement à ces informations et à une aide dans votre langue. Pour cela, veuillez appeler le numéro des Services destinés aux membres qui figure sur votre carte d'identification. (TTY/TDD: 711)

Japanese
この情報と支援を希望する言語で無料で受けることができます。支援を受けるには、IDカードに記載されているメンバーサービス番号に電話してください。(TTY/TDD: 711)

Haitian
Ou gen dwa pou resevwa enfòmasyon sa a ak asistans nan lang ou pou gratis. Rele nimewo Manm Sèvis la ki sou kat idantifikasyon ou a pou jwenn èd. (TTY/TDD: 711)

Italian
Ha il diritto di ricevere queste informazioni ed eventuale assistenza nella sua lingua senza alcun costo aggiuntivo. Per assistenza, chiami il numero dedicato ai Servizi per i membri riportato sul suo libretto. (TTY/TDD: 711)

Polish
Masz prawo do bezpłatnego otrzymania niniejszych informacji oraz uzyskania pomocy w swoim języku. W tym celu skontaktuj się z Działem Obsługi Klienta pod numerem telefonu podanym na karcie identyfikacyjnej. (TTY/TDD: 711)

Punjabi
ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਇਹ ਜਾਣਕਾਰੀ ਅਤੇ ਮਦਦ ਮੁਫ਼ਤ ਵਿੱਚ ਪ੍ਰਾਪਤ ਕਰਨ ਦਾ ਅਧਿਕਾਰ ਹੈ। ਮਦਦ ਲਈ ਆਪਣੇ ਆਈਡੀ ਕਾਰਡ ਉੱਤੇ ਮੈਂਬਰ ਸਰਵਿਸਿਜ਼ ਨੰਬਰ ਤੇ ਕਾਲ ਕਰੋ। (TTY/TDD: 711)

Navajo
Bee ná ahóót'i' t'áá ni nizaad k'ehjí niká a'doowoł t'áá jiik'e. Naaltsoos bee atah nílínígíí bee néého'dólzingo nanitínígíí béésh bee hane'í bikáá' áaji' hodíílnih. Naaltsoos bee atah nílínígíí bee néého'dólzingo nanitínígíí béésh bee hane'í bikáá' áaji' hodíílnih. (TTY/TDD: 711)

It's important we treat you fairly
That's why we follow federal civil rights laws in our health programs and activities. We don't discriminate, exclude people, or treat them differently on the basis of race, color, national origin, sex, age or disability. For people with disabilities, we offer free aids and services. For people whose primary language isn't English, we offer free language assistance services through interpreters and other written languages. Interested in these services? Call the Member Services number on your ID card for help (TTY/TDD: 711). If you think we failed to offer these services or discriminated based on race, color, national origin, age, disability, or sex, you can file a complaint, also known as a grievance. You can file a complaint with our Compliance Coordinator in writing to Compliance Coordinator, P.O. Box 27401, Mail Drop VA2002-N160, Richmond, VA 23279. Or you can file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at 200 Independence Avenue, SW; Room 509F, HHH Building; Washington, D.C. 20201 or by calling 1-800-368-1019 (TDD: 1- 800-537-7697) or online at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf. Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.