

State: VermontGMCB **Filing Company:** BCBSVT
TOI/Sub-TOI: ML02 Multi-Line - Other/ML02.000 Multi-Line - Other
Product Name: 2025 Blue Cross VT Large Group Unit Cost Trend Filing
Project Name/Number: /

Filing at a Glance

Company: BCBSVT
Product Name: 2025 Blue Cross VT Large Group Unit Cost Trend Filing
State: VermontGMCB
TOI: ML02 Multi-Line - Other
Sub-TOI: ML02.000 Multi-Line - Other
Filing Type: GMCB Trend / Admin Charge
Date Submitted: 05/20/2024
SERFF Tr Num: BCVT-134106868
SERFF Status: Assigned
State Tr Num:
State Status:
Co Tr Num:

Effective: On Approval
Date Requested:
Author(s): Martine Brisson-Lemieux, Andrew Proulx, Matthew Goodrich, Jack Cunningham
Reviewer(s): Jacqueline Lee (primary), Michael Barber, Laura Beliveau, Tara Bredice
Disposition Date:
Disposition Status:
Effective Date:

State Filing Description:

State: VermontGMCB **Filing Company:** BCBSVT
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General Information

Project Name: Status of Filing in Domicile:
Project Number: Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Group
Submission Type: New Submission Group Market Size: Large
Group Market Type: Employer Overall Rate Impact:
Filing Status Changed: 05/23/2024
State Status Changed: Deemer Date:
Created By: Matthew Goodrich Submitted By: Matthew Goodrich
Corresponding Filing Tracking Number:

Filing Description:
May 20, 2024

Laura Beliveau
Staff Attorney
Green Mountain Care Board
144 State Street
Montpelier, Vermont 05602

Subject:Blue Cross and Blue Shield of Vermont - NAIC # 53295
2025 Large Group Unit Cost Trend Filing

Dear Ms. Beliveau:

Attached for the Green Mountain Care Board's review and approval is Blue Cross and Blue Shield of Vermont's 2025 Large Group Unit Cost Trend Filing. This filing updates unit cost trend factors to align with those filed in the 2025 Vermont QHP Market rate filings in an effort to establish rates that are aligned with hospital budget requests that will be submitted on July 1, 2024. This filing is intended to allow for actual hospital budget submissions to be incorporated into large group rates in the same manner that they will be incorporated into QHP rates.

Please let me know if we can answer any questions or provide further information during your review.

Sincerely,

Ruth Greene

cc:Martine Lemieux/Blue Cross VT

Company and Contact

Filing Contact Information

Matthew Goodrich, goodrichm@bcbsvt.com
PO Box 186 802-371-3586 [Phone]
Montpelier, VT 05601

SERFF Tracking #: BCVT-134106868

State Tracking #:

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State: VermontGMCB

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Product Name: 2025 Blue Cross VT Large Group Unit Cost Trend Filing

Project Name/Number: /

Filing Company Information

BCBSVT

CoCode: 53295

State of Domicile: Vermont

PO BOX 186

Group Code:

Company Type: Hospital

Montpelier, VT 05601

Group Name:

Service Corp

(802) 371-3450 ext. [Phone]

FEIN Number: 03-0277307

State ID Number:

State: VermontGMCB

Filing Company: BCBSVT

TOI/Sub-TOI: ML02 Multi-Line - Other/ML02.000 Multi-Line - Other

Product Name: 2025 Blue Cross VT Large Group Unit Cost Trend Filing

Project Name/Number: /

Filing Fees

State Fees

Fee Required? Yes

Fee Amount: \$150.00

Retaliatory? No

Fee Explanation:

State: VermontGMCB Filing Company: BCBSVT
 TOI/Sub-TOI: ML02 Multi-Line - Other/ML02.000 Multi-Line - Other
 Product Name: 2025 Blue Cross VT Large Group Unit Cost Trend Filing
 Project Name/Number: /

Rate Information

Rate data applies to filing.

Filing Method:

Rate Change Type: %

Overall Percentage of Last Rate Revision: %

Effective Date of Last Rate Revision:

Filing Method of Last Filing:

SERFF Tracking Number of Last Filing:

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
BCBSVT	0.300%	%		2,446	\$47,210,141	%	%

SERFF Tracking #:

BCVT-134106868

State Tracking #:

Company Tracking #:

State: VermontGMCB Filing Company: BCBSVT
 TOI/Sub-TOI: ML02 Multi-Line - Other/ML02.000 Multi-Line - Other
 Product Name: 2025 Blue Cross VT Large Group Unit Cost Trend Filing
 Project Name/Number: /

Supporting Document Schedules

Satisfied - Item:	Actuarial Memorandum
Comments:	
Attachment(s):	2025 Blue Cross VT Large Group Unit Cost Trend Filing - Actuarial Memorandum.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Civil Union Rating Requirements
Bypass Reason:	Not required.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Filing Compliance Certification
Comments:	
Attachment(s):	2025 Blue Cross VT Large Group Unit Cost Trend Filing - Rate Filing Certification.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Third Party Filing Authorization
Bypass Reason:	Blue Cross and Blue Shield of Vermont does not use a Third Party to submit filings.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Plain Language Summary
Comments:	
Attachment(s):	2025 Blue Cross VT Large Group Unit Cost Trend Filing - Plain Language Summary.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Exhibits
Comments:	
Attachment(s):	2025 Blue Cross VT Large Group Unit Cost Trend Filing - Exhibits (REDACTED).pdf 2025 Blue Cross VT Large Group Unit Cost Trend Filing - Exhibits (REDACTED).xlsx
Item Status:	

SERFF Tracking #:

BCVT-134106868

State Tracking #:

Company Tracking #:

State: VermontGMCB
TOI/Sub-TOI: ML02 Multi-Line - Other/ML02.000 Multi-Line - Other
Product Name: 2025 Blue Cross VT Large Group Unit Cost Trend Filing
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Project Name/Number: /

Status Date:	
Satisfied - Item:	Cover Letter
Comments:	
Attachment(s):	2025 Blue Cross VT Large Group Unit Cost Trend Filing - Cover Letter.pdf
Item Status:	
Status Date:	
Satisfied - Item:	VT Rx Data Template
Comments:	
Attachment(s):	VT Rx Data Template - BCBSVT - 2025 Large Group Unit Cost.xlsx VT Rx Data Template - BCBSVT - 2025 Large Group Unit Cost.pdf
Item Status:	
Status Date:	

SERFF Tracking #:

BCVT-134106868

State Tracking #:

Company Tracking #:

State:	VermontGMCB	Filing Company:	BCBSVT
TOI/Sub-TOI:	ML02 Multi-Line - Other/ML02.000 Multi-Line - Other		
Product Name:	2025 Blue Cross VT Large Group Unit Cost Trend Filing		
Project Name/Number:	/		

Attachment 2025 Blue Cross VT Large Group Unit Cost Trend Filing - Exhibits (REDACTED).xlsx is not a PDF document and cannot be reproduced here.

Attachment VT Rx Data Template - BCBSVT - 2025 Large Group Unit Cost.xlsx is not a PDF document and cannot be reproduced here.

Blue Cross and Blue Shield of Vermont
2025 Large Group Unit Cost Trend Filing
Actuarial Memorandum

1. Purpose

Blue Cross and Blue Shield of Vermont (Blue Cross VT) performs large group rating on a case-by-case basis. We accomplish rating through a formulaic approach that blends recent group experience with a manual rate according to a credibility formula. We may adjust formula results for underwriting judgment and/or management decisions. This filing updates the medical unit cost trend factors that we will use for renewals beginning upon approval of this filing, most notably January 2025 renewals. Updates to the unit cost trend factors flow through to impact the manual rate as well—we also demonstrate this impact as part of this filing.

Once approved, we will use this filing for insured large group and grandfathered small group renewals (we will refer to them collectively as large groups for the remainder of the filing) until superseded by a subsequent filing. This filing will apply beginning with rates communicated within seven business days after the date of its approval and continuing until at most seven business days after the date of approval of the next Blue Cross VT Large Group Rating Program filing. The term “communicated,” for this purpose, means a written proposal delivered to a large group account.

2. Overview and Rate Impact

2.1. Overview

This filing includes the development of medical unit cost factors and illustrates a manual rate developed using the medical unit cost trend factors. The medical unit cost factors update those approved in the 2025 Blue Cross VT Large Group Rating Program Filing (BCVT-133971481). This filing also adds a factor for expected legislative impacts. The unit cost trend factors and legislative impact factors align with those filed in the 2025 Vermont QHP Market rate filings (BCVT-134096633 and BCVT-134091560). Blue Cross VT projects that this filing will affect 4,264 members (2,446 subscribers) in 33 groups. These totals are as of January 31, 2024.

2.2. Impact of Formula and Factor Changes

This total impact of changes in medical unit cost and legislative factors is 0.3 percent. The impact of the change in medical unit cost is -1.6 percent, and the impact of the legislative factors is 1.9 percent.

3. Medical Unit Cost Trend

We update the unit cost trend factors to use the assumptions in the 2025 Vermont QHP Market rate filings (BCVT-134096633 and BCVT-134091560).

During the year ending September 2023, about 57 percent of total medical claims dollars occurred at Vermont facilities and providers impacted by the hospital budget review process of the Green Mountain Care Board (GMCB). For hospitals under the jurisdiction of GMCB review, we start with the assumption that the GMCB will approve hospital budgets for October 1, 2024, and October 1, 2025 at the GMCB guidance maximum for commercial rate growth of 3.4 percent³.

Blue Cross and Blue Shield of Vermont
2025 Large Group Unit Cost Trend Filing
Actuarial Memorandum

The provider contracting and actuarial departments worked together to assess the impact these increases would have on contract negotiations specific to the networks used for the large group and AHP markets.

For other providers within the Blue Cross VT service area, we work with the Blue Cross VT contracting team to include expected contract changes.

For drugs dispensed in a facility or office, we use the outpatient or professional increase for each facility or provider group to calculate an estimated unit cost trend.

Finally, we derive unit cost increases for providers outside the Blue Cross and Blue Shield of Vermont service area from the Fall 2023 Blue Trend Survey, which is a proprietary and confidential dissemination of the BlueCross BlueShield Association.

The chart below summarizes the results of the analysis:

Blue Cross VT Managed Contact				
Annual Reimbursement Changes due to Budget Increases and Contracting Season	Percent of Total Allowed Medical Claims	Cost Trend from 2023 to 2024	Cost Trend from 2024 to 2025	Total Annual Cost Trend
Vermont facilities and providers impacted by GMCB's Hospital Budget Review	57.3%	5.2%	3.5%	4.4%
Other facilities and providers	42.7%	5.5%	5.1%	5.3%
Total	100.0%	5.3%	4.1%	4.8%

Blue Cross VT Non-Managed Contact				
Annual Reimbursement Changes due to Budget Increases and Contracting Season	Percent of Total Allowed Medical Claims	Cost Trend from 2023 to 2024	Cost Trend from 2024 to 2025	Total Annual Cost Trend
Vermont facilities and providers impacted by GMCB's Hospital Budget Review	57.3%	5.1%	3.5%	4.4%
Other facilities and providers	42.7%	5.5%	5.1%	5.3%
Total	100.0%	5.3%	4.1%	4.8%

Pages 1 through 5 of Exhibit 2A show the details of the cost increases by contract and type of claim.

3.1. Monthly Trend Factors

We use the monthly trend factors from the 2025 Large Group Filing (BCVT-133971481) as approved by the GMCB on May 10, 2024, and replace the unit cost trend factors with those established in section 3.

Blue Cross and Blue Shield of Vermont
2025 Large Group Unit Cost Trend Filing
Actuarial Memorandum

3.2. Other Adjustments

H.766, which the Vermont legislature recently passed, is expected to materially change allowable payment integrity programs, prior authorizations, and step therapy. We identified key components of the legislation that would likely affect medical and pharmacy claims. On a program-by-program basis, we identified the expected impact of the legislation, either via an internal analysis or information provided by an external vendor. To estimate the impact of the legislation, we increase medical and pharmacy claims by the expected loss in savings.

Calculation of Impact of Reduction in Payment Integrity, Step Therapy and Prior Authorizations			
		Medical	Pharmacy
CY 2023 Allowed Charges ¹	A	\$56,282,594	\$14,199,099
Estimated Reduction in Savings	B	\$865,679	\$504,150
Adjusted CY 2023 Charges	C = A + B	\$57,148,274	\$14,703,249
Experience Adjustment Factor	D = C / A	1.0154	1.0355

We expect this legislation will take effect for claims processed on or after January 1, 2025. If the experience or projection periods contain a mix of pre- and post-2025 months, we will pro-rate the adjustment factor. We apply the factor to both manual and experience claims.

4. Manual Rate

We have updated the manual rate for actives from the 2025 Blue Cross VT Large Group Rating Program Filing only to apply the trends as described in section 3.

Calculation of the Manual Rate (Actives)				
Claim Type		Medical	Pharmacy	Total
2025 Manual Rate	A	\$660.11	\$157.13	\$817.24
2025 Paid Trend Factor	B	1.2174	N/A	
Updated Paid Trend Factor	C	1.1935		
Updated Manual Rate	D = A x (C/B)	\$647.17	\$157.13	\$804.30

5. Medical Loss Ratio Projection

We use the factors and formula in this filing to project a Medical Loss Ratio (MLR) for 2025. Using the manual rate as a proxy for projected claims, we project a 2025 MLR of 89.8 percent. The credibility-adjusted MLR for Large Group was 89.5 percent in 2021 and 92.5 percent in 2022. Exhibit 4C provides the development of the projected MLR. The calculations represent estimates assuming that all pricing assumptions hold true, and assuming no change from 2022 values for various quantities (e.g., HCO, commissions).

¹ Fully insured large group and association health plan claims, paid through March 31, 2024.

Blue Cross and Blue Shield of Vermont
2025 Large Group Unit Cost Trend Filing
Actuarial Memorandum

6. Act 193 Information

This information is included template filed in SERFF with this filing (*VT Rx Data Template - BCBSVT - 2025 Large Group Unit Cost.xlsx*). The data in the template is based on actual and projected experience for the groups included in the manual rate.

7. Actuarial Opinion

I, Martine Lemieux, Chief Actuary, am an employee of Blue Cross Blue Shield of Vermont and a member of the American Academy of Actuaries. I have experience in the area of insured health care programs.

Section 8 lists applicable limitations and disclosures.

It is my opinion that the factors presented in this filing are reasonable and have been prepared in accordance with applicable Actuarial Standards of Practice. The factors will produce premium rates that are reasonable in relation to the benefits provided and will not be excessive inadequate or unfairly discriminatory.

I am a Fellow of the Society of Actuaries and a Member of the American Academy of Actuaries, and I meet the Academy's Qualification Standards to render this opinion.



Martine Lemieux, F.S.A., M.A.A.A.

May 20, 2024

Blue Cross and Blue Shield of Vermont
2025 Large Group Unit Cost Trend Filing
Actuarial Memorandum

8. Disclosures

Information Date: The analysis provided in the report is based on information as known on May 13, 2024.

Scope: The purpose of this filing is to update the trend factors and manual rate that will be used for renewals of Blue Cross and Blue Shield of Vermont large group plans. This filing is not intended to be used for other purposes.

Intended Users: This material has been prepared for the GMCB. Blue Cross VT understands that this memorandum and accompanying exhibits will be posted publicly.

Uncertainty or Risk: Future events will affect the results presented in the memorandum.

Per GMCB guidance published on March 29, 2024² Vermont hospital budgets submissions are due July 1, 2024. The hospital budget submissions will be different from the assumptions included in this filing and may call into question the adequacy or excessiveness of the premium rates discussed herein.

H.766 has not been enacted into law. If the final bill varies from the current version, or if the bill ultimately does not become law, it may affect the adequacy or excessiveness of the premium rates discussed herein. Blue Cross VT continues to evaluate the potential impacts of the bill. As such, the estimates included herein are likely to change based on further understanding of the impact of the bill.

Reliance on Other Sources for Data and Other Information:

This analysis relies upon data from the Blue Cross VT data warehouse. I have reviewed the data for reasonableness, but no audit was performed. This analysis relies upon several sources of information that are cited as footnotes at their respective references. If any of the sources I have relied upon are incorrect or inaccurate, it may affect the accuracy of the results presented in the report.

The H.766 impact estimates rely on clinical and legal internal analyses, internal reporting, vendor reporting, and vendor analyses. If any of the sources I have relied upon are incorrect or inaccurate, it may affect the accuracy of the results presented in the report.

Subsequent Events: Subsequent events may affect the adequacy or excessiveness of the rates presented herein. The degree to which future events may materially change the adequacy or excessiveness of the rates is unknown.

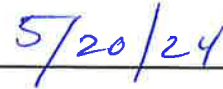
2

<https://gmcboard.vermont.gov/sites/gmcb/files/documents/FY25%20HBR%20Guidance%20FINAL%2003292024.pdf>

I HEREBY CERTIFY that I have reviewed the applicable filing requirements for this filing, and, to the best of my knowledge, the filing complies with all applicable statutory and regulatory provisions for the state of Vermont



Ruth Greene
Vice President, Treasurer & Chief Financial Officer



Date

**BLUE CROSS BLUE SHIELD OF VERMONT
2025 LARGE GROUP UNIT COST TREND FILING
PLAIN LANGUAGE SUMMARY**

Our commitment. For more than 40 years, our nonprofit health plan has had a simple, powerful mission: make healthcare work better for all Vermonters.

Rate request summary. Blue Cross and Blue Shield of Vermont (Blue Cross VT) calculates large group premiums on a case-by-case basis. The rating process uses a formula that blends recent claims experience for each large group with a manual rate. This filing updates the medical trend factors and manual rate that will be used to create large group renewals.

- There are an estimated 2,400 contracts (4,300 members) currently enrolled in one of 33 Blue Cross VT large group plans that will be affected by this filing.
- The factors in this filing will increase premium 0.3 percent for a group that is manually-rated using none of its own experience data.

Reasons for the change in factors. The only changes to this filing are to incorporate the expected increases for Vermont and New Hampshire hospitals in the next round of cost increases and to update how historical utilization trends are applied. Specifically:

- Blue Cross VT is proposing a paid trend of 8.2 percent for medical claims, which includes hospital unit cost increases and anticipated changes in the use of services. The lower paid trend factors decrease premiums of 1.6 percent.
- Vermont Legislative policy decision add to the rising cost of health care. The Vermont Legislature is limiting our ability to contains the rising costs of health care with H.766, increasing the premiums by 1.9 percent.

Our experience in this market. Over the past five years, Blue Cross VT has lost \$19 million on this line of business. Blue Cross VT has not included any additional contribution to member reserves to offset this loss.

Public comment. Members of the public can submit comments to the Green Mountain Care Board about this rate request. For more information, please visit the Board's Public Comment page: https://ratereview.vermont.gov/public_comment

BLUE CROSS AND BLUE SHIELD OF VERMONT
2025 LARGE GROUP UNIT COST TREND FILING

TABLE OF CONTENTS

Exhibit 2	Trend
2A	Medical Unit Cost Trend Calculation
2G	Monthly Trend Factors
Exhibit 4	Manual Rate
4A	Example of Manual Rate Adjustment
4C	Projected MLR Calculation

MEDICAL TREND DEVELOPMENT
COST TREND

Inpatient	VHP			IND			TVHP		
	GMCB	Other	Total	GMCB	Other	Total	GMCB	Other	Total
YE 202309	\$22,221,067	\$15,771,876	\$37,992,943	\$22,221,067	\$15,771,876	\$37,992,943	\$22,221,067	\$15,771,876	\$37,992,943
CY 2024	\$23,572,031	\$16,932,118	\$40,504,149	\$23,424,280	\$16,932,118	\$40,356,398	\$23,571,377	\$16,932,118	\$40,503,495
CY 2025	\$24,377,090	\$17,768,121	\$42,145,211	\$24,224,316	\$17,768,121	\$41,992,437	\$24,376,414	\$17,768,121	\$42,144,535
Trend Y1/Y0	4.8%	5.8%	5.2%	4.3%	5.8%	4.9%	4.8%	5.8%	5.2%
Trend Y2/Y1	3.4%	4.9%	4.1%	3.4%	4.9%	4.1%	3.4%	4.9%	4.1%
Annual Cost Trend	4.2%	4.7%	4.7%	3.9%	5.4%	4.5%	4.2%	5.4%	4.7%

Outpatient	VHP			IND			TVHP		
	GMCB	Other	Total	GMCB	Other	Total	GMCB	Other	Total
YE 202309	\$70,639,396	\$25,412,899	\$96,052,295	\$70,639,396	\$25,412,899	\$96,052,295	\$70,639,396	\$25,412,899	\$96,052,295
CY 2024	\$75,900,538	\$27,224,713	\$103,125,250	\$75,914,187	\$27,224,713	\$103,138,900	\$75,898,698	\$27,224,713	\$103,123,410
CY 2025	\$78,542,251	\$28,538,206	\$107,080,457	\$78,556,364	\$28,538,206	\$107,094,570	\$78,540,348	\$28,538,206	\$107,078,554
Trend Y1/Y0	5.9%	5.6%	5.8%	5.9%	5.6%	5.8%	5.9%	5.6%	5.8%
Trend Y2/Y1	3.5%	4.8%	3.8%	3.5%	4.8%	3.8%	3.5%	4.8%	3.8%
Annual Cost Trend	4.8%	5.3%	4.9%	4.8%	5.3%	4.9%	4.8%	5.3%	4.9%

Pharmaceuticals	VHP			IND			TVHP		
	GMCB	Other	Total	GMCB	Other	Total	GMCB	Other	Total
YE 202309	\$7,451,818	\$6,829,522	\$14,281,340	\$7,451,818	\$6,829,522	\$14,281,340	\$7,451,818	\$6,829,522	\$14,281,340
CY 2024	\$7,964,646	\$7,368,087	\$15,332,734	\$7,964,646	\$7,368,087	\$15,332,734	\$7,963,730	\$7,368,087	\$15,331,817
CY 2025	\$8,236,275	\$7,764,007	\$16,000,282	\$8,236,275	\$7,764,007	\$16,000,282	\$8,235,328	\$7,764,007	\$15,999,335
Trend Y1/Y0	5.5%	6.2%	5.8%	5.5%	6.2%	5.8%	5.4%	6.2%	5.8%
Trend Y2/Y1	3.4%	5.4%	4.4%	3.4%	5.4%	4.4%	3.4%	5.4%	4.4%
Annual Cost Trend	4.5%	5.9%	5.2%	4.5%	5.9%	5.2%	4.5%	5.9%	5.2%

Professional	VHP			IND			TVHP		
	GMCB	Other	Total	GMCB	Other	Total	GMCB	Other	Total
YE 202309	\$18,238,914	\$40,399,588	\$58,638,501	\$18,238,914	\$40,399,588	\$58,638,501	\$18,238,914	\$40,399,588	\$58,638,501
CY 2024	\$18,897,806	\$42,984,234	\$61,882,039	\$18,897,806	\$42,984,234	\$61,882,039	\$18,897,806	\$42,984,234	\$61,882,039
CY 2025	\$19,540,331	\$45,236,064	\$64,776,395	\$19,540,331	\$45,236,064	\$64,776,395	\$19,540,331	\$45,236,064	\$64,776,395
Trend Y1/Y0	2.9%	5.1%	4.4%	2.9%	5.1%	4.4%	2.9%	5.1%	4.4%
Trend Y2/Y1	3.4%	5.2%	4.7%	3.4%	5.2%	4.7%	3.4%	5.2%	4.7%
Annual Cost Trend	3.1%	5.1%	4.5%	3.1%	5.1%	4.5%	3.1%	5.1%	4.5%

Total	VHP			IND			TVHP		
	GMCB	Other	Total	GMCB	Other	Total	GMCB	Other	Total
YE 202309	\$118,551,194	\$88,413,885	\$206,965,079	\$118,551,194	\$88,413,885	\$206,965,079	\$118,551,194	\$88,413,885	\$206,965,079
CY 2024	\$126,335,021	\$94,509,151	\$220,844,172	\$126,200,920	\$94,509,151	\$220,710,071	\$126,331,611	\$94,509,151	\$220,840,762
CY 2025	\$130,695,948	\$99,306,398	\$230,002,345	\$130,557,287	\$99,306,398	\$229,863,684	\$130,692,422	\$99,306,398	\$229,998,819
Trend Y1/Y0	5.2%	5.5%	5.3%	5.1%	5.5%	5.3%	5.2%	5.5%	5.3%
Trend Y2/Y1	3.5%	5.1%	4.1%	3.5%	5.1%	4.1%	3.5%	5.1%	4.1%
Annual Cost Trend	4.4%	5.3%	4.8%	4.4%	5.3%	4.8%	4.4%	5.3%	4.8%

MONTHLY TREND FACTOR DEVELOPMENT

		Utilization	Unit Cost			Medical - Blue			
Month	Members	Factor	VHP	IND	TVHP	Cross VT Managed	Cross VT Non-Managed	Medical - TVHP	Managed
Oct-19	22,259								
Nov-19	22,443								
Dec-19	22,416								
Jan-20	22,029								
Feb-20	21,916								
Mar-20	21,891								
Apr-20	21,746								
May-20	21,688								
Jun-20	21,579								
Jul-20	21,514								
Sep-20	21,553	1.00	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
Oct-20	21,561	0.88	1.0143	1.0144	1.0144	0.8901	0.8902	0.8901	0.8901
Nov-20	21,626	0.88	1.0151	1.0152	1.0151	0.8891	0.8892	0.8891	0.8891
Dec-20	21,615	0.96	1.0158	1.0159	1.0158	0.9549	0.9552	0.9570	0.9570
Jan-21	22,145	1.06	1.0367	1.0381	1.0368	1.0102	1.0107	1.0103	1.0103
Feb-21	22,043	1.02	1.0374	1.0387	1.0374	1.0616	1.0630	1.0616	1.0616
Mar-21	21,999	1.01	1.0380	1.0394	1.0380	1.0492	1.0506	1.0493	1.0493
Apr-21	22,006	1.05	1.0386	1.0400	1.0387	1.0933	1.0948	1.0934	1.0934
May-21	22,027	1.18	1.0446	1.0460	1.0446	1.2316	1.2333	1.2317	1.2317
Jun-21	22,092	0.97	1.0452	1.0466	1.0453	1.0140	1.0154	1.0141	1.0141
Jul-21	22,080	0.94	1.0507	1.0543	1.0530	0.9900	0.9935	0.9922	0.9922
Aug-21	22,011	0.96	1.0513	1.0550	1.0536	1.0047	1.0083	1.0069	1.0069
Sep-21	22,022	1.07	1.0519	1.0556	1.0543	1.1230	1.1269	1.1255	1.1255
Oct-21	21,960	1.03	1.0597	1.0634	1.0621	1.0900	1.0938	1.0924	1.0924
Nov-21	21,832	1.17	1.0604	1.0641	1.0627	1.2426	1.2469	1.2453	1.2453
Dec-21	21,988	0.90	1.0647	1.0683	1.0631	0.9549	0.9582	0.9570	0.9570
Jan-22	25,937	0.88	1.0809	1.0858	1.0833	0.9536	0.9579	0.9557	0.9557
Feb-22	26,010	0.96	1.0818	1.0867	1.0842	1.0416	1.0464	1.0439	1.0439
Mar-22	26,089	1.04	1.0822	1.0872	1.0846	1.1252	1.1303	1.1277	1.1277
Apr-22	26,124	1.01	1.0832	1.0881	1.0856	1.0916	1.0966	1.0941	1.0941
May-22	26,146	1.02	1.0837	1.0886	1.0860	1.1071	1.1122	1.1096	1.1096
Jun-22	26,231	1.00	1.0959	1.1009	1.0983	1.0960	1.1010	1.0984	1.0984
Jul-22	26,245	1.11	1.1109	1.1160	1.1133	1.2301	1.2358	1.2329	1.2329
Aug-22	26,214	0.99	1.1113	1.1164	1.1138	1.1052	1.1102	1.1076	1.1076
Sep-22	26,128	1.05	1.1118	1.1169	1.1143	1.1672	1.1726	1.1698	1.1698
Oct-22	26,174	1.00	1.1417	1.1469	1.1442	1.1413	1.1465	1.1438	1.1438
Nov-22	26,242	1.15	1.1426	1.1478	1.1451	1.3089	1.3148	1.3118	1.3118
Dec-22	26,221	1.08	1.1435	1.1487	1.1460	1.2398	1.2454	1.2425	1.2425
Jan-23	31,227	1.02	1.1975	1.2029	1.2003	1.1460	1.1511	1.1484	1.1484
Feb-23	31,281	1.02	1.1981	1.2036	1.2007	1.2251	1.2307	1.2278	1.2278
Mar-23	31,341	1.07	1.1988	1.2042	1.2014	1.2822	1.2879	1.2849	1.2849
Apr-23	31,308	1.06	1.1995	1.2049	1.2021	1.2666	1.2723	1.2693	1.2693
May-23	31,363	1.09	1.2001	1.2056	1.2027	1.2086	1.2144	1.2114	1.2114
Jun-23	31,559	1.01	1.2008	1.2062	1.2034	1.2090	1.2145	1.2116	1.2116
Jul-23	31,810	1.05	1.2166	1.2221	1.2193	1.2716	1.2774	1.2744	1.2744
Aug-23	31,921	1.02	1.2173	1.2228	1.2199	1.2470	1.2526	1.2497	1.2497
Sep-23	32,094	1.01	1.2180	1.2235	1.2206	1.2339	1.2395	1.2366	1.2366
Oct-23	30,213	1.04	1.2365	1.2422	1.2393	1.2916	1.2976	1.2946	1.2946
Nov-23	30,213	1.05	1.2372	1.2429	1.2400	1.3031	1.3091	1.3061	1.3061
Dec-23	30,213	1.06	1.2379	1.2436	1.2407	1.3070	1.3130	1.3100	1.3100
Jan-24	30,213	1.06	1.2554	1.2603	1.2581	1.3260	1.3312	1.3289	1.3289
Feb-24	30,213	1.06	1.2562	1.2611	1.2589	1.3298	1.3350	1.3327	1.3327
Mar-24	30,213	1.06	1.2571	1.2620	1.2598	1.3337	1.3390	1.3366	1.3366
Apr-24	30,213	1.06	1.2577	1.2626	1.2604	1.3374	1.3426	1.3403	1.3403
May-24	30,213	1.07	1.2593	1.2642	1.2620	1.3421	1.3473	1.3450	1.3450
Jun-24	30,213	1.07	1.2598	1.2647	1.2625	1.3456	1.3508	1.3485	1.3485
Jul-24	30,213	1.07	1.2716	1.2766	1.2743	1.3611	1.3664	1.3640	1.3640
Aug-24	30,213	1.07	1.2721	1.2771	1.2748	1.3646	1.3700	1.3676	1.3676
Sep-24	30,213	1.08	1.2726	1.2776	1.2754	1.3682	1.3736	1.3711	1.3711
Oct-24	30,213	1.07	1.2896	1.2946	1.2924	1.3741	1.3795	1.3771	1.3771
Nov-24	30,213	1.07	1.2901	1.2952	1.2929	1.3859	1.3914	1.3889	1.3889
Dec-24	30,213	1.08	1.2906	1.2957	1.2934	1.3898	1.3953	1.3928	1.3928
Jan-25	30,213	1.08	1.3071	1.3122	1.3099	1.4082	1.4137	1.4112	1.4112
Feb-25	30,213	1.08	1.3078	1.3129	1.3106	1.4120	1.4176	1.4151	1.4151
Mar-25	30,213	1.08	1.3083	1.3134	1.3111	1.4157	1.4213	1.4188	1.4188
Apr-25	30,213	1.08	1.3088	1.3139	1.3116	1.4195	1.4251	1.4225	1.4225
May-25	30,213	1.09	1.3093	1.3145	1.3122	1.4232	1.4288	1.4263	1.4263
Jun-25	30,213	1.09	1.3099	1.3150	1.3127	1.4269	1.4325	1.4300	1.4300
Jul-25	30,213	1.09	1.3294	1.3346	1.3323	1.4513	1.4570	1.4544	1.4544
Aug-25	30,213	1.09	1.3299	1.3351	1.3328	1.4550	1.4608	1.4582	1.4582
Sep-25	30,213	1.10	1.3304	1.3357	1.3333	1.4588	1.4645	1.4620	1.4620
Oct-25	30,213	1.09	1.3401	1.3454	1.3430	1.4567	1.4624	1.4598	1.4598
Nov-25	30,213	1.10	1.3407	1.3459	1.3436	1.4690	1.4748	1.4722	1.4722
Dec-25	30,213	1.10	1.3412	1.3465	1.3441	1.4731	1.4789	1.4763	1.4763
Jan-26	30,213	1.10	1.3583	1.3636	1.3612	1.4926	1.4984	1.4958	1.4958
Feb-26	30,213	1.10	1.3588	1.3642	1.3618	1.4965	1.5023	1.4997	1.4997
Mar-26	30,213	1.10	1.3594	1.3647	1.3623	1.5004	1.5063	1.5036	1.5036
Apr-26	30,213	1.11	1.3599	1.3652	1.3628	1.5043	1.5102	1.5076	1.5076
May-26	30,213	1.11	1.3604	1.3658	1.3634	1.5083	1.5142	1.5115	1.5115
Jun-26	30,213	1.11	1.3610	1.3663	1.3639	1.5121	1.5181	1.5154	1.5154
Jul-26	30,213	1.11	1.3745	1.3799	1.3774	1.5304	1.5364	1.5337	1.5337

YE 2023/2024 Factor	1.24	1.25	1.24
YE 2025/24 Factor	1.44	1.44	1.44
Allowed Trend Factor	1.606	1.599	1.606
Annual Trend	6.8%	6.8%	6.8%

Example of Manual Rate Adjustment

Manual Rate	\$804.30
Average Age/Gender Factor	1.000
Average Industry Factor	1.000
Legislative Experience Adjustment Factor	1.019
Projection Period	1/1/2025
Trend Factor	8.60%
Benefit Normalization Factor	0.9885

Group Information	Active	Medicare Primary
Age/Gender Factor	0.940	1.030
Industry Factor	0.965	1.000
Projection Period	7/1/2025	

Contract Conversion	Contract Distribution	Members	Tier Factor	"Contract Tiers"
Single	25	25	1	25
Two-Person	25	50	2.000	50
Family	50	197	2.782	139.09
	100	272		214.09

		Active	Medicare Primary
Manual Rate	A	\$804.30	\$547.95
Adjustment for Age/Gender	B = 0.94 / 1	0.9400	1.0300
Adjustment for Industry	C = 0.965 / 1	0.9650	1.0000
Adjustment for Trend	D = 8.6% for 6 months	1.0421	1.0208
Contract Conversion Factor	E = 214.09 / 272	1.2705	1.0000
Benefit Normalization Factor	F	0.9885	N/A
Adjustment for Legislation	G	1.0193	N/A
Adjusted Manual Rate	H = A x B x C x D x E x F x G	\$973.30	\$576.15

PROJECTED 2025 MLR CALCULATION

Blue Cross VT

(A)	Manual Rate	\$819.83	Exhibit 4A
(B)	Rebates	\$43.23	2025 Large Group Rating Program Filing
(C)	Estimated HCQ	\$1.97	2022 MLR Filing, untrended
(D)	State Mandates and Assessments	\$16.60	Calculation as described on Exhibit 1C, using latest actual PMPM as needed
(E)	MLR Numerator	\$795.17	= (A) – (B) + (C) + (D)
(F)	Projected Claims	\$793.20	= (A) – (B) + (D)
(G)	Net Cost of Reinsurance	\$3.08	2025 Large Group Rating Program Filing
(H)	Administrative Charge	\$55.03	2025 Large Group Rating Program Filing
(I)	GMCB Billbacks	\$2.08	2025 Large Group Rating Program Filing
(J)	Patient-Centered Outcomes Research Institute	\$0.31	2025 Large Group Rating Program Filing
(K)	Subtotal	\$853.70	= (F) + (G) + (H) + (I) + (J)
(L)	Total Premium	\$885.70	= (K) / (1 - 0.005 - 0.03)
(M)	Commissions	\$5.43	= (L) x 0.5% (from 2022 MLR filing)
(N)	Contribution to Reserve	\$26.57	= (L) x 3.0% (from Actuarial Memorandum, Section 6.7)
(O)	MLR Denominator	\$885.70	= (L)
(P)	MLR	89.8%	= (E) / (O)

May 20, 2024

Laura Beliveau
Staff Attorney
Green Mountain Care Board
144 State Street
Montpelier, Vermont 05602

**Subject: Blue Cross and Blue Shield of Vermont - NAIC # 53295
2025 Large Group Unit Cost Trend Filing**

Dear Ms. Beliveau:

Attached for the Green Mountain Care Board's review and approval is Blue Cross and Blue Shield of Vermont's 2025 Large Group Unit Cost Trend Filing. This filing updates unit cost trend factors to align with those filed in the 2025 Vermont QHP Market rate filings in an effort to establish rates that are aligned with hospital budget requests that will be submitted on July 1, 2024. This filing is intended to allow for actual hospital budget submissions to be incorporated into large group rates in the same manner that they will be incorporated into QHP rates.

Please let me know if we can answer any questions or provide further information during your review.

Sincerely,



Ruth Greene

cc: Martine Lemieux/Blue Cross VT

Please provide Company specific inputs for any cells shaded in blue.

Field Name	Description	Input
Insurance Company Name	Company Name	Blue Cross and Blue Shield of Vermont
HIOS ID	5 digit HIOS ID (if applicable)	13627
SERFF Filing Number	Filing number assigned by SERFF	BCVT-134106868
Market	Market type: Individual, Small Group, Large Group etc.	Large Group
Product Name	Product name entered in SERFF	2025 Blue Cross VT Large Group Unit Cost Trend Filing
Period Prior to Experience Period Start Date	Beginning date for the 12 month period preceding the base period experience (MM/DD/YYYY)	10/1/2021
Period Prior to Experience Period End Date	End date for the 12 month period preceding the base period experience (MM/DD/YYYY)	9/30/2022
Experience Period Start Date	Beginning date for base period experience (MM/DD/YYYY)	10/1/2022
Experience Period End Date	End date for base period experience (MM/DD/YYYY)	9/30/2023
Projection Period Start Date	Beginning effective date for proposed rates (MM/DD/YYYY)	1/1/2025
Projection Period End Date	Ending effective date for proposed rates (MM/DD/YYYY)	12/31/2025

Insurance Company Name	Blue Cross and Blue Shield of Vermont
HIOS ID	13627
SERFF Filing Number	BCVT-134106868
Market	Large Group
Product Name	2025 Blue Cross VT Large Group Unit Cost Trend Filing

Prescription Drug Costs as Percentage of Premium¹

Enter PMPM drug costs incurred during the below periods for the following prescription drug tiers **dispensed only at a pharmacy, network pharmacy, or mail-order pharmacy**. Additionally, enter the total premium PMPM and member months for each period.

Gross of Member Cost Sharing and Rebates (Allowed Basis)						
	Experience Period -1		Experience Period		Projection Period	
	10/01/2021-09/30/2022		10/01/2022-09/30/2023		01/01/2025-12/31/2025	
	Retail	Mail	Retail	Mail	Retail	Mail
(III) Non-Specialty Generic PMPM	\$13.32	\$0.62	\$14.12	\$0.57	\$15.15	\$0.61
(III) Non-Specialty Brand PMPM	\$57.20	\$2.95	\$67.40	\$3.51	\$80.69	\$4.21
Specialty PMPM	\$41.40	\$8.30	\$45.68	\$12.84	\$61.37	\$17.25
(B) Medical Rx PMPM	\$96.83		\$94.18		\$115.25	
Total (Medical and Rx) Premium PMPM	\$619.03		\$664.25		\$877.94	
(I) Non-Specialty Generic % of Premium	2.15%	0.10%	2.13%	0.09%	1.73%	0.07%
(I) Non-Specialty Brand % of Premium	9.24%	0.48%	10.15%	0.53%	9.19%	0.48%
Specialty Total % of Premium	6.69%	1.34%	6.88%	1.93%	6.99%	1.96%
(B) Medical Rx PMPM	15.64%		14.18%		13.13%	
(II) Non-Specialty Generic % of Premium Change vs Prior Period			-0.03%	-0.01%	-0.40%	-0.02%
(II) Non-Specialty Brand % of Premium Change vs Prior Period			0.91%	0.05%	-0.96%	-0.05%
Specialty % of Premium Change vs Prior Period			0.19%	0.59%	0.11%	0.03%
(B) Medical Rx % of Premium Change vs Prior Period			-1.46%		-1.05%	

Net of Member Cost Sharing (Paid Amount), Gross of Rebates						
	Experience Period -1		Experience Period		Projection Period	
	10/01/2021-09/30/2022		10/01/2022-09/30/2023		01/01/2025-12/31/2025	
	Retail	Mail	Retail	Mail	Retail	Mail
(III) Non-Specialty Generic PMPM	\$8.23	\$0.46	\$9.03	\$0.43	\$9.81	\$0.47
(III) Non-Specialty Brand PMPM	\$51.88	\$2.82	\$60.40	\$3.27	\$73.22	\$3.96
Specialty PMPM	\$40.25	\$7.89	\$44.45	\$12.56	\$60.47	\$17.09
(B) Medical Rx PMPM	\$94.24		\$91.76		\$115.61	
Total Medical and Rx Premium PMPM	\$619.03		\$664.25		\$877.94	
(I) Non-Specialty Generic % of Premium	1.33%	0.07%	1.36%	0.06%	1.12%	0.05%
(I) Non-Specialty Brand % of Premium	8.38%	0.46%	9.09%	0.49%	8.34%	0.45%
Specialty Total % of Premium	6.50%	1.27%	6.69%	1.89%	6.89%	1.95%
(B) Medical Rx PMPM	15.22%		13.81%		13.17%	
(II) Non-Specialty Generic % of Premium Change vs Prior Period			0.03%	-0.01%	-0.24%	-0.01%
(II) Non-Specialty Brand % of Premium Change vs Prior Period			0.71%	0.04%	-0.75%	-0.04%
Specialty % of Premium Change vs Prior Period			0.19%	0.62%	0.20%	0.06%
(B) Medical Rx % of Premium Change vs Prior Period			-1.41%		-0.65%	

¹ Vermont Statute 8 V.S.A. § 4062

(2)(A) In conjunction with a rate filing required by subsection (a) of this section, an insurer shall disclose to the Board:

(i) for all covered prescription drugs, including generic drugs, brand-name drugs excluding specialty drugs, and specialty drugs dispensed at a pharmacy, network pharmacy, or mail-order pharmacy for outpatient use:

(I) the percentage of the premium rate attributable to prescription drug costs for the prior year for each category of prescription drugs;

(II) the year-over-year increase or decrease, expressed as a percentage, in per-member, per-month total health plan spending on each category of prescription drugs; and

(III) the year-over-year increase or decrease in per-member, per-month costs for prescription drugs compared to other components of the premium rate.

(B) The insurer shall provide, if available, the percentage of the premium rate attributable to prescription drugs administered by a health care provider in an outpatient setting that are part of the medical benefit as separate from the pharmacy benefit.

Insurance Company Name	Blue Cross and Blue Shield of Vermont
HIOS ID	13627
SERFF Filing Number	BCVT-134106868
Market	Large Group
Product Name	2025 Blue Cross VT Large Group Unit Cost Trend Filing

Vermont Statute 8 V.S.A. § 4062

(2)(A) In conjunction with a rate filing required by subsection (a) of this section, an insurer shall disclose to the Board:
(ii) the specialty tier formulary list.

Specialty Formulary List
Provide the specialty formulary information listed below.

Drug Name	Drug Tier	Formulary Name (if multiple formularies are used)
ABECMA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ABECMA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ABIRATERONE	ORAL-CHEMO	Blue Cross Formulary
ABIRATERONE	ORAL-CHEMO	National Performance Formulary
ABRAXANE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ABRAXANE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ACTEMRA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ACTEMRA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ACTHAR	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ACTHAR	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ACTIMMUNE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ACTIMMUNE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ADAKVEO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ADAKVEO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ADBRY	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ADBRY	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ADCETRIS	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ADCETRIS	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ADEMPAS	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ADEMPAS	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ADRIAMYCIN	GENERIC-SPECIALTY	Blue Cross Formulary
ADRIAMYCIN	GENERIC-SPECIALTY	National Performance Formulary
ADVATE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ADVATE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ADYNOVATE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ADYNOVATE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
AFSTYLA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
AFSTYLA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ALDURAZYME	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ALDURAZYME	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ALECENSA	ORAL-CHEMO	Blue Cross Formulary
ALECENSA	ORAL-CHEMO	National Performance Formulary
ALFERON	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ALFERON	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ALIMTA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ALIMTA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ALIQOPA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ALIQOPA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ALKERAN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ALKERAN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ALKERAN	ORAL-CHEMO	Blue Cross Formulary
ALKERAN	ORAL-CHEMO	National Performance Formulary
ALPHANATE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ALPHANATE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ALPHANINE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ALPHANINE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ALPROLIX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ALPROLIX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ALTUVIIIO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ALTUVIIIO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ALUNBRIG	ORAL-CHEMO	Blue Cross Formulary
ALUNBRIG	ORAL-CHEMO	National Performance Formulary
ALYMSYS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ALYQ	GENERIC-SPECIALTY	Blue Cross Formulary
ALYQ	GENERIC-SPECIALTY	National Performance Formulary
AMBRISENTAN	GENERIC-SPECIALTY	Blue Cross Formulary
AMBRISENTAN	GENERIC-SPECIALTY	National Performance Formulary
AMJEVITA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
AMJEVITA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary

AMJEVITA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
AMONDYS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
AMPYRA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
AMVUTTRA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
AMVUTTRA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
APOKYN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
APOKYN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
APOMORPHINE	GENERIC-SPECIALTY	Blue Cross Formulary
APOMORPHINE	GENERIC-SPECIALTY	National Performance Formulary
ARALAST	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ARALAST	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ARANESP	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ARANESP	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ARCALYST	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ARCALYST	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ARIKAYCE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ARIKAYCE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ARIXTRA	TIER 03	Blue Cross Formulary
ARIXTRA	TIER 03	National Performance Formulary
ARRANON	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ARRANON	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ARSENIC	GENERIC-SPECIALTY	Blue Cross Formulary
ARSENIC	GENERIC-SPECIALTY	National Performance Formulary
ARZERRA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ARZERRA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ASCENIV	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ASPARLAS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ASPARLAS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ASTAGRAF	TIER 03	Blue Cross Formulary
ASTAGRAF	TIER 03	National Performance Formulary
AUSTEDO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
AUSTEDO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
AVASTIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
AVASTIN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
AVONEX	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
AVONEX	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
AVSOLA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
AVSOLA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
AYVAKIT	ORAL-CHEMO	Blue Cross Formulary
AYVAKIT	ORAL-CHEMO	National Performance Formulary
AZACITIDINE	GENERIC-SPECIALTY	Blue Cross Formulary
AZACITIDINE	GENERIC-SPECIALTY	National Performance Formulary
BAFIERTAM	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BAFIERTAM	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BALVERSA	ORAL-CHEMO	Blue Cross Formulary
BALVERSA	ORAL-CHEMO	National Performance Formulary
BARACLUDE	TIER 03	Blue Cross Formulary
BARACLUDE	TIER 03	National Performance Formulary
BAVENCIO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BAVENCIO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BELEODAQ	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BELEODAQ	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BELRAPZO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BENDAMUSTINE	GENERIC-SPECIALTY	Blue Cross Formulary
BENDAMUSTINE	GENERIC-SPECIALTY	National Performance Formulary
BENDAMUSTINE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BENDEKA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BENDEKA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BENEFIX	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BENEFIX	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BENLYSTA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BENLYSTA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BEOVU	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BERINERT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BERINERT	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BESPONSA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BESPONSA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BESREMI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BETAINE	GENERIC-SPECIALTY	Blue Cross Formulary
BETAINE	GENERIC-SPECIALTY	National Performance Formulary
BETASERON	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BETASERON	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BEVACIZUMAB	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BEVACIZUMAB	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BEXAROTENE	GENERIC-SPECIALTY	Blue Cross Formulary
BEXAROTENE	GENERIC-SPECIALTY	National Performance Formulary

BEXAROTENE	ORAL-CHEMO	Blue Cross Formulary
BEXAROTENE	ORAL-CHEMO	National Performance Formulary
BICNU	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BICNU	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BIVIGAM	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BIVIGAM	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BLENREP	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BLENREP	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BLEOMYCIN	GENERIC-SPECIALTY	Blue Cross Formulary
BLEOMYCIN	GENERIC-SPECIALTY	National Performance Formulary
BLINCYTO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BLINCYTO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BORTEZOMIB	GENERIC-SPECIALTY	Blue Cross Formulary
BORTEZOMIB	GENERIC-SPECIALTY	National Performance Formulary
BORTEZOMIB	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BORTEZOMIB	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BOSENTAN	GENERIC-SPECIALTY	Blue Cross Formulary
BOSENTAN	GENERIC-SPECIALTY	National Performance Formulary
BOSULIF	ORAL-CHEMO	Blue Cross Formulary
BOSULIF	ORAL-CHEMO	National Performance Formulary
BOTOX	TIER 03	Blue Cross Formulary
BOTOX	TIER 03	National Performance Formulary
BRAFTOVI	ORAL-CHEMO	Blue Cross Formulary
BRAFTOVI	ORAL-CHEMO	National Performance Formulary
BREYANZI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BREYANZI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BRINEURA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BRINEURA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BRIUMVI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BRIUMVI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BRUKINSA	ORAL-CHEMO	Blue Cross Formulary
BRUKINSA	ORAL-CHEMO	National Performance Formulary
BUSULFAN	GENERIC-SPECIALTY	Blue Cross Formulary
BUSULFAN	GENERIC-SPECIALTY	National Performance Formulary
BUSULFEX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BUSULFEX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BYLVAY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
BYLVAY	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
BYOOVIZ	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CABLIVI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CABLIVI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CABOMETYX	ORAL-CHEMO	Blue Cross Formulary
CABOMETYX	ORAL-CHEMO	National Performance Formulary
CALQUENCE	ORAL-CHEMO	Blue Cross Formulary
CALQUENCE	ORAL-CHEMO	National Performance Formulary
CAMCEVI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CAMCEVI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CAMPTOSAR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CAMPTOSAR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CAMZYOS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CAPECITABINE	ORAL-CHEMO	Blue Cross Formulary
CAPECITABINE	ORAL-CHEMO	National Performance Formulary
CAPRELSA	ORAL-CHEMO	Blue Cross Formulary
CAPRELSA	ORAL-CHEMO	National Performance Formulary
CARBAGLU	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CARBAGLU	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CARBOPLATIN	GENERIC-SPECIALTY	Blue Cross Formulary
CARBOPLATIN	GENERIC-SPECIALTY	National Performance Formulary
CARGLUMIC	GENERIC-SPECIALTY	Blue Cross Formulary
CARGLUMIC	GENERIC-SPECIALTY	National Performance Formulary
CARMUSTINE	GENERIC-SPECIALTY	Blue Cross Formulary
CARMUSTINE	GENERIC-SPECIALTY	National Performance Formulary
CARVYKTI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CARVYKTI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CAYSTON	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CELLCEPT	TIER 03	Blue Cross Formulary
CELLCEPT	TIER 03	National Performance Formulary
CERDELGA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CERDELGA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CEREZYME	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CEREZYME	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CETRORELIX	GENERIC-SPECIALTY	Blue Cross Formulary
CETRORELIX	GENERIC-SPECIALTY	National Performance Formulary
CETROTIDE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CHENODAL	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CHENODAL	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary

CHOLBAM	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CHOLBAM	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CHOR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CHOR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CIBINQO	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CIBINQO	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CIMERLI	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CIMERLI	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CIMZIA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CIMZIA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CINQAIR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CINQAIR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CINRYZE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CISPLATIN	GENERIC-SPECIALTY	Blue Cross Formulary
CISPLATIN	GENERIC-SPECIALTY	National Performance Formulary
CISPLATIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CISPLATIN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CLADRIBINE	GENERIC-SPECIALTY	Blue Cross Formulary
CLADRIBINE	GENERIC-SPECIALTY	National Performance Formulary
CLOFARABINE	GENERIC-SPECIALTY	Blue Cross Formulary
CLOFARABINE	GENERIC-SPECIALTY	National Performance Formulary
CLOLAR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CLOLAR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
COAGADEX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
COAGADEX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
COMETRIQ	ORAL-CHEMO	Blue Cross Formulary
COMETRIQ	ORAL-CHEMO	National Performance Formulary
COPAXONE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
COPAXONE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
COPAXONE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
COPIKTRA	ORAL-CHEMO	Blue Cross Formulary
COPIKTRA	ORAL-CHEMO	National Performance Formulary
CORIFACT	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CORIFACT	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CORTROPHIN	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CORTROPHIN	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
COSELA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
COSENTYX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
COSMEGEN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
COSMEGEN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
COTELLIC	ORAL-CHEMO	Blue Cross Formulary
COTELLIC	ORAL-CHEMO	National Performance Formulary
CRYSVITA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CRYSVITA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CUTAQUIG	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CUVITRU	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CUVITRU	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CUVRIOR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CYCLOPHOSPH	GENERIC-SPECIALTY	Blue Cross Formulary
CYCLOPHOSPH	GENERIC-SPECIALTY	National Performance Formulary
CYCLOPHOSPH	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CYCLOPHOSPH	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CYCLOPHOSPHA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CYCLOPHOSPHA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CYRAMZA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CYRAMZA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CYSTADANE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CYSTADANE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CYSTADROPS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CYSTADROPS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CYSTAGON	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CYSTAGON	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CYSTARAN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CYSTARAN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
CYTARABINE	GENERIC-SPECIALTY	Blue Cross Formulary
CYTARABINE	GENERIC-SPECIALTY	National Performance Formulary
CYTOGAM	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
CYTOGAM	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
DACARBAZINE	GENERIC-SPECIALTY	Blue Cross Formulary
DACARBAZINE	GENERIC-SPECIALTY	National Performance Formulary
DACTINOMYCIN	GENERIC-SPECIALTY	Blue Cross Formulary
DACTINOMYCIN	GENERIC-SPECIALTY	National Performance Formulary
DALFAMPRIDIN	GENERIC-SPECIALTY	Blue Cross Formulary
DALFAMPRIDIN	GENERIC-SPECIALTY	National Performance Formulary
DANYELZA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
DANYELZA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary

DARAPRIM	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
DARAPRIM	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
DARZALEX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
DARZALEX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
DAUNORUBICIN	GENERIC-SPECIALTY	Blue Cross Formulary
DAUNORUBICIN	GENERIC-SPECIALTY	National Performance Formulary
DAURISMO	ORAL-CHEMO	Blue Cross Formulary
DAURISMO	ORAL-CHEMO	National Performance Formulary
DAYBUE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
DECITABINE	GENERIC-SPECIALTY	Blue Cross Formulary
DECITABINE	GENERIC-SPECIALTY	National Performance Formulary
DEPEN	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
DEPEN	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
DEXRAZOXANE	GENERIC-SPECIALTY	Blue Cross Formulary
DEXRAZOXANE	GENERIC-SPECIALTY	National Performance Formulary
DIACOMIT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
DIACOMIT	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
DICHLORPHENA	GENERIC-SPECIALTY	Blue Cross Formulary
DICHLORPHENA	GENERIC-SPECIALTY	National Performance Formulary
DIMETHYL	GENERIC-SPECIALTY	Blue Cross Formulary
DIMETHYL	GENERIC-SPECIALTY	National Performance Formulary
DOCETAXEL	GENERIC-SPECIALTY	Blue Cross Formulary
DOCETAXEL	GENERIC-SPECIALTY	National Performance Formulary
DOPTelet	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
DOPTelet	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
DOXIL	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
DOXIL	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
DOXORUBICIN	GENERIC-SPECIALTY	Blue Cross Formulary
DOXORUBICIN	GENERIC-SPECIALTY	National Performance Formulary
DROXIDOPA	GENERIC-SPECIALTY	Blue Cross Formulary
DROXIDOPA	GENERIC-SPECIALTY	National Performance Formulary
DUPIXENT	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
DUPIXENT	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
EGRIFTA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EGRIFTA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ELAHERE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ELAHERE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ELAPRASE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ELAPRASE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ELELYSO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ELELYSO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ELIGARD	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ELIGARD	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ELITEK	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ELITEK	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ELLECE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ELLECE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ELOCTATE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ELOCTATE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ELZONRIS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ELZONRIS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
EMFLAZA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EMFLAZA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
EMPAVELI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EMPAVELI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
EMPLICITI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EMPLICITI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ENBREL	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ENBREL	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ENHERTU	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ENHERTU	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ENJAYMO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ENJAYMO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ENOXILUV	TIER 03	Blue Cross Formulary
ENOXILUV	TIER 03	National Performance Formulary
ENSPRYNG	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ENSPRYNG	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ENTYVIO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ENTYVIO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ENVARUSUS	TIER 03	Blue Cross Formulary
ENVARUSUS	TIER 03	National Performance Formulary
EPCLUSA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EPCLUSA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
EPIDIOLEX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EPIDIOLEX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
EPIVIR	TIER 03	Blue Cross Formulary

EPIVIR	TIER 03	National Performance Formulary
EPOGEN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EPOPROSTENOL	GENERIC-SPECIALTY	Blue Cross Formulary
EPOPROSTENOL	GENERIC-SPECIALTY	National Performance Formulary
ERBITUX	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ERBITUX	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ERIVEDGE	ORAL-CHEMO	Blue Cross Formulary
ERIVEDGE	ORAL-CHEMO	National Performance Formulary
ERLEADA	ORAL-CHEMO	Blue Cross Formulary
ERLEADA	ORAL-CHEMO	National Performance Formulary
ERLOTINIB	ORAL-CHEMO	Blue Cross Formulary
ERLOTINIB	ORAL-CHEMO	National Performance Formulary
ESBRIET	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ESPEROCT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ESPEROCT	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ETOPOPHOS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ETOPOPHOS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ETOPOSIDE	GENERIC-SPECIALTY	Blue Cross Formulary
ETOPOSIDE	GENERIC-SPECIALTY	National Performance Formulary
ETOPOSIDE	ORAL-CHEMO	Blue Cross Formulary
ETOPOSIDE	ORAL-CHEMO	National Performance Formulary
EVENITY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EVENITY	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
EVEROLIMUS	ORAL-CHEMO	Blue Cross Formulary
EVEROLIMUS	ORAL-CHEMO	National Performance Formulary
EVKEEZA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EVKEEZA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
EVOMELA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EVOMELA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
EVRYSDI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EVRYSDI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
EKKIVITY	ORAL-CHEMO	Blue Cross Formulary
EKKIVITY	ORAL-CHEMO	National Performance Formulary
EXONDYS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EXTAVIA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EYLEA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
EYLEA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FABRAZYME	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FABRAZYME	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FASENRA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FASENRA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FASLODEX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FASLODEX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FEIBA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FEIBA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FENSOLVI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FENSOLVI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FIBRYGA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FIBRYGA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FILSPARI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FILSPARI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FINGOLIMOD	GENERIC-SPECIALTY	Blue Cross Formulary
FINGOLIMOD	GENERIC-SPECIALTY	National Performance Formulary
FINTEPLA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FINTEPLA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FIRDAPSE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FIRMAGON	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FIRMAGON	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FLEBOGAMMA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FLEBOGAMMA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FLOLAN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FLOLAN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FLOXURIDINE	GENERIC-SPECIALTY	Blue Cross Formulary
FLOXURIDINE	GENERIC-SPECIALTY	National Performance Formulary
FLUDARABINE	GENERIC-SPECIALTY	Blue Cross Formulary
FLUDARABINE	GENERIC-SPECIALTY	National Performance Formulary
FLUOROURACIL	GENERIC-SPECIALTY	Blue Cross Formulary
FLUOROURACIL	GENERIC-SPECIALTY	National Performance Formulary
FOLLISTIM	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FOLLISTIM	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FOLOTYN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FOLOTYN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FORTEO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FOTIVDA	ORAL-CHEMO	Blue Cross Formulary
FRAGMIN	TIER 03	Blue Cross Formulary
FRAGMIN	TIER 03	National Performance Formulary

FULPHILA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FULVESTRANT	GENERIC-SPECIALTY	Blue Cross Formulary
FULVESTRANT	GENERIC-SPECIALTY	National Performance Formulary
FYARRO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FYARRO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
FYLNETRA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
FYREMADEL	GENERIC-SPECIALTY	Blue Cross Formulary
FYREMADEL	GENERIC-SPECIALTY	National Performance Formulary
GALAFOLD	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GALAFOLD	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
GAMASTAN	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GAMASTAN	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
GAMIFANT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GAMIFANT	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
GAMMAGARD	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GAMMAGARD	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
GAMMAKED	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GAMMAKED	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
GAMMAPLEX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GAMMAPLEX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
GAMUNEX-C	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GAMUNEX-C	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
GANIRELIX	GENERIC-SPECIALTY	Blue Cross Formulary
GANIRELIX	GENERIC-SPECIALTY	National Performance Formulary
GATTEX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GATTEX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
GAVRETO	ORAL-CHEMO	Blue Cross Formulary
GAVRETO	ORAL-CHEMO	National Performance Formulary
GAZYVA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GAZYVA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
GEL-ONE	TIER 03	Blue Cross Formulary
GEMCITABINE	GENERIC-SPECIALTY	Blue Cross Formulary
GEMCITABINE	GENERIC-SPECIALTY	National Performance Formulary
GENOTROPIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GENVISC	TIER 03	Blue Cross Formulary
GILENYA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GILENYA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
GILOTRIF	ORAL-CHEMO	Blue Cross Formulary
GILOTRIF	ORAL-CHEMO	National Performance Formulary
GIVLAARI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GIVLAARI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
GLASSIA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GLASSIA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
GLATIRAMER	GENERIC-SPECIALTY	Blue Cross Formulary
GLATIRAMER	GENERIC-SPECIALTY	National Performance Formulary
GLATOPA	GENERIC-SPECIALTY	Blue Cross Formulary
GLATOPA	GENERIC-SPECIALTY	National Performance Formulary
GLEOSTINE	ORAL-CHEMO	Blue Cross Formulary
GLEOSTINE	ORAL-CHEMO	National Performance Formulary
GONAL-F	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
GRANIX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HAEGARDA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HAEGARDA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
HALAVEN	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HALAVEN	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
HARVONI	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HARVONI	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
HEMGENIX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HEMGENIX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
HEMLIBRA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HEMLIBRA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
HEMOFIL	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HEMOFIL	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
HERCEP	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HERCEP	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
HERCEPTIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HERCEPTIN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
HERZUMA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HETLIOZ	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HIZENTRA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HIZENTRA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
HUMATE-P	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HUMATE-P	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
HUMATROPE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HUMIRA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HUMIRA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary

HYCAMTIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HYCAMTIN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
HYCAMTIN	ORAL-CHEMO	Blue Cross Formulary
HYCAMTIN	ORAL-CHEMO	National Performance Formulary
HYDROXY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HYDROXY	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
HYDROXYPROG	GENERIC-SPECIALTY	Blue Cross Formulary
HYDROXYPROG	GENERIC-SPECIALTY	National Performance Formulary
HYMOVIS	TIER 03	Blue Cross Formulary
HYPERRHO	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HYPERRHO	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
HYQVIA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
HYQVIA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
IBRANCE	ORAL-CHEMO	Blue Cross Formulary
IBRANCE	ORAL-CHEMO	National Performance Formulary
ICATIBANT	GENERIC-SPECIALTY	Blue Cross Formulary
ICATIBANT	GENERIC-SPECIALTY	National Performance Formulary
ICLUSIG	ORAL-CHEMO	Blue Cross Formulary
ICLUSIG	ORAL-CHEMO	National Performance Formulary
IDAMYCIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
IDAMYCIN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
IDARUBICIN	GENERIC-SPECIALTY	Blue Cross Formulary
IDARUBICIN	GENERIC-SPECIALTY	National Performance Formulary
IDELVION	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
IDELVION	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
IDHIFA	ORAL-CHEMO	Blue Cross Formulary
IDHIFA	ORAL-CHEMO	National Performance Formulary
IFEX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
IFEX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
IFOSFAMIDE	GENERIC-SPECIALTY	Blue Cross Formulary
IFOSFAMIDE	GENERIC-SPECIALTY	National Performance Formulary
ILARIS	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ILARIS	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ILUMYA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ILUMYA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
IMATINIB	ORAL-CHEMO	Blue Cross Formulary
IMATINIB	ORAL-CHEMO	National Performance Formulary
IMBRUVICA	ORAL-CHEMO	Blue Cross Formulary
IMBRUVICA	ORAL-CHEMO	National Performance Formulary
IMCIVREE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
IMFINZI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
IMFINZI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
IMJUDO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
IMJUDO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
IMLYGIC	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
IMLYGIC	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
INBRIJA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
INBRIJA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
INCRELEX	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
INCRELEX	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
INFLECTRA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
INFLECTRA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
INFLIXIMAB	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
INFUGEM	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
INFUGEM	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
INGREZZA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
INGREZZA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
INLYTA	ORAL-CHEMO	Blue Cross Formulary
INLYTA	ORAL-CHEMO	National Performance Formulary
INQOVI	ORAL-CHEMO	Blue Cross Formulary
INREBIC	ORAL-CHEMO	Blue Cross Formulary
INREBIC	ORAL-CHEMO	National Performance Formulary
INTRON	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
INTRON	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
IRESSA	ORAL-CHEMO	Blue Cross Formulary
IRESSA	ORAL-CHEMO	National Performance Formulary
IRINOTECAN	GENERIC-SPECIALTY	Blue Cross Formulary
IRINOTECAN	GENERIC-SPECIALTY	National Performance Formulary
ISTODAX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ISTODAX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ISTURISA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
IXEMPRA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
IXEMPRA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
IXINITY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
IXINITY	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
JAKAFI	ORAL-CHEMO	Blue Cross Formulary

JAKAFI	ORAL-CHEMO	National Performance Formulary
JAYPIRCA	ORAL-CHEMO	Blue Cross Formulary
JAYPIRCA	ORAL-CHEMO	National Performance Formulary
JEMPERLI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
JEMPERLI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
JEVTANA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
JEVTANA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
JIVI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
JIVI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
JOENJA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
JUXTAPID	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
JUXTAPID	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
JYNARQUE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KADCYLA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KADCYLA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KALBITOR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KALBITOR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KALYDECO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KALYDECO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KANJINTI	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KANJINTI	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KANUMA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KANUMA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KEPIVANCE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KEPIVANCE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KESIMPTA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KESIMPTA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KEVEYIS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KEVEYIS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KEVZARA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KEVZARA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KEYTRUDA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KEYTRUDA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KHAPZORY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KHAPZORY	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KIMMTRAK	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KIMMTRAK	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KINERET	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KINERET	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KISQALI	ORAL-CHEMO	Blue Cross Formulary
KISQALI	ORAL-CHEMO	National Performance Formulary
KITABIS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KOATE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KOATE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KOATE-DVI	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KOATE-DVI	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KOGENATE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KOGENATE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KORLYM	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KORLYM	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KORSUVA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KORSUVA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KOSELUGO	ORAL-CHEMO	Blue Cross Formulary
KOSELUGO	ORAL-CHEMO	National Performance Formulary
KOVALTRY	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KOVALTRY	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KRAZATI	ORAL-CHEMO	Blue Cross Formulary
KRAZATI	ORAL-CHEMO	National Performance Formulary
KRYSTEXXA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KRYSTEXXA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KYMRIAH	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KYMRIAH	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KYNMOBI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KYNMOBI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
KYPROLIS	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
KYPROLIS	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LAMZEDE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LAMZEDE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LANREOTIDE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LAPATINIB	ORAL-CHEMO	Blue Cross Formulary
LAPATINIB	ORAL-CHEMO	National Performance Formulary
LEDIP-SOFOSB	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LEMTRADA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LEMTRADA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LENALIDOMIDE	ORAL-CHEMO	Blue Cross Formulary
LENALIDOMIDE	ORAL-CHEMO	National Performance Formulary

LENVIMA	ORAL-CHEMO	Blue Cross Formulary
LENVIMA	ORAL-CHEMO	National Performance Formulary
LEUKINE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LEUKINE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LEUPROLIDE	GENERIC-SPECIALTY	Blue Cross Formulary
LEUPROLIDE	GENERIC-SPECIALTY	National Performance Formulary
LEUPROLIDE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LEUPROLIDE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LEVOLEUCOVOR	GENERIC-SPECIALTY	Blue Cross Formulary
LEVOLEUCOVOR	GENERIC-SPECIALTY	National Performance Formulary
LIBTAYO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LIBTAYO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LIVMARLI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LIVTENCITY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LIVTENCITY	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LONSURF	ORAL-CHEMO	Blue Cross Formulary
LONSURF	ORAL-CHEMO	National Performance Formulary
LORBRENA	ORAL-CHEMO	Blue Cross Formulary
LORBRENA	ORAL-CHEMO	National Performance Formulary
LOVENOX	TIER 03	Blue Cross Formulary
LOVENOX	TIER 03	National Performance Formulary
LUCENTIS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LUMAKRAS	ORAL-CHEMO	Blue Cross Formulary
LUMAKRAS	ORAL-CHEMO	National Performance Formulary
LUMIZYME	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LUMIZYME	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LUMOXITI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LUMOXITI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LUNSUMIO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LUNSUMIO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LUPKYNIS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LUPR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LUPR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LUPR	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LUPR	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LUPRON	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LUPRON	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LUPRON	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
LUPRON	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
LYNPARZA	ORAL-CHEMO	Blue Cross Formulary
LYNPARZA	ORAL-CHEMO	National Performance Formulary
LYTGOBI	ORAL-CHEMO	Blue Cross Formulary
LYTGOBI	ORAL-CHEMO	National Performance Formulary
MAKENA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MAKENA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MARGENZA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MARGENZA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MATULANE	ORAL-CHEMO	Blue Cross Formulary
MATULANE	ORAL-CHEMO	National Performance Formulary
MAVENCLAD	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MAVENCLAD	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MAVYRET	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MAVYRET	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MAYZENT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MAYZENT	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MEKINIST	ORAL-CHEMO	Blue Cross Formulary
MEKINIST	ORAL-CHEMO	National Performance Formulary
MEKTOVI	ORAL-CHEMO	Blue Cross Formulary
MEKTOVI	ORAL-CHEMO	National Performance Formulary
MELPHALAN	GENERIC-SPECIALTY	Blue Cross Formulary
MELPHALAN	GENERIC-SPECIALTY	National Performance Formulary
MELPHALAN	ORAL-CHEMO	Blue Cross Formulary
MELPHALAN	ORAL-CHEMO	National Performance Formulary
MENOPUR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MENOPUR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MEPSEVII	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MEPSEVII	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MESNA	GENERIC-SPECIALTY	Blue Cross Formulary
MESNA	GENERIC-SPECIALTY	National Performance Formulary
MESNEX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MESNEX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MESNEX	ORAL-CHEMO	Blue Cross Formulary
MESNEX	ORAL-CHEMO	National Performance Formulary
MICRHOGAM	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MICRHOGAM	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MIGLUSTAT	GENERIC-SPECIALTY	Blue Cross Formulary

MIGLUSTAT	GENERIC-SPECIALTY	National Performance Formulary
MIRCERA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MIRCERA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MITOMYCIN	GENERIC-SPECIALTY	Blue Cross Formulary
MITOMYCIN	GENERIC-SPECIALTY	National Performance Formulary
MITOXANTRON	GENERIC-SPECIALTY	Blue Cross Formulary
MITOXANTRON	GENERIC-SPECIALTY	National Performance Formulary
MONJUVI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MONJUVI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MONOVISC	TIER 03	Blue Cross Formulary
MOZOBIL	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MOZOBIL	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MULPLETA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MULPLETA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MUTAMYCIN	GENERIC-SPECIALTY	Blue Cross Formulary
MUTAMYCIN	GENERIC-SPECIALTY	National Performance Formulary
MVASI	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MVASI	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MYALEPT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MYALEPT	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
MYCAPSSA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MYFORTIC	TIER 03	Blue Cross Formulary
MYFORTIC	TIER 03	National Performance Formulary
MYLOTARG	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
MYLOTARG	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NAGLAZYME	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NAGLAZYME	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NATPARA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NATPARA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NELARABINE	GENERIC-SPECIALTY	Blue Cross Formulary
NELARABINE	GENERIC-SPECIALTY	National Performance Formulary
NEORAL	TIER 03	Blue Cross Formulary
NEORAL	TIER 03	National Performance Formulary
NERLYNX	ORAL-CHEMO	Blue Cross Formulary
NERLYNX	ORAL-CHEMO	National Performance Formulary
NEULASTA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NEULASTA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NEUPOGEN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NEXAVAR	ORAL-CHEMO	Blue Cross Formulary
NEXAVAR	ORAL-CHEMO	National Performance Formulary
NEXVIAZYME	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NEXVIAZYME	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NILANDRON	ORAL-CHEMO	Blue Cross Formulary
NILANDRON	ORAL-CHEMO	National Performance Formulary
NILUTAMIDE	ORAL-CHEMO	Blue Cross Formulary
NILUTAMIDE	ORAL-CHEMO	National Performance Formulary
NINLARO	ORAL-CHEMO	Blue Cross Formulary
NINLARO	ORAL-CHEMO	National Performance Formulary
NIPENT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NIPENT	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NITISINONE	GENERIC-SPECIALTY	Blue Cross Formulary
NITISINONE	GENERIC-SPECIALTY	National Performance Formulary
NITYR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NITYR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NIVESTYM	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NIVESTYM	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NORDITROPIN	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NORDITROPIN	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NOVAREL	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NOVAREL	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NOVOEIGHT	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NOVOEIGHT	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NOVOSEVEN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NOVOSEVEN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NPLATE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NPLATE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NUBEQA	ORAL-CHEMO	Blue Cross Formulary
NUBEQA	ORAL-CHEMO	National Performance Formulary
NUCALA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NUCALA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NULIBRY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NULIBRY	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NULOJIX	TIER 03	Blue Cross Formulary
NULOJIX	TIER 03	National Performance Formulary
NUTROPIN	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NUTROPIN	PREFERRED-BRAND-SPECIALTY	National Performance Formulary

NUWIQ	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
NUWIQ	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
NYVEPRIA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OBIZUR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OBIZUR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
OCALIVA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OCALIVA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
OCREVUS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OCREVUS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
OCTAGAM	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OCTAGAM	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
OCTREOTIDE	GENERIC-SPECIALTY	Blue Cross Formulary
OCTREOTIDE	GENERIC-SPECIALTY	National Performance Formulary
ODOMZO	ORAL-CHEMO	Blue Cross Formulary
ODOMZO	ORAL-CHEMO	National Performance Formulary
OFEV	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OFEV	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
OGIVRI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OLUMIANT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OLUMIANT	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
OMNITROPE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OMNITROPE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ONCASPAR	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ONCASPAR	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ONIVYDE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ONIVYDE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ONPATTRO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ONPATTRO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ONTRUZANT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ONUREG	ORAL-CHEMO	Blue Cross Formulary
ONUREG	ORAL-CHEMO	National Performance Formulary
OPDIVO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OPDIVO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
OPDUALAG	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OPDUALAG	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
OPSUMIT	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OPSUMIT	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ORENCIA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ORENCIA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ORENITRAM	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ORENITRAM	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ORFADIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ORFADIN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ORGOVYX	ORAL-CHEMO	Blue Cross Formulary
ORGOVYX	ORAL-CHEMO	National Performance Formulary
ORKAMBI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ORKAMBI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ORLADEYO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ORLADEYO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ORSERDU	ORAL-CHEMO	Blue Cross Formulary
ORSERDU	ORAL-CHEMO	National Performance Formulary
ORTHOVISC	TIER 03	Blue Cross Formulary
OTEZLA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OTEZLA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
OVIDREL	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OVIDREL	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
OXALIPLATIN	GENERIC-SPECIALTY	Blue Cross Formulary
OXALIPLATIN	GENERIC-SPECIALTY	National Performance Formulary
OXBRYTA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OXERVATE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OXERVATE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
OXLUMO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
OXLUMO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PACLITAXEL	GENERIC-SPECIALTY	Blue Cross Formulary
PACLITAXEL	GENERIC-SPECIALTY	National Performance Formulary
PACLITAXEL	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PACLITAXEL	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PADCEV	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PADCEV	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PALFORZIA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PALYNZIQ	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PAMIDRONATE	GENERIC-SPECIALTY	Blue Cross Formulary
PAMIDRONATE	GENERIC-SPECIALTY	National Performance Formulary
PANZYGA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PARAPLATIN	GENERIC-SPECIALTY	Blue Cross Formulary
PARAPLATIN	GENERIC-SPECIALTY	National Performance Formulary

PARAPLATIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PARAPLATIN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PARSABIV	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PARSABIV	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PEGASYS	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PEGASYS	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PEMAZYRE	ORAL-CHEMO	Blue Cross Formulary
PEMETREXED	GENERIC-SPECIALTY	Blue Cross Formulary
PEMETREXED	GENERIC-SPECIALTY	National Performance Formulary
PEMETREXED	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PEMETREXED	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PEMFEXY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PEMFEXY	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PENICILLAMIN	GENERIC-SPECIALTY	Blue Cross Formulary
PENICILLAMIN	GENERIC-SPECIALTY	National Performance Formulary
PERJETA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PERJETA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PHEBURANE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PHEBURANE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PHENYL BUTYRA	GENERIC-SPECIALTY	Blue Cross Formulary
PHENYL BUTYRA	GENERIC-SPECIALTY	National Performance Formulary
PHESGO	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PHESGO	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PHOTOFRIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PHOTOFRIN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PIQRAY	ORAL-CHEMO	Blue Cross Formulary
PIQRAY	ORAL-CHEMO	National Performance Formulary
PIRFENIDONE	GENERIC-SPECIALTY	Blue Cross Formulary
PIRFENIDONE	GENERIC-SPECIALTY	National Performance Formulary
PLEGRIDY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
POLIVY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
POLIVY	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
POMALYST	ORAL-CHEMO	Blue Cross Formulary
POMALYST	ORAL-CHEMO	National Performance Formulary
PONVORY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PORTRAZZA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PORTRAZZA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
POTELIGEO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
POTELIGEO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PRALATREXATE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PRALATREXATE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PREGNYL	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PREGNYL	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PREVYMIS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PREVYMIS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PRIVIGEN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PRIVIGEN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PROCRIT	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PROCRIT	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PROCYSBI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PROCYSBI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PROFILNINE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PROFILNINE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PROGRAF	TIER 03	Blue Cross Formulary
PROGRAF	TIER 03	National Performance Formulary
PROLASTIN-C	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PROLASTIN-C	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PROLEUKIN	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PROLEUKIN	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PROLIA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PROLIA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PROMACTA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PROMACTA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PROVENGE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PROVENGE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PULMOZYME	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PULMOZYME	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
PURIXAN	ORAL-CHEMO	Blue Cross Formulary
PURIXAN	ORAL-CHEMO	National Performance Formulary
PYRIMETHAMIN	GENERIC-SPECIALTY	Blue Cross Formulary
PYRIMETHAMIN	GENERIC-SPECIALTY	National Performance Formulary
PYRUKYND	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
PYRUKYND	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
QINLOCK	ORAL-CHEMO	Blue Cross Formulary
QINLOCK	ORAL-CHEMO	National Performance Formulary
RADICAVA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary

RADICAVA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RADICAVA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RADICAVA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RAPAMUNE	TIER 03	Blue Cross Formulary
RAPAMUNE	TIER 03	National Performance Formulary
RAVICTI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
REBIF	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
REBINYN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
REBINYN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
REBLOZYL	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
REBLOZYL	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RECLAST	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RECLAST	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RECOMBINATE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RECOMBINATE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RECORLEV	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RELEUKO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RELYVRIO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RELYVRIO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
REMICADE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
REMODULIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RENFLEXIS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RETACRIT	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RETACRIT	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RETEVMO	ORAL-CHEMO	Blue Cross Formulary
RETEVMO	ORAL-CHEMO	National Performance Formulary
REVATIO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
REVCOVI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
REVCOVI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
REVLIMID	ORAL-CHEMO	Blue Cross Formulary
REVLIMID	ORAL-CHEMO	National Performance Formulary
REZLIDHIA	ORAL-CHEMO	Blue Cross Formulary
REZUROCK	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RHOGAM	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RHOGAM	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RIABNI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RIASTAP	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RIASTAP	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RIBAVIRIN	GENERIC-SPECIALTY	Blue Cross Formulary
RIBAVIRIN	GENERIC-SPECIALTY	National Performance Formulary
RIDAURA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RIDAURA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RINVOQ	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RINVOQ	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RITUXAN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RITUXAN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RIXUBIS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RIXUBIS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ROLVEDON	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ROMIDEPSIN	GENERIC-SPECIALTY	Blue Cross Formulary
ROMIDEPSIN	GENERIC-SPECIALTY	National Performance Formulary
ROMIDEPSIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ROMIDEPSIN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ROZLYTREK	ORAL-CHEMO	Blue Cross Formulary
ROZLYTREK	ORAL-CHEMO	National Performance Formulary
RUBRACA	ORAL-CHEMO	Blue Cross Formulary
RUCONEST	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RUCONEST	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RUXIENCE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RUXIENCE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RYBREVANT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
RYBREVANT	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
RYDAPT	ORAL-CHEMO	Blue Cross Formulary
RYDAPT	ORAL-CHEMO	National Performance Formulary
RYLAZE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SAIZEN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SAIZENPREP	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SAJAZIR	GENERIC-SPECIALTY	Blue Cross Formulary
SAJAZIR	GENERIC-SPECIALTY	National Performance Formulary
SAMSCA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SAMSCA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SANDIMMUNE	TIER 03	Blue Cross Formulary
SANDIMMUNE	TIER 03	National Performance Formulary
SANDOSTATIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SANDOSTATIN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SAPHNELO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary

SAPHNELO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SAPROPTERIN	GENERIC-SPECIALTY	Blue Cross Formulary
SAPROPTERIN	GENERIC-SPECIALTY	National Performance Formulary
SARCLISA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SARCLISA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SCEMBLIX	ORAL-CHEMO	Blue Cross Formulary
SCEMBLIX	ORAL-CHEMO	National Performance Formulary
SCENESSE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SCENESSE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SEROSTIM	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SEROSTIM	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SEVENFACT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SIGNIFOR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SIGNIFOR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SILDENAFIL	GENERIC-SPECIALTY	Blue Cross Formulary
SILDENAFIL	GENERIC-SPECIALTY	National Performance Formulary
SILIQ	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SILIQ	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SIMPONI	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SIMPONI	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SKYCLARYS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SKYCLARYS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SKYRIZI	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SKYRIZI	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SKYSONA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SKYSONA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SKYTROFA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SKYTROFA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SOD	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SOD	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SODIUM	GENERIC-SPECIALTY	Blue Cross Formulary
SODIUM	GENERIC-SPECIALTY	National Performance Formulary
SOFOS/VELPAT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SOLIRIS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SOLIRIS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SOMATULINE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SOMATULINE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SOMAVERT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SOMAVERT	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SORAFENIB	ORAL-CHEMO	Blue Cross Formulary
SORAFENIB	ORAL-CHEMO	National Performance Formulary
SOTYKTU	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SOVALDI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SOVALDI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SPEVIGO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SPEVIGO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SPRAVATO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SPRAVATO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SPRYCEL	ORAL-CHEMO	Blue Cross Formulary
SPRYCEL	ORAL-CHEMO	National Performance Formulary
STELARA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
STELARA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
STIMUFEND	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
STIVARGA	ORAL-CHEMO	Blue Cross Formulary
STIVARGA	ORAL-CHEMO	National Performance Formulary
STRENSIQ	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
STRENSIQ	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SUBLOCADE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SUBLOCADE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SUCRAID	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SUCRAID	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SUNITINIB	ORAL-CHEMO	Blue Cross Formulary
SUNITINIB	ORAL-CHEMO	National Performance Formulary
SUPARTZ	TIER 03	Blue Cross Formulary
SUPPRELIN	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SUPPRELIN	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SUSVIMO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SUSVIMO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SYFOVRE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SYFOVRE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SYLVANT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SYLVANT	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SYMDEKO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SYMDEKO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SYNAGIS	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SYNAGIS	PREFERRED-BRAND-SPECIALTY	National Performance Formulary

SYNOJOYNT	TIER 03	Blue Cross Formulary
SYNRIBO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
SYNRIBO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
SYNVISC	TIER 03	Blue Cross Formulary
TABLOID	ORAL-CHEMO	Blue Cross Formulary
TABLOID	ORAL-CHEMO	National Performance Formulary
TABRECTA	ORAL-CHEMO	Blue Cross Formulary
TABRECTA	ORAL-CHEMO	National Performance Formulary
TADALAFIL	GENERIC-SPECIALTY	Blue Cross Formulary
TADALAFIL	GENERIC-SPECIALTY	National Performance Formulary
TADLIQ	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TAFINLAR	ORAL-CHEMO	Blue Cross Formulary
TAFINLAR	ORAL-CHEMO	National Performance Formulary
TAGRISSO	ORAL-CHEMO	Blue Cross Formulary
TAGRISSO	ORAL-CHEMO	National Performance Formulary
TAKHZYRO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TAKHZYRO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TALTZ	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TALTZ	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TALZENNA	ORAL-CHEMO	Blue Cross Formulary
TARPEYO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TASCENSO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TASIGNA	ORAL-CHEMO	Blue Cross Formulary
TASIGNA	ORAL-CHEMO	National Performance Formulary
TASIMELTEON	GENERIC-SPECIALTY	Blue Cross Formulary
TASIMELTEON	GENERIC-SPECIALTY	National Performance Formulary
TAVALISSE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TAVALISSE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TAVNEOS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TAZVERIK	ORAL-CHEMO	Blue Cross Formulary
TECARTUS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TECARTUS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TECENTRIQ	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TECENTRIQ	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TECVAYLI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TECVAYLI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TEGSEDI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TEGSEDI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TEMODAR	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TEMODAR	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TEMOZOLOMIDE	ORAL-CHEMO	Blue Cross Formulary
TEMOZOLOMIDE	ORAL-CHEMO	National Performance Formulary
TEMSIROLIMUS	GENERIC-SPECIALTY	Blue Cross Formulary
TEMSIROLIMUS	GENERIC-SPECIALTY	National Performance Formulary
TEPADINA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TEPADINA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TEPEZZA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TEPEZZA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TEPMETKO	ORAL-CHEMO	Blue Cross Formulary
TERIFLUNOMID	GENERIC-SPECIALTY	Blue Cross Formulary
TERIFLUNOMID	GENERIC-SPECIALTY	National Performance Formulary
TERIPARATIDE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TERIPARATIDE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TETRABENAZIN	GENERIC-SPECIALTY	Blue Cross Formulary
TETRABENAZIN	GENERIC-SPECIALTY	National Performance Formulary
TEZSPIRE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TEZSPIRE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
THALOMID	ORAL-CHEMO	Blue Cross Formulary
THALOMID	ORAL-CHEMO	National Performance Formulary
THIOLA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
THIOLA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
THIOTEPA	GENERIC-SPECIALTY	Blue Cross Formulary
THIOTEPA	GENERIC-SPECIALTY	National Performance Formulary
TIBSOVO	ORAL-CHEMO	Blue Cross Formulary
TIBSOVO	ORAL-CHEMO	National Performance Formulary
TICE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TICE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TIOPRONIN	GENERIC-SPECIALTY	Blue Cross Formulary
TIOPRONIN	GENERIC-SPECIALTY	National Performance Formulary
TIVDAK	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TIVDAK	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TOBI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TOBI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TOBRAMYCIN	GENERIC-SPECIALTY	Blue Cross Formulary
TOBRAMYCIN	GENERIC-SPECIALTY	National Performance Formulary
TOBRAMYCIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary

TOLVAPTAN	GENERIC-SPECIALTY	Blue Cross Formulary
TOLVAPTAN	GENERIC-SPECIALTY	National Performance Formulary
TOPOSAR	GENERIC-SPECIALTY	Blue Cross Formulary
TOPOSAR	GENERIC-SPECIALTY	National Performance Formulary
TOPOTECAN	GENERIC-SPECIALTY	Blue Cross Formulary
TOPOTECAN	GENERIC-SPECIALTY	National Performance Formulary
TORISEL	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TORISEL	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TOTECT	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TOTECT	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TRACLEER	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TRACLEER	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TRAZIMERA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TRAZIMERA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TREANDA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TRELSTAR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TRELSTAR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TREMFYA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TREMFYA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TREPROSTINIL	GENERIC-SPECIALTY	Blue Cross Formulary
TREPROSTINIL	GENERIC-SPECIALTY	National Performance Formulary
TRETINOIN	ORAL-CHEMO	Blue Cross Formulary
TRETINOIN	ORAL-CHEMO	National Performance Formulary
TRETEN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TRETEN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TRIENTINE	GENERIC-SPECIALTY	Blue Cross Formulary
TRIENTINE	GENERIC-SPECIALTY	National Performance Formulary
TRIKAFTA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TRIKAFTA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TRILURON	TIER 03	Blue Cross Formulary
TRIPTODUR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TRIPTODUR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TRISENOX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TRISENOX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TRIVISC	TIER 03	Blue Cross Formulary
TRODELVY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TRODELVY	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TRUSELTIQ	ORAL-CHEMO	Blue Cross Formulary
TRUSELTIQ	ORAL-CHEMO	National Performance Formulary
TRUXIMA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TUKYSA	ORAL-CHEMO	Blue Cross Formulary
TUKYSA	ORAL-CHEMO	National Performance Formulary
TURALIO	ORAL-CHEMO	Blue Cross Formulary
TURALIO	ORAL-CHEMO	National Performance Formulary
TYMLOS	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TYMLOS	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TYSABRI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TYSABRI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
TYVASO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
TYVASO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
UDENYCA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
UDENYCA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ULTOMIRIS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ULTOMIRIS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
UNITUXIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
UNITUXIN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
UPLIZNA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
UPLIZNA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
UPTRAVI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
UPTRAVI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VABYSMO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VABYSMO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VALCHLOR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VALCHLOR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VALRUBICIN	GENERIC-SPECIALTY	Blue Cross Formulary
VALRUBICIN	GENERIC-SPECIALTY	National Performance Formulary
VALSTAR	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VALSTAR	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VECTIBIX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VECTIBIX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VEGZELMA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VELCADE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VELCADE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VELETRI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VELETRI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VEMLIDY	TIER 03	Blue Cross Formulary

VENCLEXTA	ORAL-CHEMO	Blue Cross Formulary
VENCLEXTA	ORAL-CHEMO	National Performance Formulary
VENTAVIS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VENTAVIS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VERZENIO	ORAL-CHEMO	Blue Cross Formulary
VERZENIO	ORAL-CHEMO	National Performance Formulary
VIDAZA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VIDAZA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VIEKIRA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VIEKIRA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VIGABATRIN	GENERIC-SPECIALTY	Blue Cross Formulary
VIGABATRIN	GENERIC-SPECIALTY	National Performance Formulary
VIGADRONE	GENERIC-SPECIALTY	Blue Cross Formulary
VIGADRONE	GENERIC-SPECIALTY	National Performance Formulary
VIOICE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VILTEPSO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VIMIZIM	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VIMIZIM	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VINBLASTINE	GENERIC-SPECIALTY	Blue Cross Formulary
VINBLASTINE	GENERIC-SPECIALTY	National Performance Formulary
VINCASAR	GENERIC-SPECIALTY	Blue Cross Formulary
VINCASAR	GENERIC-SPECIALTY	National Performance Formulary
VINCRISTINE	GENERIC-SPECIALTY	Blue Cross Formulary
VINCRISTINE	GENERIC-SPECIALTY	National Performance Formulary
VINORELBINE	GENERIC-SPECIALTY	Blue Cross Formulary
VINORELBINE	GENERIC-SPECIALTY	National Performance Formulary
VISCO-3	TIER 03	Blue Cross Formulary
VISUDYNE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VISUDYNE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VITRAKVI	ORAL-CHEMO	Blue Cross Formulary
VITRAKVI	ORAL-CHEMO	National Performance Formulary
VIVIMUSTA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VIVITROL	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VIVITROL	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VIZIMPRO	ORAL-CHEMO	Blue Cross Formulary
VIZIMPRO	ORAL-CHEMO	National Performance Formulary
VONJO	ORAL-CHEMO	Blue Cross Formulary
VONJO	ORAL-CHEMO	National Performance Formulary
VONVENDI	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VONVENDI	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VOSEVI	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VOSEVI	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VOTRIENT	ORAL-CHEMO	Blue Cross Formulary
VOTRIENT	ORAL-CHEMO	National Performance Formulary
VOXZOGO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VOXZOGO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VPRIV	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VPRIV	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VUMERITY	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VUMERITY	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VYNDAMAX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VYNDAMAX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VYNDAQEL	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VYNDAQEL	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VYONDYS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VYVGART	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VYVGART	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
VYXEOS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
VYXEOS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
WAKIX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
WAKIX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
WELIREG	ORAL-CHEMO	Blue Cross Formulary
WELIREG	ORAL-CHEMO	National Performance Formulary
WILATE	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
WILATE	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
WINRHO	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
WINRHO	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
XALKORI	ORAL-CHEMO	Blue Cross Formulary
XELJANZ	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
XELJANZ	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
XEMBIFY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
XEMBIFY	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
XENPOZYME	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
XENPOZYME	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
XERMELO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
XERMELO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary

XGEVA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
XGEVA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
XIAFLEX	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
XIAFLEX	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
XOLAIR	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
XOLAIR	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
XOSPATA	ORAL-CHEMO	Blue Cross Formulary
XOSPATA	ORAL-CHEMO	National Performance Formulary
XPOVIO	ORAL-CHEMO	Blue Cross Formulary
XPOVIO	ORAL-CHEMO	National Performance Formulary
XTANDI	ORAL-CHEMO	Blue Cross Formulary
XTANDI	ORAL-CHEMO	National Performance Formulary
XURIDEN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
XURIDEN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
XYNTHA	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
XYNTHA	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
XYREM	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
XYWAV	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
XYWAV	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
YERVOY	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
YERVOY	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
YESCARTA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
YESCARTA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
YONDELIS	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
YONDELIS	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
YONSA	ORAL-CHEMO	Blue Cross Formulary
ZALTRAP	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZALTRAP	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZANOSAR	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZANOSAR	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZARXIO	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZARXIO	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZEJULA	ORAL-CHEMO	Blue Cross Formulary
ZEJULA	ORAL-CHEMO	National Performance Formulary
ZELBORAF	ORAL-CHEMO	Blue Cross Formulary
ZELBORAF	ORAL-CHEMO	National Performance Formulary
ZEMAIRA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZEMAIRA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZEPATIER	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZEPATIER	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZEPOSIA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZEPOSIA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZEPZELCA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZEPZELCA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZEVALIN	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZEVALIN	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZIEXTENZO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZIRABEV	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZIRABEV	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZOKINVY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZOKINVY	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZOLADEX	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZOLADEX	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZOLADEX	PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZOLADEX	PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZOLEDRONIC	GENERIC-SPECIALTY	Blue Cross Formulary
ZOLEDRONIC	GENERIC-SPECIALTY	National Performance Formulary
ZOLGENSMA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZOLGENSMA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZOLINZA	ORAL-CHEMO	Blue Cross Formulary
ZOLINZA	ORAL-CHEMO	National Performance Formulary
ZOMACTON	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZORBTIVE	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZORBTIVE	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZORTRESS	TIER 03	Blue Cross Formulary
ZORTRESS	TIER 03	National Performance Formulary
ZTALMY	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZTALMY	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZULRESSO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZULRESSO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZYDELIG	ORAL-CHEMO	Blue Cross Formulary
ZYDELIG	ORAL-CHEMO	National Performance Formulary
ZYKADIA	ORAL-CHEMO	Blue Cross Formulary
ZYKADIA	ORAL-CHEMO	National Performance Formulary
ZYNLONTA	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZYNLONTA	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary

ZYNTEGLO	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZYNTEGLO	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary
ZYNYZ	NON-PREFERRED-BRAND-SPECIALTY	Blue Cross Formulary
ZYNYZ	NON-PREFERRED-BRAND-SPECIALTY	National Performance Formulary

Insurance Company Name	Blue Cross and Blue Shield of Vermont
HIOS ID	13627
SERFF Filing Number	BCVT-134106868
Market	Large Group
Product Name	2025 Blue Cross VT Large Group Unit Cost Trend Filing

Pharmacy Benefit Manager Information²
Please list any pharmacy benefit managers utilized for the following periods. Include additional lines as necessary.

	Experience Period -1		Experience Period		Projection Period	
	10/01/2021-09/30/2022		10/01/2022-09/30/2023		10/01/2025-12/31/2025	
Pharmacy Benefit Manager #1	Optum Rx (ORx)		Optum Rx (ORx)		Optum Rx (ORx)	
Pharmacy Benefit Manager #2						
Pharmacy Benefit Manager #3						
Pharmacy Benefit Manager #4						

For each period, enter the PBM, if applicable, administering pharmacy benefits **at a pharmacy, network pharmacy, or mail-order pharmacy** for each drug tier.

	Experience Period -1		Experience Period		Projection Period	
	10/01/2021-09/30/2022		10/01/2022-09/30/2023		10/01/2025-12/31/2025	
	Retail	Mail	Retail	Mail	Retail	Mail
Non-Specialty Generic PMPM	ORx	ORx	ORx	ORx	ORx	ORx
Non-Specialty Brand PMPM	ORx	ORx	ORx	ORx	ORx	ORx
Specialty PMPM	ORx	ORx	ORx	ORx	ORx	ORx

For each period, enter the PBM, if applicable, **administering drug benefits by a health care provider in an outpatient setting as part of the medical benefit as separate from the pharmacy benefit** for each drug tier.

	Experience Period -1		Experience Period		Projection Period	
	10/01/2021-09/30/2022		10/01/2022-09/30/2023		10/01/2025-12/31/2025	
	Retail	Mail	Retail	Mail	Retail	Mail
Non-Specialty Generic PMPM	N/A	N/A	N/A	N/A	N/A	N/A
Non-Specialty Brand PMPM	N/A	N/A	N/A	N/A	N/A	N/A
Specialty PMPM	N/A	N/A	N/A	N/A	N/A	N/A

² **Vermont Statute 8 V.S.A. § 4062**

(2)(A) In conjunction with a rate filing required by subsection (a) of this section, an insurer shall disclose to the Board:

(C) The insurer shall include information on its use of a pharmacy benefit manager, if any, including which components of the prescription drug coverage described in subdivisions (A) and (B) of this subdivision (2) are managed by the pharmacy benefit manager, as well as the name of the pharmacy benefit manager or managers used.