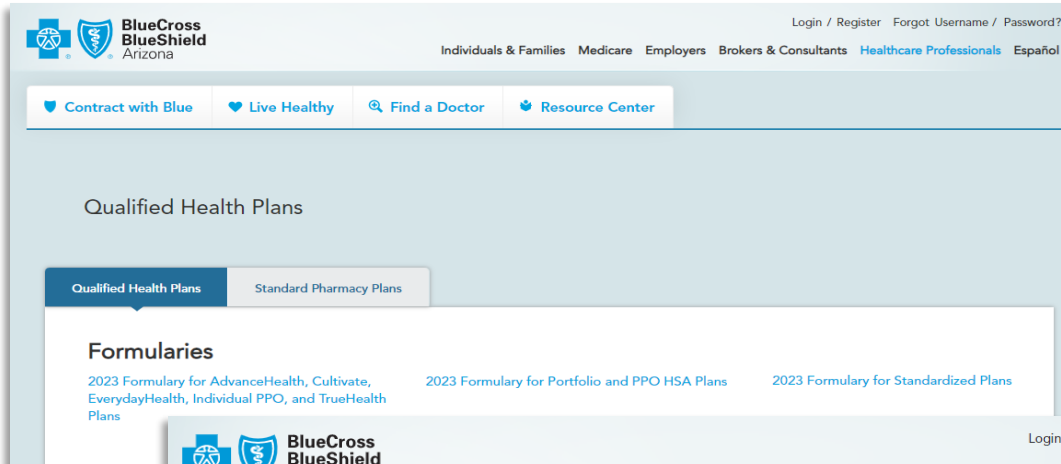


How to Access Drug-Specific Pharmacy Coverage Guidelines

First, find the applicable formulary for the specific plan.



BlueCross BlueShield Arizona

Individuals & Families Medicare Employers Brokers & Consultants Healthcare Professionals Español

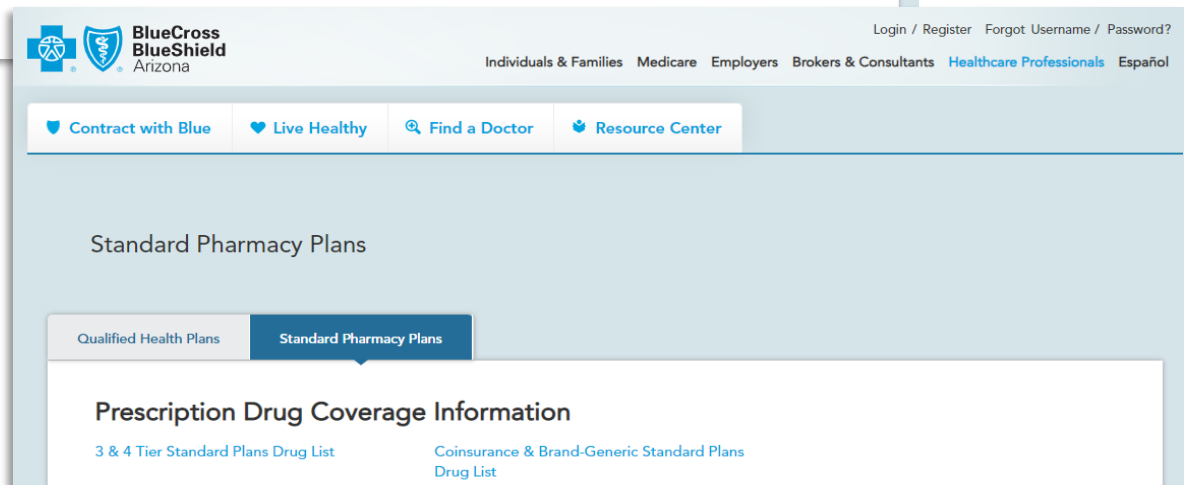
Contract with Blue Live Healthy Find a Doctor Resource Center

Qualified Health Plans

Qualified Health Plans Standard Pharmacy Plans

Formularies

[2023 Formulary for AdvanceHealth, Cultivate, EverydayHealth, Individual PPO, and TrueHealth Plans](#) [2023 Formulary for Portfolio and PPO HSA Plans](#) [2023 Formulary for Standardized Plans](#)



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Contract with Blue Live Healthy Find a Doctor Resource Center

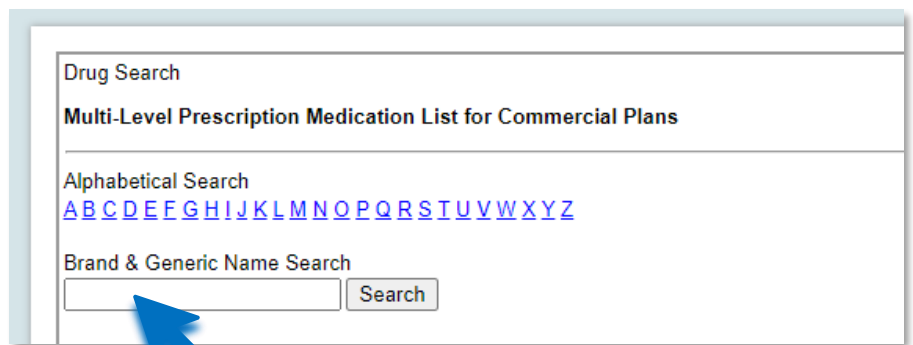
Standard Pharmacy Plans

Qualified Health Plans Standard Pharmacy Plans

Prescription Drug Coverage Information

[3 & 4 Tier Standard Plans Drug List](#) [Coinsurance & Brand-Generic Standard Plans Drug List](#)

Once plan has been selected, search for drug using the search bar.



Drug Search

Multi-Level Prescription Medication List for Commercial Plans

Alphabetical Search
[A](#) [B](#) [C](#) [D](#) [E](#) [F](#) [G](#) [H](#) [I](#) [J](#) [K](#) [L](#) [M](#) [N](#) [O](#) [P](#) [Q](#) [R](#) [S](#) [T](#) [U](#) [V](#) [W](#) [X](#) [Y](#) [Z](#)

Brand & Generic Name Search

Search

For this example, we will be using Abiraterone.

Drug Search

Multi-Level Prescription Medication List for Commercial Plans

[Start Over](#)

Please select a drug from the list below to continue.

① [abiraterone acetate oral tablet 500 mg](#)

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Formulary Id: 00000000
 Formulary Effective Date: 09/01/2020
 Updated: 01/2023

Once you click on the medication, detailed information will be shown. Click on the “Clinical Criteria” icon in the “Notes & Restrictions” column.

Search Results

[Start Over](#)

Selection





Multi-Level Prescription Medication List for Commercial Plans

Drug Search: abiraterone acetate oral tablet 500 mg

1 drug(s) found

To view other medications in a therapeutic class, click any class hyperlink in your search results.

Results

Brand Name <small>generic name</small>	Therapeutic Class <small>Sub-Class</small>	Dose/Strength	Status	Notes & Restrictions
abiraterone acetate oral tablet 500 mg Ⓞ	*Antineoplastics And Adjunctive Therapies* *Androgen Biosynthesis Inhibitors***	TABLET 500 MG	①	   


A pop up window will appear that says “Click [HERE](#)”.

Search Results


[Start Over](#)

Selection
Multi-Level Prescription Medication List
 Drug Search: abiraterone acetate oral tablet
 1 drug(s) found
 To view other medications in a therapeutic class, click [HERE](#)


Results

Brand Name generic name	Therapeutic Class Sub-Class
abiraterone acetate oral tablet 500 mg 	*Antineoplastics, Adjunctive Therapies *Androgen Biosynthesis Inhibitors***

Brand Name: Abiraterone Acetate Oral Tablet 500 MG
Generic Name:
Dosage/Strength: Tablet 500 MG
Status: Tier 1

Details: Click [HERE](#) 

Click the hyperlink and it will redirect you to the Pharmacy Coverage Guideline.



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PHARMACY COVERAGE GUIDELINES	ORIGINAL EFFECTIVE DATE: 1/1/2016
SECTION: DRUGS	LAST REVIEW DATE: 5/19/2022
	LAST CRITERIA REVISION DATE: 5/19/2022
	ARCHIVE DATE:

Abiraterone Acetate
YONSA® (abiraterone acetate)
ZYTIGA® (abiraterone acetate)

Coverage for services, procedures, medical devices and drugs are dependent upon benefit eligibility as outlined in the member's specific benefit plan. This Pharmacy Coverage Guideline must be read in its entirety to determine coverage eligibility, if any.

This Pharmacy Coverage Guideline provides information related to coverage determinations only and does not imply that a service or treatment is clinically appropriate or inappropriate. The provider and the member are responsible for all decisions regarding the appropriateness of care. Providers should provide BCBSAZ complete medical rationale when requesting any exceptions to these guidelines.