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NEW YORK Provider Communications

Designated specialty pharmacy network updates

Published: Jun 1, 2021 - **Products & Programs** / Pharmacy

As we previously communicated, Empire BlueCross BlueShield’s (“Empire”) Designated Specialty Pharmacy Network requires providers who are not part of the Designated Specialty Pharmacy Network to acquire certain select specialty pharmacy medications administered in the hospital outpatient setting through CVS Specialty Pharmacy.

This update is to advise of the following changes:

Effective for dates of service on and after June 30, 2021, the following specialty pharmacy medication will be **added** to the Designated Medical Specialty Pharmacy drug list. Accordingly, hospitals that are not in the Designated Specialty Pharmacy Network will be required to acquire this specialty medication administered in the hospital outpatient setting from CVS Specialty Pharmacy.

HCPCS	Description	Brand Name
Q5121	INJECTION, INFLIXIMAB-AXXQ, BIOSIMILAR 10MG	Avsola

Effective immediately, the following specialty pharmacy medications have been **removed** from the Designated Medical Specialty Pharmacy drug list:

HCPCS	Description	Brand Name
J0178	EYLEA	Eylea
J0588	INJECTION INCOBOTULINUMTOXIN 1 UNIT	Xeomin
J2353	INJ OCTREOTIDE DEPOT FORM IM 1MG	Sandostatin LAR Depot
J1930	SOMATULINE DEPOT	Somatuline Depot

To access the current Designated Medical Specialty Pharmacy drug list, please visit empireblue.com, select *Providers*, select *Forms and Guides* (under the Provider Resources column), scroll down and select *Pharmacy* in the Category drop down. The Designated Medical Specialty Pharmacy drug list may be updated periodically by Empire.

If you have questions or would like to discuss the terms and conditions to be included as a Designated Specialty Pharmacy Network provider, please contact your Empire Contract Manager. Thank you for your continued participation in the Empire networks and the services you provide to our members.

1199-0621-PN-NY

URL: <https://providernews.empireblue.com/article/designated-specialty-pharmacy-network-updates>

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June 2021 Newsletter

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