

Blue Cross and Blue Shield of Texas

Medical Drug Benefit List

Summary of Formulary Benefits Drugs Covered under Medical Benefit (Medical Drug Benefits)

The information in this document is designed to help you understand the Medical Drug Benefits offered under this plan and compare these benefits to those offered by other plans. Information contained in this summary is designed to help you compare both the value and scope of formulary benefits.

How to Find Information on the Cost of Prescription Drugs

Your Summary of Benefits and Coverage (SBC) document lists information about your plan, including medical deductibles and out of pocket maximums. This formulary document lists drugs covered under the medical benefit of this plan and any special requirements for each drug.

Medical drug pricing shown in this document, which applies to drug claims paid under your medical benefit, is based on the median allowable cost from 2025 medical claims (professional and facility claims) for each of the drugs listed below. If a medication had no previous claims history, pricing was based on the professional national drug code (NDC) fee schedule with average units expected.

Site of Care Medications are a list of select infused medications which members may experience a lower-cost share for using a professional setting (doctor's office, infusion suite or home infusion).

In reviewing this formulary please utilize the following legend to identify member cost share estimates as well as drugs that may need prior authorization. Please note this information is included in the footer of each page throughout this document.

Legend:

\$ = under \$100

\$\$ = \$100-\$250

\$\$\$ = \$251-\$500

\$\$\$\$ = \$501-\$1,000

\$\$\$\$\$ = over \$1,000

A = drug not subject to medical deductible or member cost share

*** = drug may require prior authorization in order to be covered.**

SoC = Site of Care

The following plans are not expected to have member cost share after deductible for the drugs listed in this medical benefit formulary as long as any prior authorizations noted are approved:

Blue Advantage Gold HMO - Max - Native American Zero

Blue Advantage Gold HMO - Max - Native American Limited

Blue Advantage Silver HMO - Champion - Native American Zero

Blue Advantage Silver HMO - Champion - Native American Limited

Blue Advantage Bronze HMO - Balance HSA - Native American Zero

Blue Advantage Bronze HMO - Balance HSA - Native American Limited

Blue Advantage Gold HMO - Secure - Native American Zero

Blue Advantage Gold HMO - Secure - Native American Limited

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Blue Cross and Blue Shield of Texas

Medical Drug Benefit List

MyBlue Health Bronze - Champion HSA - Native American Zero
MyBlue Health Bronze - Champion HSA - Native American Limited
MyBlue Health Gold - Champion - Native American Zero
MyBlue Health Gold - Champion - Native American Limited
MyBlue Health Silver - Champion - Native American Zero
MyBlue Health Silver - Champion - Native American Limited
Blue Advantage Silver HMO - Balance - Native American Zero
Blue Advantage Silver HMO - Balance - Native American Limited
Blue Advantage Plus Bronze - Support HSA - Native American Zero
Blue Advantage Plus Bronze - Support HSA - Native American Limited
Blue Advantage Plus Gold - Secure - Native American Zero
Blue Advantage Plus Gold - Secure - Native American Limited
Blue Advantage Plus Silver - Balance - Native American Zero
Blue Advantage Plus Silver - Balance - Native American Limited
Blue Advantage Plus Silver - Champion - Native American Zero
Blue Advantage Plus Silver - Champion - Native American Limited
Blue Advantage Plus Gold - Balance - Native American Zero
Blue Advantage Plus Gold - Balance - Native American Limited
Blue Advantage Gold HMO - Standard - Native American Zero
Blue Advantage Gold HMO - Standard - Native American Limited
Blue Advantage Silver HMO - Standard - Native American Zero
Blue Advantage Silver HMO - Standard - Native American Limited
Blue Advantage Bronze HMO - Standard HSA - Native American Zero
Blue Advantage Bronze HMO - Standard HSA - Native American Limited
MyBlue Health Bronze - Standard HSA - Native American Zero
MyBlue Health Bronze - Standard HSA - Native American Limited
MyBlue Health Gold - Standard - Native American Zero
MyBlue Health Gold - Standard - Native American Limited
MyBlue Health Silver - Standard - Native American Zero
MyBlue Health Silver - Standard - Native American Limited
Blue Advantage Plus Bronze - Standard HSA - Native American Zero
Blue Advantage Plus Bronze - Standard HSA - Native American Limited
Blue Advantage Plus Gold - Standard - Native American Zero
Blue Advantage Plus Gold - Standard - Native American Limited
Blue Advantage Plus Silver - Standard - Native American Zero
Blue Advantage Plus Silver - Standard - Native American Limited

This formulary document includes a link on the bottom of each page to the Find a Medicine web-based tool on MyPrime.com, which you may use to search for drugs that may be covered on the prescription benefit if not found on this list to get estimate prices.

Toll free number to obtain specific cost-sharing information: 1-800-423-1973

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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

Formulary by Health Benefit Plan for the following 2027 Individual Plans

Plan <i>(Select plan name to view plan Summary of Benefits & Coverage)</i>	Associated Drug List
Blue Advantage Gold HMO - Max - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Gold HMO - Max - Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Gold HMO - Max - Native American Zero	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Gold HMO - Max - Native American Limited	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Gold HMO - Signature - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Security HMO - HSA - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Security HMO - HSA - Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Champion - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Champion - Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Champion - Native American Zero	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Champion - Native American Limited	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Champion - Marketplace 73% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Champion - Marketplace 87% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Champion - Marketplace 94% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Bronze HMO - Balance HSA - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Bronze HMO - Balance HSA - Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Bronze HMO - Balance HSA - Native American Zero	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Bronze HMO - Balance HSA - Native American Limited	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Bronze HMO - Signature HSA - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List

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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

Blue Advantage Silver HMO - Signature 1- Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Gold HMO - Secure - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Gold HMO - Secure - Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Gold HMO - Secure - Native American Zero	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Gold HMO - Secure - Native American Limited	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Signature 2 - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Bronze - Champion HSA - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Bronze - Champion HSA - Marketplace	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Bronze - Champion HSA - Native American Zero	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Bronze - Champion HSA - Native American Limited	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Gold - Champion - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Gold - Champion - Marketplace	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Gold - Champion - Native American Zero	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Gold - Champion - Native American Limited	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Silver - Champion - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Silver - Champion - Marketplace	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Silver - Champion - Native American Zero	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Silver - Champion - Native American Limited	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Silver - Champion - Marketplace 73% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Silver - Champion - Marketplace 87% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Silver - Champion - Marketplace 94% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List

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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

Blue Advantage Silver HMO - Balance - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Balance - Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Balance - Native American Zero	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Balance - Native American Limited	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Balance - Marketplace 73% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Balance - Marketplace 87% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Silver HMO - Balance - Marketplace 94% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Silver - Signature - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Security - HSA - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
MyBlue Health Security - HSA - Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Bronze - Signature HSA - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Bronze - Support HSA - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Bronze - Support HSA - Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Bronze - Support HSA - Native American Zero	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Bronze - Support HSA - Native American Limited	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Gold - Secure - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Gold - Secure - Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Gold - Secure - Native American Zero	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Gold - Secure - Native American Limited	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Balance - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Balance - Marketplace	Health Insurance Marketplace 6 Tier Drug List

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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

Blue Advantage Plus Silver - Balance - Native American Zero	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Balance - Native American Limited	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Balance - Marketplace 73% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Balance - Marketplace 87% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Balance - Marketplace 94% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Signature - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Champion - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Champion - Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Champion - Native American Zero	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Champion - Native American Limited	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Champion - Marketplace 73% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Champion - Marketplace 87% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Silver - Champion - Marketplace 94% Actuarial Value	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Gold - Balance - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Gold - Balance - Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Gold - Balance - Native American Zero	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Gold - Balance - Native American Limited	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Security - HSA - Non-Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Plus Security - HSA - Marketplace	Health Insurance Marketplace 6 Tier Drug List
Blue Advantage Gold HMO - Standard - Non-Marketplace	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Gold HMO - Standard - Marketplace	Health Insurance Marketplace 4 Tier Drug List

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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

Blue Advantage Gold HMO - Standard - Native American Zero	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Gold HMO - Standard - Native American Limited	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Silver HMO - Standard - Non-Marketplace	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Silver HMO - Standard - Marketplace	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Silver HMO - Standard - Native American Zero	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Silver HMO - Standard - Native American Limited	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Silver HMO - Standard - Marketplace 73% Actuarial Value	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Silver HMO - Standard - Marketplace 87% Actuarial Value	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Silver HMO - Standard - Marketplace 94% Actuarial Value	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Bronze HMO - Standard HSA - Non-Marketplace	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Bronze HMO - Standard HSA - Marketplace	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Bronze HMO - Standard HSA - Native American Zero	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Bronze HMO - Standard HSA - Native American Limited	Health Insurance Marketplace 4 Tier Drug List
MyBlue Health Bronze - Standard HSA - Non-Marketplace	Health Insurance Marketplace 4 Tier Drug List
MyBlue Health Bronze - Standard HSA - Marketplace	Health Insurance Marketplace 4 Tier Drug List
MyBlue Health Bronze - Standard HSA - Native American Zero	Health Insurance Marketplace 4 Tier Drug List
MyBlue Health Bronze - Standard HSA - Native American Limited	Health Insurance Marketplace 4 Tier Drug List
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MyBlue Health Gold - Standard - Marketplace	Health Insurance Marketplace 4 Tier Drug List
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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

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MyBlue Health Silver - Standard - Marketplace 87% Actuarial Value	Health Insurance Marketplace 4 Tier Drug List
MyBlue Health Silver - Standard - Marketplace 94% Actuarial Value	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Plus Bronze - Standard HSA - Non-Marketplace	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Plus Bronze - Standard HSA - Marketplace	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Plus Bronze - Standard HSA - Native American Zero	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Plus Bronze - Standard HSA - Native American Limited	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Plus Gold - Standard - Non-Marketplace	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Plus Gold - Standard - Marketplace	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Plus Gold - Standard - Native American Zero	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Plus Gold - Standard - Native American Limited	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Plus Silver - Standard - Non-Marketplace	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Plus Silver - Standard - Marketplace	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Plus Silver - Standard - Native American Zero	Health Insurance Marketplace 4 Tier Drug List
Blue Advantage Plus Silver - Standard - Native American Limited	Health Insurance Marketplace 4 Tier Drug List
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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

Blue Advantage Plus Silver - Standard - Marketplace 94% Actuarial Value

Health Insurance Marketplace
4 Tier Drug List

Drug List by Health Benefit Plan: 2027 Blue Cross and Blue Shield of Texas employer-offered small group plans with in-vitro fertilization (or IVF) coverage should use the Health Insurance Marketplace 6 Tier In-Vitro Fertilization Drug List. All other employer-offered small group plans use the 2027 Health Insurance Marketplace 6 Tier Drug List. These employer-offered health plans are offered on and off the Texas Health Insurance Marketplace.

How Prescription Drugs are Covered Under the Plan

Cost-Sharing: Your deductible is listed on your SBC document. Your deductible is the amount of money that you and anyone covered by your plan must pay out-of-pocket each plan year for covered services before your plan starts to pay. A certain set of drugs may be covered without cost-sharing, even before meeting the deductible. Your cost share details are listed on your Summary of Benefits and Coverage. Your cost share may be a copayment (an amount you pay out-of-pocket for your prescription medicines after you've met any deductible) or coinsurance (a percentage of the total cost that you pay for your medicines after you've met any deductible).

Medical Management Requirements: Medical or utilization management is a process that is part of your health plan. Utilization management helps to make sure that you are getting the right drugs -- all while helping to make medicine more affordable. Health plans call for utilization management on some medicines to keep you safe, by helping to make sure the medicines you take and are prescribed by your doctor are used correctly. Health plan companies, hospitals, doctors and pharmacists share information — working together to help improve medicine use for members. These programs help to catch mistakes, reduce waste, improve safety and keep medicine affordable by lowering costs. Medical or utilization management is made up of programs that include:

Prior Authorization or Pre-Determination: Prior authorization or pre-determination (sometimes called pre-approval) means that your medicine needs to be approved by your health plan before it will be covered.

Right to Appeal: If your request for coverage is denied, but your physician has determined that the drug is medically necessary, you have the right to appeal and request coverage.

Continuation of Coverage: You have the right to continued coverage for a prescription drug at the benefit coverage level at which the drug was covered at the beginning of the plan year, until your plan renewal date, provided that the drug continues to be medically necessary and safe.

Off-Label Drug Use: Off-label use of drugs approved by the U.S. Food and Drug Administration occurs when a drug is prescribed for a reason that has not been approved by the FDA. Off-label use may be covered when all of the following apply:

- The medicine has been approved by the FDA for at least one use
- The medicine is prescribed by a physician
- The medicine is intended to treat chronic, disabling, or life-threatening illnesses
- Sufficient clinical evidence is provided by your physician for the off-label use requested, and

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Blue Cross and Blue Shield of Texas

Medical Drug Benefit List

- The services and medicine are medically necessary

Off-Label use of FDA approved drugs is not covered when these conditions are not met or when the FDA has determined its use to be contraindicated for treatment of the condition for which coverage is requested.

Limitations and Exclusions

Medical Drug Benefits are not available for:

- Drugs required by law to be labeled: **“Caution - Limited by Federal Law to Investigational Use,”** or
- **Experimental** drugs, even though a charge is made for the drugs, or
- **Legend** drugs which are not approved by the FDA for a particular use or purpose or when used for a purpose other than the purpose for which the FDA approval is given, except as required by law or regulation.

Experimental/Investigational means the use of any treatment, procedure, facility, equipment, drug, device or supply not accepted as Standard Medical Treatment of the condition being treated or any of such items requiring federal or other governmental agency approval not granted at the time services were provided. “Approval” by a federal agency means that the treatment, procedure, facility, equipment, drug, device or supply has been approved for the condition being treated and, in the case of a drug, in the dosage used on the patient. Medical treatment includes medical, surgical or dental treatment. “Standard Medical Treatment” means the services or supplies that are in general use in the medical community in the United States, and:

- have been demonstrated in peer-reviewed literature to have scientifically established medical value for curing or alleviating the condition being treated;
- are appropriate for the Hospital or Participating Provider; and
- the Health Care Professional has had the appropriate training and experience to provide the treatment or procedure.

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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

Drug Name	Member Cost Share Estimate
ABECMA *	\$\$\$\$\$
ABILIFY ASIM	\$\$\$\$\$
ABILIFY MAIN	\$\$\$\$\$
ABLYSINOL	\$\$\$\$\$
ABRILADA	\$\$\$\$\$
ABRYSVO	A
ACETAMINOPHEN	\$
ACETAZOLAMID	\$
ACTEMRA * SoC	\$\$\$\$\$
ACTEMRA ACTPEN	\$\$\$\$\$
ACTHAR GEL	\$\$\$\$\$
ACTHIB	A
ACTIMMUNE	\$\$\$\$\$
ACYCLOVIR NA	\$
ADACEL	A
ADALIMUMAB	\$\$\$\$\$
ADRIAMYCIN	\$\$\$
ADSTILADRIN *	\$\$\$\$\$
AFLURIA QUAD	A
AGGRASTAT	\$\$\$
AIMOVIG	\$\$\$
AJOVY	\$\$\$
ALBUMIN HUM	\$\$\$
ALBUMINEX	\$\$\$
ALBURX	\$\$\$\$\$
ALBUTEIN	\$\$\$\$\$
ALIMTA	\$\$\$\$\$
ALOPRIM	\$\$\$\$\$
ALYMSYS *	\$\$\$\$\$
AMELUZ	\$\$\$
AMIKACIN	\$
AMINOPHYLLIN	\$
AMJEVITA	\$\$\$\$\$
AMP/SULBACTA	\$

Drug Name	Member Cost Share Estimate
AMPHOTERICIN	\$\$\$\$
AMPICILLIN	\$
AMP-SULBACTA	\$\$\$
AMTAGVI *	\$\$\$\$\$
AMVUTTRA * SoC	\$\$\$\$\$
AMYTAL SOD	\$\$\$\$
ANDEMBRY	\$\$\$\$\$
ANDROGEL	\$
ANUCORT-HC	\$
APHEXDA	\$\$\$\$\$
APOKYN	\$\$\$\$
APOMORPHINE HCL	\$\$\$
APRETUDE	A
AQUASTAT	\$
AQUASTAT SFR	\$
ARALAST NP	\$\$\$\$\$
ARANESP * SoC	\$\$\$\$\$
ARCALYST	\$\$\$\$\$
AREXVY	A
ARGATRB/NACL	\$\$\$\$\$
ARGATROBAN	\$\$\$\$
ARISTADA	\$\$\$\$\$
ARRANON	\$\$\$\$\$
ARSENIC TRIO	\$\$\$\$\$
ARTESUNATE	\$\$\$\$\$
ARTZ FX	\$
ASCENIV * SoC	\$\$\$\$\$
ASCLERA	\$\$
ASPARLAS	\$\$\$\$\$
ATGAM	\$\$\$\$
ATIVAN	\$
ATROPINE SUL	\$
AUKELSO *	\$\$\$\$\$
AVASTIN *	\$\$\$\$\$

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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

Drug Name	Member Cost Share Estimate
AVSOLA * SoC	\$\$\$\$\$
AVTOZMA * SoC	\$\$\$\$\$
AZACITIDINE	\$\$\$\$\$
AZACTAM	\$
AZITHROMYCIN	\$
AZTREONAM	\$
BABYBIG	\$\$\$\$\$
BACLOFEN	\$\$\$\$\$
BARHEMSYS	\$
BCG VACCINE	\$
B-COMPLEX	\$
BD POSIFLUSH	\$
BELEODAQ *	\$\$\$\$\$
BELLADONNA-OPIMUM	\$
BELRAPZO	\$\$\$\$\$
BENDAMUSTINE	\$\$\$\$\$
BENLYSTA * SoC	\$\$\$\$\$
BENTYL	\$
BENZTROPINE	\$
BEOVU	\$\$\$\$\$
BERINERT	\$\$\$\$\$
BESREMI	\$\$\$\$\$
BETA-PHOS/AC	\$
BEXSERO	A
BEYFORTUS	\$\$\$\$\$
BICILLIN C-R	\$\$\$\$\$
BICILLIN L-A	\$\$\$\$\$
BILDYOS *	\$
BILPREVDA *	\$\$\$\$\$
BIVIGAM * SoC	\$\$\$\$\$
BLEOMYCIN	\$
BLOXIVERZ	\$
BOMYNTRA *	\$\$\$\$\$
BOOSTRIX	A

Drug Name	Member Cost Share Estimate
BORTEZOMIB	\$\$\$
BOSAYA *	\$\$\$\$\$
BOTOX *	\$\$\$\$\$
BREKIYA	\$\$\$\$\$
BREYANZI *	\$\$\$\$\$
BRIUMVI * SoC	\$\$\$\$\$
BRIVIACT	\$
BUPIV/DEXTRO SPINAL	\$
BUPIVACAINE	\$
BUPIVACAINE SPINAL	\$
BUPIVACAINE/ EPI	\$
BUPRENORPHIN	\$
BUPRENORPHINE	\$
BUSULFAN	\$\$\$\$\$
BUSULFEX	\$\$\$\$\$
BUTORPHANOL	\$
BUTRANS	\$
BYFAVO	\$
BYOOVIZ *	\$\$\$\$\$
CABENUVA *	\$\$\$\$\$
CABLIVI	\$\$\$
CAFFEINE CIT	\$
CAFFEINE/SOD BENZOATE	\$
CAL GLU/NACL	\$
CALCITRIOL	\$
CALDOLOR	\$
CALSODORE PAK	\$\$\$\$\$
CAMCEVI	\$\$\$\$\$
CAMPTOSAR	\$
CANCIDAS	\$\$\$
CARBOPLATIN	\$
CARMUSTINE	\$\$\$\$\$
CARNITOR	\$
CARVYKTI *	\$\$\$\$\$

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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

Drug Name	Member Cost Share Estimate
CASPOFUNGIN	\$\$\$
CATAPRES-TTS-	\$\$
CAVERJECT	\$
CAVERJECT IM	\$
CEFAZOL/DEXTROSE	\$
CEFAZOLIN	\$
CEFEPIME	\$
CEFEPIME HCL	\$
CEFEPIME/DEXTROSE	\$
CEFOTAXIME	\$
CEFOXITIN	\$
CEFTAZIDIME	\$
CEFTRIAX/DEXTROSE	\$
CEFTRIAXONE	\$
CEFTRIAXONE/DEXTROSE	\$\$
CEFUROXIME	\$
CELESTONE USPAN	\$
CELLCEPT IV	\$
CEREBYX	\$
CHLOROTHIAZ	\$\$
CHLORPROMAZ	\$
CIDOFOVIR	\$\$\$\$
CIMERLI	\$\$\$\$
CINRYZE * SoC	\$\$\$\$
CIPROFLOXACN	\$
CISPLATIN	\$
CLADRIBINE	\$\$\$
CLEOCIN PHOS	\$
CLIMARA	\$
CLINDAMY/DEXTROSE	\$
CLINDAMYCIN	\$
CLINDMYC/NACL	\$
CLOBETAVIX	\$\$\$\$
CLOFARABINE	\$\$\$\$

Drug Name	Member Cost Share Estimate
CLOLAR	\$\$
CLONIDINE	\$
CLONIDINE HCL	\$
COCAINE HCL	\$\$\$
COLISTIMETH	\$
COLUMVI	\$\$\$\$
COLY-MYCIN M	\$
COMIRNATY	A
COMPRO	\$
CONEXENCE *	\$\$\$\$
COPAXONE	\$\$\$\$
CORTROPHIN GEL	\$\$\$\$
COSELA	\$\$\$\$
CRESEMBA	\$\$\$
CRYSVITA * SoC	\$\$\$\$
CUBICIN RF	\$\$\$
CUTAQUIG * SoC	\$\$\$\$
CUVITRU * SoC	\$\$\$\$
CYANOCOBALAM	\$
CYCLOPHOSPH	\$\$\$\$
CYCLOPHOSPHA	\$\$\$\$
CYCLOSPORINE	\$\$\$\$
CYLTEZO	\$\$\$\$
CYRAMZA *	\$\$\$\$
CYTARABINE	\$
CYTOGAM	\$\$\$\$
DACARBAZINE	\$\$
DACTINOMYCIN	\$\$\$\$
DANYELZA	\$\$\$\$
DAPTACEL	A
DAPTOMY/NACL	\$
DAPTOMYCIN	\$\$\$\$
DARZALEX *	\$\$\$\$
DARZALEX FASPRO *	\$\$\$\$

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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

Drug Name	Member Cost Share Estimate
DAUNORUBICIN	\$
DAWNZERA	\$\$\$\$\$
DDAVP	\$\$\$\$\$
DECITABINE	\$\$\$\$\$
DEFITELIO	\$\$\$\$\$
DELESTROGEN	\$
DEMEROL	\$
DENG VAXIA Suspension Reconstituted	\$
DEPO-ESTRADI	\$
DEPO-MEDROL	\$
DEPO-PROVERA	A
DESMOPRESSIN	\$\$\$\$\$
DEXAMETH PHOSPHATE	\$
DEXMED/DEXTROSE	\$
DEXMEDE/NACL	\$
DEXMEDETOMID	\$\$
DEXPANTHENOL	\$
DEXRAZOXANE	\$\$\$\$\$
DIAZEPAM	\$\$
DICLOFENAC SODIUM	\$
DICYCLOMINE	\$
DIGOXIN	\$
DIHYDROERGOT	\$\$\$\$\$
DIPHENHYDRAM	\$
DIVIGEL	\$
DOBUTAM/DEXTROSE	\$
DOBUTAMINE	\$
DOCETAXEL	\$\$\$\$\$
DODEX	\$
DOPAMINE	\$
DOPAMINE/DEXTROSE	\$
DOPRAM	\$
DOTTI	\$

Drug Name	Member Cost Share Estimate
DOXERCALCIF	\$
DOXIL *	\$
DOXORUBICIN	\$\$\$\$\$
DROPERIDOL	\$
DUOBRII	\$
DURACLON	\$
DURAMORPH	\$
DURYSTA	\$\$\$\$\$
DYSPORT *	\$\$\$\$\$
ECTAFER	\$\$\$\$\$
EDEX	\$\$
ELAHERE *	\$\$\$\$\$
ELFABRIO * SoC	\$\$\$\$\$
ELIGARD	\$\$\$\$\$
ELITEK	\$\$\$\$\$
ELLENC	\$
ELREXFIO *	\$\$\$\$\$
ELZONRIS *	\$\$\$\$\$
EMEND	\$\$\$\$\$
EMGALITY	\$\$\$\$\$
EMPAVELI	\$\$\$\$\$
EMPLICITI *	\$\$\$\$\$
ENALAPRILAT	\$
ENBREL	\$\$\$\$\$
ENBREL MINI	\$\$\$\$\$
ENBREL SURECLICK	\$\$\$\$\$
ENGERIX-B	A
ENJAYMO * SoC	\$\$\$\$\$
ENOBY *	\$\$\$\$\$
ENSPRYNG	\$\$\$\$\$
ENTYVIO PEN	\$\$\$\$\$
EPKINLY *	\$\$\$\$\$
EPOGEN * SoC	\$\$\$\$\$
EPOPROSTENOL	\$\$

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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

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EPTIFIBATIDE	\$\$\$
ERAXIS	\$\$
ERBITUX *	\$\$\$\$\$
ERTAPENEM	\$\$
ERYTHROCIN	\$\$
ERYTHROMYCIN	\$\$
ESTRAD VAL	\$
ESTRADIOL	\$
ESTROGEL	\$
ETHYOL	\$\$\$\$\$
ETOPOPHOS	\$\$
ETOPOSIDE	\$\$
EUFLEXXA	\$\$\$\$\$
EVENITY * SoC	\$\$\$\$\$
EVKEEZA * SoC	\$\$\$\$\$
EVOMELA	\$\$\$\$\$
EXDENSUR * SoC	\$\$\$\$\$
EXELON	\$
EYLEA	\$\$\$\$\$
EYLEA HD	\$\$\$\$\$
FABRAZYME * SoC	\$\$\$\$\$
FASENRA * SoC	\$\$\$\$\$
FASENRA PEN *	\$\$\$\$\$
FASLODEX	\$\$\$\$\$
FENTANYL CIT	\$
FENTANYL/BUPIVACAINE/SODIUM CHLORIDE NA Solution	\$
FENVI	\$\$\$\$\$
FERAHEME	\$\$\$\$\$
FERRIC GLUCO	\$\$
FERRLECIT	\$
FERUMOXYTOL	\$\$\$\$\$
FETROJA	\$\$\$\$\$
FIASP	\$

Drug Name	Member Cost Share Estimate
FIASP FLEXTOUCH	\$
FIASP PENFILL	\$
FIASP PUMPCART	\$
FIRAZYR	\$\$\$\$\$
FIRMAGON	\$\$\$\$\$
FLEBOGAMMA * SoC	\$
FLEXBUMIN	\$\$\$
FOLAN	\$
FLOXURIDINE	\$\$\$\$\$
FLUAD QUADRI	A
FLUARIX QUAD	A
FLUBLOK QUAD	A
FLUCLVX QUAD	A
FLUCONAZOLE / NACL	\$
FLUCONAZOLE/ NACL	\$
FLUDARABINE	\$\$\$\$\$
FLULAVAL QUA	A
FLUMIST QUAD	A
FLUMIST TRIVALENT	A
FLUOROURACIL	\$\$
FLUPHENAZ	\$
FLUPHENAZINE	\$
FLUZONE HD	A
FLUZONE QUAD	A
FOLOTYN	\$\$\$\$\$
FORZINITY	\$\$\$\$\$
FOSAPREPITAN	\$\$\$\$\$
FOSCARNET	\$
FOSCAVIR	\$
FOSPHENYTOIN	\$
FULPHILA *	\$\$\$\$\$
FULVESTRANT	\$\$\$\$\$
FYARRO *	\$\$\$\$\$
FYLNETRA *	\$\$\$\$\$

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GABLOFEN	\$\$\$\$\$
GAMASTAN	\$
GAMIFANT	\$\$\$\$\$
GAMMAGARD * SoC	\$\$\$\$\$
GAMMAGARD SD * SoC	\$\$\$\$\$
GAMMAKED * SoC	\$\$\$\$\$
GAMMAPLEX * SoC	\$\$\$\$\$
GAMUNEX-C * SoC	\$\$\$\$\$
GANCICLOVIR	\$
GARDASIL	A
GEL-ONE	\$\$\$\$\$
GEMCITABINE	\$
GENOTROPIN	\$\$\$\$
GENOTROPIN MINIQUICK	\$\$\$\$
GENTAM/NACL	\$
GENTAMICIN	\$
GEODON	\$
GIMOTI	\$\$\$\$
GLASSIA	\$\$\$\$\$
GLATIRAMER ACETATE	\$
GLATOPA	\$\$\$
GLUCAGON EMR	\$\$\$\$
GLYCOPYRROL	\$
GOHIBIC	\$
GOPRELTO	\$
GRANISETRON	\$
GRANIX *	\$\$\$\$
HADLIMA	\$\$\$\$\$
HADLIMA PUSHTOUCH	\$\$\$\$\$
HAEGARDA	\$\$\$\$\$
HALDOL DEC	\$
HALOPER DEC	\$
HALOPER LAC	\$
HALOPERIDOL	\$

Drug Name	Member Cost Share Estimate
HAVRIX	A
HECTOROL	\$
HEMGENIX *	\$\$\$\$\$
HEMLIBRA	\$\$\$\$\$
HEP SOD/DEXTROSE	\$
HEP SOD/NACL	\$
HEPAGAM B	\$
HEPARIN SOD	\$
HEPARIN SOD/NACL	\$
HEPLISAV-B	A
HERCEPTIN *	\$\$\$\$\$
HERZUMA *	\$\$\$\$\$
HEXATRIONE	\$
HIBERIX	A
HIZENTRA * SoC	\$\$\$\$\$
HULIO	\$\$\$\$\$
HUMATROPE	\$\$\$\$\$
HUMIRA	\$\$\$\$\$
HYALGAN	\$\$\$\$\$
HYCANTIN	\$\$\$\$\$
HYDROCORTISONE ACETATE	\$
HYDROCORTISONE ACETATE-PRAMOXINE HCL	\$
HYDROMORPHON	\$
HYDROXOCOBAL	\$
HYDROXYZ HCL	\$
HYLENEX	\$
HYMOVIS	\$\$\$\$\$
HYOSCYAMINE	\$
HYPERHEP B	\$
HYPERRAB	\$\$\$\$\$
HYPERRHO S/D	\$
HYPERTET	\$\$\$\$\$
HYQVIA * SoC	\$\$\$\$\$

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HYRIMOZ	\$\$\$\$\$
IBANDRONATE	\$
IBUPROFEN LYSINE	\$
ICATIBANT	\$\$\$\$\$
IDAMYCIN PFS	\$
IDARUBICIN	\$
IFEX	\$
IFOSFAMIDE	\$
IGALMI	\$
ILARIS * SoC	\$\$\$\$\$
IMCIVREE	\$\$\$\$\$
IMFINZI *	\$\$\$\$\$
IMIPENEM/CIL	\$
IMJUDO *	\$\$\$\$\$
IMLYGIC *	\$\$\$\$\$
IMOVAX RABIE	\$\$\$\$\$
INCRELEX	\$\$\$\$\$
INDOCIN	\$
INDOMETHACIN	\$
INFANRIX	A
INFED	\$\$\$\$\$
INFLIXIMAB * SoC	\$\$\$\$\$
INFUMORPH	\$
INVEGA HAFYE	\$\$\$\$\$
INVEGA T	\$\$\$\$\$
IPOL INACTIVE	A
IRINOTECAN	\$
ISOPROTEREN	\$\$\$\$\$
ISTODAX	\$\$\$\$\$
IXEMPRA	\$\$\$\$\$
IXIARO	\$\$\$\$\$
IZERVAY	\$\$\$\$\$
JELMYTO *	\$\$\$\$\$
JEMPERLI *	\$\$\$\$\$

Drug Name	Member Cost Share Estimate
JUBBONTI *	\$\$\$\$\$
JYNNEOS	A
KADCYLA *	\$\$\$\$\$
KANJINTI *	\$\$\$\$\$
KEDBUMIN	\$
KEDRAB	\$\$\$\$\$
KENALOG	\$
KENGREAL	\$\$\$\$\$
KEPIVANCE	\$\$\$\$\$
KEPPRA	\$
KESIMPTA	\$\$\$\$\$
KETOROLAC	\$
KETOROLAC TR	\$
KEYTRUDA *	\$\$\$\$\$
KEYTRUDA QLEX *	\$\$\$\$\$
KHAPZORY *	\$\$\$\$\$
KIMMTRAK *	\$\$\$\$\$
KIMYRSA	\$\$\$\$\$
KINRIX	A
KORSUVA	\$
KRYSTEXXA * SoC	\$\$\$\$\$
KYLEENA IUD	\$\$\$\$\$
KYMRIAH *	\$\$\$\$\$
KYPROLIS *	\$\$\$\$\$
LABETALOL	\$
LABETALOL NAOL	\$
LACOSAMIDE	\$
LACTATED RINGERS Solution	\$
LAMZEDE	\$\$\$\$\$
LANOXIN	\$
LANREOTIDE ACETATE *	\$\$\$\$\$
LANTIDRA	\$\$\$\$\$
LECITHIN Granules	\$\$\$\$\$
LEQEMBI * SoC	\$\$\$\$\$

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LEQEMBI IQLIK	\$\$\$
LEQVIO * SoC	\$\$\$\$\$
LEUCOVOR CA	\$
LEUCOVOR CA CALCIUM	\$
LEUCOVORIN	\$
LEUKINE	\$\$\$
LEUPROLIDE ACETATE	\$\$\$\$\$
LEVETIR/NACL	\$
LEVETIRACETA	\$
LEVETIRACETM	\$
LEVETRA/NACL	\$
LEVOCARNITIN	\$
LEVOFLOX/DEXTROSE	\$
LEVOFLOXACIN	\$
LEVOLEUCOVOR	\$\$\$\$\$
LEVOTHYROXIN	\$\$\$
LEVULAN KERASTICK	\$\$\$\$\$
LIBTAYO *	\$\$\$\$\$
LICART	\$\$\$
LIDOCAINE HCL	\$
LIDOCAINE HCL VISCOUS	\$
LIDOCAINE VISCOUS HCL	\$
LIDOTRAL + HYDROCORTISONE	\$
LILETTA IUD	\$
LINCOCIN	\$
LINCOMYCIN	\$
LINEZOLID	\$
LIORESAL INT	\$\$\$\$\$
LORAZEPAM	\$
LUCENTIS	\$\$\$\$\$
LUGOLS IODINE	\$
LUMIZYME * SoC	\$
LUNSUMIO *	\$\$\$\$\$
LUNSUMIO VELO	\$\$\$\$\$

Drug Name	Member Cost Share Estimate
LUPR DEP-PED	\$\$\$\$\$
LUPRON DEPOT	\$\$\$\$\$
LUXTURNA *	\$\$\$\$\$
LYLLANA	\$
LYUMJEV KWIKPEN	\$
LYUMJEV TEMPO PEN	\$
MACI	\$\$\$\$\$
MANNITOL	\$
MARCAINE	\$
MARCAINE SPINAL	\$
MARCAINE/EPI	\$
MARGENZA *	\$
MEDROXYPR AC	A
MELPHALAN	\$\$\$\$\$
MENQUADFI	A
MENVEO	A
MEPERIDINE	\$
MEROPENEM	\$
MESALAMINE	\$\$\$
MESNA	\$
MESNEX	\$
METER BUFFER pH	\$
METHOCARBAM	\$
METHOTREXATE	\$
METHYLERGON	\$
METHYLPR ACE	\$
METHYLPR SS	\$
METHYLPREDNI	\$
METOCLOPRAM	\$
METRONIDAZOL	\$
MICAFUNGIN	\$\$\$
MIDAZOLAM	\$
MIDAZOLAM NACL	\$
MILRINONE	\$

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MILRINONE/DEXTROSE	\$
MINIVELLE	\$
MINOCIN	\$\$\$\$\$
MIRCERA * SoC	\$\$\$
MIRENA IUD SYSTEM	\$\$\$
MITIGO	\$
MITOMYCIN	\$\$\$
MITOXANTRON	\$
M-M-R II	A
MODERNA	A
MONJUVI *	\$\$\$\$\$
MONOFERRIC	\$\$\$
MORPHIN/NACL	\$
MORPHINE SUL	\$
MOUNJARO	\$\$\$\$\$
MOXIFLOXACIN	\$
MUTAMYCIN	\$
MVASI *	\$\$\$\$\$
MYCAMINE	\$\$\$\$\$
MYCOPHENOLAT	\$
MYOBLOC *	\$
MYXREDLIN	\$
NABI-HB	\$\$\$
NALBUPHINE	\$
NAROPIN	\$
NAYZILAM	\$
NELARABINE	\$\$\$\$\$
NEMLUVIO	\$\$\$\$\$
NEOPROFEN	\$
NEOSTIG METH	\$
NEUPOGEN *	\$\$\$\$\$
NEUPRO	\$
NEXAVIR	\$
NEXPLANON	\$\$\$

Drug Name	Member Cost Share Estimate
NEXVIAZYME * SoC	\$\$\$\$\$
NGENLA	\$\$\$\$\$
NIPENT	\$\$\$\$\$
NIVESTYM *	\$\$\$
NORDITROPIN	\$\$\$\$\$
NORDITROPIN FLEXP	\$\$\$\$\$
NORELGESTROMIN-ETH ESTRADIOL	A
NORML SALINE IV FLUSH	\$
NOVAVAX	\$
NPLATE * SoC	\$\$\$\$\$
NUCALA * SoC	\$\$\$\$\$
NUDERMRXPAK	\$\$\$
NUMBRINO	\$
NUTROPIN AQ NUSPIN	\$\$\$
NUZYRA	\$\$\$
NYVEPRIA *	\$\$\$\$\$
OCREVUS ZUNOVO * SoC	\$\$\$\$\$
OCTAGAM * SoC	\$\$\$\$\$
OCTREOTIDE *	\$
OGIVRI *	\$\$\$\$\$
OLANZAPINE	\$
OLINVIK	\$\$\$
OMISIRGE	\$\$\$\$\$
OMNITROPE	\$\$\$\$\$
OMVOH *	\$\$\$\$\$
OMVOH PEN *	\$\$\$\$\$
ONAPGO	\$
ONCASPARG	\$\$\$\$\$
ONDANSETRON	\$
ONIVYDE *	\$\$\$
ONTRUZANT *	\$\$\$\$\$
OPDIVO *	\$\$\$\$\$
OPDIVO QVANTIG *	\$\$\$\$\$
OPDUALAG *	\$\$\$\$\$

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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

Drug Name	Member Cost Share Estimate
ORBACTIV	\$\$\$\$\$
ORENCIA * SoC	\$\$\$\$\$
ORENCIA CLICKJECT *	\$\$\$\$\$
ORPHENADRINE	\$
OSENVELT *	\$
OSMITROL	\$
OSMITROL VFX	\$\$
OSPOMYV *	\$\$\$\$\$
OXACILLIN	\$\$\$
OXALIPLATIN	\$\$\$\$
OXLUMO * SoC	\$\$\$\$\$
OXYTOCIN	\$
OXYTROL	\$\$
PACLITAXEL	\$\$\$\$\$
PADCEV *	\$\$\$\$\$
PALONOSETRON	\$\$\$
PALYNZIQ *	\$\$\$\$\$
PAMIDRONATE	\$\$
PANZYGA * SoC	\$\$\$\$\$
PAPAVERINE	\$
PAPZIMEOS Suspension *	\$\$\$\$\$
PARAGARD IUD T	\$\$\$\$\$
PARAPLATIN	\$\$\$\$\$
PARICALCITOL	\$
PARSABIV	\$\$\$\$
PEDIARIX	A
PEDMARK	\$\$
PEMETREXED	\$\$\$\$\$
PEMFEXY	\$\$\$\$\$
PEMRYDI RTU	\$\$
PEN G SODIUM	\$
PEN GK/DEXTROSE	\$\$
PENBRAYA	A
PENICILLN GK	\$\$

Drug Name	Member Cost Share Estimate
PENNSAID	\$
PENTOBARB	\$\$
PERSERIS	\$\$\$\$\$
PFIZER	A
PFIZERPEN	\$
PH BUFFER pH	\$
PHENERGAN	\$
PHENOBARB	\$\$
PHENOL	\$
PHENOL Liquid	\$
PHENTOLAMINE	\$
PHENYTOIN	\$
PHESGO *	\$\$\$\$\$
PIPER/TAZOBA	\$
PITOCIN	\$
PLERIXAFOR	\$\$\$\$\$
PNEUMOVAX	A
POLIVY	\$\$\$\$\$
POLOCAINE MPF	\$
POLYMYXIN B	\$\$
POLYOXYL	\$
POMBILITI * SoC	\$\$\$\$\$
POSIMIR	\$\$
PRECEDEX	\$\$
PREVNAR	\$\$\$\$
PREVNAR	A
PREVYMIS	\$\$
PRIALT	\$\$\$\$\$
PRIMAXIN IV	\$
PRIORIX	A
PRIVIGEN * SoC	\$\$\$\$\$
PROCHLORPER	\$
PROCRIT * SoC	\$\$\$\$\$
PROGESTERONE	\$

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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

Drug Name	Member Cost Share Estimate
PROLASTIN-C	\$\$\$\$\$
PROLEUKIN	\$\$\$\$\$
PROLIA *	\$\$\$\$\$
PROMETHAZINE	\$
PROMETHAZINE HCL	\$
PROMETHEGAN	\$
PROPEL MINI SDS	\$\$\$
PROQUAD	A
PROSTIN VR	\$
PSEUDOEPHEDRINE HCL Crystals	\$
QALSODY *	\$\$\$\$\$
QBREXZA	\$
QFITLIA	\$\$\$\$\$
QFITLIA PEN	\$\$\$\$\$
QUADRACEL	A
QUZYTIR	\$\$\$\$\$
RABAERT	\$\$\$\$\$
RADICAVA * SoC	\$\$\$\$\$
RAPIVAB	\$\$\$
RAYASORE	\$\$\$\$
REBLOZYL *	\$\$\$\$\$
REBYOTA *	\$\$\$\$\$
RECARBRIO	\$\$\$\$\$
RECLAST	\$\$\$
RECOMBIVA HB	A
RECOMBIVA-HB	A
REDEMPLO	\$\$\$\$\$
RELEUKO *	\$\$\$\$
REMIFENTANIL	\$\$
REMODULIN	\$\$\$\$\$
RENFLEXIS * SoC	\$\$\$\$\$
RETACRIT * SoC	\$\$\$\$\$
RETHYMIC	\$\$\$\$\$
RETROVIR	\$\$

Drug Name	Member Cost Share Estimate
REVATIO	\$
REVCovi	\$\$\$\$\$
REZZAYO	\$\$\$\$\$
RHOPHYLAC	\$\$\$
RIABNI * SoC	\$\$\$\$\$
RINGERS IRRIGATION SOL	\$
RISPERDAL	\$\$\$\$
RISPERIDONE	\$\$\$\$\$
RITUXAN HYCELA *	\$\$\$\$\$
RIVASTIGMINE	\$
RIVFLOZA	\$\$\$\$\$
ROBAXIN	\$
ROLVEDON *	\$\$\$\$\$
ROMIDEPSIN	\$\$\$\$\$
ROPIVACAINE	\$\$
ROTARIX	A
RUCONEST	\$\$\$\$\$
RUXIENCE * SoC	\$\$\$\$\$
RYBREVANT *	\$\$\$
RYBREVANT FASPRO *	\$\$\$\$\$
RYKINDO	\$\$\$\$\$
RYLAZE *	\$\$\$\$\$
RYPLAZIM	\$\$\$\$\$
RYSTIGGO * SoC	\$\$\$\$\$
RYZNEUTA *	\$\$\$\$\$
SAIZEN	\$\$\$\$
SAJAZIR	\$\$\$\$\$
SANCUSO	\$\$\$\$
SANDIMMUNE	\$
SANDOSTATIN * SoC	\$\$\$\$\$
SANDOSTATIN LAR * SoC	\$\$\$\$\$
SAPHNELO * SoC	\$\$\$\$\$
SARCLISA *	\$\$\$\$\$
SCARZEN SKIN REPAIR	\$

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Drug Name	Member Cost Share Estimate
SCENESSE	\$
SCOPOLAMINE	\$
SECUADO	\$
SENSORCAINE	\$
SENSORCAINE MPF	\$
SENSORCAINE/EPI	\$
SEROSTIM	\$\$\$
SEZABY	\$\$\$\$
SFROWASA ENE	\$\$\$
SHINGRIX	A
SIGNIFOR LAR	\$\$\$\$\$
SILDENAFIL	\$\$\$\$\$
SIMLANDI	\$\$\$\$\$
SIMULECT	\$\$\$\$\$
SIVEXTRO	\$\$
SKYRIZI *	\$\$\$\$\$
SKYRIZI ON-BODY	\$\$\$\$\$
SKYTROFA	\$\$\$\$\$
SOD CHLORIDE	\$
SOD TETRADEC	\$\$\$
SOGROYA	\$\$\$\$\$
SOMATULINE DEPOT * SoC	\$\$\$\$\$
SOTRADECOL	\$\$
SPIKEVAX	A
STAMARIL	\$\$
STERILE WATER FOR IRRIGATION SOL	\$
STIMUFEND *	\$\$\$\$\$
STOBOCLO *	\$
SUFENTANIL	\$\$\$
SUNLENCA *	\$\$\$\$\$
SYFOVRE	\$\$\$\$\$
SYLVANT *	\$\$\$\$\$
SYNOJOYNT	\$\$
SYNVISC	\$\$\$

Drug Name	Member Cost Share Estimate
SYNVISC ONE	\$\$\$
TAKHZYRO	\$\$\$\$\$
TALVEY *	\$\$\$\$\$
TAZICEF	\$
TDVAX	\$\$
TECARTUS *	\$\$\$\$\$
TECENTRIQ *	\$\$\$\$\$
TECENTRIQ HYBREZA *	\$
TECVAYLI *	\$\$\$\$\$
TEFLARO	\$\$\$\$\$
TEGSEDI	\$\$\$\$\$
TEMSIROLIMUS	\$\$\$\$\$
TENIVAC	A
TEPEZZA * SoC	\$\$\$\$\$
TERBUTALINE SULFATE	\$
TERLIVAZ	\$\$\$\$\$
TESTOST CYP	\$
TESTOSTERONE	\$
TEZSPIRE * SoC	\$\$\$\$\$
THROMBAT III	\$\$\$\$\$
TICE BCG	\$\$\$
TICOVAC	\$\$
TIGAN	\$
TIGECYCLINE	\$\$\$\$
TIROFIBAN	\$
TIS-U-	\$
TIVDAK *	\$\$\$\$\$
TOBRAMYCIN	\$\$
TOL	\$\$\$\$
TOPOTECAN	\$
TORISEL	\$\$\$\$\$
TRANSDERM SCOP	\$
TRANSDERM-SCOP	\$
TRAZIMERA *	\$\$\$\$\$

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Blue Cross and Blue Shield of Texas Medical Drug Benefit List

Drug Name	Member Cost Share Estimate
TREANDA	\$\$\$\$\$
TRELSTAR MIX	\$\$\$\$\$
TREMFYA *	\$\$\$\$\$
TREMFYA PEN *	\$\$\$\$\$
TREPROSTINIL	\$\$\$\$
TRIAMCIN ACE	\$
TRIASIL	\$\$\$\$\$
TRISENOX	\$\$\$\$\$
TRODELVY *	\$\$\$\$\$
TROGARZO * SoC	\$\$\$\$\$
TRUMENBA	A
TRUXIMA * SoC	\$\$\$\$\$
TRYNGOLZA	\$\$\$\$\$
TWINRIX	A
TWIRLA	A
TYENNE * SoC	\$\$\$\$\$
TYGACIL	\$\$\$\$
TYPHIM VI	\$\$\$
TYRVAYA	\$\$\$\$
TZIELD *	\$\$\$\$\$
U-CORTEF	\$
UDENYCA *	\$\$\$\$\$
UDENYCA ONBODY *	\$\$\$\$\$
ULTIVA	\$\$\$
ULTOMIRIS * SoC	\$\$\$\$\$
U-MEDROL	\$\$
UNASYN	\$
UNITUXIN *	\$\$\$\$\$
UPLIZNA * SoC	\$\$\$\$\$
UPTRAVI	\$\$
UZEDY	\$\$\$\$\$
VABOMERE	\$\$\$\$\$
VABRINTY	\$\$\$\$\$
VABYSMO	\$\$\$\$\$

Drug Name	Member Cost Share Estimate
VALRUBICIN	\$\$\$\$\$
VALSTAR	\$\$\$\$\$
VALTOCO	\$\$\$
VALTOCO SPR	\$\$\$\$
VANCOMYCIN	\$
VANISH	\$
VAQTA	A
VARITHENA AER	\$\$\$\$\$
VARIVAX	A
VARIZIG	\$\$\$\$\$
VASOPRESSIN	\$\$
VASOSTRICT	\$
VAXELIS	A
VAXNEUVANCE	A
VECTIBIX *	\$\$\$\$\$
VEGZELMA *	\$\$\$\$
VEKLURY *	\$\$\$\$\$
VELETRI	\$\$
VENOFER	\$\$\$
VEOPOZ * SoC	\$\$\$\$\$
VFEND IV	\$\$\$
VIBATIV	\$\$\$\$\$
VIDAZA	\$\$\$\$\$
VIMO *	\$\$\$\$
VINCRISTINE	\$\$
VINORELBINE	\$\$
VISCO	\$\$\$\$\$
VIVIMUSTA	\$\$\$\$\$
VOGELXO	\$
VORICONAZOLE	\$\$\$\$\$
VOXZOGO	\$\$\$
VOYXACT	\$\$\$\$\$
VYEPTI * SoC	\$\$\$\$\$
VYLEESI	\$\$\$\$\$

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VYVGART * SoC	\$\$\$\$\$
VYVGART HYTRULO * SoC	\$\$\$\$\$
VYXEOS *	\$\$\$\$\$
WAINUA	\$\$\$\$\$
WINREVAIR	\$\$\$\$\$
WINRHO SDF	\$\$\$\$\$
WYOST *	\$\$\$\$\$
XACDURO	\$\$\$\$
XELSTRYM	\$
XEMBIFY * SoC	\$\$\$\$\$
XENPOZYME * SoC	\$\$\$\$\$
XEOMIN *	\$\$\$\$\$
XERAVA	\$\$\$
XGEVA *	\$\$\$\$\$
XICLO	\$\$
XOLAIR * SoC	\$\$\$\$\$
XTRENBO *	\$\$\$
XYOSTED	\$
YCANTH	\$\$\$\$\$
YERVOY *	\$\$\$\$\$
YESCARTA *	\$\$\$\$\$
YEZTUGO	\$
YF-VAX RECON SUS	\$\$
YORVIPATH	\$\$\$\$\$
YUFLYMA	\$\$\$\$\$
YUSIMRY	\$\$\$\$
YUUIWEL	\$\$\$\$\$
ZAFEMY	A
ZALTRAP	\$\$\$\$\$

Drug Name	Member Cost Share Estimate
ZARXIO *	\$\$\$\$\$
ZAVZPRET	\$\$\$\$
ZEGALOGUE	\$\$\$\$
ZEMAIRA	\$\$\$\$\$
ZEMDRI	\$\$\$\$
ZEMPLAR	\$
ZEPBOUND	\$\$\$
ZEPBOUND KWIKPEN	\$\$\$
ZEPZELCA *	\$\$\$\$\$
ZEVASKYN *	\$\$\$\$\$
ZIEXTENZO *	\$\$\$\$\$
ZILBRYSQ	\$\$\$\$\$
ZILRETTA	\$\$\$\$
ZINPLAVA	\$\$\$\$\$
ZIPRASIDONE	\$\$\$
ZIRABEV *	\$\$\$\$\$
ZITHROMAX	\$
ZOLADEX	\$\$\$\$\$
ZOLEDRONIC	\$\$\$\$\$
ZOLGENSMA *	\$\$\$\$\$
ZOMACTON	\$\$
ZOSYN	\$\$
ZULRESSO	\$\$\$\$\$
ZYMFENTRA	\$\$\$\$\$
ZYNLONTA	\$
ZYNYZ	\$\$\$\$
ZYPREXA RELP	\$\$\$\$
ZYVOX	\$

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Blue Cross and Blue Shield of Texas

Medical Drug Benefit List

provider setting, and network. Benefit tiers based on brand versus generic status do not apply on the drugs covered under the medical benefit. Out-of-pocket costs may be higher when going to a non-participating network provider. Provider Directories list primary care and referral physicians who participate in our network programs. You may not have coverage for services provided by certain provider types. Members should refer to their certificate of coverage for more details, including benefits, limitations, and exclusions. Before these drugs can be considered for benefit coverage, prior authorization or predetermination approval may be required. Benefits may be confirmed by calling the number on the member's ID card.

Regardless of benefits, the final decision about any medication is between the member and their health care provider. Physicians and other health care providers are instructed to use their own best medical judgment based upon all available information and the condition of the patient in determining the best course of treatment. The majority of medical drugs listed are for injectable formulations or those typically covered when administered by a health care professional in a hospital, doctor's office, or other medical setting.

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