

~A~	~D~	HUMATE P HUMATROPE HUMIRA HYALGAN HYPERHEP HYPERRHO	ORENCIA ORTHOVISC OXANDRIN OXANDROLONE	SYNAREL ^M SYNVISC
ABELCET ACTHAR ^{LD} ACTHREL ACTIMMUNE ^{LD} ADVATE AFINITOR ALDURAZYME ^{LD} ALFERON ^{NM} ALIMTA ALKERAN ALOXI ALPHANATE ALPHANINE AMBISOME AMEVIVE AMINOCAPROIC ACID AMPYRA ^{LD} ANZEMET APOKYN ^{LD} APTIVUS ARALAST ^{LD} ARANESP ARCALYST AREDIA ARIXTRA AROMASIN ATRIPLA AVASTIN AVONEX	DACARBAZINE DAUNORUBICIN DDAVP DEFEROXAMINE ^M DESFERAL DESMOPRESSIN DIDANOSINE DOXIL	~I~ IMMUNE GLOBULINE ^{LD} INCRELEX ^{LD} INFERGEN INNOHEP INTELENCE INTRON A INVIRASE ISENTRESS	~P~ PACLITAXEL PAMIDRONATE PANGLOBULIN PEG-INTRON PEGASYS PHENTOLAMINE POLYGAM SD ^M PREGNYL ^M PREZISTA PROCRIT PROFILNINE ^{LD} PROGRAF PROLEUKIN PROMACTA ^{LD} PULMOZYME	~T~ TACROLIMUS TARCEVA TARGETIN TASIGNA TAXOTERE TEMODAR TEV-TROPIN ^{LD} THALOMID THROMBAT THYMOGLOBULIN THYROGEN ^{LD} TICE TOBI TORISEL TRACLEER ^{LD} TRELSTAR ^{LD} TRIZIVIR TRUVADA TWINRIX TYKERB ^{LD} TYSABRI ^{LD}
~B~	~E~	~K~ KALETRA KINERET KOATE-DVI KOGENATE FS KUVAN ^{LD} KYTRIL	~R~ RAPAMUNE REBETOL REBIF RECLAST RECOMBINATE REFACTO ^{LD} REFLUDAN REMICADE REMODULIN ^{LD} REPRONEX RESCRIPTOR RETROVIR REVATIO REVLIMID ^{LD} REYATAZ RHOPHYLAC ^{LD} RIBAPAK RIBASPHERE RIBAVIRIN RIMSO-50 RITUXAN	~V~ VALCYTE VANTAS ^{LD} VENTAVIS ^{LD} VFEND VIDAZA ^{LD} VIDEX VINORELBINE VIRACEPT VIRAMUNE VIREAD VISTIDE VISUDYNE ^{LD} VITAMIN K VIVAGLOBIN ^{LD} VIVITROL ^{LD} VOTRIENT ^{LD}
~C~	~F~	~L~ LETAIRIS ^{LD} LEUKERAN LEUKINE LEUPROLIDE ACETATE LEUSTATIN LEXIVA LUCENTIS ^{LD} LUPRON	~S~ SAIZEN SANCUSO SANDOSTATIN SELZENTRY SENSIPAR SEROSTIM ^{LD} SIMPONI SOLU-CORTEF SOMAVERT ^{LD} SPRYCEL STAVUDINE STELARA STIMATE SUPARTZ SUPPRELIN ^{LD} SUSTIVA SUTENT SYNAGIS ^{LD}	~W~ WINRHO SDF
~D~	~G~	~M~ MACUGEN ^{LD} MONARC-M MONOCLATE P MONONINE MYCOBUTIN MYCOPHENOLATE MYOBLOC MYOZYME ^{LD}	~X~ XELODA XENAZINE ^{LD} XIAFLEX ^{LD} XOLAIR ^{LD}	~Z~ ZEMPLAR ZERIT ZIAGEN ZIDOVUDINE ZINECARD ZOLADEX ZOMETA ZORBTIVE ZYVOX
~E~	~H~	~N~ NABI-HB NAGLAZYME ^{LD} NAVELBINE NEULASTA NEUMEGA NEUPOGEN NEXAVAR ^{LD} NORDITROPIN NORVIR NOVAREL NOVOSEVEN NUTROPIN ^{LD}	~O~ OCTAGAM ^{LD} OCTREOTIDE OMNITROPE ^{LD} ONTAK	
~F~	~I~	~O~		
~G~	~J~			
~H~	~K~			
~I~	~L~			
~J~	~M~			
~K~	~N~			
~L~	~O~			
~M~	~P~			
~N~	~Q~			
~O~	~R~			
~P~	~S~			
~Q~	~T~			
~R~	~U~			
~S~	~V~			
~T~	~W~			
~U~	~X~			
~V~	~Y~			
~W~	~Z~			

Benefits subject to established plan provisions and copay amounts. SCL Specialty Drug List is updated Quarterly. Additions, Deletions, and Updated Lists are available at www.scriptcare.com.

^M NOTE: These medications are subject to manufacturer availability. Please contact SCL Specialty Pharmacy at 866-443-1991 for more information.

^{LD} NOTE: These medications are classified as limited distribution and are only available through a secondary source. Please contact SCL Specialty Pharmacy at 866-443-1991 for benefit coverage or for more information.

The SCL Specialty Pharmacy Program MUST be used to obtain specialty drugs available through the Program as listed on the Specialty Drug List (on reverse side).

To help you manage your pharmaceutical expenses, Script Care, Ltd. includes the SCL Specialty Pharmacy Program with your prescription drug plan. The Program will handle a wide range of specialty drug items relating to the treatment of various chronic conditions.

The program covers Specialty Drugs that you may obtain on an outpatient basis or administered in the doctor's office or home health care agency as covered through prescription drug benefits. The SCL Specialty Pharmacy will provide you lower out of pocket expense, at the same time offering a lower cost for your group's plan as well.

Medications available through the Program will be dispensed through a full-service pharmacy. The Program will provide a convenient way to receive injectables and hard to find drugs while offering expert care services to help you stay healthy. These services include informative disease-related materials, pharmacist and nurse access. Delivery of your medication will be mailed to your home or location of choice within 24-72 hours, and you will receive advance delivery notification calls to make you aware of when you can expect your order. The program also offers easy refill ordering options as well.

INITIAL ORDER:

- For new Specialty Prescriptions, please call the SCL Specialty Pharmacy help desk toll free at 1-866-443-1991, and a customer service representative will assist you in the ordering process.
- If you already have a Specialty Prescription that was filled through a retail pharmacy or mail order facility, contact the SCL Specialty Pharmacy Program help desk toll free at 1-866-443-1991 and customer service representative will assist you in transferring the prescription to the SCL Specialty Pharmacy.

REFILLS:

- At the time of your order, you may setup a refill reminder. A customer service representative will contact you when you are eligible to refill.

DELIVERY:

- A customer service representative will contact you to verify your order and your shipping address before your prescription is shipped.

Your medications will be delivered to your home, office, physician's office or home health care agency of your choice via FedEx or UPS.

SCL Specialty Pharmacy Program

P.O. Box 12607

Beaumont, TX 77726-2607

Customer Service Hours

Monday – Friday 7:00 a.m. to 6:00 p.m. (CST)

Telephone: (866) 443-1991

Fax: (409) 866-1317

www.scriptcare.com

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