

Pharmacy formulary change notice

Summary: Effective October 1, 2018, the following changes were made to the state formulary for Statewide Medicaid Managed Care Managed Medical Assistance (SMMC MMA) members.

| Effective for all SMMC MMA patients on October 1, 2018 | | | |
|--|--|------------------------------------|---------------------------------------|
| Therapeutic class | Drug | Revised status | Potential alternatives |
| Diabetic Supplies | BD PEN NEEDLES BD INSULIN SYRINGES | PREFERRED | N/A |
| Diabetic Supplies | ALL OTHER PEN NEEDLES AND INSULIN SYRINGES/MANUFACTURERS | NON-PREFERRED WITH STEP THERAPY | BD PEN NEEDLES BD INSULIN SYRINGES |

What action do I need to take?

Please review these changes and work with your Amerigroup patients to transition them to formulary alternatives. If you determine preferred formulary alternatives are not clinically appropriate for specific patients, you will need to obtain prior authorization (PA) to continue coverage beyond the applicable effective date.

What if I need assistance?

We recognize the unique aspects of patients' cases. If for medical reasons any of your Amerigroup patients cannot be converted to a formulary alternative, call our Pharmacy department at 1-800-454-3730 and follow the voice prompts for pharmacy PA. You can find the *Preferred Drug List* on our provider website at <https://providers.amerigroup.com/FL>.

If you need assistance with any other item, contact your local Provider Relations representative or call Provider Services at 1-800-454-3730.