

Quarterly pharmacy formulary change notice

Summary: The formulary changes listed in the table below were reviewed and approved at our first-quarter Pharmacy and Therapeutics Committee meeting.

Effective April 15, 2018, and May 1, 2018, the changes outlined below apply to all Amerigroup Community Care members. Please remember to read the footnotes at the end of the table.

Inhaled Corticosteroid Coverage Update Effective for all patients on April 15, 2018	
Drug	Revised status
FLOVENT HFA 110 MCG INHALER FLOVENT HFA 44 MCG INHALER FLOVENT HFA 220 MCG INHALER FLOVENT 50 MCG DISKUS FLOVENT 100 MCG DISKUS FLOVENT 250 MCG DISKUS	PREFERRED (AGE LIMIT REMOVED)
AEROSPAN* 80 MCG INHALER	NON-PREFERRED AS OF MAY 1, 2018
Resulting Inhaled Corticosteroid Coverage	
Drug	Status
ARNUITY ELLIPTA FLOVENT HFA/DISKUS	PREFERRED
BUDESONIDE FOR NEBULIZATION	PREFERRED FOR MEMBERS 5 YEARS OF AGE AND YOUNGER
ASMANEX TWISTHALER	COVERED FOR MEMBERS 5 YEARS OF AGE AND YOUNGER
QVAR HFA	COVERED FOR MEMBERS 11 YEARS OF AGE AND YOUNGER
QVAR REDIMALER ASMANEX HFA ALVESCO PULMICORT FLEXHALER ARMONAIR RESPICLICK AEROSPAN*	NON-PREFERRED

* Currently being removed from the market.

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 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 your Amerigroup patient cannot be converted to a formulary alternative, call our Pharmacy department at 1-800-454-3730 and follow the voice prompts for pharmacy prior authorization. You can find the *Preferred Drug List* on our provider website at <https://providers.amerigroup.com/NJ>.

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