

September 2016

Quarterly pharmacy formulary change notice

Summary of change

The formulary changes listed in the table below were reviewed and approved at the second quarter Pharmacy and Therapeutics Committee (P&T) meetings held on June 27, 2016.

Effective for all patients on September 1, 2016			
Therapeutic class	Medication	Formulary status change	Potential alternatives (formulary products)
ICS	QVAR 40 MCG ORAL INHALER QVAR 80 MCG ORAL INHALER	NONPREFERRED FOR MEMBERS 12 YEARS OF AGE AND OLDER	AEROSPAN 80 MCG INHALER ARNUITY ELLIPTA 100 MCG INH ARNUITY ELLIPTA 200 MCG INH

What this means to you

- Effective September 1, 2016, formulary changes apply.
- Effective September 1, 2016, nonformulary changes and prior authorization (PA) requirements will apply.
- This notice applies to HealthKeepers, Inc. benefits for Anthem HealthKeepers Plus members.

What action do I need to take?

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

What if I need assistance?

We recognize the unique aspects of patients' cases. If your Anthem HealthKeepers Plus patient cannot be converted to a formulary alternative, call our Pharmacy department at **1-800-901-0020** and follow the voice prompts for pharmacy PA. You can find the Preferred Drug List (formulary) on our provider website at <https://mediproviders.anthem.com/va>.

If you need assistance with any other item, contact your local Provider Relations representative or call Provider Services at **1-800-901-0020**.

<https://mediproviders.anthem.com/va>