

July 2016

## Quarterly pharmacy formulary change notice

### Summary of change

The formulary changes listed in the table below were reviewed and approved at the first quarter pharmacy and therapeutics (P&T) committee meeting held on March 29, 2016.

Effective for all patients on [September 1, 2016]			
Therapeutic class	Drug name	Revised status	Potential alternatives
ORAL INHALED CORTICOSTEROIDS	ARNUITY ELLIPTA 100 MCG INH ARNUITY ELLIPTA 200 MCG INH	PREFERRED	N/A
ORAL INHALED CORTICOSTEROIDS	PULMICORT 1 MG/2 ML RESPULE (BRAND)	NON-PREFERRED	BUDESONIDE 1 MG/2 ML INH SUSPENSION
ORAL INHALED CORTICOSTEROIDS	ASMANEX TWISTHALER 110 MCG ASMANEX TWISTHALER 220 MCG ASMANEX HFA 100 MCG INHALER ASMANEX HFA 200 MCG INHALER PULMICORT 180 MCG FLEXHALER PULMICORT 90 MCG FLEXHALER 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 QVAR 40 MCG ORAL INHALER QVAR 80 MCG ORAL INHALER	NON-PREFERRED	ARNUITY ELLIPTA AEROSPAN
ORAL INHALED CORTICOSTEROIDS COMBINATION	BREO ELLIPTA 200-25 MCG INH BREO ELLIPTA 100-25 MCG INH	PREFERRED ST REQUIRED	N/A

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

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ORAL INHALED CORTICOSTEROIDS COMBINATION	SYMBICORT 80-4.5 MCG INHALER SYMBICORT 160-4.5 MCG INHALER	NON-PREFERRED	BREO ELLIPTA DULEREA ST REQUIRED
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**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 prior authorization 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 [www.anthem.com/vamedicaidoc](http://www.anthem.com/vamedicaidoc).

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