



Pharmacy Program Updates: Quarterly Pharmacy Changes Effective July 1, 2016

DRUG LIST (FORMULARY) CHANGES

Based on the availability of new prescription medications and the Prime's National Pharmacy and Therapeutics Committee's review of changes in the pharmaceuticals market, some revisions were made to the BCBSOK standard drug list and generics plus drug list effective July 1, 2016.

Brand Medications Added to the Standard and Generics Plus Drug Lists, Effective July 1, 2016

Preferred Brand ¹	Drug Class/Condition Used For
Adynovate	Hemophilia
Brilinta	DVT, Stroke and Embolism Prophylaxis
Coagadex	Hemophilia
Depen	Wilson's Disease, Cystinuria
Narcan	Opiate Overdose
Uptravi	Pulmonary Arterial Hypertension

Brand Medications Added to the Generics Plus Drug List, Effective July 1, 2016

Preferred Brand ¹	Drug Class/Condition Used For
Eliquis	DVT, Stroke and Embolism Prophylaxis

DISPENSING LIMIT CHANGES

The BCBSOK standard and generics plus prescription drug benefit program includes coverage limits on certain medications and drug categories. Dispensing limits are based on U.S. Food and Drug Administration (FDA) approved dosage regimens and product labeling.

Effective July 1, 2016, dispensing limits for the following drugs were added to the standard list:

Drug Class and Medication ¹	Dispensing Limit
Irritable Bowel Syndrome	
Viberzi	60 tablets per 30 days
Ophthalmic Immunomodulators	
Restasis	60 vials per 30 days

UTILIZATION MANAGEMENT PROGRAM CHANGES

Effective July 1, 2016, several drug categories and/or targeted medications were added to the current Prior Authorization (PA) and Step Therapy (ST) programs for standard pharmacy benefit plans.

Drug categories added to the pharmacy PA standard programs, effective July 1, 2016

Drug Category	Targeted Medication(s)^{1, 2}
Ophthalmic Immunomodulators	Restasis

Targeted drugs added to current pharmacy PA standard programs, effective July 1, 2016

Drug Category	Targeted Medication(s)^{1, 2}
Therapeutic Alternatives	Kadian, Northera, Onmel, Sporanox, Spritam, Zegerid, Zflo/Zflo CR

Drug Categories added to current pharmacy ST standard programs, effective July 1, 2016³

Drug Category	Targeted Medication(s)^{1, 2}
Atypical Antipsychotics	Abilify, Abilify Discmelt, Abilify Maintena, Aripiprazole ODT, Aristada, Clozaril, Fanapt, Fazaclo, Clozapine ODT, Geodon, Invega, Invega Sustenna, Invega Trinza, Latuda, Rexulti, Risperdal, Risperdal M-Tab, Risperdal Consta, Saphris, Seroquel, Seroquel XR, Versacloz, Zyprexa, Zyprexa Zydys, Zyprexa Relprevv

Targeted drugs added to current pharmacy ST standard programs, effective July 1, 2016³

Drug Category	Targeted Medication(s)^{1, 2}
Lipid Management	Crestor

Targeted mailings were sent to members affected by prior authorization program changes per our usual process of member notification prior to implementation. For the most up-to-date drug list and list of drug dispensing limits, visit the Pharmacy Program section of our website at bcbsok.com/provider.

¹Third party brand names are the property of their respective owners

²These lists are not all inclusive. Other medications may be available in this drug class.

³Members on a current drug regimen will be grandfathered from participation in the ST program.

Prime Therapeutics LLC is a pharmacy benefit management company. BCBSOK contracts with Prime to provide pharmacy benefit management, prescription home delivery and specialty pharmacy services. BCBSOK, as well as several other independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime.

The information mentioned here is for informational purposes only and is not a substitute for the independent medical judgment of a physician. Physicians are to exercise their own medical judgment. Pharmacy benefits and limits are subject to the terms set forth in the member's certificate of coverage which may vary from the limits set forth above. The listing of any particular drug or classification of drugs is not a guarantee of benefits. Members should refer to their certificate of coverage for more details, including benefits, limitations and exclusions. Regardless of benefits, the final decision about any medication is between the member and their health care provider.