

To: AmeriHealth Caritas District of Columbia Providers

**Date:** February 23, 2022

## Subject: Formulary Update: Aimovig® Product Removal

Summary: Effective March 30, 2022, the Aimovig<sup>®</sup> products below will be removed from the AmeriHealth Caritas District of Columbia drug formulary.

Enrollees currently receiving any of the products listed below on the left will require a new prescription for an alternative product. Enrollees for whom it is not medically advisable to change therapy will require prior authorization to continue to receive coverage for the non-formulary products.

Formulary Removals	
Product List	Alternative Product(s)
<ul> <li>Aimovig<sup>®</sup> (erenumab-aooe) 70MG/ML subcutaneous auto-injectors</li> <li>Aimovig<sup>®</sup> (erenumab-aooe) 140MGML subcutaneous auto-injector</li> </ul>	<ul> <li>Emgality® (galcanezumab-gnlm) 120MG/ML subcutaneous pen injector</li> <li>Emgality® (galcanezumab-gnlm) 100MG/ML subcutaneous prefilled syringes</li> <li>Emgality® (galcanezumab-gnlm) 120MG/ML subcutaneous prefilled syringe</li> </ul>

If you have questions about this communication, please contact the AmeriHealth Caritas District of Columbia Provider Pharmacy Services at 1-888-602-3741.