

Update: AmeriHealth Caritas District of Columbia (Alliance) Formulary Change

1) On June 01, 2017, the following products will be removed from the AmeriHealth Caritas District of Columbia (Alliance) drug formulary.

Members currently receiving these products will require a new prescription for an alternative product before **June 01, 2017**. Members for whom it is not medically advisable to change therapy will require prior authorization to continue to receive coverage for the non-formulary product.

Formulary Removals

Product list	Alternative Product(s)
Lantus® vial	<ul style="list-style-type: none"> • Basaglar® KwikPen
Brand EpiPen® and EpiPen Jr®	<ul style="list-style-type: none"> • Generic epinephrine auto-injector
Nicotrol NS	<ul style="list-style-type: none"> • Nicorette® Gum, Commit® Lozenge, NicoDerm CQ® Patch, Zyban®, Chantix®

2) On June 01, 2017, the following products will have an age and/or quantity limits.

Formulary Restrictions

Product list	Notes and Restrictions
Aricept, Aricept ODT	<ul style="list-style-type: none"> • Age limit ≥ 18
Exelon	<ul style="list-style-type: none"> • Age limit ≥ 18
Chantix	<ul style="list-style-type: none"> • Age limit ≥ 18 and quantity limit 360 tabs per 365 days

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

You may also contact your Provider Account Executive.