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Select Drug Program® formulary updates and safe prescribing procedures

To provide comprehensive prescription drug coverage with drugs selected for their reported medical effectiveness, safety, and value, as well as promote safe prescribing and manage cost, we routinely update our drug formulary and review our list of drugs requiring prior authorization as part of our procedures for safe prescribing. These updates are approved by our Pharmacy and Therapeutics Committee.

Standard quarterly updates to the Select Drug Program® formulary effective April 1, 2014 include:

- additions of generic and brand drugs to the formulary;
- deletions of brand drugs from the formulary;
- additions to the list of drugs that require prior authorization;
- additions to the list of drugs with quantity limits.

Prior authorization updates

We are adding prior authorization requirements to certain prescription medications to help ensure that our members are using prescription drugs safely. Prior authorization requirements were placed on the following drugs when they entered the marketplace:

- Actemra® SC
- Adempas®
- Breo™ Ellipta™
- Brintellix®
- Gilotrif™
- Opsumit®

On April 1, 2014,* we will add a prior authorization requirement to the following drugs:

- Advate®
- Alphanate®
- Alphanine® SD

- Androgel[®]
- Bebulin[®]
- Belviq[®]
- BeneFIX[®]
- Feiba[®]
- Helixate[®] FS
- Hemofil[®] M
- Humate-P[®]
- Koate[®] DVI
- Kogenate[®] FS
- Letairis[®]
- Monoclate-P[®]
- Mononine[®]
- Novoseven[®] RT
- Profilnine[®] SD
- Recombinate[™]
- Rixubis[™]
- Tracleer[®]
- Tyvaso[®]
- Valchlor[™]
- Ventavis[®]
- Wilate[®]
- Xyntha[®]
- Zohydro[™] ER

* Members taking these drugs prior to the effective date are not affected.

Quantity Limit updates

Effective April 1, 2014, we are adding quantity limits to the following drugs and products:

- Actemra[®] SC (3.6 ml per 30 days)
- Depo-Provera[®] 104 mg, 150 mg (1 vial/syringe per 90 days, applies to both brand and generic)
- Esomeprazole Strontium (30 caps per 30 days)
- Nuvaring[®] (1 ring per 30 days)
- Ortho Evra[®] Patch (3 patches per 30 days)
- Zohydro[™] ER (60 tabs per 30 days when drug becomes available)

Communications to members

All members affected by the updates will be notified this week with a letter. We will not be separately communicating these updates to group customers.

Please refer to the full list of [formulary updates](#) for more information. If you have any questions, please contact your AmeriHealth New Jersey broker representative.