



Formulary Updates

Effective 04/01/2019

DEFINITIONS

- Formulary** These drugs are included in AllWays Health Partners' covered drug list.
- Non-Formulary** These drugs are not included in AllWays Health Partners' formulary. AllWays Health Partners would only cover formulary alternatives. Providers can request Non-Formulary drugs as an exception, and AllWays Health Partners would require trial of all appropriate formulary alternatives prior to approving coverage of a Non-Formulary drug. If a Non-Formulary drug is approved, the member's cost sharing would be the highest tier.
- Preferred** These drugs are on AllWays Health Partners' formulary and offer a lower cost to members.
- Non-Preferred** These drugs are on AllWays Health Partners' formulary but offer a higher cost to members.
- Excluded** AllWays Health Partners does not cover these drugs. Members will receive a denial for all Excluded drug requests.

Updates for All Members

The following changes are being made to the corticosteroid quantity limit program:

| Medication | Update |
|---|---|
| Hydrocortisone cream, lotion, ointment Triamcinolone cream, lotion, ointment | These medications are being added to the program with a quantity limit of 120 units |
| Ala-Scalp Hydrocortisone lotion | A ceiling limit of 240ml is being added |
| Hydrocortisone cream, ointment Micort HC | A ceiling limit of 240g is being added |
| Triamcinolone 0.025% and 0.1% Cream and Ointment | A ceiling limit of 160g is being added |
| Triamcinolone 0.025% and 0.1% Lotion | A ceiling limit of 180ml is being added |

Updates for My Care Family Members

The following medications will become non-formulary. Please use the brand alternative:

| Current Medication | Covered Brand Alternative |
|--------------------|---------------------------|
| Ritonavir tablets | Norvir tablets |