

Update: Formulary Changes

Effective June 03, 2019, Breo Ellipta® (fluticasone/vilanterol) inhalers will be removed from the AmeriHealth Caritas Pennsylvania and AmeriHealth Caritas Northeast drug formulary.

Members currently receiving any of the products listed below will require a new prescription for an alternative product before **August 05, 2019**. Members for whom it is not medically advisable to change therapy will require prior authorization to continue to receive coverage for the formulary changed products.

Formulary Removals	
Product List	Alternative Product(s)
Breo Ellipta® (fluticasone/vilanterol) 100-25mcg and 200-25mcg inhalers	<ul style="list-style-type: none"> generic Airduo™ Respiclick® (fluticasone/salmeterol) generic Advair Diskus® (fluticasone propion/salmeterol)

Additional prior authorization criteria may apply.

Please refer to most recent drug formulary and prior authorization information available at <http://www.amerhealthcaritaspa.com> or www.amerhealthcaritasnortheast.com → Pharmacy.

If you have any questions regarding this notice, please contact Pharmacy Services

Pharmacy Services	
Plan Name	Telephone Number
AmeriHealth Caritas Pennsylvania	1-866-610-2774
AmeriHealth Caritas Northeast	1-888-208-1020

Ethics and Compliance Hotline (for reporting fraud, waste, and abuse): 1-866-833-9718, 24 hours a day, seven days a week. Secure and confidential. You may remain anonymous. Mandatory provider training available on-line at: www.amerhealthcaritaspa.com or www.amerhealthcaritasnortheast.com → Providers → Resources → Fraud, Waste, and Abuse.