



## Behavioral Health Drug Coverage Update Effective July 1, 2016

Drug Category	YourCare Coverage Notes
<p><b>Long-Acting Injectable Antipsychotics on Formulary</b></p> <ul style="list-style-type: none"> <li>• AbilifyMaintena</li> <li>• Invega Sustenna</li> <li>• RisperdalConsta</li> <li>• Zyprexa Relprevv</li> <li>• Invega Trinza</li> <li>• Aristada</li> </ul>	<p><b>Covered as a Pharmacy or Medical Benefit:</b></p> <ul style="list-style-type: none"> <li>• <b>For Pharmacy coverage:</b> the member can fill the prescription at any network pharmacy or the physician can order the drug from Accredo Specialty Pharmacy for shipment to the office for a specific member use (Accredo Specialty Pharmacy - call: 1- 888-608-9010)</li> <li>• No prior-authorization is required for formulary products. Coverage for a non-formulary drug will need to be requested by the prescriber through Express Scripts: (call: 1-800-753-2851)</li> <li>• <b>For Medical coverage:</b> <ul style="list-style-type: none"> <li>• No preauthorization is needed</li> <li>• Physician will need to purchase and bill the Plan directly</li> <li>• For questions, call Provider Services at 1-888-638-7149</li> </ul> </li> </ul>
<p><b>Vivitrol (Naltrexone long-acting injection)</b></p>	<p><b>Covered as a Pharmacy or Medical Benefit:</b></p> <p>Pharmacy Benefit: The physician can order the drug from Accredo Specialty Pharmacy for shipment to the office for a specific member use (Accredo Specialty Pharmacy: call: 1- 888-608-9010).</p> <p><b>For Medical coverage:</b></p> <ul style="list-style-type: none"> <li>• No Pre-Authorization is needed.</li> <li>• Physician will need to purchase and bill the Plan directly.</li> <li>• For questions, call Provider Services at 1-888-638-7149</li> </ul>
<p><b>Naloxone Injections</b></p> <ul style="list-style-type: none"> <li>• Naloxone 0.4mg/mL vial</li> <li>• Naloxone 1mg/mL prefilled syringe</li> </ul>	<p><b>Covered as a Pharmacy or Medical Benefit:</b></p> <p>The member can fill the prescription at any network pharmacy or the physician can order the drug from Accredo Specialty Pharmacy for shipment to the office for a specific member use (Accredo Specialty Pharmacy: call: 1- 888-608-9010)</p> <p>-</p> <p><b>For Medical coverage:</b></p> <ul style="list-style-type: none"> <li>• No Pre-Authorization is needed.</li> <li>• Physician will need to purchase and bill the Plan directly.</li> <li>• For questions, call Provider Services at 1-888-638-7149</li> </ul>
<p><b>Buprenorphine, Naloxone Products</b></p> <ul style="list-style-type: none"> <li>• Suboxone Film</li> <li>• Buprenorphine/naloxone sublingual tablets</li> <li>• Buprenorphine sublingual tablets</li> <li>• Zubsolv</li> </ul>	<p><b>Covered only as a Pharmacy Benefit</b></p> <ul style="list-style-type: none"> <li>• For Pharmacy coverage the member can fill the prescription at any network pharmacy.</li> <li>• Formulary products do not require prior-authorization.</li> <li>• Coverage for a non-formulary drug will need be requested by the prescriber through Express Scripts: (call: 1-800-753-2851).</li> </ul>
<p><b>All smoking cessation products</b></p> <ul style="list-style-type: none"> <li>• Bupropion</li> <li>• Chantix</li> <li>• Nicotine Replacement Therapy</li> </ul>	<p><b>Covered only as a Pharmacy Benefit</b></p> <ul style="list-style-type: none"> <li>• The 90 day supply annual limit has been removed.</li> <li>• Monthly quantity limits may apply.</li> <li>• For Pharmacy coverage, the member can fill the prescription at any network pharmacy.</li> </ul>