Quarterly pharmacy formulary change notice

Summary of change: The formulary changes listed in the table below were reviewed and approved at the 2nd Quarter Pharmacy and Therapeutics (P&T) Committee meetings held on June 23, 2015.

What this means to you:
- Effective December 1, 2015, the following formulary changes will apply.

What is the impact of this change?

<table>
<thead>
<tr>
<th>Therapeutic Class</th>
<th>Medication</th>
<th>Formulary Status Change</th>
<th>Potential Alternatives (preferred products)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRENATAL VITAMINS (BY MANUFACTURER)</td>
<td>21ST CENTURY HE, AMERISOURCEBERG, A-S MEDICATION, AVKARE, CHAIN DRUG, CHAIN DRUG CONS, CVS, EQUALINE VITAMINS, FREEDA VITAMINS, GOOD NEIGHBOR, KAISER FOUNDATION, KIRKMAN SALES, LEADER MAGNO-HUMPHRIES, MAJOR PHARMACEUTICALS, MECHEM MEDICINE SHOP, NAT'L VIT. CO., NNODUM CORP, PD-RX PHARMACY, PLUS PHARMA; INC, PRIME MARKETING, RITE AID CORP., RUGBY, SUNMARK, TODAY’S HEALTH; WAL-MART STORES</td>
<td>PREFERRED</td>
<td>N/A</td>
</tr>
<tr>
<td>PRENATAL VITAMINS (BY MANUFACTURER)</td>
<td>ACELLA PHARMACEUTICALS, AMNEAL PHARMACEUTICALS, ROCAGRENMD INC, BRECKENRIDGE, BUREL PHARMACEUTICALS, CENTURION LABS, CYPRESS PHARMACY, HEALTH MART, MACOGEN PHARMACEUTICALS, NATIONWIDE LABO, PATRIN PHARMACEUTICALS, PHARMASURE, PHARMAVITE, PRUGEN PHARMACEUTICALS, PURETEK CORPORATION, R.A.MC NEIL CO., SANCILIO &amp; COMPANY, SETON PHARMACEUTICALS, TRIGEN LABORATO, VIRTUS PHARMACEUTICALS, VITAMEDMD, WALGREEN CO. WH NUTRITIONALS, ABBOTT NUTRITIONS, ACTAVIS U.S. BR, ADVANCED MEDICAL, AMBI PHARMACEUTICALS, AVION</td>
<td>NON-PREFERRED (CURRENT UTILIZERS WILL BE GRANDFATHERED)</td>
<td>LISTED ABOVE</td>
</tr>
</tbody>
</table>
What action do I need to take?
Please review these changes and work with your UniCare Health Plan of West Virginia, Inc. (UniCare) patients to transition them to formulary alternatives. If you determine preferred formulary alternatives are not clinically appropriate for specific patients, you will need to obtain prior authorization to continue coverage beyond the applicable effective date.

What if I need assistance?
We recognize the unique aspects of patients’ cases. If for medical reasons your UniCare patient cannot be converted to a formulary alternative, call our Pharmacy department at 1-877-375-6185 and follow the voice prompts for pharmacy prior authorization. You may also fax a completed prior authorization form to 1-855-875-3627. You can find the preferred drug list and the prior authorization forms on our provider website at http://www.unicare.com/wps/portal.

If you need assistance with any other item, contact your local Provider Relations representative or call our Customer Care Center at 1-800-782-0095.