

_

January 2024

Subject:

Important pharmacy benefit changes



Have questions about this letter? Contact us at the number on your Member ID card.



Starting on April 1, 2024, a change will be made to the Balanced Drug List.

Please see the table included in this letter. The left column lists drugs that will move to a non-preferred brand status or will no longer be covered.

What should you do?

Drugs that are moving to a non-preferred brand status may still be eligible for coverage. If covered, you may have to pay a higher copay or coinsurance amount, based on your benefit plan.

For drugs that will no longer be covered, ask your doctor about therapeutic alternatives. Your doctor can also request a drug list coverage exception. We will let you and your doctor know if your request is approved or denied.

Some benefit plans may have preventive drug benefits. This means you may pay a lower cost, as low as \$0, for preventive care drugs. If your plan has these benefits and coverage for your prescription is changing, the amount you pay under the preventive drug benefit may also change.

If you are taking or prescribed one of the drugs affected by these changes, ask your doctor about the choices you have. Together, you may decide a drug from the preferred alternatives column(s) could be right for you. Choosing one of these drugs may help you save money.

To see the complete current drug list, visit **bcbsil.com** and log in to Blue Access for Members SM (BAMSM). If you have any questions, call the number on your Member ID card.

Treatment decisions are always between you and your doctor. Coverage is subject to the terms and limits noted in your benefit materials. See your plan materials for details.

Our goal is to serve your health care coverage needs through all of life's changes. If you have any questions, our team stands ready to help.

Sincerely,

Your Customer Advocates
Blue Cross and Blue Shield of Illinois

Prime Therapeutics LLC is a separate pharmacy benefit management company contracted by Blue Cross and Blue Shield of Illinois to provide pharmacy benefit management and related other services. BCBSIL, as well as several independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics.

bcbsil.com

Drugs Moving to a Non-Preferred Brand Level

(higher out-of-pocket cost for you)

Drug ¹	Generic Alternatives ²	Brand Alternatives ^{1,2}	Condition Used For
AMCINONIDE (amcinonide oint 0.1%)	fluocinonide cream 0.5%, betamethasone dipropionate augmented cream 0.05%, betamethasone dipropionate oint 0.05%		Inflammatory Conditions
HYDROCODONE POLISTIREX/CH LORPHENIRAMINE POLISTIREX (hydrocod polst-chlorphen polst er susp 10-8 mg/5ml)	benzonatate, hydrocodone bitartrate/homatropine methylbromide, promethazine hydrochloride/dextromethorp han hydrobromide, promethazine/codeine, promethazine/dextromethorp han		Upper Respiratory Symptoms
MELPHALAN (melphalan tab 2 mg)	Please talk to your doctor or pharmacist about other medication(s) available for your condition.		Cancer
MIGLITOL (miglitol tab 25 mg)	acarbose		Diabetes
MIGLITOL (miglitol tab 50 mg)	acarbose		Diabetes
MIGLITOL (miglitol tab 100 mg)	acarbose		Diabetes

Drugs No Longer Covered

Drug ¹	Generic Alternatives ²	Brand Alternatives ^{1,2}	Condition Used For
CAROSPIR (spironolactone susp 25 mg/5ml)	eplernone tablet, spironolactone tablet, triamterene capsule		Heart Failure, Hypertension, Edema
DIASTAT ACUDIAL (diazepam rectal gel delivery system 10 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		Acute Repetitive Seizures
DIASTAT ACUDIAL (diazepam rectal gel delivery system 20 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		Acute Repetitive Seizures
LIVALO (pitavastatin calcium tab 1 mg)	atorvastatin, lovastatin, rosuvastatin, pravastatin, simvastatin		Hyperlipidemia, Hypercholesterolemia
LIVALO (pitavastatin calcium tab 2 mg)	atorvastatin, lovastatin, rosuvastatin, pravastatin, simvastatin		Hyperlipidemia, Hypercholesterolemia
LIVALO (pitavastatin calcium tab 4 mg)	atorvastatin, lovastatin, rosuvastatin, pravastatin, simvastatin		Hyperlipidemia, Hypercholesterolemia
MITIGARE (colchicine cap 0.6 mg)	colchicine tablet 0.6 mg		Gout
NORDITROPIN FLEXPRO (somatropin solution pen-injector 5 mg/1.5ml)		Genotropin, Ominitrope	Growth Hormone Deficiency, Short Stature, Growth Failure
NORDITROPIN FLEXPRO (somatropin solution pen-injector 10 mg/1.5ml)		Genotropin, Ominitrope	Growth Hormone Deficiency, Short Stature, Growth Failure
NORDITROPIN FLEXPRO (somatropin solution pen-injector 15 mg/1.5ml)		Genotropin, Ominitrope	Growth Hormone Deficiency, Short Stature, Growth Failure
NORDITROPIN FLEXPRO (somatropin solution pen-injector 30 mg/3ml)		Genotropin, Ominitrope	Growth Hormone Deficiency, Short Stature, Growth Failure

Drug ¹	Generic Alternatives ²	Brand Alternatives ^{1,2}	Condition Used For
ONEXTON (clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		Acne
OXANDROLONE (oxandrolone tab 2.5 mg)	Please talk to your doctor or pharmacist about other medication(s) available for your condition.		Promotes Weight Gain
OXANDROLONE (oxandrolone tab 10 mg)	Please talk to your doctor or pharmacist about other medication(s) available for your condition.		Promotes Weight Gain
oxandrolone tab 2.5 mg	Please talk to your doctor or pharmacist about other medication(s) available for your condition.		Promotes Weight Gain
oxandrolone tab 10 mg	Please talk to your doctor or pharmacist about other medication(s) available for your condition.		Promotes Weight Gain
VOTRIENT (pazopanib hcl tab 200 mg (base equiv))	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		Cancer
VYVANSE - (lisdexamfetamine dimesylate cap 10 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		ADHD, Binge Eating Disorder
VYVANSE - (lisdexamfetamine dimesylate cap 20 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		ADHD, Binge Eating Disorder
VYVANSE - (lisdexamfetamine dimesylate cap 30 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		ADHD, Binge Eating Disorder

Drug ¹	Generic Alternatives ²	Brand Alternatives ^{1,2}	Condition Used For
VYVANSE - (lisdexamfetamine dimesylate cap 40 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		ADHD, Binge Eating Disorder
VYVANSE - (lisdexamfetamine dimesylate cap 50 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		ADHD, Binge Eating Disorder
VYVANSE - (lisdexamfetamine dimesylate cap 60 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		ADHD, Binge Eating Disorder
VYVANSE - (lisdexamfetamine dimesylate cap 70 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		ADHD, Binge Eating Disorder
VYVANSE - (lisdexamfetamine dimesylate chew tab 10 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		ADHD, Binge Eating Disorder
VYVANSE - (lisdexamfetamine dimesylate chew tab 20 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		ADHD, Binge Eating Disorder
VYVANSE - (lisdexamfetamine dimesylate chew tab 30 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		ADHD, Binge Eating Disorder

Drug ¹	Generic Alternatives ²	Brand Alternatives ^{1,2}	Condition Used For
VYVANSE - (lisdexamfetamine dimesylate chew tab 40 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		ADHD, Binge Eating Disorder
VYVANSE - (lisdexamfetamine dimesylate chew tab 50 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		ADHD, Binge Eating Disorder
VYVANSE - (lisdexamfetamine dimesylate chew tab 60 mg)	There is a generic equivalent available. Please talk to your doctor or pharmacist about other medication(s) available for your condition.		ADHD, Binge Eating Disorder

¹ All brand names are the property of their respective owners.

Please note: Alternative drugs used to treat the same condition as a non preferred brand drug may have different active ingredients (i.e., they work in a different way but resolve the same problem).

² This list is not all inclusive. Other medicines may be available in this drug class.

A Division of Health Care Service Corporation, a Mutual Legal Reserve Company

Health care coverage is important for everyone.

We provide free communication aids and services for anyone with a disability or who needs language assistance. We do not discriminate on the basis of race, color, national origin, sex, gender identity, age, sexual orientation, health status or disability.

To receive language or communication assistance free of charge, please call us at 855-710-6984.

If you believe we have failed to provide a service, or think we have discriminated in another way, contact us to file a grievance.

Office of Civil Rights Coordinator

300 E. Randolph St.

35th Floor

Chicago, Illinois 60601

Phone: 855-664-7270 (voicemail)

TTY/TDD: 855-661-6965 Fax: 855-661-6960

You may file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, at:

U.S. Dept. of Health & Human Services

200 Independence Avenue SW

Room 509F, HHH Building 1019 Washington, DC 20201

Phone: 800-368-1019 TTY/TDD: 800-537-7697

Complaint Portal: https://ocrportal.hhs.gov/ocr/portal/lobby.jsf Complaint Forms: http://www.hhs.gov/ocr/office/file/index.html

A Division of Health Care Service Corporation, a Mutual Legal Reserve Company

If you, or someone you are helping, have questions, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 855-710-6984.

Español Spanish	Si usted o alguien a quien usted está ayudando tiene preguntas, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 855-710-6984.
العربية Arabic	إن كان لديك أو لدى شخص تساعده أسئلة، فلديك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك من دون اية تكلفة. للتحدث مع مترجم فوري، اتصل على الرقم 6984-710-855.
繁體中文 Chinese	如果您, 或您正在協助的對象, 對此有疑問, 您有權利免費以您的母語獲得幫助和訊息。 洽詢一位翻譯員, 請撥電話 號碼 855-710-6984。
Français French	Si vous, ou quelqu'un que vous êtes en train d'aider, avez des questions, vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, appelez 855-710-6984.
Deutsch German	Falls Sie oder jemand, dem Sie helfen, Fragen haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 855-710-6984 an.
ગુજરાતી Gujarati	જો તમને અથવા તમે મદદ કરી રહ્યા હોય એવી કોઈ બીજી વ્યક્તિને એસ.બી.એમ. કાયેક્રમ બાબતે પૃશ્નો હોય, તો તમને વિના ખર્ચે, તમારી ભાષામાં મદદ અને માહિતી મેળવવાનો હક્ક છે. દુભાષિયા સાથે વાત કરવા માટે આ નંબર 855-710-6984 પર કૉલ કરો.
हिंदी Hindi	यदि आपके, या आप जिसकी सहायता कर रहे हैं उसके, प्रश्न हैं, तो आपको अपनी भाषा में निःशुल्क सहायता और जानकारी प्राप्त करने का अधिकार है। किसी अनुवादक से बात करने के लिए 855-710-6984 पर कॉल करें।.
Italiano Italian	Se tu o qualcuno che stai aiutando avete domande, hai il diritto di ottenere aiuto e informazioni nella tua lingua gratuitamente. Per parlare con un interprete, puoi chiamare il numero 855-710-6984.
한국어 Korean	만약 귀하 또는 귀하가 돕는 사람이 질문이 있다면 귀하는 무료로 그러한 도움과 정보를 귀하의 언어로 받을 수 있는 권리가 있습니다. 통역사가 필요하시면 855-710-6984 로 전화하십시오.
Diné Navajo	T'áá ni, éí doodago ła'da bíká anánílwo'ígíí, na'ídíłkidgo, ts'ídá bee ná ahóóti'i' t'áá níík'e níká a'doolwoł dóó bína'ídíłkidígíí bee nił h odoonih. Ata'dahalne'ígíí bich'į' hodíílnih kwe'é 855-710-6984.
فارس <i>ی</i> Persian	اگر شما، یا کسی که شما به او کمک می کنید، سؤالی داشته باشید، حق این را دارید که به زبان خود، به طور رایگان کمک و اطلاعات دریافت نمایید. جهت گفتگو با یک مترجم شفاهی، با شماره 6984-710-855 تماس حاصل نمایید.
Polski Polish	Jeśli Ty lub osoba, której pomagasz, macie jakiekolwiek pytania, macie prawo do uzyskania bezpłatnej informacji i pomocy we własnym języku. Aby porozmawiać z tłumaczem, zadzwoń pod numer 855-710-6984.
Русский Russian	Если у вас или человека, которому вы помогаете, возникли вопросы, у вас есть право на бесплатную помощь и информацию, предоставленную на вашем языке. Чтобы связаться с переводчиком, позвоните по телефону 855-710-6984.
Tagalog Tagalog	Kung ikaw, o ang isang taong iyong tinutulungan ay may mga tanong, may karapatan kang makakuha ng tulong at impormasyon sa iyong wika nang walang bayad. Upang makipag-usap sa isang tagasalin-wika, tumawag sa 855-710-6984.
اردو Urdu	اگر آپ کو، یا کسی ایسے فرد کو جس کی آپ مدد کررہے ہیں، کوئی سوال درپیش ہے تو، آپ کو اپنی زبان میں مفت مدد اور معلومات حاصل کرنے کا حق ہے۔ مترجم سے بات کرنے کے لیے، 6984-710-855 پر کال کریں۔
Tiếng Việt Vietnamese	Nếu quý vị, hoặc người mà quý vị giúp đỡ, có câu hỏi, thì quý vị có quyển được giúp đỡ và nhận thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, gọi 855-710-6984.