



<DATE>

<GROUP NAME>

Attn: Group Benefits Manager

<ADDRESS 1>

<ADDRESS 2>

<CITY>, <STATE> <ZIP>

Re: Premium Formulary Updates Effective July 1, 2022

Dear Group Benefits Manager:

I am writing to notify you of changes to the Blue Cross and Blue Shield of Kansas City (Blue KC) Prescription Drug List that will go into effect July 1, 2022.

The Blue KC Medical and Pharmacy Management Committee reviews and maintains the Prescription Drug List. The Committee, consisting of practicing physicians and pharmacists in the Kansas City area, holds quarterly meetings to evaluate new drug therapies and review drug utilization issues. Medications are evaluated based on drug safety and costs.

The enclosed document outlines the changes in detail. These updates affect employer group members with Blue-Care® (HMO), BlueSelect Plus (PPO), Preferred-Care® (PPO) and Preferred-Care Blue® (PPO) plans. Subject to group-specific coverage limitations.

How We Will Communicate These Changes

Blue KC is taking proactive steps to limit disruption, including:

- Sending a letter to impacted members notifying them of the changes.
- Notifying all in-area providers by letter in the event their patients contact them to discuss alternative medications.

If you have any questions, please contact your Blue KC representative.

Sincerely,

Jay Weaver
VP, Chief Pharmacy Officer

Enclosure

Premium Prescription Drug List Updates Effective July 1, 2022

Please Note: This change only applies to groups that are on the Premium formulary (this does NOT impact small group ACA). Group-specific benefit exceptions may apply.

New Excluded Medications with Alternatives

*Members currently utilizing Vermlidy will be grandfathered on therapy.

New Excluded Medications with Alternatives		
Drug Class	Excluded Medications	Covered Alternative
Acne Agents	clindamycin phosphate 1% gel made by Oceanside	clindamycin phosphate 1% gel
Antidepressant Agents	fluoxetine tablets	fluoxetine capsules
Antihistamine Agents	clemastine 0.5/5ml syp	carbinoxamine tablet, 4mg/oral solution, OTC medications
	Ryvent	Over-the-counter medication(s) available for purchase
Anti-inflammatory Agents	ketoprofen cap 25mg	celecoxib, diclofenac, etodolac, ibuprofen, meloxicam tablet
Anti-migraine Agents	almotriptan tab	Sumatriptan, naratriptan, rizatriptan, zolmitriptan
	Emgality 120mg	Ajovy, Aimovig
	Zomig Spray	rizatriptan ODT tablet, sumatriptan nasal spray, zolmitriptan ODT tablet
Cancer Agents	Pemazyre	Truseltiq
Cardiovascular Agents	carvedilol cap ER	carvedilol
	fenofibrate cap 50mg, 150mg	fenofibrate (generic Tricor), fenofibric acid, gemfibrozil
	Lipofen	fenofibrate (generic Tricor), fenofibric acid, gemfibrozil
	Nitro-Dur	Nitroglycerin Patch

Drug Class	Excluded Medications	Covered Alternative
Corticosteroids	clocortolone 0.1% cream	mometasone lotion/cream, triamcinolone cream
	Orapred ODT	prednisone
	prednisolone sol	prednisone, prednisone oral sol
	Sernivo	mometasone lotion/cream, triamcinolone cream
Gastrointestinal Agents	Cuvposa	glycopyrrolate tablet
	Dexilant; dexlansoprazole	Omeprazole, pantoprazole
Glaucoma Agents	Betopic-S 0.25% Susp	Timolol Maleate Ophthalmic Solution
Glucose Elevating Agents	Glucagen, Gvoke	One of the following: generic glucagon, Baqsimi, glucagon inj manufactured by Fresenius Kabi, Zegalogue Inj
Hepatitis Agents	Vemlidy*	entecavir, tenofovir
Iron Chelating Agents	deferiprone	deferasirox
	Ferriprox	
Respiratory Agents	fluticasone/salmeterol (generic AirDuo)	generic Advair Diskus, Wixela, Breo Ellipta Inh, Symbicort Inh
	Xopenex Neb	levalbuterol nebulization sol
Sedatives	Hetlioz	Please talk to your doctor about other alternatives
Sickle Cell Anemia Agents	Siklos	Droxia
Smoking Cessation Agents	Chantix	varenicline

New Excluded Drugs with Covered Generic Equivalents

Alinia tablets	Afinitor	Azilect	Brovana
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Minivelle Dis	Nuvaring	Rapaflo	Rythmol SR
Sutent	Tykerb		

New Excluded Non-FDA Approved Drugs

Chromagen Cap	hyoscyamine drop 0.125/ML	Nulev Tab 0.125MG
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