## Pharmacy Program Updates for April 2019

The information provided below applies to members of all groups that use the BlueCross BlueShield of South Carolina **Preferred Drug List** (PDL) and the **Try Generics Drug List**. The information does NOT apply to members of groups using the Caremark Formulary or to members with Marketplace/Affordable Care Act (ACA) health plans. Caremark is an independent company that provides pharmacy benefits management on behalf of BlueCross.

## **EXCLUDED DRUG LIST UPDATES**

The drugs in the left-hand column were added to the Excluded Drug List, effective Jan. 1, 2019. For members who have active prescriptions for these drugs that were filled before Jan. 1, 2019, we will continue to cover them through April 1, 2019. For any members who were prescribed these drugs after Jan. 1, 2019, the exclusions are currently in effect, and these members will have to pay full price for these drugs. Members who were using Envarsus XR before Jan. 1, 2019, will continue to have coverage for the drug going forward.

Excluded Drug	Covered Alternatives
Beau Rx	OTC Mederma and Scar Away silicone scar sheets/gel
Benzonatate 150 mg capsule	Benzonatate 100 mg, 200 mg, OTC cough syrup
Bionect 0.2%	Silvasorb or Xeroform wound care products
Carbinoxamine 6 mg tablet	Carbinoxamine 4 mg, loratadine, cetirizine
Celacyn	OTC Mederma and Scar Away silicone scar sheets/gel
Chlorzoxazone 250 mg tablet	Chlorzoxazone 500 mg, cyclobenzaprine
Envarsus XR	Generic tacrolimus
Folika-V	OTC multivitamins with folic acid
Hydrocortisone 1% in asorbase ointment	Hydrocortisone cream or ointment
Levicyn Dermal Spray	Silvasorb or Xeroform wound care products
Recedo	OTC Mederma and Scar Away silicone scar sheets/gel
Sil-K Pad	Silvasorb or Xeroform wound care products
Tronvite	OTC multivitamins with folic acid
Vexasyn gel	Silvasorb or Xeroform wound care products

## QUANTITY MANAGEMENT PROGRAM UPDATES

The drugs in the left-hand column will have quantity limits effective April 1, 2019.

Drug	New Quantity Limit
triamcinolone cream, lotion and ointment	120 units/month
hydrocortisone cream, lotion and ointment	120 units/month

## PROTON PUMP INHIBITOR (PPI) COVERAGE UPDATE

Proton pump inhibitors (PPIs) are products that reduce stomach acid production and are used to treat ulcers, heartburn and acid reflux. To provide additional PPI treatment options for pediatric patients, we have begun covering **First-omeprazole** and **First-pantoprazole** for patients 17 years of age and younger only. These drugs were previously excluded from coverage.