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Charting the Future of Pharmacy



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Blue Cross and Blue Shield Association

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# Notice to Pharmacies

## **IMPORTANT Blue Cross Blue Shield of Massachusetts Pharmacy Benefit Information**

BCBSMA will implement **quality care dosing guidelines** and **changes to its non-covered drug list**. These initiatives will maintain access to cost-effective therapies for all of our members. Below are key facts about these initiatives.

### **Quality Care Dosing Introduces Dosing Consolidation and Monthly Quantity Guidelines.**

On September 5, 2001, BCBSMA will introduce Quality Care Dosing guidelines to improve appropriate use and dosing convenience through two interventions:

- Dosing consolidation
- Monthly quantity guidelines

The Quality Care Dosing guidelines are based on medical necessity criteria formed with input from FDA recommendations, national practice guidelines, and BCBSMA's Pharmacy and Therapeutics Committee, which is comprised of pharmacists, physicians, and mental health specialists from across the state.

### **Remeron®, Luvox®, and Prevacid® Move To Non-Covered Drug List**

On September 1, 2001, BCBSMA will move Luvox, Remeron, and Prevacid to its non-covered list.

- Luvox is available generically as fluvoxamine, which is a covered drug.
- For new medication starts of Remeron, alternatives include Effexor®/XR, Wellbutrin® SR, and Serzone®. Members currently taking Remeron will receive formulary exceptions; no further action is necessary.
- To facilitate transitions for patients taking Prevacid, BCBSMA has made Protonix® a covered drug, effective July 1, 2001. Prevpac® will remain covered.

For patients for whom no covered drug or drug dosage is clinically appropriate, the patient's physician can take advantage of our expedient exception process.