



September 2021

Pharmacy Formulary Change Notice

Highmark Blue Cross Blue Shield of Western New York is here to help you stay on top of your healthcare. We want to tell you about some upcoming changes to your Preferred Drug List (PDL) as of 09/01/2021.

Your PDL is a list of preferred drugs covered by <BlueHealth> Medicaid. A group of doctors and pharmacists check the PDL to make sure the drugs you're taking are safe and effective.

Effective for all members on <DATE>		
Medication	Changes	Your doctor may change it to one of these preferred drugs:
HUMATROPE INJ 5MG HUMATROPE INJ 6MG HUMATROPE INJ 12MG HUMATROPE INJ 24MG	PREFERRED WITH PRIOR AUTHORIZATION REQUIRED (Effective August 15, 2021)	N/A
ZOMACTON INJ 5MG ZOMACTON INJ 10MG	NON-PREFERRED WITH PRIOR AUTHORIZATION REQUIRED	HUMATROPE INJ 5MG HUMATROPE INJ 6MG HUMATROPE INJ 12MG HUMATROPE INJ 24MG

*Current utilizers will be grandfathered on Zomacton

What does this mean for you?

Some medications you take may no longer be preferred. You'll need approval from us to continue to get these medications.

What should I do if I use a nonpreferred drug?

Talk with your doctor to see if you can change to the new preferred drug. If your doctor says you can take the new preferred drug, ask them to write a new prescription for you. You and your doctor have the final say in your care.

Things to remember:

This doesn't change which pharmacy you go to or where you get your care.

If your doctor writes a prescription for or says you need to keep using a nonpreferred drug, he or she will need to get approval from <BlueHealth> Medicaid first by calling 866-231-0847.

Your health is important to us — that's why we have our experienced team of doctors and pharmacists regularly review this list to keep you safe and healthy.

Questions? Call Member Services at 866-231-0847 (TTY 711), Monday through Friday from 8:30 a.m. to 6 p.m. Eastern time.

Enclosures: Get help in another language
Nondiscrimination notice

bcbswny.com/stateplans

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