

## Changes to Wellcare Prime by Absolute Total Care (Medicare-Medicaid Plan)'s List of Covered Drugs (Formulary)

The table below outlines changes to our List of Covered Drugs (Formulary) that may impact you.

Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug(s) *	Alternative Drug(s) Cost-Sharing Tier **	Effective Date
AVITA CRE 0.025%	Deletion Of Drug From Formulary	Manufacturer Discontinuation	TRETINOIN CREAM 0.025%	Tier 1	11/01/2023
AVITA GEL 0.025%	Deletion Of Drug From Formulary	Manufacturer Discontinuation	TRETINOIN GEL 0.025%	Tier 1	07/01/2023
BYDUREON BC INJ	Prior Authorization Added***	PA Added To Ensure Use Is For A Part D Covered Indication	Consult Your Health Care Provider		11/01/2023
BYETTA INJ 10 MCG	Prior Authorization Added***	PA Added To Ensure Use Is For A Part D Covered Indication	Consult Your Health Care Provider		11/01/2023
CALCITRIOL INJ 1 MCG/ML	Deletion Of Drug From Formulary	Manufacturer Discontinuation	CALCITRIOL SOL 1 MCG/ML	Tier 1	07/01/2023
CAZANT PAK	Deletion Of Drug From Formulary	Manufacturer Discontinuation	VELIVET PAK	Tier 1	01/01/2023
CEFACLOR SUS 125 MG / 5 ML	Deletion Of Drug From Formulary	Manufacturer Discontinuation	CEFACLOR SUS 250 MG / 5 ML	Tier 1	12/01/2023
CEFACLOR SUS 375 MG / 5 ML	Deletion Of Drug From Formulary	Manufacturer Discontinuation	CEFACLOR SUS 250 MG / 5 ML	Tier 1	12/01/2023
CEFTAZIDIME D5W IV SOL	Deletion Of Drug From Formulary	Manufacturer Discontinuation	CEFTAZIDIME INJ	Tier 1	12/01/2023

Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug(s) *	Alternative Drug(s) Cost-Sharing Tier **	Effective Date
DALIRESP TAB	Deletion Of Drug From Formulary	Generic Available	ROFLUMILAST TAB	Tier 1	05/01/2023
DIGOX TAB 0.125 MG	Deletion Of Drug From Formulary	Manufacturer Discontinuation	DIGOXIN TAB 0.125 MG	Tier 1	01/01/2023
DIGOX TAB 0.25 MG	Deletion Of Drug From Formulary	Manufacturer Discontinuation	DIGOXIN TAB 0.25 MG	Tier 1	01/01/2023
ELLA TAB 30 MG	Deletion Of Drug From Formulary	Medicare Will No Longer Cover	Consult Your Health Care Provider		04/01/2023
ESBRIET CAP 267 MG	Deletion Of Drug From Formulary	Generic Available	PIRFENIDONE CAP 267 MG	Tier 2	05/01/2023
FREAMINE III INJ 10%	Deletion Of Drug From Formulary	Manufacturer Discontinuation	TROPHAMINE INJ 10%, TRAVASOL INJ 10%	Tier 2	10/01/2023
GILENYA CAP 0.5 MG	Deletion Of Drug From Formulary	Generic Available	FINGOLIMOD CAP 0.5 MG	Tier 2	05/01/2023
HETLIOZ CAP 20 MG	Deletion Of Drug From Formulary	Generic Available	TASIMELTEON CAP 20 MG	Tier 2	05/01/2023
ISOPTO ATROP SOL 1% OP	Deletion Of Drug From Formulary	Manufacturer Discontinuation	ATROPINE SULFATE OPHTH SOLN 1%	Tier 1	11/01/2023
KYNMOBI FILM	Deletion Of Drug From Formulary	Manufacturer Discontinuation	APOKYN INJ 10 MG/ML	Tier 2	08/01/2023
LARISSIA TAB	Deletion Of Drug From Formulary	Manufacturer Discontinuation	AVIANE TAB	Tier 1	02/01/2023
LEVO-T TAB	Deletion Of Drug From Formulary	Medicare Will No Longer Cover	LEVOTHYROXINE SODIUM TAB	Tier 1	08/01/2023

Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug(s) *	Alternative Drug(s) Cost-Sharing Tier **	Effective Date
LIDOCAINE HCL GEL 2%	Deletion Of Drug From Formulary	Manufacturer Discontinuation	GLYDO GEL 2%	Tier 1	07/01/2023
LILLOW TAB 0.15-30 MG-MCG	Deletion Of Drug From Formulary	Manufacturer Discontinuation	LEVONORGESTREL-ETHINYL ESTRADIOL TAB 0.15-30 MG-MCG	Tier 1	12/01/2023
MYORISAN CAP	Deletion Of Drug From Formulary	Manufacturer Discontinuation	CLARAVIS CAP	Tier 1	07/01/2023
NEVIRAPINE TAB 100 MG ER	Deletion Of Drug From Formulary	Manufacturer Discontinuation	NEVIRAPINE TAB 400 MG ER	Tier 1	11/01/2023
NORVIR SOLN 80 MG/ML	Deletion Of Drug From Formulary	Manufacturer Discontinuation	NORVIR PACKET 100 MG	Tier 2	04/01/2023
OXANDROLONE TAB 10 MG	Deletion Of Drug From Formulary	Market Removal	Consult Your Health Care Provider		11/01/2023
OXANDROLONE TAB 2.5 MG	Deletion Of Drug From Formulary	Market Removal	Consult Your Health Care Provider		11/01/2023
OZEMPIC INJ	Prior Authorization Added***	PA Added To Ensure Use Is For A Part D Covered Indication	Consult Your Health Care Provider		11/01/2023
PASER PACKETS 4 GM	Deletion Of Drug From Formulary	Manufacturer Discontinuation	Consult Your Health Care Provider		03/01/2023
PRENATAL VIT TAB LOW IRON	Deletion Of Drug From Formulary	Manufacturer Discontinuation	PRENATAL TAB 27-1 MG	Tier 2	03/01/2023
PROCALAMINE INJ 3%	Deletion Of Drug From Formulary	Manufacturer Discontinuation	CLINIMIX INJ 4.25/D5W	Tier 2	08/01/2023
PROCTO-PAK CRE 1%	Deletion Of Drug From Formulary	Manufacturer Discontinuation	HYDROCORTISONE PERIANAL CREAM 1%	Tier 1	09/01/2023

Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug(s) *	Alternative Drug(s) Cost-Sharing Tier **	Effective Date
ROSADAN CREAM 0.75%	Deletion Of Drug From Formulary	Manufacturer Discontinuation	METRONIDAZOLE CREAM 0.75%	Tier 1	03/01/2023
RYBELSUS TAB	Prior Authorization Added***	PA Added To Ensure Use Is For A Part D Covered Indication	Consult Your Health Care Provider		11/01/2023
STAVUDINE CAP	Deletion Of Drug From Formulary	Manufacturer Discontinuation	ABACAVIR TAB, EMTRICITABINE CAP, LAMIVUDINE TAB, ZIDOVUDINE TAB	Tier 1	10/01/2023
SYNERCID INJ 500 MG	Deletion Of Drug From Formulary	Manufacturer Discontinuation	Consult Your Health Care Provider		09/01/2023
TOPOSAR INJ 100 / 5 ML	Deletion Of Drug From Formulary	Manufacturer Discontinuation	ETOPOSIDE INJ 20 MG/ML	Tier 1	09/01/2023
TOPOSAR INJ 1 GM / 50 ML	Deletion Of Drug From Formulary	Manufacturer Discontinuation	ETOPOSIDE INJ 1 GM / 50 ML	Tier 1	09/01/2023
TRICARE TAB PRENATAL	Deletion Of Drug From Formulary	Manufacturer Discontinuation	PRENATAL TAB 27-1 MG; M-NATAL PLUS TAB	Tier 2	12/01/2023
TRULICITY INJ	Prior Authorization Added***	PA Added To Ensure Use Is For A Part D Covered Indication	Consult Your Health Care Provider		11/01/2023
VICTOZA INJ	Prior Authorization Added***	PA Added To Ensure Use Is For A Part D Covered Indication	Consult Your Health Care Provider		11/01/2023

\*Alternative drug(s) are drugs that you could consider with your prescriber. Only your prescriber can determine alternative drugs that are appropriate for you given the individualized nature of drug therapy. Please consult your prescriber to confirm if this is an appropriate drug for you.

\*\*The cost-sharing tier for the alternative drug(s) may be Tier 1 or Tier 2 (for Medicare Part D drugs) or Tier 3 (for drugs covered by Healthy Connections Medicaid). Please see your List of Covered Drugs (Formulary) for more information.

\*\*\*If you are currently taking this drug, this change will not affect your coverage for this drug for the rest of the plan year.

Wellcare Prime by Absolute Total Care (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and South Carolina Healthy Connections Medicaid to provide benefits of both programs to enrollees.

## Multi-Language Insert

### Multi-Language Interpreter Services

ATENCIÓN: Si habla español, contamos con servicios de asistencia lingüística que se encuentran disponibles para usted de manera gratuita. Llame al **1-855-735-4398** (TTY: **711**), de 8 a.m. a 8 p.m., de lunes a viernes. Después del horario de atención, los fines de semana y días feriados federales, es posible que se le solicite dejar un mensaje. Se le devolverá la llamada el siguiente día hábil. La llamada es gratuita.

注意：如果您說中文，您可以免費獲得語言協助服務。請致電 **1-855-735-4398** (TTY： **711**)，服務時間為週一至週五，從早上 8 點到晚上 8 點。非服務時間、週末和聯邦假日，您可能需要留言。我們將在下一個工作日內回電給您。此為免付費專線。

ATTENTION : si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition. Appelez le **1-855-735-4398** (TTY : **711**) du lundi au vendredi, de 8 h à 20 h. En dehors des heures d'ouverture et durant le week-end et les jours fériés, il vous sera peut-être demandé de laisser un message. Vous serez rappelé le jour ouvrable suivant. L'appel est gratuit.

LƯU Ý: Nếu quý vị nói tiếng Việt, chúng tôi có các dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Vui lòng gọi **1-855-735-4398** (TTY: **711**), từ 8 a.m. đến 8 p.m., Thứ Hai đến Thứ Sáu. Sau giờ làm việc, vào cuối tuần và ngày lễ liên bang, quý vị có thể được yêu cầu để lại tin nhắn. Cuộc gọi của quý vị sẽ được trả lời vào ngày làm việc tiếp theo. Cuộc gọi này được miễn phí.

HINWEIS: Wenn Sie Deutsch sprechen, steht Ihnen ein kostenloser Übersetzungsdienst zur Verfügung. Wählen Sie dafür **1-855-735-4398** (TTY: **711**) von Montag bis Freitag zwischen 8 und 20 Uhr. Außerhalb dieser Zeiten, an Wochenenden und gesetzlichen Feiertagen werden Sie möglicherweise gebeten, eine Nachricht zu hinterlassen. Ihr Anruf wird innerhalb des nächsten Arbeitstages beantwortet. Der Anruf ist kostenlos.

ВНИМАНИЕ: если вы говорите на русском языке, вы можете бесплатно получить помощь переводчика. Позвоните по номеру **1-855-735-4398** (TTY: **711**), с 8 а.м. до 8 р.м. с понедельника по пятницу. В нерабочее время, в выходные дни и государственные праздники вас могут попросить оставить сообщение. Вам перезвонят на следующий рабочий день. Звонки бесплатные.

انتباه: في حال كنت تتحدث اللغة العربية، تتوفر لك خدمات مساعدة لغوية مجانية. اتصل على الرقم **1-855-735-4398** (TTY: **711**)، من الساعة 8 صباحًا ولغاية الساعة 8 مساءً من الاثنين إلى الجمعة. وقد يُطلب منك ترك رسالة بعد انتهاء ساعات العمل وفي عطلات نهاية الأسبوع والإجازات الفيدرالية. وستتم معاودة الاتصال بك خلال يوم العمل التالي. والاتصال مجاني.

ATENÇÃO: se falar português, estão disponíveis serviços de assistência gratuitos no seu idioma. Ligue para o número **1-855-735-4398** (TTY: **711**) de segunda-feira a sexta-feira, das 8:00 às 20:00. Se ligar fora deste horário, num fim de semana ou num feriado federal, poderá ter de deixar mensagem. A sua chamada será devolvida no próximo dia útil. A chamada é gratuita.

ATANSYON: Si ou pale Kreyòl-Franse, sèvis asistans lang disponib gratis pou ou. Rele **1-855-735-4398** (TTY: **711**), soti lendi pou rive vandredi, de 8è am. pou 8è pm. Apre lè travay, nan wikenn ak jou konje federal yo, yo ka mande w pou kite yon mesaj. Y ap retounen w apèl la nan pwochen jou ouvrab la. Apèl la gratis.

УВАГА: якщо ви володієте українською мовою, вам безкоштовно доступні послуги мовної підтримки. Телефонуйте за номером **1-855-735-4398** (TTY: **711**) з 8:00 до 20:00 з понеділка по п'ятницю. У неробочий час, у вихідні та державні свята вас можуть попросити залишити повідомлення. Ваш дзвінок буде оброблено протягом наступного робочого дня. Дзвінок безкоштовний.

توجه: اگر پشتو صحبت می کنید، خدمات کمک زبان، رایگان، در دسترس شما است. با شماره **1-855-735-4398** تماس بگیرید (TTY: **711**)، از 8 صبح تا 8 بعد از ظهر، از دوشنبه تا جمعه. پس از ساعات کاری، در تعطیلات آخر هفته و در تعطیلات فدرال، ممکن است از شما خواسته شود که پیامی بگذارید. تماس شما ظرف یک روز کاری آینده برگردانده خواهد شد. تماس رایگان است.

মনে রাখবেন: আপনি বাংলা ভাষাতে কথা বললে আপনার জন্য ভাষা সহায়তা পরিষেবাটি নিখরচায় আপনার জন্য রয়েছে। সোমবার থেকে শুক্রবার, সকাল 8টা থেকে রাত্রি 8টা অবধি **1-855-735-4398** (TTY: **711**), নম্বরে ফোন করুন। নির্ধারিত সময়ের পরে, সপ্তাহান্তের এবং ফেডেরাল ছুটির দিনগুলিতে আপনাকে মেসেজ রেখে যেতে বলা হতে পারে। পরবর্তী কাজের দিনে আপনাকে রিটার্ন কল করা হবে। এই কলটি নিঃশুল্ক।

توجه: اگر فارسی صحبت می کنید، خدمات کمک زبان به صورت رایگان در اختیار شما قرار می گیرد. با شماره **1-855-735-4398** تماس بگیرید (TTY: **711**)، از 8 صبح تا 8 بعد از ظهر، از دوشنبه تا جمعه. پس از ساعات کاری، در تعطیلات آخر هفته و در تعطیلات فدرال، ممکن است از شما خواسته شود که پیامی بگذارید. تماس شما ظرف یک روز کاری آینده برگردانده خواهد شد. تماس رایگان است.

VINI RE: Nëse flisni shqip, ju ofrohen shërbime të asistencës gjuhësore, pa pagesë. Telefononi numrin **1-855-735-4398** (TTY: **711**), nga ora 8:00 deri në 20:00, nga e hëna në të premte. Pas këtij orari, gjatë fundjavave dhe pushimeve zyrtare federale, mund t'ju kërkohet të lini një mesazh. Telefonata juaj do të marrë përgjigje brenda ditës vijuese të punës. Telefonata është pa pagesë.

توجه: اگر به زبان دری صحبت می کنید، خدمات کمک زبان به صورت رایگان در دسترس شما است. از دوشنبه تا جمعه، از 8 صبح تا 8 بعد از ظهر، با شماره **1-855-735-4398** (TTY: **711**) تماس بگیرید. در رخصتی های آخر هفته و در رخصتی های فدرال ایالتی، ممکن است از شما خواسته شود که پیام بگذارید. تماس شما ظرف یک روز کاری آینده برگردانده خواهد شد. تماس رایگان است.