

# PROVIDER NEWSLETTER

A newsletter for Molina Healthcare Providers

## Third Quarter 2021



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### Molina Healthcare and PsychHub Partner for Mental Health Resources

Because good behavioral health is vitally important for everyone, Molina Healthcare is committed to doing all we can to support mental wellbeing for providers and members. By joining PsychHub’s coalition partnership, Molina can now offer providers and members access to the Mental Wellbeing Resource Hub. This free library of resources helps address mental health issues during the COVID-19 pandemic and beyond. Members and providers can search for resources by keyword, topic, and audience.

To access the Mental Wellbeing Resources Hub, go to:

<https://psychhub.com/initiatives/resource-hub/>

# MASK COVID... NOT YOUR EMOTIONS.



## **Mental Health Ally Certification (MHAC) Program:**

Through partnership with PsychHub, in-network primary care and specialty providers are offered free continuing education credits, Mental Health Ally Certifications, and additional learning opportunities. The MHAC Library offers micro-certification tracks focused on critical topics like mental health competency foundations, substance use awareness, safety planning, diversity, and motivational interviewing basics. The MHAC is made up of eight one-hour, self-paced modules that can be taken in any order, as well as supplemental videos, podcasts, and downloadable PDF file. This certification program is available to all providers/provider offices and recommended for those interested in strengthening their knowledge and competency of behavioral health issues and concepts like primary care, office management and nursing.

To access learning hub resources, go to <https://lms.psychhub.com/> and create an account by clicking 'Log In.' Click the Dashboard button on the navigation toolbar and select 'Join Cohort with Code.' Use the following provider Cohort Code: **sGDcuXXmQXZEGsu**

Please reach out to your local Provider Services Representative for any additional questions!

## **New Provider Online Directory**

**Molina Healthcare is getting a new Provider Online Directory. Check out the new tool when it launches this summer!**

Molina is committed to improving your online experience. The new Provider Online Directory enhances search functionality so information is available quickly and easily.

Key benefits include:

- User-friendly and intuitive navigation
- Provider profile cards for quick access to information
- Browsing by category, search bar and common searches
- Expanded search options and filtering for narrowing results
- Provider information you can save to use later

As always, please make sure your provider information is correct. This allows Molina to accurately generate provider directories, process claims and communicate with our network. Providers must notify Molina in writing at least 30 days in advance of changes. Changes

should be submitted on the Change of Information Form at [www.MolinaHealthcare.com](http://www.MolinaHealthcare.com) under the Frequently Used Forms section.

## Naloxone Saves Lives!

On July 23, 2020, the Food and Drug Administration (FDA) issued updated recommendations regarding the use and availability of naloxone. The FDA recommends that health care professionals consider prescribing naloxone to patients taking prescribed opioid pain medicine who are at increased risk of opioid overdose, and discuss the availability of naloxone both when beginning and renewing treatment. Furthermore, health care professionals should consider prescribing naloxone to at-risk patients who are not receiving a prescription for an opioid pain reliever or medicine to treat opioid use disorder (OUD).



Patients considered HIGH RISK include those prescribed opioids who:

- Receive a dosage of 50 morphine milligram equivalents (MME) per day or greater
- Receive opioids with concurrent benzodiazepine (regardless of opioid dose)
- Have a history of overdose
- Have a history of substance use disorder

If your patients are considered HIGH RISK, please consider submitting a prescription to their pharmacy for one of the preferred naloxone products listed below.

### Preferred Naloxone Products:

- NALOXONE SOLUTION PREFILLED SYRINGE FOR INJECTION 2MG/2ML
- NARCAN NASAL SPRAY 4MG

For naloxone to be effective, members and their friends and family must learn how to use it, put it in an easily accessible place and inform family and friends where it is located.

## 2021 Molina Healthcare Model of Care Provider Training

In alignment with requirements from the Centers for Medicaid and Medicare Services (CMS), Molina requires PCPs and key high-volume specialists to receive training about Molina's Special Needs Plans (SNPs) Model of Care (MOC).

The SNPs Model of Care is the plan for delivering coordinated care and care management to special needs members. Per CMS requirements, Managed Care Organizations (MCOs) are responsible for conducting their own MOC training, which means you may be asked to complete separate trainings by multiple insurers.

Model of Care training materials and attestation forms are available at <https://www.Molinahealthcare.com/>

</media/Molina/PublicWebsite/PDF/Providers/common/medicare/model-of-care-Provider-Training.pdf>. The completion date for this year's training is December 31, 2021.

If you have any additional questions, please contact your local Molina Healthcare Provider Services Representative at: (855) 322-4080.

## Is Your Authorization Request Urgent?



Molina renders decisions on prior authorization requests as quickly as a member's health requires. In accordance with CMS and state guidelines, providers may submit expedited or urgent requests when standard timelines could seriously jeopardize a member's life or health.

When submitting prior authorization requests, keep the following items in mind:

- An urgent/expedited service request designation should be used only when “applying the standard time for making a determination could seriously jeopardize the life or health of the enrollee or the enrollee’s ability to regain maximum function.” When submitting requests that don’t fulfill this definition, please mark them elective/routine on the Molina Prior Authorization Request Form.
- By requesting an expedited/urgent authorization, providers are asking Molina to make a decision within mandated timeframes. Because these timeframes are measured in hours rather than days, the provider or provider’s office staff must be available to answer any potential questions about the request in a timely manner.
- Submit all necessary information with the request. Failure to do so will require Molina to ask for additional information, which could delay the decision. If Molina requests more information, we urge providers to respond immediately to allow Molina to render a decision within the mandated expedited timeframe.
- Molina will provide member prior authorization notification and decisions in accordance with CMS and/or any state guidelines which may include verbal and written decisions.

## Culturally Competency Resources for Providers and Office Staff



Molina Healthcare is committed to being a culturally competent organization. We support and adhere to the [National Standards for Culturally and Linguistically Appropriate Services \(CLAS\) in Health and Health Care](#) as established by the Office of Minority Health. Additionally, we work to achieve NCQA's [Multicultural Health Care Distinction](#) in the markets we serve. Cultural and linguistic competency is the ability to provide respectful and responsive care to members with diverse values, beliefs and behaviors, including

tailoring health care delivery to meet members' social, cultural and linguistic needs.

### Resources for Your Office and Staff

#### **Molina's Building Culturally Competent Health Care: Training for Providers and Staff**

Cultural Competency can positively impact a patient's health care experience and outcomes. As part of Molina's ongoing commitment to cultural competency, a series of five short Cultural Competency Training videos are available to providers and office staff on the Culturally and Linguistically Appropriate Resources/Disability Resources link under the Health Resources tab at [www.MolinaHealthcare.com](http://www.MolinaHealthcare.com).

#### **Training topics:**

- Video 1: Introduction to Cultural Competency
  - The Need for Cultural Competency
  - How Culture Impacts Health Care
  - Implicit Bias
  - Federal Requirements Related to Cultural Competency (Affordable Care Act, Americans with Disabilities Act)
- Video 2: Health Disparities
  - Examples of Racial Health Disparities and Health Disparities Among Persons with Disabilities
  - Health Equity
  - Social Determinants of Health
- Video 3: Specific Population Focus – Seniors and Persons with Disabilities
  - Social Model of Disability and Accepted Protocol and Language of the Independent Living/Disability Rights Movement
- Video 4: Specific Population Focus – LGBTQ and Immigrants / Refugees
  - Health Disparities Among LGBTQ Population
  - Clear Communication Guidelines for Healthcare Providers Interacting with LGBTQ Patients
  - Disparities Among Immigrant and Refugee Communities
  - Clear Communication Guidelines for Healthcare Providers Interacting with Immigrant and Refugee Patients

- Video 5: Becoming Culturally Competent
  - Perspective-taking
  - Clear Communication Guidelines
  - Tips for Effective Listening
  - Assisting Patients whose Preferred Language is Not English
  - Tips for Working with an Interpreter
  - Teach Back Method
  - Molina's Language Access Services

Training videos range from five to ten minutes each. Viewers may participate in all five training modules, or just one, depending on topics of interest. Please contact your Provider Services Representative if you have any questions.

### **Americans with Disabilities Act (ADA) Resources: Provider Education Series:**

A series of provider education materials related to disabilities is now available to providers and office staff on Molina's website. Please visit Molina's Culturally and Linguistically Appropriate Resources/Disability Resources link under the Health Resources tab at [www.MolinaHealthcare.com](http://www.MolinaHealthcare.com) to view the materials.

### **Molina Healthcare's Provider Education Series – Disability Resources consists of the following educational materials:**

- American with Disabilities Act (ADA)
  - Introduction to the ADA and questions and answers for healthcare providers (i.e. which healthcare providers are covered under the ADA; how does one remove communication barriers that are structural in nature; is there money available to assist with ADA compliance costs?).
- Members who are Blind or have Low Vision
  - How to get information in alternate formats such as Braille, large font, audio, or other formats.
- Service Animals
  - Examples of tasks performed by a service animal; tasks that do not meet the definition of service animal; inquiries you can make regarding service animals; and exclusions, charges, or other specific rules.
- Tips for Communicating with People with Disabilities & Seniors
  - Communicating with Individuals who Are Blind or Visually Impaired; Deaf or Hard of Hearing; Communicating with Individuals with Mobility Impairments; Speech Impairments; and Communicating with Seniors.

Please contact your Provider Services Representative if you have any questions.

### **Molina's Language Access Services**

Accurate communication strengthens mutual understanding of illness and treatment, increases patient satisfaction, and improves the quality of health care. Providing language access services is a legal requirement for health care systems that receive federal funds; a member cannot be refused services due to language barriers. When needed, Molina provides the following services directly to members at no cost:

- Written material in other formats (i.e. large print, audio, accessible electronic formats, Braille)
- Written material translated into languages other than English

- Oral and Sign Language Interpreter Services
- Relay Service (711)
- 24-Hour Nurse Advice Line
- Bilingual/Bicultural Staff

In many cases, Molina will also cover the cost for a language or sign language interpreter for our members' medical appointments. Molina members and providers are instructed to call the Member and Provider Contact Center to schedule interpreter services or to connect to a telephonic interpreter.

Also, Molina's materials are always written simply in plain language and at required reading levels. For additional information on Molina's language access services or cultural competency resources, contact Provider Services or visit [www.MolinaHealthcare.com](http://www.MolinaHealthcare.com).

## Submitting Electronic Data Interchange (EDI) Claims

Submitting claims electronically through methods like clearinghouses or through Molina's Provider Portal offer many advantages. These include:

- Improved HIPAA compliance
- Reduced operational costs associated with paper claims (printing, postage, etc.)
- Increased accuracy of data and efficient information delivery
- Fewer claim delays since errors can be corrected and resubmitted electronically!
- Claims reach Molina faster!

### How to submit EDI claims:

A clearinghouse is the easiest way to submit EDI claims to Molina Healthcare. You may submit EDI transactions through Molina's contracted clearinghouse, Change Healthcare, or use a clearinghouse of your choice. If you do not have a clearinghouse, Molina offers additional options for electronic claims submissions. Log onto Molina's Provider Portal at [provider.Molinahealthcare.com](http://provider.Molinahealthcare.com) for more information.

### Frequently Asked Questions:

- Can I submit COB claims electronically?
  - Yes, Molina and our connected clearinghouses fully support electronic COB.
- Do I need to submit a certain volume of claims to send EDI?
  - No, any number of claims via EDI saves both time and money.
- Which clearinghouses are currently available to submit EDI claims to Molina?
  - Molina Healthcare uses Change Healthcare as our channel partner for EDI claims. You may use the clearinghouse of your choice. Change Healthcare partners with hundreds of other clearinghouses.
- What claims transactions are currently accepted for EDI transmission?
  - 837P (Professional claims) and 837I (Institutional claims).
  - 270/271 (Health Care Eligibility Benefit Inquiry and Response)
  - 278 (Health Care Services Review - Request for Review and Response)
  - 276/277 (Health Care Claim Status Request and Response)
  - 835 (Health Care Claim Payment/Advice)
- What is Molina's Payer ID?
  - Molina Healthcare of Texas' Payer ID is 20554.
- What if I still have questions?

- More information is available at [www.Molinahealthcare.com](http://www.Molinahealthcare.com) under the EDI tab.

## Electronic Fund Transfer (EFT)

Molina has partnered with our payment vendor, ProviderNet, for Electronic Funds Transfer and Electronic Remittance Advice. Access to the ProviderNet portal is FREE to providers and we encourage you to register after receiving your first check from Molina.

<p><b>New ProviderNet User Registration:</b></p> <ol style="list-style-type: none"> <li>1. Go to <a href="https://providernet.adminisource.com">https://providernet.adminisource.com</a></li> <li>2. Click "Register"</li> <li>3. Accept the Terms</li> <li>4. Verify your information             <ol style="list-style-type: none"> <li>a. Select Molina Healthcare from Payers list</li> <li>b. Enter your primary NPI</li> <li>c. Enter your primary Tax ID</li> <li>d. Enter recent claim and/or check number associated with this Tax ID and Molina Healthcare</li> </ol> </li> <li>5. Enter your User Account Information             <ol style="list-style-type: none"> <li>a. Use your email address as user name</li> <li>b. Strong passwords are enforced (8 or more characters consisting of letters/numbers)</li> </ol> </li> <li>6. Verify: contact information; bank account information; payment address             <ol style="list-style-type: none"> <li>a. Note: Any changes to payment address may interrupt the EFT process.</li> <li>b. Add any additional payment addresses, accounts, and Tax IDs once you have logged in.</li> </ol> </li> </ol>	<p><b>If you are associated with a Clearinghouse:</b></p> <ol style="list-style-type: none"> <li>1. Go to "Connectivity" and click the "Clearinghouses" tab</li> <li>2. Select the Tax ID for which this clearinghouse applies</li> <li>3. Select a Clearinghouse (if applicable, enter your Trading Partner ID)</li> <li>4. Select the File Types you would like to send to this clearinghouse and click "Save"</li> </ol>
	<p><b>If you are a registered ProviderNet user:</b></p> <ol style="list-style-type: none"> <li>1. Log in to ProviderNet and click "Provider Info"</li> <li>2. Click "Add Payer" and select Molina Healthcare from the Payers list</li> <li>3. Enter recent check number associated with your primary Tax ID and Molina Healthcare</li> </ol>
	<p><b>BENEFITS</b></p> <ul style="list-style-type: none"> <li>▪ Administrative rights to sign-up/manage your own EFT Account</li> <li>▪ Ability to associate new providers within your organization to receive EFT/835s</li> <li>▪ View/print/save PDF versions of your Explanation of Payment (EOP)</li> <li>▪ Historical EOP search by various methods (i.e. Claim Number, Member Name)</li> <li>▪ Ability to route files to your ftp and/or associated Clearinghouse</li> </ul>
<p>If a provider has questions regarding the actual registration process, they can contact ProviderNet at: (877) 389-1160 or email: <a href="mailto:wco.provider.registration@changehealthcare.com">wco.provider.registration@changehealthcare.com</a>.</p>	

**Note:** Providers, please ensure you are registered for EFT for all participating Molina Healthcare Lines of Business.

## Molina Healthcare Marketplace 2021 Formulary Changes – Effective October 1, 2021

Date Effective	Product Name	Change	Notes
10/1/2021	COSENTYX INJ 75MG/0.5	Add to formulary, T4, with PA	
10/1/2021	ReliOn Rx TMX Blood Glucose Meter	Add to formulary, DME, with QL	1 per 365 days
10/1/2021	ReliOn Rx TMX strip 100 ct	Add to formulary, T2, with QL	200 per 30 days, 100/month max quantity for non- insulin users
10/1/2021	ReliOn Rx TMX strip 50 ct	Add to formulary, T2, with QL	200 per 30 days, 100/month max quantity for non- insulin users
10/1/2021	ALBENDAZOLE TAB 200MG	Add to formulary tier 3, QL	2 per 1 day, max days supply = 1
10/1/2021	TINIDAZOLE TAB 250MG	Add to formulary tier 3, QL	8 per day, max days supply = 7
10/1/2021	TINIDAZOLE TAB 500MG	Add to formulary tier 3, QL	4 per day, max days supply = 7
10/1/2021	PYRIME/LEUCO CAP 12.5/2.5	Add to formulary tier 1 with QL	90 per 30 days

10/1/2021	PYRIME/LEUCO CAP 25/5MG	Add to formulary tier 1 with QL	30 per 30 days
10/1/2021	PYRIME/LEUCO CAP 25/10MG	Add to formulary tier 1 with QL	30 per 30 days
10/1/2021	PYRIME/LEUCO CAP 50/10MG	Add to formulary tier 1 with QL	30 per 30 days
10/1/2021	PYRIME/LEUCO CAP 50/20MG	Add to formulary tier 1 with QL	30 per 30 days
10/1/2021	PYRIME/LEUCO CAP 50/25MG	Add to formulary tier 1 with QL	30 per 30 days
10/1/2021	PYRIME/LEUCO CAP 75/25MG	Add to formulary tier 1 with QL	30 per 30 days
10/1/2021	Ivermectin 3 mg TAB	Add QL and max day supply	
10/1/2021	TRAMADL/APAP TAB 37.5-325	Add to formulary tier 1 with QL, MED, Max 7 day initial supply	10 per day
10/1/2021	ABIRATERONE TAB 500MG	Add to formulary tier 1 with PA and QL	60 per 30 days
10/1/2021	ICLUSIG TAB 10MG	Add to formulary tier 3 with PA and QL	30 per 30 days
10/1/2021	ICLUSIG TAB 30MG	Add to formulary tier 4 with PA and QL	30 per 30 days
10/1/2021	Z-TUSS AC LIQ 2-9/5ML	Add to formulary tier 2 with QL	240 mL per 25 days
10/1/2021	DESVENLAFAX TAB 25MG ER	Add to formulary tier 1 QL	30 per 30 days
10/1/2021	ULESFIA LOT 5%	Add to formulary tier 3 with PA	
10/1/2021	Nitazoxanide TABS 500MG	Add to formulary tier 3 with PA	
10/1/2021	METOCLOPRAM INJ 5MG/ML	Add to formulary tier 1	
10/1/2021	METOCLOPRAM INJ 10MG/2ML	Add to formulary tier 1	
10/1/2021	Toujeo SoloStar SOPN 300UNIT/ML	Add to formulary tier 2, QL	18 mL/25 days
10/1/2021	Toujeo Max SoloStar SOPN 300UNIT/ML	Add to formulary tier 2, QL	18 mL/25 days
10/1/2021	Soliqua SOPN 100-33UNT-MCG/ML	Add to formulary tier 2 with ST, QL	18 mL/25 days
10/1/2021	Xultophy SOPN 100-3.6UNIT-MG/ML	Add to formulary tier 2 with ST, QL	15 mL/25 days
10/1/2021	NovoLIN R FlexPen SOPN 100UNIT/ML	Add to formulary, Tier 2 with QL	30 per 25 days
10/1/2021	NovoLIN N FlexPen SUPN 100UNIT/ML	Add to formulary, Tier 2 with QL	30 per 25 days
10/1/2021	Rebif Rebidose SOAJ 22MCG/0.5ML	Add to Formulary Tier 4 with PA	
10/1/2021	Rebif Rebidose SOAJ 44MCG/0.5ML	Add to Formulary Tier 4 with PA	
10/1/2021	Rebif Rebidose Titration Pack SOAJ 6X8.8 & 6X22MCG	Add to Formulary Tier 4 with PA	

10/1/2021	Rebif SOSY 22MCG/0.5ML	Add to Formulary Tier 4 with PA	
10/1/2021	Rebif SOSY 44MCG/0.5ML	Add to Formulary Tier 4 with PA	
10/1/2021	Rebif Titration Pack SOSY 6X8.8 & 6X22MCG	Add to Formulary Tier 4 with PA	
10/1/2021	Advair HFA AERO 45-21MCG/ACT	Add to formulary tier 2 with QL	12 g per 25 days
10/1/2021	Advair HFA AERO 115-21MCG/ACT	Add to formulary tier 2 with QL	12 g per 25 days
10/1/2021	Advair HFA AERO 230-21MCG/ACT	Add to formulary tier 2 with QL	12 g per 25 days
10/1/2021	Advair Diskus AEPB 100-50MCG/DOSE	Add to formulary tier 2 with QL	60 per 25 days
10/1/2021	Advair Diskus AEPB 250-50MCG/DOSE	Add to formulary tier 2 with QL	60 per 25 days
10/1/2021	Advair Diskus AEPB 500-50MCG/DOSE	Add to formulary tier 2 with QL	60 per 25 days
10/1/2021	Tremfya SOSY 100MG/ML	Add to formulary tier 4 with PA	30 per 30 days
10/1/2021	Spiriva HandiHaler CAPS 18MCG	Add to formulary tier 2, QL	4 per 30 days
10/1/2021	Spiriva Respimat AERS 2.5MCG/ACT	Add to formulary tier 2, QL	
10/1/2021	Spiriva Respimat AERS 1.25MCG/ACT	Add to formulary tier 2, QL	4 per 30 days
10/1/2021	Aimovig SOAJ 70MG/ML	Add to formulary tier 3 with PA and QL	1 mL per 28 days
10/1/2021	Aimovig (140 MG Dose) SOAJ 70MG/ML	Add to formulary tier 3 with PA and QL	2 mL per 28 days
10/1/2021	Aimovig SOAJ 140MG/ML	Add to formulary tier 3 with PA and QL	1 mL per 28 days
10/1/2021	Emgality SOAJ 120MG/ML	Add to formulary tier 3 with PA and QL	2 mL per 28 days
10/1/2021	Emgality (300 MG Dose) SOSY 100MG/ML	Add to formulary tier 3 with PA and QL	3 mL per 28 days
10/1/2021	Emgality SOSY 120MG/ML	Add to formulary tier 3 with PA and QL	2 mL per 28 days
10/1/2021	BREZTRI AERO AER SPHERE	Add to formulary tier 2 with QL 10.8 g per 25 days	10.8 g per 25 days
10/1/2021	TRELEGY AER ELLIPTA	Add to formulary tier 2 with QL	60 per 30 days
10/1/2021	TRELEGY AER ELLIPTA	Add to formulary tier 2 with QL	60 per 30 days
10/1/2021	CELECOXIB CAP 50MG	Remove PA	
10/1/2021	CELECOXIB CAP 100MG	Remove PA	
10/1/2021	CELECOXIB CAP 200MG	Remove PA	
10/1/2021	CELECOXIB CAP 400MG	Remove PA	

10/1/2021	XARELTO TAB 2.5MG	Remove PA, Add QL	QL 60 per 30 days
10/1/2021	XARELTO TAB 10MG	Remove PA, Add QL	QL 30 per 30 days
10/1/2021	XARELTO TAB 15MG	Remove PA, Add QL	QL 30 per 30 days
10/1/2021	XARELTO TAB 20MG	Remove PA, Add QL	QL 30 per 30 days
10/1/2021	XARELTO STAR TAB 15/20MG	Remove PA	
10/1/2021	ENOXAPARIN INJ 60/0.6ML	Remove max days supply	
10/1/2021	ENOXAPARIN INJ 80/0.8ML	Remove max days supply	
10/1/2021	ENOXAPARIN INJ 100MG/ML	Remove max days supply	
10/1/2021	ENOXAPARIN INJ 120/0.8	Remove max days supply	
10/1/2021	ENOXAPARIN INJ 150MG/ML	Remove max days supply	
10/1/2021	ENOXAPARIN INJ 300/3ML	Remove max days supply	
10/1/2021	ELIQUIS TAB 2.5MG	Downtier from T3 to T2, update QL	60 per 30 days
10/1/2021	ELIQUIS TAB 5MG	Downtier from T3 to T2, update QL	60 per 30 days
10/1/2021	ELIQUIS ST P TAB 5MG	Add to formulary, T2, with QL	1 fill per year
10/1/2021	LINZESS CAP 72MCG	Downtier from T3 to T2	
10/1/2021	LINZESS CAP 145MCG	Downtier from T3 to T2	
10/1/2021	LINZESS CAP 290MCG	Downtier from T3 to T2	
10/1/2021	HUMULIN R INJ U-500	Downtier from T3 to T2	
10/1/2021	HUMULIN R INJ U-500	Downtier from T3 to T2	
10/1/2021	CHANTIX PAK 0.5& 1MG	Update QL	53 per 24 days, max 2 fills per 365 days
10/1/2021	ESTRADIOL TAB 0.5MG	Remove QL	
10/1/2021	ESTRADIOL TAB 1MG	Remove QL	
10/1/2021	ESTRADIOL TAB 2MG	Remove QL	
10/1/2021	SEMAGLUTIDE TAB 3 MG	Add QL MDD = 1	30 per 30 days
10/1/2021	SEMAGLUTIDE TAB 7 MG	Add QL MDD = 2	60 per 30 days
10/1/2021	SEMAGLUTIDE TAB 14 MG	Add QL MDD = 3	90 per 30 days
10/1/2021	DULAGLUTIDE SOLN PEN- INJECTOR 0.75 MG/0.5ML	Add QL 2 mL/24 days	2 mL per 24 days
10/1/2021	DULAGLUTIDE SOLN PEN- INJECTOR 1.5 MG/0.5ML	Add QL 2 mL/24 days	2 mL per 24 days
10/1/2021	DULAGLUTIDE SOLN PEN- INJECTOR 3 MG/0.5ML	Add QL 2 mL/24 days	2 mL per 24 days
10/1/2021	DULAGLUTIDE SOLN PEN- INJECTOR 4.5 MG/0.5ML	Add QL 2 mL/24 days	2 mL per 24 days
10/1/2021	LIRAGLUTIDE SOLN PEN- INJECTOR 18 MG/3ML (6 MG/ML)	Add QL 9 mL/35 days	9 mL per 35 days

10/1/2021	SEMAGLUTIDE SOLN PEN-INJ 0.25 OR 0.5 MG/DOSE (2 MG/1.5ML)	Add QL 1.5 mL/24 days	1.5 mL per 24 days
10/1/2021	SEMAGLUTIDE SOLN PEN-INJ 1 MG/DOSE (2 MG/1.5ML)	Add QL 3 mL/24 days	3 mL per 24 days
10/1/2021	SEMAGLUTIDE SOLN PEN-INJ 1 MG/DOSE (4 MG/3ML)	Add QL 3 mL/24 days	3 mL per 24 days
10/1/2021	INSULIN DEGLUDEC- LIRAGLUTIDE SOL PEN-INJ 100-3.6 UNIT-MG/ML	Add QL 15 mL/25 days	15 mL per 25 days
10/1/2021	INSULIN GLARGINE- LIXISENATIDE SOL PEN-INJ 100-33 UNIT-MCG/ML	Add QL 18 mL/25 days	18 mL per 25 days
10/1/2021	DUPIXENT INJ 200MG	Add to formulary, T4, PA	
10/1/2021	XOFLUZA TAB 40MG	Add to formulary, T2, QL	2 per 25 days
10/1/2021	XOFLUZA TAB 80MG	Add to formulary, T2, QL	1 per 25 days
10/1/2021	RUKOBIA TAB 600MG ER	Add to formulary, T2, QL	60 per 30 days
10/1/2021	SUNITINIB MALATE CAP 37.5 MG (BASE EQUIVALENT)	Add to formulary, T4, PA, QL	30 per 30 days
10/1/2021	SUNITINIB MALATE CAP 25 MG (BASE EQUIVALENT)	Add to formulary, T4, PA, QL	60 per 30 days
10/1/2021	SUNITINIB MALATE CAP 50 MG (BASE EQUIVALENT)	Add to formulary, T4, PA, QL	30 per 30 days
10/1/2021	SUNITINIB MALATE CAP 12.5 MG (BASE EQUIVALENT)	Add to formulary, T4, PA, QL	120 per 30 days
10/1/2021	LOPINAVIR-RITONAVIR TAB 200-50 MG	Add to formulary, T1, QL	180 per 30 days
10/1/2021	LOPINAVIR-RITONAVIR TAB 100-25 MG	Add to formulary, T1, QL	360 per 30 days
10/1/2021	ETRAVIRINE TAB 200 MG	Add to formulary, T1, QL	60 per 30 days
10/1/2021	ETRAVIRINE TAB 100 MG	Add to formulary, T1, QL	120 per 30 days
10/1/2021	ARFORMOTEROL TARTRATE SOLN NEBU 15 MCG/2ML (BASE EQUIV)	Add to formulary, T1, QL	120 per 30 days

PA = Prior Authorization QL = Quantity Limits ST = Step Therapy