

To: AmeriHealth Caritas Pennsylvania (PA) Community HealthChoices (CHC) Providers

Date: July 27, 2021

RE: Update: Formulary Changes

The following products will be removed from the AmeriHealth Caritas Pennsylvania Community HealthChoices drug formulary.

Participants currently receiving the product listed below will require a new prescription for an alternative product before **September 13, 2021**. Participants for whom it is not medically advisable to change therapy will require prior authorization to continue to receive coverage for the formulary changed products.

Formulary Removals	
Product List	Alternative Product(s)
Hylavite oral tablets	b complex-c-folic acid oral tablets, super b-complex/vit c/fa oral tablets

Additional prior authorization criteria may apply. Please refer to most recent drug formulary and prior authorization information available at:

www.amerihealthcaritaschc.com → Providers → Pharmacy Services

If you have any questions regarding this notice, please contact Pharmacy Services at 1-800-674-8720.