

PHARMACY BENEFIT PRIOR AUTHORIZATION UPDATES

May 26th, 2023

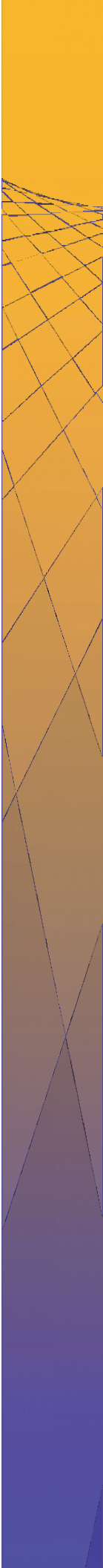
Below are upcoming updates to pharmacy benefit medication prior authorization criteria for Community Health Choice's Marketplace plans.

Marketplace Premier Plans

Drug/Class	Effective Date	Overview
Votrient	6/1/2023	Removing age criteria
FloLipid	6/1/2023	Adding to formulary with PA (PA required for members age 9 years or older)
Atorvaliq	6/1/2023	Adding to formulary with PA (PA required for members age 9 years or older)
Tezspire (pen)	6/1/2023	Adding to formulary with PA
Cibinqo	6/1/2023	Updating age criteria - expanding age to 12 and older
Tafinlar	6/1/2023	Adding new indication of low-grade glioma
Mekinist	6/1/2023	Adding new indication of low-grade glioma
Strensiq	6/1/2023	Adding continuation criteria
Descovy	08/01/2023	Update prior authorization criteria to remove separate section on continuation request

Marketplace Select Plans

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