

**To: AmeriHealth Caritas Pennsylvania (PA) and 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 PA and AmeriHealth Caritas PA CHC drug formulary.

Members currently receiving the product listed below will require a new prescription for an alternative product before **September 13, 2021**. Members 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 on-line at:
www.amerihealthcaritaspa.com → Providers → Resource → Pharmacy Services or
www.amerihealthcaritaschc.com → Providers → Pharmacy Services.

If you have any questions regarding this notice, please contact Pharmacy Services at 1-866-610-2774.