

Behavioral Health Formulary Updates for Medicaid

July 1, 2016

Please refer to the below grid concerning enhanced pharmacy benefits for Medicaid members related to behavioral health:

-Long Acting Injectable Antipsychotics will not require prior authorization. Certain quantity limits will be in place.

-All products can be filled at any network pharmacy, with the exception of Vivitrol, which can be filled through any specialty pharmacy par for New York State Medicaid (for billing questions, please call Provider Services at 1-800-950-0051).

-No course limitations for smoking cessation therapies. No PA required for patients 18+.

Product Name	Pharmacy Benefit	Medical Benefit
Zyprexa Relprevv	No PA, All strengths formulary, QL (2 per 21 days)	No PA required
Abilify Maintena ER	No PA, All strengths formulary, QL (1 per 21 days)	No PA required
Invega Sustenna	No PA, All strengths formulary, QL (1 per 21 days)	No PA required
Risperdal Consta	No PA, All strengths formulary, QL (2 per 21 days)	No PA required
Invega Trinza	No PA, All strengths formulary, QL (1 per 69 days)	No PA required
Aristada	No PA, All strengths formulary, QL (1 per 21 days)	No PA required

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Vivitrol (naltrexone injection)	No PA, All strengths formulary, QL (1 per 21 days), SP	No PA required
naloxone vial naloxone prefilled syringe Narcan nasal spray Evzio	No PA, Formulary No PA, Formulary No PA, Formulary, QL (4 per claim) No PA, Non-formulary, QL (4 per claim)	No PA required
Smoking Cessation products:	No PA required for patients 18+ PA required for patients under 18	Not covered under Medical Benefit
Chantix 0.5 mg	QL (103 per 30 days)	
Chantix 1 mg	QL (60 per 30 days)	
Chantix titration/starter pack	QL (1 per 30 days)	
Bupropion/Zyban 150 mg SR	QL (60 per 30 days), Zyban is NF	
Nicotine Nasal Spray	All strengths formulary, QL (6 per 30 days)	
Nicotine Transdermal	All strengths formulary, QL (30 per 30 days)	
Nicotrol Cartidge Inhaler	All strengths formulary, QL (504 per 30 days)	
Nicotine Lozenges	All strengths formulary, QL (600 per 30 days)	
Nicotine Gum	All strengths formulary, QL (720 per 30 days)	

Key: QL = Quantity Limits PA = Prior Authorization NF= Non-formulary SP = Specialty Pharmacy

Pharmacy Changes for New York City Behavioral Health Transition to Managed Care. Medicaid Update. New York State Department of Health. September 2015:31(10), p11. Accessed on 6/28/16 at http://www.health.ny.gov/health_care/medicaid/program/update/2015/index.htm.