



Healthfirst Medicaid and Personal Wellness Plan Update: Behavioral Health Drug Coverage Changes

EFFECTIVE 3/27/2017

Drug	Healthfirst Personal Wellness Plan	Healthfirst Medicaid
Long-acting injectable antipsychotics <ul style="list-style-type: none"> • Abilify Maintena • Invega Sustenna • Risperdal Consta • Zyprexa Relprevv (Non-Formulary) • Invega Trinza (Non-Formulary) 	Covered as a Pharmacy or Medical Benefit for all members <ul style="list-style-type: none"> - For Pharmacy coverage, the member can fill the prescription at any network pharmacy - For Medical coverage: <ul style="list-style-type: none"> • No preauthorization is needed • For billing questions, call Provider Services at 1-888-801-1660 	Covered as a Pharmacy or Medical Benefit by Healthfirst for: <ul style="list-style-type: none"> • All non-SSI members • SSI members 21 years of age or older residing in any of the five boroughs of New York City - For Pharmacy coverage, the member can fill the prescription at any network pharmacy - For Medical coverage: <ul style="list-style-type: none"> • No preauthorization is needed • For billing questions, call Provider Services at 1-888-801-1660 Covered as a NYS Fee-For-Service Medical Benefit <ul style="list-style-type: none"> • SSI members under 21 years of age residing in any of the five boroughs of New York City • All SSI members residing in Nassau or Suffolk Counties
Vivitrol (Naltrexone)	Covered as a Pharmacy or Medical Benefit for all members <ul style="list-style-type: none"> - Vivitrol can be filled by any network specialty pharmacy - For Medical coverage: <ul style="list-style-type: none"> • For billing questions, call Provider Services at 1-888-801-1660 	Covered as a Pharmacy or Medical Benefit for all members <ul style="list-style-type: none"> - Vivitrol can be filled by any network specialty pharmacy - For Medical coverage: <ul style="list-style-type: none"> • For billing questions, call Provider Services at 1-888-801-1660
Naloxone 0.4mg/mL vial Naloxone 1mg/mL prefilled syringe	Covered as a Pharmacy or Medical Benefit for all members <ul style="list-style-type: none"> - For Pharmacy coverage, the member can fill the prescription at any network pharmacy - For Medical coverage: <ul style="list-style-type: none"> • No preauthorization is needed • For billing questions, call Provider Services at 1-888-801-1660 	Covered as a Pharmacy or Medical Benefit for all members <ul style="list-style-type: none"> - For Pharmacy coverage, the member can fill the prescription at any network pharmacy - For Medical coverage: <ul style="list-style-type: none"> • No preauthorization is needed • For billing questions, call Provider Services at 1-888-801-1660
Suboxone Film Buprenorphine/naloxone sublingual tablets Buprenorphine sublingual tablets	Covered only as a Pharmacy Benefit for all members <ul style="list-style-type: none"> - For Pharmacy coverage, the member can fill the prescription at any network pharmacy 	Covered only as a Pharmacy Benefit for all members <ul style="list-style-type: none"> - For Pharmacy coverage, the member can fill the prescription at any network pharmacy
All smoking-cessation products <ul style="list-style-type: none"> • Bupropion • Chantix • Nicotine Replacement Therapy 	Covered only as a Pharmacy Benefit for all members <ul style="list-style-type: none"> • The two-course annual limit has been removed <ul style="list-style-type: none"> - For Pharmacy coverage, the member can fill the prescription at any network pharmacy 	Covered only as a Pharmacy Benefit for all members <ul style="list-style-type: none"> • The two-course annual limit has been removed <ul style="list-style-type: none"> - For Pharmacy coverage, the member can fill the prescription at any network pharmacy