

Drug	Healthfirst Personal Wellness Plan	Healthfirst Medicaid
<p>Long-acting injectable antipsychotics</p> <ul style="list-style-type: none"> Abilify Maintena Invega Sustenna Risperdal Consta Zyprexa Relprevv (Non-Formulary) Invega Trinza (Non-Formulary) 	<p>Covered as a Pharmacy or Medical Benefit for all members</p> <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 	<p>Covered as a Pharmacy or Medical Benefit by Healthfirst for:</p> <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 <p>Covered as a NYS Fee-For-Service Medical Benefit</p> <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
<p>Vivitrol (Naltrexone)</p>	<p>Covered as a Pharmacy or Medical Benefit for all members</p> <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 	<p>Covered as a Pharmacy or Medical Benefit for all members</p> <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
<p>Naloxone 0.4mg/mL vial Naloxone 1mg/mL prefilled syringe</p>	<p>Covered as a Pharmacy or Medical Benefit for all members</p> <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 	<p>Covered as a Pharmacy or Medical Benefit for all members</p> <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
<p>Suboxone Film Buprenorphine/naloxone sublingual tablets Buprenorphine sublingual tablets</p>	<p>Covered only as a Pharmacy Benefit for all members</p> <ul style="list-style-type: none"> For Pharmacy coverage, the member can fill the prescription at any network pharmacy 	<p>Covered only as a Pharmacy Benefit for all members</p> <ul style="list-style-type: none"> For Pharmacy coverage, the member can fill the prescription at any network pharmacy
<p>All smoking-cessation products</p> <ul style="list-style-type: none"> Bupropion Chantix Nicotine Replacement Therapy 	<p>Covered only as a Pharmacy Benefit for all members</p> <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 	<p>Covered only as a Pharmacy Benefit for all members</p> <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