

**Independent Care Health Plan  
Future Formulary Change File**

**CMS FORMULARY ID: 17044.000**

**EFFECTIVE DATE: 10/01/2017**

**AFFECTED DRUG NAME**

**BUTRANS 10 MCG/HR TRANSDERM.**

**CHANGE TYPE**

**BRAND VERSION REMOVED FROM FORMULARY**

**CHANGE REASON**

**REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW  
GENERIC EQUIVALENT.**

**ALTERNATIVE DRUG(S) AND TIER(S)**

**BUPRENORPHINE 10 MCG/HR PATCH TDWK - TIER 1**

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**Independent Care Health Plan  
Future Formulary Change File**

**CMS FORMULARY ID: 17044.000**

**EFFECTIVE DATE: 10/01/2017**

**AFFECTED DRUG NAME**

**BUTRANS 15 MCG/HR TRANSDERM.**

**CHANGE TYPE**

**BRAND VERSION REMOVED FROM FORMULARY**

**CHANGE REASON**

**REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW  
GENERIC EQUIVALENT.**

**ALTERNATIVE DRUG(S) AND TIER(S)**

**BUPRENORPHINE 15 MCG/HR PATCH TDWK - TIER 1**

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**Independent Care Health Plan  
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**EFFECTIVE DATE: 10/01/2017**

**AFFECTED DRUG NAME**

**BUTRANS 20 MCG/HR TRANSDERM.**

**CHANGE TYPE**

**BRAND VERSION REMOVED FROM FORMULARY**

**CHANGE REASON**

**REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW  
GENERIC EQUIVALENT.**

**ALTERNATIVE DRUG(S) AND TIER(S)**

**BUPRENORPHINE 20 MCG/HR PATCH TDWK - TIER 1**

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**Independent Care Health Plan  
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**CMS FORMULARY ID: 17044.000**

**EFFECTIVE DATE: 10/01/2017**

**AFFECTED DRUG NAME**

**BUTRANS 5 MCG/HR TRANSDERM.**

**CHANGE TYPE**

**BRAND VERSION REMOVED FROM FORMULARY**

**CHANGE REASON**

**REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW  
GENERIC EQUIVALENT.**

**ALTERNATIVE DRUG(S) AND TIER(S)**

**BUPRENORPHINE 5 MCG/HR PATCH TDWK - TIER 1**

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**CMS FORMULARY ID: 17044.000**

**EFFECTIVE DATE: 10/01/2017**

**AFFECTED DRUG NAME**

**STRATTERA 10 MG ORAL**

**CHANGE TYPE**

**BRAND VERSION REMOVED FROM FORMULARY**

**CHANGE REASON**

**REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW  
GENERIC EQUIVALENT.**

**ALTERNATIVE DRUG(S) AND TIER(S)**

**ATOMOXETINE HCL 10 MG CAPSULE - TIER 1**

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**EFFECTIVE DATE: 10/01/2017**

**AFFECTED DRUG NAME**

**STRATTERA 100 MG ORAL**

**CHANGE TYPE**

**BRAND VERSION REMOVED FROM FORMULARY**

**CHANGE REASON**

**GENERIC DRUG AVAILABLE AT LOWER TIER.**

**ALTERNATIVE DRUG(S) AND TIER(S)**

**ATOMOXETINE HCL 100 MG CAPSULE - TIER 1**

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**CMS FORMULARY ID: 17044.000**

**EFFECTIVE DATE: 10/01/2017**

**AFFECTED DRUG NAME**

**STRATTERA 18 MG ORAL**

**CHANGE TYPE**

**BRAND VERSION REMOVED FROM FORMULARY**

**CHANGE REASON**

**REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW  
GENERIC EQUIVALENT.**

**ALTERNATIVE DRUG(S) AND TIER(S)**

**ATOMOXETINE HCL 18 MG CAPSULE - TIER 1**

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**CMS FORMULARY ID: 17044.000**

**EFFECTIVE DATE: 10/01/2017**

**AFFECTED DRUG NAME**

**STRATTERA 25 MG ORAL**

**CHANGE TYPE**

**BRAND VERSION REMOVED FROM FORMULARY**

**CHANGE REASON**

**REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW  
GENERIC EQUIVALENT.**

**ALTERNATIVE DRUG(S) AND TIER(S)**

**ATOMOXETINE HCL 25 MG CAPSULE - TIER 1**

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**CMS FORMULARY ID: 17044.000**

**EFFECTIVE DATE: 10/01/2017**

**AFFECTED DRUG NAME**

**STRATTERA 40 MG ORAL**

**CHANGE TYPE**

**BRAND VERSION REMOVED FROM FORMULARY**

**CHANGE REASON**

**REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW  
GENERIC EQUIVALENT.**

**ALTERNATIVE DRUG(S) AND TIER(S)**

**ATOMOXETINE HCL 40 MG CAPSULE - TIER 1**

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**CMS FORMULARY ID: 17044.000**

**EFFECTIVE DATE: 10/01/2017**

**AFFECTED DRUG NAME**

**STRATTERA 60 MG ORAL**

**CHANGE TYPE**

**BRAND VERSION REMOVED FROM FORMULARY**

**CHANGE REASON**

**REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW  
GENERIC EQUIVALENT.**

**ALTERNATIVE DRUG(S) AND TIER(S)**

**ATOMOXETINE HCL 60 MG CAPSULE - TIER 1**

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**EFFECTIVE DATE: 10/01/2017**

**AFFECTED DRUG NAME**

**STRATTERA 80 MG ORAL**

**CHANGE TYPE**

**BRAND VERSION REMOVED FROM FORMULARY**

**CHANGE REASON**

**REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW  
GENERIC EQUIVALENT.**

**ALTERNATIVE DRUG(S) AND TIER(S)**

**ATOMOXETINE HCL 80 MG CAPSULE - TIER 1**

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