

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

CMS FORMULARY ID: 18011.000

EFFECTIVE DATE: 08/01/2018

AFFECTED DRUG NAME

FORADIL 12 MCG INHALATION

CHANGE TYPE

DRUG REMOVED FROM FORMULARY

CHANGE REASON

WITHDRAWN FROM MARKET BY THE MANUFACTURER.

ALTERNATIVE DRUG(S) AND TIER(S)
