

SPECIAL BULLETIN

FOR PROFESSIONAL PROVIDERS

OCT. 1, 2014

HIGHMARK TO DISCONTINUE COVERAGE OF NUMEROUS COMPOUNDED MEDICATIONS FOR COMMERCIAL PHARMACY PRODUCT MEMBERS EFFECTIVE 12/1/14

This past summer, Highmark notified our members and network physicians that we would discontinue coverage of certain compounded medications to address safety concerns — specifically due to an outbreak of fungal meningitis at a Massachusetts compounding pharmacy and recent U.S. Food and Drug Administration (FDA) investigations regarding safety and sterility at some compounding pharmacies. Further, the FDA does not verify or approve the quality, safety and/or effectiveness of compounded medications.

To further promote patient safety in this regard, effective with dates of service of Dec. 1, 2014, and beyond, Highmark will discontinue coverage of 1,521 bulk powders (representing 1,590 brands) that may be contained in compounded medications. Please note the number of excluded bulk powders is subject to change in the future.

Highmark strives to ensure that our members have comprehensive prescription drug coverage that offers access to a wide range of safe, effective and affordable medications to treat all manner of illness, including chronic conditions. Although compounded medications containing bulk powders no longer will be covered as of Dec. 1, 2014, our prescription drug formularies will continue to provide coverage for a range of oral and topical commercially available products.

MEMBERS MAY CONTACT YOU

This change is applicable to all Highmark commercial products, and letters are being mailed to notify those members who have recently received a compounded medication. As a result, these members may contact your practice before their next refill to request new prescriptions for their medications in different dosage forms or for another FDA-approved drug. (Please note that new prescriptions may still require authorization to be covered under a member's benefit plan.) Members who continue taking the compounded medications that will no longer be covered as of Dec. 1, 2014, may be responsible for paying the full cost for those medications.

REQUESTS FOR EXCEPTIONS

If you believe that there are no other treatment options available for your Highmark patient, you may submit a coverage determination request to Highmark by sending an email to compoundrequest@highmark.com. In the email, please provide the following Highmark member information:

- Name
- Date of birth
- Highmark member identification number

(over, please)



- Diagnosis being treated
- Compound being requested (including a list of all ingredients)
- Reasons why a commercially available drug cannot be used
- Quantity being requested
- Duration of drug treatment
- Name of compounding pharmacy being used
- List of other prescription medications already used in an attempt to treat the patient's condition

CHECK MEMBERS' BENEFITS AND ELIGIBILITY AND LOOK UP FEES IN NAVINET®

Please remember to use NaviNet or the applicable HIPAA electronic transactions to verify the member's benefits and eligibility before prescribing medications or delivering services. As always, the individual member's benefit structure will determine coverage.

If you have questions regarding this Special Bulletin, please contact your Provider Relations Representative or Provider Relations Consultant.