

Inside this issue: Subsidy Changes

CareLink Subsidy Changes

1. Insulin aspart (Novolog® FlexPen®) -Pre-filled pens were added to the UHS outpatient formulary. **CareLink will subsidize without restrictions.**
2. Insulin aspart protamine suspension 70% [intermediate acting] and insulin aspart solution 30% [rapid acting] (NovoLog® Mix 70/30) -CareLink will subsidize insulin NovoLog® 70/30 Mix without restrictions. The drug is also obtainable through a Medication Assistance Program (MAP).
3. Insulin aspart protamine suspension 70% [intermediate acting] and insulin aspart solution 30% [rapid acting] (NovoLog® Mix 70/30 FlexPen®) – Pre-filled pens were added to the UHS outpatient formulary. **CareLink will subsidize without restrictions.**
4. Insulin detemir (Levemir® FlexPen®)– Pre-filled pens were added to the UHS outpatient formulary. **CareLink will subsidize FlexPens® pending the attainment through a MAP, for those who do not qualify for a MAP, or if a MAP is not available.**
5. Insulin glargine (Lantus® SoloStar®) pen- Pre-filled pens were added to the UHS outpatient formulary. **CareLink will subsidize pending the attainment through a MAP, for those who do not qualify for a MAP, or if a MAP is not available.**
6. Insulin lispro (Humalog® KwikPen) pre-filled pen - Pre-filled pens were added to the UHS outpatient formulary. **CareLink will subsidize without restrictions.**
7. Insulin lispro protamine suspension 50% [intermediate acting] and insulin lispro solution 50% [rapid acting] (Humalog® Mix 50/50™) -CareLink will subsidize insulin Humalog® 50/50™ Mix when initiated by Endocrinology for outpatient use. The drug is also obtainable through a MAP. PCPs may continue therapy.
8. Insulin lispro protamine suspension 75% [intermediate acting] and insulin lispro solution 25% [rapid acting] (Humalog® Mix 75/25™) -CareLink will subsidize insulin Humalog® 75/25™ Mix without restrictions. The drug is also obtainable through a MAP.
9. Insulin lispro protamine suspension 75% [intermediate acting] and insulin lispro solution 25% [rapid acting] (Humalog® Mix KwikPen 75/25™)- Pre-filled pens were added to the UHS outpatient formulary. **CareLink will subsidize without restrictions.**
10. Metformin extended-release tablet 750 mg (Glucophage® XR equivalent) - All strengths of metformin and metformin extended-release tablets are subsidized by CareLink without restrictions.
11. Pramlintide (Symlin®) pen – Pre-filled pens were added to the UHS outpatient formulary with use restricted to Endocrinology. **Pramlintide is not subsidized.** All prescriptions should be processed through the MAP for attainment.
12. Timolol/brimonidine (Combigan® equivalent) ophthalmic solution – CareLink will subsidize timolol/brimonidine eye drops without restrictions.
13. Timolol/dorzolamide (Cosopt® equivalent) ophthalmic solution – CareLink will subsidize timolol/dorzolamide eye drops without restrictions.
14. The following medications were removed from the formulary due to lack of use and will no longer be subsidized by CareLink:
 - **Amnioglutethemide (Cytandren®) 250 mg tablets** discontinued by the manufacturer
 - **Carteolol (Ocupress®) ophthalmic solution** due to lack of use
 - **Chlorpropamide tablets** due to lack of use
 - **Dipivefrin (Propine®) ophthalmic solution** due to lack of use
 - **Levobunolol (Betagan®) ophthalmic solution** due to lack of use



Any prescriber who feels a regimen warrants special consideration, please contact:

Brandi Kelly, Pharm.D., Manager, Pharmacy Programs-CareLink at

358-3180, Brandi.Kelly@uhs-sa.com OR CareLink Authorization at 358-3224

Webform requests available at <http://www.universityhealthsystem.com/carelink/formulary-request.shtml>