# SPBP1

#### **PROVIDER BULLETIN**

January 28, 2016

## **HEPATITIS C DRUGS**

EFFECTIVE Monday February 1, 2016, the following hepatitis C drugs are being added to the SPBP1 (ADAP) formulary.

NDC	DRUG	STRENGTH
00003021301	DAKLINZA	30 MG
00003021501	DAKLINZA	60 MG
00003021301	DANLINZA	OU IVIG
61958180101	HARVONI	90MG-400MG
59676022528	OLYSIO	150 MG
61958150101	SOVALDI	400 MG
00074308228	TECHNIVIE	12.5-75 MG
00014300220	IECHNIVIE	12.5-75 IVIG
000074309328	VIEKIRA PAK	12.5-75-50

### **IMPORTANT:**

Each of these drugs will be denied at the point of sale with the NCPDP Error 78: "Cost Exceeds Max." For a claim for one of these medications to be *considered* for payment, providers must contact Provider Services. at 1-800-835-4080.

# PROVIDER SERVICES CANNOT ENTER A "1 TIME" MEDICAL EXCEPTION UPON REQUEST BY THE PROVIDER.

Caseworkers at the Department of Health will review each request. Providers will be notified when the decision for either approval or denial has been made.

Hepatitis C questions should be directed to the Department of Health caseworkers at