



# AmeriHealth Caritas™

## New Hampshire

**To:** AmeriHealth Caritas New Hampshire Providers  
**Date:** September 12, 2022  
**Subject:** AmeriHealth Caritas New Hampshire Formulary Changes

**Summary: Effective September 12, 2022, the changes below will be made to the AmeriHealth Caritas New Hampshire formulary.**

### FORMULARY CHANGES

#### Medications with a new diagnosis code requirement:

- Olumiant® (baricitinib)  
A diagnosis code for COVID-19 will allow the medication to process at the pharmacy without prior authorization requirements. All other indications require prior authorization.

#### Medications added as non-preferred agents:

- Veklury® (remdesivir)
- Bebtelovimab

#### Prior authorization changes:

##### The following criterion will be retired:

- Emergency Use Authorization (EUA) Drugs/Products for COVID-19

#### Questions:

If you have questions about this communication, please contact AmeriHealth Caritas New Hampshire Provider Pharmacy Services at **1-888-765-6394 (TTY 1-855-809-9206)**.

ACNH\_222222731