

In an ongoing effort to provide appropriate, affordable, healthcare options to our members, Willamette Valley Community Health CCO will be making several changes to the current formulary.

All formulary changes, additions and removals are thoroughly investigated, reviewed and approved by the Pharmacy & Therapeutics Committee. This Committee is comprised of several providers representing multiple specialties and clinics from our community. These recommendations were based on utilization, pharmacokinetic information and cost data.

We value your partnership as we continue to work toward our mutual goal of delivering the highest quality healthcare while ensuring affordability and accessibility. If you are interested in participating in the P & T Committee please contact the Clinical Pharmacists at 503-371-7701 for more information.

WVCH Formulary Additions Effective 5/6/2017				
Name	Strength	Dosage Form	Route	Change
Tamsulosin	0.4 mg	capsule	Oral	Add to formulary
Basaglar	100 units/ml	Solution pen-injector	Subcutaneous	Add to formulary
Carteolol	1%	Solution	Ophthalmic	Add to formulary
Metipranolol	0.3%	Solution	Ophthalmic	Add to formulary
Dorzolamide	2%	Solution	Ophthalmic	Add to formulary
Carbachol (Miostat Intraocular)	0.01%	Solution	Ophthalmic	Add to formulary
Dorzolamide/Timolol	22.3-6.8 mg/ml	solution	Ophthalmic	Add to formulary
Cromolyn	4%	Solution	Ophthalmic	Add to formulary
				Add to formulary
Linezolid	600 mg/300 ml	IV solution	IV	with PA criteria
				Add to formulary
Linezolid	600 mg	Tablets	Oral	with PA criteria

WVCH Formulary Changes Effective 7/1/2017				
Name	Strength	Dosage Form	Route	Change



Rosuvastatin	5 mg, 10 mg, 20 mg, 40 mg	Tablets	ро	Removing PA restriction
				For new starts only we are requiring
				step therapy with a trial of the Timolol
		Gel forming		solution – they must have at least 2 fills
Timolol maleate	0.25%, 0.5%	solution	Ophthalmic	in the last 120 days to not be a new start
				For new starts only we are requiring
				step therapy with a trial of Latanoprost
				- they must have at least 2 fills in the
Bimatoprost	0.01%	Solution	Ophthalmic	last 120 days to not be a new start
				For new starts only we are requiring
				step therapy with a trial of Latanoprost
				- they must have at least 2 fills in the
Bimatoprost	0.03%	Solution	Ophthalmic	last 120 days to not be a new start
				For new starts only we are requiring
				step therapy with a trial of Latanoprost
				- they must have at least 2 fills in the
Travoprost	0.004%	Solution	Ophthalmic	last 120 days to not be a new start
				For new starts only we are requiring
				step therapy with a trial of Dorzolamide
				- they must have at least 2 fills in the
Brinzolamide	1%	Solution	Ophthalmic	last 120 days to not be a new start
				For new starts only we are requiring
				step therapy with a trial of Brimonidine
				0.2% - they must have at least 2 fills in
Brimonidine	0.1%	Solution	Ophthalmic	the last 120 days to not be a new start
				For new starts only we are requiring
				step therapy with a trial of Brimonidine
				0.2% - they must have at least 2 fills in
Brimonidine	0.15%	Solution	Ophthalmic	the last 120 days to not be a new start

WVCH Formulary Removals Effective 7/1/2017				
Name	Strength	Dosage Form	Route	
Timolol Hemihydrate (Betimol)	0.25%, 0.5%	Solution	ophthalmic	



Timolol Maleate (Istalol)	0.5%	Solution	ophthalmic
Pilocarpine	1%, 2%, 4%	Solution	Ophthalmic
Gatifloxacin	0.5%	Solution	Ophthalmic
Moxifloxacin	0.5%	Solution	Ophthalmic
Tobramycin	0.3%	Ointment	Ophthalmic
Neomycin-Polymyxin B – Hydrocortisone	3.5 mg-10Kunits-1%	Suspension	Ophthalmic
Bacitracin	500 units/g	Ointment	Ophthalmic
Antipyrine-Benzocaine	5.4%-1.4%	Solution	Otic
Fluocinolone	0.01%	Oil	Otic