PROVIDER QUICK POINTS PROVIDER INFORMATION



February 10, 2021

Commercial Pharmacy Benefit Exclusion for Select Medications

Effective April 1, 2021, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will not cover these medications under the pharmacy benefit. Members must use a medication alternative that is covered under the pharmacy benefit plan or pay full price for use of the medication. A summary of the excluded medications and formulary alternatives can be found below.

Excluded Medications	Formulary Alternatives
ArmonAir® Digihaler® (fluticasone	Flovent® HFA (fluticasone propionate), Qvar Redihaler®
propionate)	(beclomethasone dipropionate)
AirDuo® Digihaler® (fluticasone/salmeterol)	Advair® HFA (fluticasone/salmeterol), Advair Diskus®
	(fluticasone/salmeterol), Symbicort® (budesonide/formoterol)
imipramine pamoate 75 mg, 100 mg, 125	imipramine tablets
mg, 150 mg capsules	imprainine tablets
temazepam 7.5 mg, 22.5 mg capsules	temazepam 15 mg, 30 mg capsules
Semglee TM (insulin glargine) injection	Lantus [®] (insulin glargine) injection

Products Impacted

This exclusion applies to commercial lines of business.

Questions?

If you have questions, please contact provider services at (651) 662-5200 or 1-800-262-0820.