



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 WVP Health Authority 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 WVP P & T Committee please contact the WVP 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
Linezolid	600 mg/300 ml	IV solution	IV	Add to formulary with PA criteria
Linezolid	600 mg	Tablets	Oral	Add to formulary 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	po	Removing PA restriction
Timolol maleate	0.25%, 0.5%	Gel forming solution	Ophthalmic	For new starts only we are requiring step therapy with a trial of the Timolol solution – they must have at least 2 fills in the last 120 days to not be a new start
Bimatoprost	0.01%	Solution	Ophthalmic	For new starts only we are requiring step therapy with a trial of Latanoprost – they must have at least 2 fills in the last 120 days to not be a new start
Bimatoprost	0.03%	Solution	Ophthalmic	For new starts only we are requiring step therapy with a trial of Latanoprost – they must have at least 2 fills in the last 120 days to not be a new start
Travoprost	0.004%	Solution	Ophthalmic	For new starts only we are requiring step therapy with a trial of Latanoprost – they must have at least 2 fills in the last 120 days to not be a new start
Brinzolamide	1%	Solution	Ophthalmic	For new starts only we are requiring step therapy with a trial of Dorzolamide – they must have at least 2 fills in the last 120 days to not be a new start
Brimonidine	0.1%	Solution	Ophthalmic	For new starts only we are requiring step therapy with a trial of Brimonidine 0.2% - they must have at least 2 fills in the last 120 days to not be a new start
Brimonidine	0.15%	Solution	Ophthalmic	For new starts only we are requiring step therapy with a trial of Brimonidine 0.2% - they must have at least 2 fills in the last 120 days to not be a new start

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Questions? Please contact WVCH at 503-584-2150



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