



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 2/10/2018				
Name	Strength	Dosage Form	Route	Change
Guaifenesin	100 mg/5 ml	Liquid	Po	Add to formulary QL 240ml/6 mo, PA if under 13 yo
Guaifenesin	400 mg	Tablet	Po	Add to formulary QL 30 tabs in 90 days, PA if under 13 yo
Guaifenesin ER 12 H	600 mg	ER tablet	Po	Add to formulary QL 30 tabs in 90 days, PA if under 13 yo
Guaifenesin DM	100-10 mg/5 ml	Liquid	Po	Add to formulary QL 240 ml/6 mo, PA if under 13 yo
Guaifenesin DM	400 mg/20 mg	Tablet	Po	Add to formulary QL 30 tabs in 90 days, PA if under 13 yo
Dimethyl Fumarate (Tecfidera)	120 mg and 240 mg	Capsule	Po	Add to formulary with PA

Questions? Please contact WVCH at 503-584-2150 Posted 3.16.2018

WVCH Formulary Removals Effective 7/1/2018

Name	Strength	Dosage Form	Route
Donepezil	23 mg	Tablet	Po
Donepezil	5 mg and 10 mg	ODT tablet	Po
Amiloride/HCTZ	5/50 mg	Tablet	Po
Triamterene	50 mg and 100 mg	Capsule	Po
Spironolactone/HCTZ	25/25 mg	Tablet	Po
Guaifenesin with codeine	10-100 mg/5 ml	Solution	Po
Hydroxyzine	25 mg and 50 mg	Injectable	Inj
Quinapril/HCTZ	10/12.5 mg, 20/12.5 mg, 20-25 mg	Capsule	Po
Triamterene/HCTZ	50/25 mg	Capsule	po

WVCH Formulary Changes Effective 2/10/2018

Name	Strength	Dosage Form	Route	Change
Donepezil	5 mg and 10 mg	Tablet	Oral	Change to PA if under 40 yo.
Memantine	5 mg, 10 mg	Tablet	Oral	Change to PA if under 40 yo, and QL 60 tabs in 30 days
Memantine	5-10 dosepack	Tablet	Oral	Change to PA if under 40 yo
Bupropion SR	150 mg	ER tablet	Oral	Remove PA, QL 360 tabs/6 mo