



Bright Start PlusSM family health mobile app

With the Bright Start Plus app, members can have health information for their entire family right at their fingertips!

Most popular in-app tools:

- **Pregnancy:** kick counter and ultrasound videos.
- **Newborn:** growth tracker and diaper tracker.
- **All ages:** vaccination tracker and weight tracker.

Encourage your patients to download the Bright Start Plus app today. Text "health" to **1-302-202-9766**.



Bright Start *Plus*SM

Pharmacy news

Opioid prescription update

AmeriHealth Caritas Delaware continues to carefully review and update our prior authorization requirements for opioid prescriptions. Our collaborative goal with you is to ensure that our members receive the correct treatment for their pain and that opioid use is managed and monitored appropriately.

On October 1, 2018, AmeriHealth Caritas Delaware implemented a limitation on opiate prescriptions for members who have not filled a prescription for opiate therapy in the last 90 days. In accordance with Centers for Disease Control and Prevention (CDC) recommendations, an opiate-naïve member will have their quantity limited to a seven-day supply equal to or less than 50 oral morphine equivalents per day on their first short-acting opiate prescription.

Below are the most common dispensed examples of the quantity limitations:

7-day opiate-naïve limitations	Limitation
Hydrocodone, 10 mg	35 tablets for 7 days
Hydromorphone, 4 mg	21 tablets for 7 days
Morphine, 15 mg	21 tablets for 7 days
Oxycodone, 5 mg	42 tablets for 7 days

For prescribing providers, we ask that you adjust quantities on first-time opiate prescriptions to be below these CDC guidelines whenever possible. If the prescription is for a preferred product and below the quantity limitation, it will not need prior authorization.

For dispensing pharmacies, if you receive a quantity and/or day supply that exceeds the limitation, you can either inform the prescriber that the quantity dispensed is being reduced to meet the limitation or contact the prescriber to have a prior authorization submitted.

This limitation serves two-fold:

- To decrease prolonged opiate exposure to members when possible.
- To decrease leftover medication that could be diverted or improperly stored.

Levothyroxine and liothyronine recall

The U.S. Food and Drug Administration (FDA) is alerting health care professionals and patients of a voluntary recall of all lots of drug products containing the active ingredient levothyroxine or liothyronine manufactured by Westminster Pharmaceuticals LLC. According to the FDA press release: “They were manufactured using active pharmaceutical ingredients that were sourced prior to the FDA’s Import Alert of Sichuan Friendly Pharmaceutical Co. Ltd., which as a result of a 2017 inspection were found to have deficiencies with Current Good Manufacturing Practices (cGMP). Substandard cGMP practices could represent the possibility of risk being introduced into the manufacturing process.”

Requested actions

- Please work with your patients to find a replacement for their prescription if their pharmacy does not have another manufacturer’s thyroid product.
- To access our searchable formulary for alternatives if needed, please go to www.amerihhealthcaritasde.com → [Providers](#) → [Pharmacy Services](#) → [Searchable formulary](#).

For more information, including the specific products subject to the recall, please visit <https://www.fda.gov/Safety/Recalls/ucm616601.htm>.



Pharmacy news (continued)

Effective **January 1, 2019**, the following products will change from preferred to non-preferred on the Division of Medicaid and Medical Assistance (DMMA) Preferred Drug List (PDL). This will affect all AmeriHealth Caritas Delaware members who do not have primary insurance or Medicare Part D.

Members currently receiving any of the products listed below will require a new prescription for an alternative before January 1, 2019, to avoid any interruptions. Members for whom it is not medically advisable to change therapy will require prior authorization.

PDL changes affecting members	
Products moved to non-preferred	Alternative preferred products
Azopt	Brimonidine 0.2%, carteolol, dorzolamide/timolol, latanoprost, levobunolol, pilocarpine, timolol solution, Alphagan P, Betimol, Combigan, Istalol, Rhopressa, Simbrinza, Travatan Z
Citranatal Bloom Citanatal 90 DHA Combo Pack Citranatal Assure Combo Pack Citranatal B-Calm Combo Pack Citranatal Harmony Capsule Citranatal Rx Tablet	Complete Natal DHA, Concept DHA, Concept OB, Inatal Ultra, Niva-Plus, O-Cal, O-Cal FA, PNV 29-1, PNV Folic Acid + Iron, PNV Ferrous Fumarate Docusate Folic Acid, PNV-VP-U, Prenate Chewable, Prenatal Plus, Prenatal Plus Low Iron, Preplus, Pretab, Purefe OB Plus, Trinatal Rx1, Triveen-Duo DHA, Virt-Advance, Virt-Nate, Virt-Vite GT, Vol-Nate, Vol-Plus, Vol-Tab Rx
Lotemax ophthalmic	Dexamethasone, diclofenac, fluoromehtolone, flurbiprofen, ketorolac, prednisolone acetate, prednisolone sodium phosphate, Alrex, Durezol, Flarex, Ilevro, Maxidex, Pred Mild
Nitrofurantoin macrocrystals	Methenamine, Nitrofurantoin Monohydrate/Macrocrystals, Monurol
Nutropin AQ	Genotropin, Norditropin
Xiidra	Restasis
Zubsolv	Buprenorphine, buprenorphine/naloxone, Suboxone



Quick reference guide



Provider Services

- Phone: 1-855-707-5818.
- Fax: 1-855-396-5790.



Member Services

- Diamond State Health Plan (DSHP) and Delaware Healthy Children Program (DHCP): **1-844-211-0966**.
- DSHP-Plus and DSHP-Plus Long-Term Services and Supports (LTSS): **1-855-777-6617**.
- Fax: **1-855-396-5780**.



Let Us Know

- Contact our Rapid Response and Outreach Team at **1-844-623-7090**.
- Use the [Member Intervention Request Form](#). Fax completed forms to **1-855-806-6242**.



Pharmacy Services (PerformRx)

PerformRx Pharmacy Provider Services

- Diamond State Health Plan (DSHP) and Delaware Healthy Children Program (DHCP): **1-855-251-0966**.
- DSHP-Plus and DSHP-Plus Long-Term Services and Supports (LTSS): **1-888-987-6396**.

PerformRx Pharmacy Member Services

- Diamond State Health Plan (DSHP) and Delaware Healthy Children Program (DHCP): **1-877-759-6257**.
- DSHP-Plus and DSHP-Plus Long-Term Services and Supports (LTSS): **1-855-294-7048**.
- Fax: **1-855-829-2872**.

Do you know your Provider Network Account Executive?

Your Account Executive is your liaison with AmeriHealth Caritas Delaware. They are responsible for orientation, continuing education, and problem resolution for our network providers.

- **Tiara Goodmond**
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Provider Network Manager
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Call your Account Executive:

- To arrange for orientation or in-service meetings.
 - For service calls.
 - If you have any questions or concerns.
 - To report any changes in your status, such as the phone number, address, taxpayer identification number, or additions or deletions of physician listings for your practice.
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Delaware

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