



February 05, 2021

Dear University of Arkansas System Member,

MedImpact Healthcare Systems, Inc., (MedImpact) on behalf of the University of Arkansas System Health Plan, will be implementing a change to the prescription drug formulary that affects you. **Please continue to read this entire letter.** 

Effective May 1, 2021, Elmiron will no longer be covered under the prescription benefit. You are receiving this letter because our records indicate you had a prescription filled for Elmiron within the last 120 days. This change is being made because this medication is readily available over the counter without a prescription necessary.

**Before May 1, 2021,** The Plan will continue to cover Elmiron. Please use this time between now and **May 1, 2021** to discuss alternative prescription medications with your doctor.

If your doctor determines that none of the covered medications are right for you due to your medical condition, an appeal process for coverage of a medication not on the formulary is available. To request coverage, your doctor must submit the appeal form and required medical documentation to MedImpact by fax to 1-858-790-7100.

Pharmacy benefits are subject to terms, conditions and eligibility as outlined in the benefit documentation in effect at the time services are provided. The above change to your prescription drug plan is directed by the University's Pharmacy Advisory Committee.

For questions, please contact MedImpact Healthcare Systems, Inc. at 1-800-788-2949.

Sincerely,

MedImpact and the University of Arkansas Pharmacy Advisory Committee