



August 9, 2023

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 benefit plan that affects you. **Please continue to read this entire letter.**

You are receiving this letter because our records indicate you had a prescription filled for Asmanex, Asmanex HFA, or Pulmicort Flexhaler within the last 120 days.

While the Plan will continue to cover your prescription for **Asmanex, Asmanex HFA, or Pulmicort Flexhaler** you may be able to switch to a comparable medication used to treat your condition for a lower member cost share – including preferred formulary covered alternatives such as **FLOVENT HFA, FLOVENT DISKUS, ARNUITY ELLIPTA**. You may discuss these alternative medications with your doctor.

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 benefit 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

The University of Arkansas System's' prescription drug formulary, administered by MedImpact, is maintained by the University of Arkansas System's Pharmacy Advisory Committee. The Pharmacy Advisory Committee is composed of both faculty and clinical pharmacists, who advise the Committee on the most recent medical research results. The recommendations by the committee are based on the latest available evidence-based studies.