

PHARMACEUTICAL POLICIES AVAILABLE FOR PROVIDERS AT WWW.MVPHEALTHCARE.COM

For a listing of all current medical and pharmaceutical policies, *Log In* at **www.mvphealthcare.com/providers** and select *Resources*, then *Medical Policies*. All policies are reviewed at least once annually. A **FastFax** will be sent out one month prior to the effective date listing the policies and their status. These policies can fall into one of the following categories:

- New Denotes a new policy.
- **Updated** Updated policies have content changes that may affect coverage criteria for services and/or drugs.
- Review/No Changes Policies that have been reviewed, but have no content change.
- Archived Denotes a policy that is not active.

The following policies are effective **April 1, 2018** and will be available for viewing on or before **March 1, 2018**. Hard copies of the policies are available upon request.

Pharmaceutical Policy Name	<u>Status</u>
Male Hypogonadism	Updated
Metformin ER	Updated
Disposable Insulin Delivery Devices	Review/No Changes
Infertility Drug Therapy	Review/No Changes
Growth Hormone Therapy	Updated
Kuvan	Review/No Changes
Transgender Policy	Updated
Mepron	Updated
Zinplava	New
Movement Disorder	New
Physician Prescription Eligibility	Review/No Changes
Prescribers Treating Self or Family Members	Review/No Changes
Mail Order	Updated

If you have any questions with respect to this notice, please contact your Professional Relations Representative.

