

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/provider** and select *Online 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 **August 1**, **2016** and will be available for viewing on or before **July 1**, **2016**. Hard copies of the policies are available upon request.

Pharmaceutical Policy Name	<u>Status</u>
Intranasal Corticosteroids	Updated
Inhaled Corticosteroids and Combinations	Archived
Inhaled Corticosteroids	New
Xolair	Updated
Cystic Fibrosis (select agents for inhalation)	Updated
Cystic Fibrosis (select oral agents)	Updated
Idiopathic Pulmonary Fibrosis	Review/No Changes
Cough and Cold Products	Review/No Changes
Male Hypogonadism	Updated

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

