

Aetna Better Health of Virginia (HMO SNP)
9881 Mayland Drive
Richmond, VA 23233

*****Prior Authorization Change Notice *****

Dear Provider,

You are receiving this notice because effective 1/1/19, the below Medicare Part B medications will require prior authorization. Members will no longer be able to obtain these medications at the pharmacy, without a prior authorization on file with Aetna Better Health of Virginia (HMO SNP).

To avoid interruption in your patients' therapy, please obtain prior authorization on 1/1/19.

Prior Authorization Required for 2019

Drug Name	Drug List Criteria
KCentra Kit 1000 Unit	Prothrombin Complex Injection
KCentra Kit 500 Unit	Prothrombin Complex Injection
Riastap Sol 1gm	Fibrinogen Injection
Xeloda Tab 150mg	Capecitabine
Xeloda Tab 500mg	Capecitabine

Sincerely,
Aetna Better Health of Virginia (HMO SNP)
Phone: 1-855-463-0933

This document may contain confidential or privileged information. If you think you have received this message in error, please contact the sender and then destroy this document immediately. Thank you.