



Formulary ID: 19101

**ATRIO Special Needs Plan  
ATRIO Special Needs Plan (Willamette)**

**ATRIO Health Plans  
2019 SNP Plans Formulary Change Notice**

ATRIO Health Plans may remove drugs from our formulary (list of covered drugs) or add rules about whether and when certain drugs are covered during the year. The chart below contains upcoming changes to the ATRIO Health Plans formulary. **You may not be taking these drugs now. We provide you with these updates so that you know about future changes to our drug list.** Please see Section 4 of your Monthly Prescription Drug Summary (Member Explanation of Benefits) for specific changes to drugs that you are currently taking.

Effective Date	Drug Name	Reason Description	Alternate Drugs**
There are no formulary changes effective February 1, 2019			

\*\* These drugs are on our drug list (formulary). Please talk with your doctor to find out if these drugs are right for you. Note: The amount you will pay for these drugs depends on which coverage period you are in. You can call Customer Service to find out how much you will pay for these drugs.