UF BPA Appendix for the November 2014 DoD P&T Meeting

Uniform Formulary Price Quotes and Uniform Formulary Blanket Purchase Agreements (BPA)

The following Condition Sets, as authorized at each listed UF Drug Class Page, identify the conditions under which UF BPA price quotes are to be submitted by the Company.

The Company must submit a separate, complete UF BPA price quote for each NDC that applies to the Company's pharmaceutical agent(s) in a given drug class.

Medications placed on the Uniform Formulary but not BCF or ECF are available for the local Military Treatment Facility P&T to decide whether to place on their individual formulary.

Grandfathering: a prior authorization process would require all new patients to complete an adequate trial of the steppreferred agent(s) before a non-step-preferred agent is provided to a new user. Unless otherwise noted, patients must have tried an agent in the class in the previous 180 days in order to be excluded from the prior authorization process.

No grandfathering: a prior authorization process, would require all patients, regardless of past medication history to complete an adequate trial of the step-preferred agent(s) before a non-step-preferred agent is provided to a user.

Grandfathering unstipulated: DHA reserves the right to choose the grandfathering or no-grandfathering of some or all agents based the total price/clinical evaluations after quotes have been submitted and in the best interests of the Government.

NDC	Drug Name	Strength	Dosage Form	Package Size

PEC Class: MULTIPLE S						
Class Note(s): Prior author						
Step Therapy Addendum: A			erring one oral agent	over the other		
oral agents Grandfathering	Category **	One of (X) Number of brand agents	Military Treatment Facility & Mail Order			
Condition Set #			Price per Unit of Measure (ea., gram, mil) to 4 decimal places	Price Per NDC to 4 decimal places		
ORAL AGENTS						
Military Treatment Facility 20151MSXX1BCBS1X Mail Order 20151MSXX1T2BS1X	Basic Core Formulary & Tier 2 Before Step Therapy	1	\$xx.xxxx	\$xx.xxxx		
Military Treatment Facility 20151MSXX1UFAS1M Mail Order 20151MSXX1T2AS1M	Uniform Formulary & Tier 2 After Step Therapy	1 or more	\$	\$		
Military Treatment Facility 20151MSXX0BCNS1M Mail Order 20151MSXX0T2NS1M	Basic Core Formulary & Tier 2 No Step Therapy	1 or more	\$	\$		
Military Treatment Facility 20151MSXX0UFNS1X Mail Order 20151MSXX0T2NS1M	Uniform Formulary & Tier 2 No Step Therapy	1 or more	\$	\$		

SELF INJECTABLE AGENTS							
Military Treatment Facility 20151MSXX0BCNS1X Mail Order 20151MSXX0T2NS1X	Basic Core Formulary & Tier 2 No Step Therapy	1	\$	\$			
Military Treatment Facility 20151MSXX0UFNS1M Mail Order 20151MSXX0T2NS1M	Uniform Formulary & Tier 2 No Step Therapy	1 or more	\$	\$			

^{**} Only one price per category may be submitted.