



An important message regarding generic Alphagan P 0.1%

Humana is notifying its network pharmacy providers that a generic version of Alphagan P 0.1% (brimonidine tartrate) has been released on 09/09/2023. Generic Alphagan P 0.1% (brimonidine tartrate) will be considered non-formulary for all Medicare Advantage Prescription Drug and Part D Plans formularies. Pharmacies should continue to process claims for brand-name Alphagan P 0.1% as it will remain covered.

Medicare Advantage Prescription Drug and Part D Plans claims submitted for generic Alphagan P 0.1% (brimonidine tartrate) may return one of the following error messages:

- Generic not covered - fill brand with DAW 9

Pharmacies should reprocess for brand-name Alphagan P 0.1% with DAW 9 for Medicare Advantage Prescription Drug and Part D Plans when one of the above error messages is present.

The Florida Agency for Healthcare Administration (AHCA) determines drug coverage for Humana-designated Medicaid Plans offered in Florida. If you need additional information, please visit ahca.myflorida.com/medicaid/Prescribed_Drug/preferred_drug.shtml.

Humana's Bank Identification Number (BIN) and Processor Control Number (PCN) combinations are the following.

	BIN	PCN
Non-Medicare	610649	03190000
Medicare PDP and MAPD	015581	03200000
Medicare Advantage (MA only)	610649	03200004
LINET	015599	05440000
CarePlus MAPD	015581	03200008
CarePlus MA-only	610649	03200000
Humana Healthy Horizons® in Florida	610649	03190000
Humana Healthy Horizons® in South Carolina	610649	03191504

If you have any questions regarding this information, please call **888-204-8349**.