

This is an important message from YouthCare Health*Choice* Illinois (YouthCare).

YouthCare would like to inform you that the coverage of the medications listed below has changed, effective **May 15, 2023,** for all members.

Please reference the table for information regarding medication changes.

Impacted Medication	Change	Preferred Agents
Aripiprazole IM For ER Susp Prefilled Syringe 300 MG	New minimum age limit 18	NA
Aripiprazole IM For ER Susp Prefilled Syringe 400 MG	New minimum age limit 18	NA
Aripiprazole IM For Extended Release Susp 300 MG	New minimum age limit 18	NA
Aripiprazole IM For Extended Release Susp 400 MG	New minimum age limit 18	NA

**Please note:** Active prior authorizations for this medication will not be affected.

If you have any questions, please call YouthCare Provider Services at 844-289-2264.