



PO Box 733
Elk Grove Village, IL 60009-0733

This is an important message from YouthCare HealthChoice Illinois (YouthCare).

YouthCare would like to inform you that the status of the medications **desmopressin acetate** and **oxybutynin chloride** will change on May 1, 2023, for members under the care of the Department of Children and Family Services.

The medicines will require **form CFS 431-A** (also known as a consent form) to be submitted to DCFS when prescribed within 100 days of the below medication.

Aripiprazole	Olanzapine
Aripiprazole Lauroxil	Olanzapine Pamoate
Asenapine Maleate	Olanzapine-Fluoxetine
Asenapine TD Patch	Olanzapine-Samidorphan L-Malate
Brexipiprazole	Paliperidone
Cariprazine HCL	Paliperidone Palmitate
Clozapine	Quetiapine Fumarate
Iloperidone	Risperidone
Lithium	Risperidone Microspheres
Lumateperone Tosylate	Ziprasidone HCl
Lurasidone HCl	Ziprasidone Mesylate

Please fax form CFS 431-A to **312-814-7015**.

Note: Active consent for these medications will not be affected.

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

Sincerely,

YouthCare HealthChoice Illinois