



2018 Formulary Changes

Changes occur, for example, because new drugs come on the market, a drug is moved to a different cost-sharing level (tier), or a generic version becomes available.

Requirements/Limits Key:

PA	Prior authorization required
QL	Quantity limit
ST	Step therapy
MN	Maintenance medication
B/D	Part B versus D prior authorization required

DRUG NAME	DRUG TIER	REQUIRMENTS / LIMITS	FORMULARY CHANGE	ALTERNATIVE DRUGS	EFFECTIVE DATE
ADACEL	3		Addition		1/1/2018
<i>ampicillin trihydrate suspension</i>			Deletion	<i>ampicillin trihydrate capsules</i>	3/1/2018
<i>atazanavir</i>	5				4/1/2018
BENLYSTA (AUTOINJECT SYRINGE)	5		Addition		1/1/2018
BERINERT	5	PA	Addition		5/1/2018
BIKTARVY	5		Addition		5/1/2018
<i>bortezomib</i>	5	B/D	Addition		1/1/2018
BYDUREON BCISE	4	MN	Addition		1/1/2018

CALQUENCE	5		Addition		1/1/2018
<i>colesevelam</i>	4	MN	Addition		7/1/2018
<i>dexmethylphenidate</i>	2	MN	Addition		1/1/2018
<i>dexmethylphenidate ER</i>	4	MN	Addition		1/1/2018
<i>dexmethylphenidate hcl (2.5mg, 5mg, 10 mg tablets)</i>	2	MN	Addition		1/1/2018
<i>dexmethylphenidate hcl ER</i>	4	MN	Addition		1/1/2018
<i>efavirenz</i>	2	MN	Addition		1/1/2018
<i>efavirenz 600 mg capsule</i>	2	MN			4/1/2018
ELIQUIS 30-DAY STARTER PACK	3		Addition		4/1/2018
ENTRESTO	4	MN	PA Removed		6/1/2018
ERLEADA	5		Addition		5/1/2018
<i>estradiol 0.01 % cream</i>	2	MN			4/1/2018
<i>fosamprenavir</i>	5		Addition		1/1/2018
<i>glatiramer acetate</i>	5		Addition		1/1/2018
<i>haloperidol lactate 5 mg/ml syringe</i>	2		Addition		5/1/2018
HUMIRA (10 MG/0.1 ML SYRINGE, 20 MG/0.2 ML SYRINGE, 40 MG/0.4 ML SYRINGE)	5	PA	Addition		7/1/2018
HUMIRA PEDIATRIC CROHN'S (PED CROHNS 80 MG/0.8 ML, PEDIATR CROHN'S 80-40MG)	5	PA	Addition		7/1/2018
HUMIRA PEN (40 MG/0.4 ML PEN)	5	PA	Addition		7/1/2018
IDHIFA	5		Addition		1/1/2018
JARDIANCE	3	MN	Tier Change		1/1/2018
JENTADUETO	3	MN	Addition		1/1/2018
JULUCA	5		Addition		3/1/2018
LYNPARZA	5		Addition		1/1/2018
MAVYRET	5	PA	Addition		1/1/2018
<i>memantine hcl extended release</i>	2	MN			4/1/2018
MENOMUNE A/C/Y/W-135			Deletion		3/1/2018
<i>mesalamine 1.2 g tablet dr</i>	4	MN	Addition		1/1/2018

<i>methotrexate sodium 25mg/ml vial</i>	2		Addition		1/1/2018
<i>methylphenidate hcl er</i>	4	MN	Addition		1/1/2018
<i>moxifloxacin hcl 0.5 % drops</i>	4		Addition		1/1/2018
NERLYNX	5		Addition		1/1/2018
<i>oseltamivir phosphate suspension</i>	2		Addition		1/1/2018
OXYCONTIN	4	QL (90 per 30 days)	Addition		1/1/2018
<i>paroxetine mesylate</i>	4	MN	Addition		1/1/2018
QUILLICHEW ER	4	MN	Addition		1/1/2018
SELZENTRY ORAL SOLN	4	MN			4/1/2018
SHINGRIX	3				4/1/2018
SYMFI	5		Addition		6/1/2018
SYNJARDY	3	MN	Tier Change		1/1/2018
TOUJEO MAX SOLOSTAR	3	MN	Addition		6/1/2018
TREMFYA	5	PA	Addition		7/1/2018
<i>trientine</i>	5				4/1/2018
TYMLOS	5	PA	Addition		1/1/2018
VEMLIDY	5				4/1/2018
VERZENIO	5		Addition		1/1/2018
<i>vigabatrin power packet</i>	5		Addition		1/1/2018
VIRAMUNE 50 MG/5 ML SUSP	3	MN	Addition		6/1/2018
VYVANSE	3	MN	Addition		1/1/2018
XATMEP	5		Addition		1/1/2018
XIIDRA	4	MN	Addition		1/1/2018
<i>ziprasidone</i>	2	MN	Tier Change		1/1/2018