

8/18/2020

Essential Health Benefit (EHB) Formulary Changes*

DRUG NAME	FORMULARY CHANGES	RESTRICTIONS	EFFECTIVE DATE
Nexletol Nexlizet	Tier 2	PA, QL	9/1/2020
Koselugo	Tier 4	PA	8/1/2020

Year-to-Date 2020 EHB Formulary Changes*

DRUG NAME	FORMULARY CHANGES	RESTRICTIONS	EFFECTIVE DATE
Xtampza ER	Tier 2	PA, QL	7/1/2020
Harvoni Pak	Tier 4	PA, QL	6/16/2020
loperamide solution	Tier 1		5/12/2020
Fluzone injection	Tier 2		5/12/2020
Enhertu injection Padcev injection	Tier 4	PA	5/1/2020
albuterol HFA <i>(Proventil generic)</i>	Tier 1	QL	4/28/2020
Albuterol 90mcg 18gm <i>(Ventolin authorized generic)</i> Albuterol 90mcg 6.7gm <i>(Proventil authorized generic)</i> Levalbuterol HFA Proair Digihaler Proventil HFA Xopenex HFA Xopenex nebulizer solution	Tier 3	QL	4/10/2020
Promacta Pak	Tier 4	PA	4/1/2020
Hizentra solution	Tier 4	PA	4/1/2020

Key

PA= Prior Authorization AL= Age Limit ST= Step Therapy NF=Non-formulary

Tier 1=preferred generic; Tier 2=preferred brand; Tier 3= Non-preferred brands and generics; Tier 4=Specialty

Removal of drugs from formulary, certain tier changes or added formulary restrictions may not be effective until renewal of your benefits. For more information, call Scott & White Pharmacy Help Desk at 1-800-728-7947.

When generics become available on the EHB formulary, the brand moves to Excluded status.

Drugs may be subject to coverage requirements or limits such as prior authorization. Refer to your formulary or plan documents for additional information.

This list does not guarantee coverage.

*Changes are reflective of OptumRx P&T Committee decisions.

Year-to-Date 2020 EHB Formulary Changes*

DRUG NAME	FORMULARY CHANGES	RESTRICTIONS	EFFECTIVE DATE
Hizentra injection	Tier 4	PA	3/30/2020
Ibrance tablets	Tier 4	PA	3/3/2020
Bendeka injection Herceptin Hylecta solution Kanjinti injection Mvasi injection Rituxan Hycela injection Zirabev injection Ruxience injection Trazimera injection	Tier 4	PA	4/1/2020
Adakveo injection	Tier 4	PA	4/1/2020
Riluzole	Tier 1	PA, QL	3/1/2020
Reblozyl	Tier 4	PA	3/1/2020
Nucala (auto-injector & prefilled syringe)	Tier 4	PA, QL	2/1/2020
Tramadol 100mg	Tier 1	QL	1/22/2020
hydrocodone ER capsules	Tier 1	PA, QL	1/20/2020

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