



PRESCRIPTION DRUG PROGRAM FORMULARY UPDATES

Generic Additions

These generic drugs recently became available in the marketplace. When these generic drugs became available, we began covering them at the appropriate generic formulary level of cost-sharing:

Generic drug	Brand drug	Formulary chapter	Effective date
buprenorphine patch	Butrans [®] patch	Chapter 3. Pain, Nervous System, & Psych	June 5, 2017
doxycycline hyclate	Acticlate [®]	Chapter 1. Antibiotics & Other Drugs Used for Infection	June 19, 2017
eletriptan	Relpax [®]	Chapter 3. Pain, Nervous System, & Psych	July 31, 2017
mesalamine	Lialda [™]	Chapter 8. Stomach, Ulcer, & Bowel Meds	July 24, 2017
moxifloxacin hcl soln	Vigamox [®] soln	Chapter 11. Eye Medications	July 10, 2017
olopatadine hcl soln	Pataday [™] soln	Chapter 11. Eye Medications	June 19, 2017
scopolamine patch	Transderm-Scop [®] patch	Chapter 8. Stomach, Ulcer, & Bowel Meds	July 31, 2017
sevelamer packet	Renvela [®] packet	Chapter 15. Diagnostics & Miscellaneous Agents	June 19, 2017
sevelamer tablet	Renvela [®] tablet	Chapter 15. Diagnostics & Miscellaneous Agents	July 24, 2017
testosterone soln 30 mg/act	Axiron [®] soln 30 mg/act	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones	July 3, 2017

Brand Additions

These brand drugs were added to the formulary as of the date indicated below and are covered at the appropriate preferred brand formulary level of cost-sharing:

Effective January 1, 2018

Generic drug	Formulary chapter
Advair [™] Diskus [®]	Chapter 12. Allergy, Cough & Cold, Lung Meds
Advair [™] HFA	Chapter 12. Allergy, Cough & Cold, Lung Meds
Ampyra [®]	Chapter 3. Pain, Nervous System, & Psych
Breo [®] Ellipta [®]	Chapter 12. Allergy, Cough & Cold, Lung Meds
Mavyret [™]	Chapter 1. Antibiotics & Other Drugs Used for Infection
Pradaxa [®]	Chapter 4. Heart, Blood Pressure, & Cholesterol

Brand Deletions

These brand drugs will be covered at the appropriate non-preferred drug level of cost-sharing:

Effective January 1, 2018

Brand drug	Generic drug	Formulary chapter
Lialda [™]	mesalamine	Chapter 8. Stomach, Ulcer, & Bowel Meds
Vigamox [®] soln	moxifloxacin hcl soln	Chapter 11. Eye Medications

The generic for the above brand drugs are on our formulary and available at the generic formulary level of cost-sharing.

Brand Deletions

These brand drugs will be covered at the appropriate non-preferred drug level of cost-sharing:

Effective January 1, 2018

Brand drug	Formulary Therapeutic Alternatives	Formulary chapter
Dulera [®]	Advair [™] Diskus [®] , Advair [™] HFA, and Symbicort [®]	Chapter 12. Allergy, Cough & Cold, Lung Meds
Eliquis [®]	Xarelto [®]	Chapter 4. Heart, Blood Pressure, & Cholesterol
Sovaldi [™]	Mavyret [™] , Harvoni [®] , and Epclusa [®]	Chapter 1. Antibiotics & Other Drugs Used for Infection

There are no generic equivalents for the above brand drugs; however, there are formulary therapeutic alternative drugs. These therapeutic alternative drugs are available at the appropriate formulary level of cost-sharing. Contact your doctor to discuss formulary alternatives.

Generic Deletions

**This generic drug will be covered at the appropriate non-preferred drug level of cost-sharing:
Effective January 1, 2018**

Generic drug	Formulary Therapeutic Alternatives	Formulary chapter
tretinoin microspheres gel	tretinoin gel	Chapter 5. Skin Medications

Drugs Requiring Prior Authorization

**The prior authorization requirement for the following drugs was effective
at the time the drugs became available in the marketplace:**

Brand drug	Generic drug	Formulary chapter	Effective date
Alunbrig™	N/A	Chapter 2. Cancer & Organ Transplant Drugs	May 8, 2017
Benlysta® Inj	N/A	Chapter 3. Pain, Nervous System, & Psych	July 31, 2017
buprenorphine patch	N/A	Chapter 3. Pain, Nervous System, & Psych	June 5, 2017
Haegarda® Inj	N/A	Chapter 15. Diagnostics & Miscellaneous Agents	July 17, 2017
Ingrezza™	N/A	Chapter 3. Pain, Nervous System, & Psych	May 1, 2017
Kevzara® Inj	N/A	Chapter 9. Bone, Joint, & Muscle	May 29, 2017
Mavyret™	N/A	Chapter 1. Antibiotics & Other Drugs Used for Infection	August 14, 2017
MorphaBond™ ER 60 mg, 100 mg	N/A	Chapter 3. Pain, Nervous System, & Psych	May 22, 2017
Mydayis™	N/A	Chapter 3. Pain, Nervous System, & Psych	July 3, 2017
Nerlynx™	N/A	Chapter 2. Cancer & Organ Transplant Drugs	July 24, 2017
Rydapt®	N/A	Chapter 2. Cancer & Organ Transplant Drugs	May 8, 2017
Siliq™	N/A	Chapter 5. Skin Medications	June 26, 2017
testosterone soln 30 mg/act	N/A	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones	July 3, 2017
Tremfya™ Inj	N/A	Chapter 5. Skin Medications	July 24, 2017
Tymlos™ Inj	N/A	Chapter 10. Female, Hormone Replacement, & Birth Control	May 8, 2017
Vosevi™	N/A	Chapter 1. Antibiotics & Other Drugs Used for Infection	July 24, 2017
Xadago™	N/A	Chapter 3. Pain, Nervous System, & Psych	May 15, 2017

Drugs Requiring Prior Authorization

**The following drugs have been added to the list of drugs requiring prior authorization.
Effective January 1, 2018**

Brand drug	Generic drug	Formulary chapter
Berinert®	N/A	Chapter 15. Diagnostics & Miscellaneous Agents
Cinryze®	N/A	Chapter 15. Diagnostics & Miscellaneous Agents
doxycycline ER/IR	N/A	Chapter 1. Antibiotics & Other Drugs Used for Infection
Dulera®	N/A	Chapter 12. Allergy, Cough & Cold, Lung Meds
Ruconest®	N/A	Chapter 15. Diagnostics & Miscellaneous Agents

Drugs With Quantity Limits

Quantity limits will be added to the following drugs:

Brand drug	Generic drug	Quantity limit	Effective date
Emverm	N/A	6 tabs per 21 days	January 1, 2018
Insulin Products	N/A	2 ml per day	January 1, 2018
MorphaBond™ ER 15 mg, 30 mg, 60 mg, 100 mg	N/A	2 tabs per day	May 22, 2017
Mydayis™	N/A	1 cap per day	July 3, 2017

Drugs No Longer Requiring Prior Authorization

Prior authorization has been removed for the following drugs:

Effective January 1, 2018

Brand drug	Generic drug	Formulary chapter
Advair™Diskus®	N/A	Chapter 12. Allergy, Cough & Cold, Lung Meds
Advair™HFA	N/A	Chapter 12. Allergy, Cough & Cold, Lung Meds

Drugs With Day Supply Limits

The following drugs will be limited to two 5-day supplies per 60 days:

Drug name	Formulary chapter	Effective date
MorphaBond™ ER 15 mg, 30 mg	Chapter 3. Pain, Nervous System, & Psych	November 1, 2017