Blue Shield 65 Plus Choice Plan (HMO)

Formulary Updates:

The enclosed table lists the changes made to your formulary such as removing or adding: a drug, prior authorization, quantity limits or step therapy as well as any changes to a cost sharing tier. The table also includes alternative drug(s) if applicable.

Abbreviation Key:

Symbol	Name	Description
LA	Limited Access	This prescription may be available only at certain pharmacies.
PA	Prior Authorization	Coverage for this prescription requires prior authorization from Blue Shield. Call Blue Shield to provide the necessary information to determine coverage. Some drugs may require Part B or Part D coverage determination, based on Medicare coverage rules. These drugs are noted with "PA – Part B vs. D Determination"
QL	Quantity Limit	This medication has a dosing or prescription quantity limit. Maximum daily dose limits are defined by the FDA and listed in the drug package insert. Other quantity limits encourage consolidated dosing when possible.
ST	Step Therapy	Coverage for this prescription is provided when other first-line or preferred drug therapies have been tried (step therapy).
NDS	Non-Extended Day Supply	Medication is NOT available for long-term supply.
ED	Excluded Part D Drug	This prescription drug is not normally covered in a Medicare Prescription Drug Plan; however, Blue Shield covers this drug as a supplemental benefit. The amount you pay when you fill a prescription for this drug does not count towards your total drug costs (that is, the amount you pay does not help you qualify for catastrophic coverage). In addition, if you are receiving extra help from Medicare or Social Security to pay for your prescriptions, you will not get any extra help to pay for this drug.
SI	Select Insulins	This select insulin is covered at a flat copayment during the Deductible, Initial Coverage Limit, and Coverage Gap phases of your Part D benefit. Please refer to your Evidence of Coverage for more information about this coverage.

Drug Tier Key
Tier 1: Preferred Generic Drugs
Tier 2: Generic Drugs
Tier 3: Preferred Brand Drugs
Tier 3: Select Insulins
Tier 4: Non-Preferred Drugs
Tier 5: Specialty Tier Drugs

Drug Name	Description of Change	Alternative
Acthar 80 Unit/Ml Gel	Removed from formulary (drug list)	Cortrophin 80 Unit/Ml Gel - Tier 5
Advair Diskus 100-50 Mcg/Act Aer Pow Ba	Added to Tier 3	-
Advair Diskus 250-50 Mcg/Act Aer Pow Ba	Added to Tier 3	-
Advair Diskus 500-50 Mcg/Act Aer Pow Ba	Added to Tier 3	-
Advair Hfa 115-21 Mcg/Act Aerosol	Added to Tier 3	-
Advair Hfa 230-21 Mcg/Act Aerosol	Added to Tier 3	-
Advair Hfa 45-21 Mcg/Act Aerosol	Added to Tier 3	-
Albendazole 200 Mg Tab	Moved to higher tier - Tier 5	-
Amiodarone Hcl 100 Mg Tab	Moved to higher tier - Tier 3	amiodarone hcl 200 mg tab; Pacerone 200 mg tab - Tier 1
Amiodarone Hcl 200 Mg Tab	Moved to lower tier - Tier 1	-
Amiodarone Hcl 200 Mg Tab	Moved to lower tier - Tier 1	-
Amiodarone Hcl 400 Mg Tab	Moved to higher tier - Tier 3	amiodarone hcl 200 mg tab; Pacerone 200 mg tab - Tier 1
Amitiza 24 Mcg Cap	Removed from formulary (drug list)	Lubiprostone 24 Mcg Cap - Tier 3
Amitiza 8 Mcg Cap	Removed from formulary (drug list)	Lubiprostone 8 Mcg Cap - Tier 3
Azopt 1 % Suspension	Removed from formulary (drug list)	Brinzolamide 1 % Suspension - Tier 3
Baclofen 5 Mg Tab	Updated quantity limit	-
Breztri Aerosphere 160-9-4.8 Mcg/Act Aerosol	Added to Tier 3	-
Butorphanol Tartrate 1 Mg/Ml Solution	Added BvD prior authorization	-
Butorphanol Tartrate 2 Mg/Ml Solution	Added BvD prior authorization	-
Carbidopa 25 Mg Tab	Moved to lower tier - Tier 5	-
Cleocin 100 Mg Suppos	Removed from formulary (drug list)	Clindamycin Phosphate 2 % CREAM; Metronidazole 0.75% gel - Tier 2
Clopidogrel Bisulfate 75 Mg Tab	Moved to lower tier - Tier 1	-

Drug Name	Description of Change	Alternative
Colcrys 0.6 Mg Tab	Removed from formulary (drug list)	Colchicine 0.6 Mg Tab - Tier 3
Compro 25 Mg Suppos	Moved to higher tier - Tier 4	meclizine hcl 12.5 mg, 25 mg tab; ondansetron 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp, prochlorperazine 5 mg, 10 mg tab - Tier 2
Cyklokapron 1000 Mg/10Ml Solution	Added BvD prior authorization	-
Dexilant 30 Mg Cap Dr	Removed from formulary (drug list)	dexlansoprazole 30 mg cap dr - Tier 3
Dexilant 60 Mg Cap Dr	Removed from formulary (drug list)	dexlansoprazole 60 mg cap dr - Tier 3
Diclofenac Sodium 3 % Gel	Updated quantity limit	-
Dificid 200 Mg Tab	Added to Tier 5 with prior authorization and quantity limit	-
Dificid 40 Mg/Ml Recon Susp	Added to Tier 5 with prior authorization and quantity limit	-
Digoxin 0.05 Mg/Ml Solution	Moved to higher tier - Tier 4	Digoxin 125mcg, 250mcg tab - Tier 2
Diphenoxylate-Atropine 2.5-0.025 Mg/5Ml Liquid	Moved to higher tier - Tier 4	diphenoxylate-atropine 2.5-0.025 mg tab - Tier 2
Disopyramide Phosphate 100 Mg Cap	Moved to higher tier - Tier 4	flecainide acetate 50 mg, 100 mg, 150 mg tab; mexiletine hcl 150 mg, 200 mg, 250 mg cap; Propafenone hcl 150 mg, 225 mg, 300 mg tab; quinidine sulfate 200 mg, 300 mg

Drug Name	Description of Change	Alternative
		tab; sorine 80 mg, 120 mg, 160 mg, 240 mg tab; sotalol hcl (af) 80 mg, 120 mg, 160 mg; sotalol hcl 80 mg, 120 mg, 160 mg, 240 mg tab - Tier 2
Disopyramide Phosphate 150 Mg Cap	Moved to higher tier - Tier 4	flecainide acetate 50 mg, 100 mg, 150 mg tab; mexiletine hcl 150 mg, 200 mg, 250 mg cap; Propafenone hcl 150 mg, 225 mg, 300 mg tab; quinidine sulfate 200 mg, 300 mg tab; sorine 80 mg, 120 mg, 160 mg, 240 mg tab; sotalol hcl (af) 80 mg, 120 mg, 160 mg; sotalol hcl 80 mg, 120 mg, 160 mg, 240 mg tab - Tier 2
Dorzolamide Hcl 2 % Solution	Added to Tier 2	-
Durysta 10 Mcg Implant	Added BvD prior authorization	-
Dutasteride-Tamsulosin Hcl 0.5-0.4 Mg Cap	Removed prior authorization	-
Entecavir 0.5 Mg Tab	Moved to lower tier - Tier 5	-
Entecavir 1 Mg Tab	Moved to lower tier - Tier 5	-
Etidronate Disodium 200 Mg Tab	Removed from formulary (drug list)	Alendronate Sodium 40 MG TAB - Tier 1
Etidronate Disodium 400 Mg Tab	Removed from formulary (drug list)	Alendronate Sodium 40 MG TAB - Tier 1
Ezetimibe-Simvastatin 10-10 Mg Tab	Moved to lower tier - Tier 1	-
Ezetimibe-Simvastatin 10-20 Mg Tab	Moved to lower tier - Tier 1	-
Ezetimibe-Simvastatin 10-40 Mg Tab	Moved to lower tier - Tier 1	-
Ezetimibe-Simvastatin 10-80 Mg Tab	Moved to lower tier - Tier 1	-
Famotidine 20 Mg Tab	Moved to lower tier - Tier 1	-
Famotidine 40 Mg Tab	Moved to lower tier - Tier 1	-
Fluvoxamine Maleate 100 Mg Tab	Added quantity limit	-
Fluvoxamine Maleate 25 Mg Tab	Added quantity limit	-
Fluvoxamine Maleate 50 Mg Tab	Added quantity limit	-

Drug Name	Description of Change	Alternative
Fragmin 5000 Unit/0.2Ml Soln Prsyr	Updated quantity limit	-
Gemtesa 75 Mg Tab	Added to Tier 3	-
Glassia 1000 Mg/50Ml Solution	Added BvD prior authorization	-
Golytely 227.1 Gm Recon Soln	Added to Tier 3	-
Golytely 236 Gm Recon Soln	Added to Tier 3	-
Golytely 236 Gm Recon Soln	Added to Tier 3	-
Granisetron Hcl 1 Mg Tab	Moved to higher tier - Tier 3	ondansetron hcl 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp - Tier 2
Humulin R U-500 (Concentrated) 500 Unit/Ml Solution	Moved to lower tier - Tier 3	-
Humulin R U-500 Kwikpen 500 Unit/Ml Soln Pen	Moved to lower tier - Tier 3	-
Ibandronate Sodium 150 Mg Tab	Moved to lower tier - Tier 1	-
Ibandronate Sodium 3 Mg/3Ml Solution	Prior authorization updated to BvD prior authorization	-
Ibu 400 Mg Tab	Moved to lower tier - Tier 1	-
Ibu 600 Mg Tab	Moved to lower tier - Tier 1	-
Ibu 800 Mg Tab	Moved to lower tier - Tier 1	-
Ibuprofen 400 Mg Tab	Moved to lower tier - Tier 1	-
Ibuprofen 600 Mg Tab	Moved to lower tier - Tier 1	-
Ibuprofen 800 Mg Tab	Moved to lower tier - Tier 1	-
Ilevro 0.3 % Suspension	Updated quantity limit	-
Indapamide 1.25 Mg Tab	Moved to lower tier - Tier 1	-
Indapamide 2.5 Mg Tab	Moved to lower tier - Tier 1	-
Ionosol-Mb In D5W Solution	Added BvD prior authorization	-
Kcl (In Nacl 0.9%) 30 Meq/100Ml Solution	Added BvD prior authorization	-
Kcl-Lidocaine In D5W 20-10 Meq-Mg /100Ml Solution	Added BvD prior authorization	-
Kerendia 10 Mg Tab	Added to Tier 4	-
Kerendia 20 Mg Tab	Added to Tier 4	-
Ketorolac Tromethamine 10 Mg Tab	Added quantity limit	-

Drug Name	Description of Change	Alternative
Krystexxa 8 Mg/Ml Solution	Removed from formulary and added BvD prior authorization	Allopurinol 100 mg, 300 mg tab - Tier 1
Levocetirizine Dihydrochloride 5 Mg Tab	Moved to lower tier - Tier 1	-
Magnesium Sulfate 50 % Solution	Added to Tier 4	-
Magnesium Sulfate 50 % Solution	Added to Tier 4	-
Meclofenamate Sodium 100 Mg Cap	Removed from formulary (drug list)	ibuprofen 400 mg, 600 mg, 800 mg tab; meloxicam 7.5 mg, 15 mg tab; naproxen 250 mg, 375 mg, 500 mg tab - Tier 1
Meclofenamate Sodium 50 Mg Cap	Removed from formulary (drug list)	ibuprofen 400 mg, 600 mg, 800 mg tab; meloxicam 7.5 mg, 15 mg tab; naproxen 250 mg, 375 mg, 500 mg tab - Tier 1
Mefenamic Acid 250 Mg Cap	Removed from formulary (drug list)	ibuprofen 400 mg, 600 mg, 800 mg tab; meloxicam 7.5 mg, 15 mg tab; naproxen 250 mg, 375 mg, 500 mg tab - Tier 1
Meloxicam 15 Mg Tab	Moved to lower tier - Tier 1	-
Meloxicam 7.5 Mg Tab	Moved to lower tier - Tier 1	-
Meloxicam 7.5 Mg/5Ml Suspension	Removed from formulary (drug list)	ibuprofen 400 mg, 600 mg, 800 mg tab; meloxicam 7.5 mg, 15 mg tab; naproxen 250 mg, 375 mg, 500 mg tab - Tier 1
Methylprednisolone Sodium Succ 125 Mg Recon Soln	Added BvD prior authorization	-
Metoclopramide Hcl 10 Mg Tab	Moved to lower tier - Tier 1	-
Metoclopramide Hcl 10 Mg Tab	Moved to lower tier - Tier 1	-
Metoclopramide Hcl 5 Mg Tab	Moved to lower tier - Tier 1	-
Miconazole 3 200 Mg Suppos	Moved to higher tier - Tier 4	terconazole 0.4%, 0.8% cream - Tier 3
Modafinil 100 Mg Tab	Added prior authorization	-
Modafinil 200 Mg Tab	Added prior authorization	-
Naloxone Hcl 0.4 Mg/Ml Soln Cart	Removed quantity limit	-
Naproxen 250 Mg Tab	Moved to lower tier - Tier 1	-
Naproxen 375 Mg Tab	Moved to lower tier - Tier 1	-
Naproxen 500 Mg Tab	Moved to lower tier - Tier 1	-

Drug Name	Description of Change	Alternative
Naratriptan Hcl 1 Mg Tab	Moved to higher tier - Tier 3	sumatriptan succinate 25 mg, 50 mg, 100 mg tab; rizatriptan benzoate 5 mg, 10 mg tab, 5 mg, 10 mg tab disp - Tier 2
Naratriptan Hcl 2.5 Mg Tab	Moved to higher tier - Tier 3	sumatriptan succinate 25 mg, 50 mg, 100 mg tab; rizatriptan benzoate 5 mg, 10 mg tab, 5 mg, 10 mg tab disp - Tier 2
Narcan 4 Mg/0.1Ml Liquid	Removed from formulary (drug list)	Naloxone hcl 4 mg/ 0.1 ml liquid - Tier 2
Neut 4 % Solution	Added BvD prior authorization	-
Nitrofurantoin Macrocrystal 50 Mg Cap	Added to Tier 2	-
Nityr 10 Mg Tab	Removed from formulary (drug list)	nitisinone 10 mg cap - Tier 5
Nityr 2 Mg Tab	Removed from formulary (drug list)	nitisinone 2 mg cap - Tier 5
Nityr 5 Mg Tab	Removed from formulary (drug list)	nitisinone 5 mg cap - Tier 5
Normosol-R In D5W Solution	Added BvD prior authorization	-
Nulytely Lemon-Lime 420 Gm Recon Soln	Added to Tier 3	-
Nulytely With Flavor Packs 420 Gm Recon Soln	Added to Tier 3	-
Omeprazole 20 Mg Cap Dr	Moved to lower tier - Tier 1	-
Omeprazole 40 Mg Cap Dr	Moved to lower tier - Tier 1	-
Ondansetron Hcl 4 Mg/5Ml Solution	Moved to higher tier - Tier 3	ondansetron hcl 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp - Tier 2
Oxbryta 300 Mg Tab Sol	Removed from formulary (drug list)	Hydroxyurea 500 mg cap - Tier 2
Oxbryta 500 Mg Tab	Removed from formulary (drug list)	Hydroxyurea 500 mg cap - Tier 2
Pacerone 100 Mg Tab	Moved to higher tier - Tier 3	amiodarone hcl 200 mg tab, Pacerone 200 mg tab - Tier 1
Pacerone 200 Mg Tab	Moved to lower tier - Tier 1	-
Pacerone 400 Mg Tab	Moved to higher tier - Tier 3	amiodarone hcl 200 mg tab, Pacerone 200 mg tab - Tier 1
Pantoprazole Sodium 20 Mg Tab Dr	Moved to lower tier - Tier 1	-

Drug Name	Description of Change	Alternative
Pantoprazole Sodium 40 Mg Tab Dr	Moved to lower tier - Tier 1	-
Phenadoz 12.5 Mg Suppos	Moved to higher tier - Tier 4	meclizine hcl 12.5 mg, 25 mg tab; ondansetron 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp, prochlorperazine 5 mg, 10 mg tab - Tier 2
Phenadoz 25 Mg Suppos	Moved to higher tier - Tier 4	meclizine hcl 12.5 mg, 25 mg tab; ondansetron 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp, prochlorperazine 5 mg, 10 mg tab - Tier 2
Pirfenidone 534 Mg Tab	Added to Tier 5	-
Plenvu 140 Gm Recon Soln	Added to Tier 3	-
Prempro 0.3-1.5 Mg Tab	Removed quantity limit	-
Prempro 0.45-1.5 Mg Tab	Removed quantity limit	-
Prempro 0.625-2.5 Mg Tab	Removed quantity limit	-
Prempro 0.625-5 Mg Tab	Removed quantity limit	-
Prezista 75 Mg Tab	Updated quantity limit	-
Prochlorperazine 25 Mg Suppos	Moved to higher tier - Tier 4	meclizine hcl 12.5 mg, 25 mg tab; ondansetron 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp, prochlorperazine 5 mg, 10 mg tab - Tier 2
Prograf 1 Mg Packet	Moved to lower tier - Tier 5	-
Promethazine Hcl 12.5 Mg Suppos	Moved to higher tier - Tier 4	meclizine hcl 12.5 mg, 25 mg tab; ondansetron 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp, prochlorperazine 5 mg, 10 mg tab - Tier 2
Promethazine Hcl 25 Mg Suppos	Moved to higher tier - Tier 4	meclizine hcl 12.5 mg, 25 mg tab; ondansetron 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp, prochlorperazine 5 mg, 10 mg tab - Tier 2

Drug Name	Description of Change	Alternative
Promethazine Hcl 50 Mg Suppos	Moved to higher tier - Tier 4	meclizine hcl 12.5 mg, 25 mg tab; ondansetron 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp, prochlorperazine 5 mg, 10 mg tab - Tier 2
Promethegan 12.5 Mg Suppos	Moved to higher tier - Tier 4	meclizine hcl 12.5 mg, 25 mg tab; ondansetron 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp, prochlorperazine 5 mg, 10 mg tab - Tier 2
Promethegan 25 Mg Suppos	Moved to higher tier - Tier 4	meclizine hcl 12.5 mg, 25 mg tab; ondansetron 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp, prochlorperazine 5 mg, 10 mg tab - Tier 2
Promethegan 50 Mg Suppos	Moved to higher tier - Tier 4	meclizine hcl 12.5 mg, 25 mg tab; ondansetron 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp, prochlorperazine 5 mg, 10 mg tab - Tier 2
Pyridostigmine Bromide 60 Mg Tab	Removed quantity limit	-
Pyridostigmine Bromide 60 Mg/5Ml Solution	Moved to higher tier - Tier 5 and removed quantity limit	pyridostigimine bromide 60 mg tab - Tier 2
Pyridostigmine Bromide Er 180 Mg Tab Er	Removed quantity limit	-
Revatio 10 Mg/12.5Ml Solution	Added BvD prior authorization	-
Revlimid 10 Mg Cap	Added to Tier 5 with prior authorization	-
Revlimid 15 Mg Cap	Added to Tier 5 with prior authorization	-
Revlimid 25 Mg Cap	Added to Tier 5 with prior authorization	-
Revlimid 5 Mg Cap	Added to Tier 5 with prior authorization	-
Risedronate Sodium 30 Mg Tab	Removed step therapy	-
Serostim 4 Mg Recon Soln	Removed from formulary (drug list)	-

Drug Name	Description of Change	Alternative
Serostim 5 Mg Recon Soln	Removed from formulary (drug list)	-
Serostim 6 Mg Recon Soln	Removed from formulary (drug list)	-
Sildenafil Citrate 10 Mg/12.5Ml Solution	Removed from formulary and added BvD prior authorization	-
Solifenacin Succinate 10 Mg Tab	Moved to lower tier - Tier 2	-
Solifenacin Succinate 5 Mg Tab	Moved to lower tier - Tier 2	-
Terconazole 0.4 % Cream	Moved to higher tier - Tier 3	fluconazole 10 mg/ml, 40mg/ml recon susp, 50 mg, 100 mg, 150 mg, 200 mg tab - Tier 2
Terconazole 0.8 % Cream	Moved to higher tier - Tier 3	fluconazole 10 mg/ml, 40mg/ml recon susp, 50 mg, 100 mg, 150 mg, 200 mg tab - Tier 2
Terconazole 80 Mg Suppos	Moved to higher tier - Tier 4	terconazole 0.4%, 0.8% cream - Tier 3
Theophylline 80 Mg/15Ml Solution	Removed from formulary (drug list)	theophylline er 100 mg, 200 mg, 300 mg, 400 mg, 450 mg, 600 mg tab er 24h - Tier 2
Tranexamic Acid 1000 Mg/10Ml Solution	Removed from formulary and added BvD prior authorization	Tranexamic acid tab 650 mg - Tier 3
Triamterene-Hctz 37.5-25 Mg Cap	Moved to lower tier - Tier 1	-
Verapamil Hcl 120 Mg Tab	Moved to lower tier - Tier 1	-
Verapamil Hcl 40 Mg Tab	Moved to lower tier - Tier 1	-
Verapamil Hcl 80 Mg Tab	Moved to lower tier - Tier 1	-
Vyzulta 0.024 % Solution	Added to Tier 4	-
Xiidra 5 % Solution	Added to Tier 3	-
Zilretta 32 Mg Srer	Added BvD prior authorization	-
Zolmitriptan 2.5 Mg Tab	Moved to higher tier - Tier 4	sumatriptan succinate 25 mg, 50 mg, 100 mg tab; rizatriptan benzoate 5 mg, 10 mg tab, 5 mg, 10 mg tab disp - Tier 2
Zolmitriptan 2.5 Mg Tab Disp	Moved to higher tier - Tier 4	sumatriptan succinate 25 mg, 50 mg, 100 mg tab; rizatriptan benzoate 5 mg, 10 mg tab, 5 mg, 10 mg tab disp - Tier 2

Drug Name	Description of Change	Alternative
Zolmitriptan 5 Mg Tab	Moved to higher tier - Tier 4	sumatriptan succinate 25 mg, 50 mg, 100 mg tab; rizatriptan benzoate 5 mg, 10 mg tab, 5 mg, 10 mg tab disp - Tier 2
Zolmitriptan 5 Mg Tab Disp	Moved to higher tier - Tier 4	sumatriptan succinate 25 mg, 50 mg, 100 mg tab; rizatriptan benzoate 5 mg, 10 mg tab, 5 mg, 10 mg tab disp - Tier 2

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