



## Blue Shield Medicare (PPO)

### 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.                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| EDC    | Enhanced Drug Coverage  | 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. |
| VAC    | IRA Vaccine \$0         | This Part D vaccine is at no cost to you, even if you haven't paid your deductible. Call Customer Service for more information.                                                                                                                                                                                                                                                                                                                                                                                        |
| INS    | Covered Insulin         | You won't pay more than \$35 for a one-month supply of each insulin product covered by our plan, no matter what cost-sharing tier it's on, even if you haven't paid your deductible.                                                                                                                                                                                                                                                                                                                                   |

Blue Shield of California

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Y0118\_25\_062A\_PHA\_C 08042025

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| Drug Tier Key |                       |
|---------------|-----------------------|
| <b>gen:</b>   | Generic Drugs         |
| <b>brd:</b>   | Preferred Brand Drugs |
| <b>npd:</b>   | Non-Preferred Drugs   |
| <b>spec:</b>  | Specialty Tier Drugs  |

| EFFECTIVE 02/2026                                                                             |                              |             |
|-----------------------------------------------------------------------------------------------|------------------------------|-------------|
| Drug Name                                                                                     | Description of Change        | Alternative |
| ANUCORT-HC 25 MG SUPPOS<br><i>hydrocortisone acetate (rectal)</i>                             | - Change                     |             |
| ANUSOL-HC 25 MG SUPPOS<br><i>hydrocortisone acetate (rectal)</i>                              | - Change                     |             |
| AVAR-E EMOLLIENT 10-5 % CREAM<br><i>sulfacetamide sodium w/ sulfur</i>                        | - Change                     |             |
| <i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>                                         | - Added to Tier 1            |             |
| BACITRA-NEOMYCIN-POLYMYXIN-HC 1 % OINTMENT<br><i>bacitracin-poly-neomycin-hc</i>              | - Added to Tier 1            |             |
| BACITRACIN-POLYMYXIN B 500-10000 UNIT/GM<br>OINTMENT<br><i>bacitracin-polymyxin b (ophth)</i> | - Added to Tier 1            |             |
| BESIVANCE 0.6 % SUSPENSION<br><i>besifloxacin hcl</i>                                         | - Added to Tier 2<br>- Added |             |
| BOSULIF 100 MG CAP<br><i>bosutinib</i>                                                        | - Change                     |             |
| BOSULIF 100 MG TAB<br><i>bosutinib</i>                                                        | - Change                     |             |
| BOSULIF 400 MG TAB<br><i>bosutinib</i>                                                        | - Change                     |             |
| BOSULIF 50 MG CAP<br><i>bosutinib</i>                                                         | - Change                     |             |
| BOSULIF 500 MG TAB<br><i>bosutinib</i>                                                        | - Change                     |             |

| EFFECTIVE 02/2026                                                                        |                                             |                               |
|------------------------------------------------------------------------------------------|---------------------------------------------|-------------------------------|
| Drug Name                                                                                | Description of Change                       | Alternative                   |
| <i>chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg</i>                               | - Added to Tier 1<br>- QL Added: 8 / 1 DAYS |                               |
| <i>clobetasol propionate emollient base cream 0.05%</i>                                  | - Added to Tier 1                           |                               |
| CHLORDIAZEPOXIDE-CLIDINIUM 5-2.5 MG CAP<br><i>chlordiazepoxide hcl-clidinium bromide</i> | - Added to Tier 1<br>- QL Added: 8 / 1 DAYS |                               |
| COMFORT EZ INSULIN SYRINGE 27G X 1/2" 1 ML MISC<br><i>insulin syringe/needle u-100</i>   | - Added to Tier 2                           |                               |
| COVARYX 1.25-2.5 MG TAB<br><i>esterified estrogens &amp; methyltestosterone</i>          | - Change                                    |                               |
| COVARYX HS 0.625-1.25 MG TAB<br><i>esterified estrogens &amp; methyltestosterone</i>     | - Change                                    |                               |
| DIFICID 200 MG TAB<br><i>fidaxomicin</i>                                                 | - Formulary Removal                         | <i>fidaxomicin 200 mg tab</i> |
| DROPSAFE AUTOPROTECT DUO 31G X 4 MM MISC<br><i>insulin pen needle</i>                    | - Added to Tier 2                           |                               |
| DROPSAFE AUTOPROTECT DUO 31G X 5 MM MISC<br><i>insulin pen needle</i>                    | - Added to Tier 2                           |                               |
| DROPSAFE AUTOPROTECT DUO 31G X 8 MM MISC<br><i>insulin pen needle</i>                    | - Added to Tier 2                           |                               |
| EEMT 1.25-2.5 MG TAB<br><i>esterified estrogens &amp; methyltestosterone</i>             | - Change                                    |                               |
| EEMT HS 0.625-1.25 MG TAB<br><i>esterified estrogens &amp; methyltestosterone</i>        | - Change                                    |                               |

| EFFECTIVE 02/2026                                                                                     |                               |                             |
|-------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------|
| Drug Name                                                                                             | Description of Change         | Alternative                 |
| <i>esterified estrogens &amp; methyltestosterone tab 0.625-1.25 mg</i>                                | - Added to Tier 1<br>- Change |                             |
| <i>esterified estrogens &amp; methyltestosterone tab 1.25-2.5 mg</i>                                  | - Added to Tier 1<br>- Added  |                             |
| EST ESTROGENS-METHYLTEST 1.25-2.5 MG TAB<br><i>esterified estrogens &amp; methyltestosterone</i>      | - Added to Tier 1<br>- Added  |                             |
| EST ESTROGENS-METHYLTEST DS 1.25-2.5 MG TAB<br><i>esterified estrogens &amp; methyltestosterone</i>   | - Change                      |                             |
| EST ESTROGENS-METHYLTEST HS 0.625-1.25 MG TAB<br><i>esterified estrogens &amp; methyltestosterone</i> | - Added to Tier 1<br>- Added  |                             |
| ESTRATEST H.S. 0.625-1.25 MG TAB<br><i>esterified estrogens &amp; methyltestosterone</i>              | - Added to Tier 1<br>- Added  |                             |
| GLEOSTINE 10 MG CAP<br><i>lomustine</i>                                                               | - Formulary Removal           | <i>lomustine 10 mg cap</i>  |
| GLEOSTINE 100 MG CAP<br><i>lomustine</i>                                                              | - Formulary Removal           | <i>lomustine 100 mg cap</i> |
| GLEOSTINE 40 MG CAP<br><i>lomustine</i>                                                               | - Formulary Removal           | <i>lomustine 40 mg cap</i>  |
| <i>hydrocortisone acetate suppos 25 mg</i>                                                            | - Added to Tier 1<br>- Added  |                             |
| <i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>                                                        | - Change                      |                             |
| <i>hyoscyamine sulfate sl tab 0.125 mg</i>                                                            | - Added to Tier 1<br>- Added  |                             |

| EFFECTIVE 02/2026                                                             |                               |             |
|-------------------------------------------------------------------------------|-------------------------------|-------------|
| Drug Name                                                                     | Description of Change         | Alternative |
| <i>hyoscyamine sulfate soln 0.125 mg/ml</i>                                   | - Added to Tier 1<br>- Change |             |
| <i>hyoscyamine sulfate tab 0.125 mg</i>                                       | - Added to Tier 1<br>- Added  |             |
| <i>hyoscyamine sulfate tab disint 0.125 mg</i>                                | - Added to Tier 1<br>- Change |             |
| <i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>                               | - Change                      |             |
| HEMMOREX-HC 25 MG SUPPOS<br><i>hydrocortisone acetate (rectal)</i>            | - Change                      |             |
| HYDROCORTISONE ACETATE 25 MG SUPPOS<br><i>hydrocortisone acetate (rectal)</i> | - Added to Tier 1<br>- Added  |             |
| HYOSCYAMINE SULFATE 0.125 MG SL TAB<br><i>hyoscyamine sulfate</i>             | - Added to Tier 1<br>- Added  |             |
| HYOSCYAMINE SULFATE 0.125 MG TAB DISP<br><i>hyoscyamine sulfate</i>           | - Added to Tier 1<br>- Change |             |
| HYOSCYAMINE SULFATE 0.125 MG TAB<br><i>hyoscyamine sulfate</i>                | - Added to Tier 1<br>- Change |             |
| HYOSCYAMINE SULFATE 0.125 MG/5ML ELIXIR<br><i>hyoscyamine sulfate</i>         | - Change                      |             |
| HYOSCYAMINE SULFATE 0.125 MG/ML SOLUTION<br><i>hyoscyamine sulfate</i>        | - Change                      |             |

| EFFECTIVE 02/2026                                                        |                                                            |             |
|--------------------------------------------------------------------------|------------------------------------------------------------|-------------|
| Drug Name                                                                | Description of Change                                      | Alternative |
| HYOSCYAMINE SULFATE ER 0.375 MG TAB ER 12H<br><i>hyoscyamine sulfate</i> | - Added to Tier 1<br>- Added                               |             |
| HYOSCYAMINE SULFATE SL 0.125 MG SL TAB<br><i>hyoscyamine sulfate</i>     | - Change                                                   |             |
| HYOSYNE 0.125 MG/5ML ELIXIR<br><i>hyoscyamine sulfate</i>                | - Change                                                   |             |
| HYOSYNE 0.125 MG/ML SOLUTION<br><i>hyoscyamine sulfate</i>               | - Change                                                   |             |
| JANUVIA 100 MG TAB<br><i>sitagliptin phosphate</i>                       | - Added                                                    |             |
| <i>leucovorin calcium tab 5 mg</i>                                       | - Added to Tier 1                                          |             |
| <i>lidocaine oint 5%</i>                                                 | - Added to Tier 1<br>- QL Added: 50 / 30 DAYS              |             |
| <i>loteprednol etabonate-tobramycin ophth susp 0.5-0.3%</i>              | - Added to Tier 1                                          |             |
| LEDERLE LEUCOVORIN 5 MG TAB<br><i>leucovorin calcium</i>                 | - Added to Tier 1                                          |             |
| <i>methadone hcl tab for oral susp 40 mg</i>                             | - Added to Tier 1<br>- NDS Added<br>- QL Added: 1 / 1 DAYS |             |
| <i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>      | - Added to Tier 1                                          |             |
| NULEV 0.125 MG TAB DISP<br><i>hyoscyamine sulfate</i>                    | - Change                                                   |             |

## EFFECTIVE 02/2026

| Drug Name                                                                                                     | Description of Change         | Alternative |
|---------------------------------------------------------------------------------------------------------------|-------------------------------|-------------|
| OSCIMIN 0.125 MG SL TAB<br><i>hyoscyamine sulfate</i>                                                         | - Change                      |             |
| OSCIMIN 0.125 MG TAB<br><i>hyoscyamine sulfate</i>                                                            | - Change                      |             |
| PAZOPANIB HCL 400 MG TAB<br><i>pazopanib hcl</i>                                                              | - Added                       |             |
| <i>pb-hyoscy-atrop-scopol tab 16.2-0.1037-0.0194-0.0065 mg</i>                                                | - Added to Tier 1<br>- Added  |             |
| PB-HYOSCY-ATROPINE-SCOPOLAMINE 16.2 MG TAB<br><i>phenobarbital-hyoscyamine-atropine-scopolamine</i>           | - Change                      |             |
| PB-HYOSCY-ATROPINE-SCOPOLAMINE 16.2 MG/5ML<br>ELIXIR<br><i>phenobarbital-hyoscyamine-atropine-scopolamine</i> | - Change                      |             |
| <i>phenazopyridine hcl tab 100 mg</i>                                                                         | - Added to Tier 1<br>- Change |             |
| <i>phenazopyridine hcl tab 200 mg</i>                                                                         | - Added to Tier 1<br>- Change |             |
| <i>phenobarbital elixir 20 mg/5ml</i>                                                                         | - Added to Tier 1<br>- Added  |             |
| <i>phenobarbital tab 100 mg</i>                                                                               | - Added to Tier 1<br>- Added  |             |
| <i>phenobarbital tab 15 mg</i>                                                                                | - Added to Tier 1<br>- Added  |             |

## EFFECTIVE 02/2026

| Drug Name                                              | Description of Change        | Alternative |
|--------------------------------------------------------|------------------------------|-------------|
| <i>phenobarbital tab 16.2 mg</i>                       | - Added to Tier 1<br>- Added |             |
| <i>phenobarbital tab 30 mg</i>                         | - Added to Tier 1<br>- Added |             |
| <i>phenobarbital tab 32.4 mg</i>                       | - Added to Tier 1<br>- Added |             |
| <i>phenobarbital tab 60 mg</i>                         | - Added to Tier 1<br>- Added |             |
| <i>phenobarbital tab 64.8 mg</i>                       | - Added to Tier 1<br>- Added |             |
| <i>phenobarbital tab 97.2 mg</i>                       | - Added to Tier 1<br>- Added |             |
| PHENOBARBITAL 100 MG TAB<br><i>phenobarbital</i>       | - Added to Tier 1<br>- Added |             |
| PHENOBARBITAL 15 MG TAB<br><i>phenobarbital</i>        | - Added to Tier 1<br>- Added |             |
| PHENOBARBITAL 16.2 MG TAB<br><i>phenobarbital</i>      | - Added to Tier 1<br>- Added |             |
| PHENOBARBITAL 20 MG/5ML ELIXIR<br><i>phenobarbital</i> | - Added to Tier 1<br>- Added |             |
| PHENOBARBITAL 30 MG TAB<br><i>phenobarbital</i>        | - Added to Tier 1<br>- Added |             |

## EFFECTIVE 02/2026

| Drug Name                                                                       | Description of Change        | Alternative |
|---------------------------------------------------------------------------------|------------------------------|-------------|
| PHENOBARBITAL 30 MG/7.5ML ELIXIR<br><i>phenobarbital</i>                        | - Added to Tier 1<br>- Added |             |
| PHENOBARBITAL 32.4 MG TAB<br><i>phenobarbital</i>                               | - Added to Tier 1<br>- Added |             |
| PHENOBARBITAL 60 MG TAB<br><i>phenobarbital</i>                                 | - Added to Tier 1<br>- Added |             |
| PHENOBARBITAL 60 MG/15ML ELIXIR<br><i>phenobarbital</i>                         | - Added to Tier 1<br>- Added |             |
| PHENOBARBITAL 64.8 MG TAB<br><i>phenobarbital</i>                               | - Added to Tier 1<br>- Added |             |
| PHENOBARBITAL 97.2 MG TAB<br><i>phenobarbital</i>                               | - Added to Tier 1<br>- Added |             |
| <i>pot &amp; sod citrates w/ cit ac soln 550-500-334 mg/5ml</i>                 | - Change                     |             |
| <i>potassium citrate &amp; citric acid soln 1100-334 mg/5ml</i>                 | - Change                     |             |
| PHENAZOPYRIDINE HCL 100 MG TAB<br><i>phenazopyridine hcl</i>                    | - Added to Tier 1<br>- Added |             |
| PHENAZOPYRIDINE HCL 200 MG TAB<br><i>phenazopyridine hcl</i>                    | - Added to Tier 1<br>- Added |             |
| PHENOHYTRO 16.2 MG TAB<br><i>phenobarbital-hyoscyamine-atropine-scopolamine</i> | - Change                     |             |

| EFFECTIVE 02/2026                                                                              |                                                          |                                         |
|------------------------------------------------------------------------------------------------|----------------------------------------------------------|-----------------------------------------|
| Drug Name                                                                                      | Description of Change                                    | Alternative                             |
| PHENOHYTRO 16.2 MG/5ML ELIXIR<br><i>phenobarbital-hyoscyamine-atropine-scopolamine</i>         | - Added to Tier 1<br>- QL Added: 40 / 1 DAYS<br>- Change |                                         |
| PHOSPHO-TRIN K500 500 MG TAB<br><i>potassium phosphate monobasic</i>                           | - Change                                                 |                                         |
| POT & SOD CIT-CIT AC 550-500-334 MG/5ML SOLUTION<br><i>pot &amp; sod citrates w/citric ac</i>  | - Change                                                 |                                         |
| POTASSIUM CITRATE-CITRIC ACID 1100-334 MG/5ML SOLUTION<br><i>potassium citrate-citric acid</i> | - Added to Tier 1<br>- Added                             |                                         |
| PREMARIN 0.45 MG TAB<br><i>estrogens, conjugated</i>                                           | - Formulary Removal                                      | <i>estrogens conjugated 0.45 mg tab</i> |
| PREMARIN 0.9 MG TAB<br><i>estrogens, conjugated</i>                                            | - Formulary Removal                                      | <i>estrogens conjugated 0.9 mg tab</i>  |
| PREMARIN 1.25 MG TAB<br><i>estrogens, conjugated</i>                                           | - Formulary Removal                                      | <i>estrogens conjugated 1.25 mg tab</i> |
| PULMOSAL 7 % NEBU SOLN<br><i>sodium chloride (inhalant)</i>                                    | - Change                                                 |                                         |
| RYCLORA 2 MG/5ML SOLUTION<br><i>dexchlorpheniramine maleate</i>                                | - Formulary Removal                                      |                                         |
| <i>salsalate tab 500 mg</i>                                                                    | - Added to Tier 1                                        |                                         |

| EFFECTIVE 02/2026                                                                             |                                                  |             |
|-----------------------------------------------------------------------------------------------|--------------------------------------------------|-------------|
| Drug Name                                                                                     | Description of Change                            | Alternative |
| <i>salsalate tab 750 mg</i>                                                                   | - Added to Tier 1                                |             |
| SSS 10-5 10-5 % CREAM<br><i>sulfacetamide sodium w/ sulfur</i>                                | - Change                                         |             |
| <i>sulfacetamide sodium w/ sulfur cream 10-5%</i>                                             | - Change                                         |             |
| SALSALATE 750 MG TAB<br><i>salsalate</i>                                                      | - Added to Tier 1                                |             |
| SHINGRIX 50 MCG / 0.5ML SUSP PRSYR<br><i>zoster vaccine recombinant adjuvanted</i>            | - Added to Tier 2<br>- QL Added: 1 ML / 365 DAYS |             |
| SOD CITRATE-CITRIC ACID 1.5-1 GM/15ML SOLUTION<br><i>sodium citrate &amp; citric acid</i>     | - Added to Tier 1<br>- Added                     |             |
| SOD CITRATE-CITRIC ACID 1500-1002 MG/15ML SOLUTION<br><i>sodium citrate &amp; citric acid</i> | - Added to Tier 1                                |             |
| SOD CITRATE-CITRIC ACID 3-2 GM/30ML SOLUTION<br><i>sodium citrate &amp; citric acid</i>       | - Added to Tier 1<br>- Change                    |             |
| SOD CITRATE-CITRIC ACID 3000-2004 MG/30ML SOLUTION<br><i>sodium citrate &amp; citric acid</i> | - Added to Tier 1                                |             |
| SOD CITRATE-CITRIC ACID 500-334 MG/5ML SOLUTION<br><i>sodium citrate &amp; citric acid</i>    | - Change                                         |             |
| SODIUM CHLORIDE 10 % NEBU SOLN<br><i>sodium chloride (inhalant)</i>                           | - Change                                         |             |

| EFFECTIVE 02/2026                                                                                |                               |                               |
|--------------------------------------------------------------------------------------------------|-------------------------------|-------------------------------|
| Drug Name                                                                                        | Description of Change         | Alternative                   |
| SODIUM CHLORIDE 7 % NEBU SOLN<br><i>sodium chloride (inhalant)</i>                               | - Change                      |                               |
| SODIUM CITRATE-CITRIC ACID 1500-1002 MG/15ML SOLUTION<br><i>sodium citrate &amp; citric acid</i> | - Change                      |                               |
| SODIUM CITRATE-CITRIC ACID 3000-2004 MG/30ML SOLUTION<br><i>sodium citrate &amp; citric acid</i> | - Change                      |                               |
| SODIUM FLUORIDE 0.55 (0.25 F) MG CHEW TAB<br><i>sodium fluoride</i>                              | - Added to Tier 1             |                               |
| SODIUM FLUORIDE 1.1 (0.5 F) MG CHEW TAB<br><i>sodium fluoride</i>                                | - Added to Tier 1             |                               |
| SODIUM FLUORIDE 2.2 (1 F) MG CHEW TAB<br><i>sodium fluoride</i>                                  | - Added to Tier 1             |                               |
| SULFACETAMIDE SODIUM-SULFUR 10-5 % CREAM<br><i>sulfacetamide sodium w/ sulfur</i>                | - Added to Tier 1<br>- Added  |                               |
| SULFACETAMIDE SODIUM-SULFUR 10-5 % LOTION<br><i>sulfacetamide sodium w/ sulfur</i>               | - Change                      |                               |
| SULFACETAMIDE SODIUM-SULFUR 10-5 % SUSPENSION<br><i>sulfacetamide sodium w/ sulfur</i>           | - Change                      |                               |
| TRACLEER 32 MG TAB SOL<br><i>bosentan</i>                                                        | - Formulary Removal           | <i>bosentan 32 mg tab sol</i> |
| TRICITRATES 550-500-334 MG/5ML SOLUTION<br><i>pot &amp; sod citrates w/citric ac</i>             | - Added to Tier 1<br>- Change |                               |

| EFFECTIVE 03/2026                                                |                                              |                                          |
|------------------------------------------------------------------|----------------------------------------------|------------------------------------------|
| Drug Name                                                        | Description of Change                        | Alternative                              |
| <i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i> | - Added to Tier 1<br>- Added                 |                                          |
| <i>ceftaroline fosamil for iv soln 400 mg</i>                    | - Added to Tier 4                            |                                          |
| <i>ceftaroline fosamil for iv soln 600 mg</i>                    | - Added to Tier 4                            |                                          |
| DAPTOMYCIN 500 MG RECON SOLN<br><i>daptomycin</i>                | - Added to Tier 4                            |                                          |
| <i>diazepam rectal gel delivery system 2.5 mg</i>                | - Added to Tier 1<br>- QL Added: 5 / 30 DAYS |                                          |
| HYRNUO 10 MG TAB<br><i>sevabertinib</i>                          | - Added to Tier 4<br>- Added                 |                                          |
| JYNARQUE 15 MG TAB THPK<br><i>tolvaptan</i>                      | - Formulary Removal                          | <i>tolvaptan 15 mg tab thpk</i>          |
| JYNARQUE 15 MG TAB<br><i>tolvaptan</i>                           | - Formulary Removal                          | <i>tolvaptan 15 mg tab</i>               |
| JYNARQUE 30 & 15 MG TAB THPK<br><i>tolvaptan</i>                 | - Formulary Removal                          | <i>tolvaptan 30 &amp; 15 mg tab thpk</i> |
| JYNARQUE 30 MG TAB<br><i>tolvaptan</i>                           | - Formulary Removal                          | <i>tolvaptan 30 mg tab</i>               |
| JYNARQUE 45 & 15 MG TAB THPK<br><i>tolvaptan</i>                 | - Formulary Removal                          | <i>tolvaptan 45 &amp; 15 mg tab thpk</i> |

| EFFECTIVE 03/2026                                                                                |                                                       |                                          |
|--------------------------------------------------------------------------------------------------|-------------------------------------------------------|------------------------------------------|
| Drug Name                                                                                        | Description of Change                                 | Alternative                              |
| JYNARQUE 60 & 30 MG TAB THPK<br><i>tolvaptan</i>                                                 | - Formulary Removal                                   | <i>tolvaptan 60 &amp; 30 mg tab thpk</i> |
| JYNARQUE 90 & 30 MG TAB THPK<br><i>tolvaptan</i>                                                 | - Formulary Removal                                   | <i>tolvaptan 90 &amp; 30 mg tab thpk</i> |
| KOMZIFTI 200 MG CAP<br><i>ziftomenib</i>                                                         | - Added to Tier 4<br>- Added                          |                                          |
| KOSELUGO 5 MG CAP SPRINK<br><i>selumetinib sulfate</i>                                           | - LA Removed                                          |                                          |
| KOSELUGO 7.5 MG CAP SPRINK<br><i>selumetinib sulfate</i>                                         | - LA Removed                                          |                                          |
| LAGEVRIO 200 MG CAP<br><i>molnupiravir</i>                                                       | - Added to Tier 4                                     |                                          |
| <i>pomalidomide cap 1 mg</i>                                                                     | - Added                                               |                                          |
| <i>pomalidomide cap 2 mg</i>                                                                     | - Added                                               |                                          |
| <i>pomalidomide cap 3 mg</i>                                                                     | - Added                                               |                                          |
| <i>pomalidomide cap 4 mg</i>                                                                     | - Added                                               |                                          |
| PAXLOVID (300/100 & 150/100) 6 X 150 MG & 5 X 100MG<br>TAB THPK<br><i>nirmatrelvir-ritonavir</i> | - Added to Tier 1<br>- QL Added: 11 / 30 OVER<br>TIME |                                          |

## EFFECTIVE 03/2026

| Drug Name                                           | Description of Change                                                   | Alternative |
|-----------------------------------------------------|-------------------------------------------------------------------------|-------------|
| <i>sevelamer carbonate tab 800 mg</i>               | - Added to Tier 1<br>- Added                                            |             |
| <i>sodium oxybate oral solution 500 mg/ml</i>       | - Added to Tier 4<br>- Added<br>- QL Added: 540 / 30 DAYS<br>- LA Added |             |
| SUBVENITE 10 MG/ML SUSPENSION<br><i>lamotrigine</i> | - Added to Tier 4<br>- Added                                            |             |
| <i>tolvaptan tab 15 mg</i>                          | - Added to Tier 4<br>- Added<br>- QL Change: 1 / 1 DAYS to 8 / 1 DAYS   |             |
| <i>tolvaptan tab 30 mg</i>                          | - Added to Tier 4<br>- Added<br>- QL Change: 2 / 1 DAYS to 4 / 1 DAYS   |             |
| <i>tolvaptan tab therapy pack 15 mg</i>             | - Added to Tier 4<br>- Added                                            |             |
| <i>tolvaptan tab therapy pack 30 &amp; 15 mg</i>    | - Added to Tier 4<br>- Added                                            |             |
| <i>tolvaptan tab therapy pack 45 &amp; 15 mg</i>    | - Added to Tier 4<br>- Added                                            |             |
| <i>tolvaptan tab therapy pack 60 &amp; 30 mg</i>    | - Added to Tier 4<br>- Added                                            |             |

**EFFECTIVE 03/2026**

| Drug Name                                        | Description of Change                                                             | Alternative |
|--------------------------------------------------|-----------------------------------------------------------------------------------|-------------|
| <i>tolvaptan tab therapy pack 90 &amp; 30 mg</i> | <ul style="list-style-type: none"><li>- Added to Tier 4</li><li>- Added</li></ul> |             |

## EFFECTIVE 04/2026

| Drug Name                                                           | Description of Change                                         | Alternative                                                     |
|---------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------|
| ATROVENT HFA 17 MCG/ACT AERO SOLN<br><i>ipratropium bromide hfa</i> | - QL Change: 25.8 / 30<br>DAYS to 25.8 GM / 30 DAYS           |                                                                 |
| <i>brivaracetam oral soln 10 mg/ml</i>                              | - Added to Tier 1<br>- ST Added<br>- QL Added: 20 ML / 1 DAYS |                                                                 |
| <i>brivaracetam tab 10 mg</i>                                       | - Added to Tier 1<br>- ST Added<br>- QL Added: 2 / 1 DAYS     |                                                                 |
| <i>brivaracetam tab 100 mg</i>                                      | - Added to Tier 1<br>- ST Added<br>- QL Added: 2 / 1 DAYS     |                                                                 |
| <i>brivaracetam tab 25 mg</i>                                       | - Added to Tier 1<br>- ST Added<br>- QL Added: 2 / 1 DAYS     |                                                                 |
| <i>brivaracetam tab 50 mg</i>                                       | - Added to Tier 1<br>- ST Added<br>- QL Added: 2 / 1 DAYS     |                                                                 |
| <i>brivaracetam tab 75 mg</i>                                       | - Added to Tier 1<br>- ST Added<br>- QL Added: 2 / 1 DAYS     |                                                                 |
| <i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>    | - Added to Tier 1<br>- Added                                  |                                                                 |
| CIPRO HC 0.2-1 % SUSPENSION<br><i>ciprofloxacin-hydrocortisone</i>  | - Formulary Removal                                           | <i>ciprofloxacin-<br/>hydrocortisone 0.2-1 %<br/>suspension</i> |

| EFFECTIVE 04/2026                                                             |                                              |                                        |
|-------------------------------------------------------------------------------|----------------------------------------------|----------------------------------------|
| Drug Name                                                                     | Description of Change                        | Alternative                            |
| FYCOMPA 0.5 MG/ML SUSPENSION<br><i>perampanel</i>                             | - Formulary Removal                          | <i>perampanel 0.5 mg/ml suspension</i> |
| HYRNUO 10 MG TAB<br><i>sevabertinib</i>                                       | - LA Removed                                 |                                        |
| <i>lacosamide oral solution 10 mg/ml</i>                                      | - Added to Tier 1<br>- QL Added: 40 / 1 DAYS |                                        |
| LACOSAMIDE 10 MG/ML SOLUTION<br><i>lacosamide</i>                             | - Added to Tier 1<br>- QL Added: 40 / 1 DAYS |                                        |
| LAGEVRIO 200 MG CAP<br><i>molnupiravir</i>                                    | - Added to Tier 4                            |                                        |
| LIFYORLI (125 MG DOSE) 1 X 25 MG & 1 X 100 MG CAP THPK<br><i>relacorilant</i> | - Added                                      |                                        |
| LIFYORLI (150 MG DOSE) 2 X 25 MG & 1 X 100 MG CAP THPK<br><i>relacorilant</i> | - Added                                      |                                        |
| <i>mesalamine cap dr 400 mg</i>                                               | - ST Change                                  |                                        |
| MESALAMINE 400 MG CAP DR<br><i>mesalamine</i>                                 | - ST Change                                  |                                        |
| <i>nintedanib esylate cap 100 mg (base equivalent)</i>                        | - Added                                      |                                        |
| <i>nintedanib esylate cap 150 mg (base equivalent)</i>                        | - Added                                      |                                        |
| OFLOXACIN 400 MG TAB<br><i>ofloxacin</i>                                      | - Added to Tier 1                            |                                        |

EFFECTIVE 04/2026

| Drug Name                                                         | Description of Change                                  | Alternative |
|-------------------------------------------------------------------|--------------------------------------------------------|-------------|
| <i>pomalidomide cap 1 mg</i>                                      | - Added to Tier 4<br>- Added<br>- QL Added: 1 / 1 DAYS |             |
| <i>pomalidomide cap 2 mg</i>                                      | - Added to Tier 4<br>- Added<br>- QL Added: 1 / 1 DAYS |             |
| <i>pomalidomide cap 3 mg</i>                                      | - Added to Tier 4<br>- Added<br>- QL Added: 1 / 1 DAYS |             |
| <i>pomalidomide cap 4 mg</i>                                      | - Added to Tier 4<br>- Added<br>- QL Added: 1 / 1 DAYS |             |
| <i>rilpivirine hcl tab 25 mg (base equivalent)</i>                | - Added to Tier 1<br>- QL Added: 2 / 1 DAYS            |             |
| <i>sevelamer carbonate tab 800 mg</i>                             | - Added to Tier 1<br>- Added                           |             |
| TOBRAMYCIN SULFATE 1.2 GM RECON SOLN<br><i>tobramycin sulfate</i> | - Added to Tier 3                                      |             |
| ZYKADIA 150 MG TAB<br><i>ceritinib</i>                            | - Change                                               |             |

| EFFECTIVE 05/2026                                                                          |                                                 |             |
|--------------------------------------------------------------------------------------------|-------------------------------------------------|-------------|
| Drug Name                                                                                  | Description of Change                           | Alternative |
| <i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>                         | - QL Change: 13.4 / 30 DAYS<br>to 17 / 30 DAYS  |             |
| ACETAMINOPHEN-CODEINE 120-12 MG/5ML SOLUTION<br><i>acetaminophen w/ codeine</i>            | - QL Added: 1800 / 30<br>OVER TIME              |             |
| ACETASOL HC 2-1 % SOLUTION<br><i>hydrocortisone w/ acetic acid</i>                         | - Added to Tier 1                               |             |
| ALCOHOL PREP PAD 70 % PAD<br><i>alcohol swabs</i>                                          | - Added to Tier 1                               |             |
| BD INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC<br><i>insulin syringe/needle u-100</i>           | - Added to Tier 2                               |             |
| BD INSULIN SYRINGE 29G X 1/2" 1 ML MISC<br><i>insulin syringe/needle u-100</i>             | - Added to Tier 2                               |             |
| BD VEO INSULIN SYRINGE U/F 31G X 15/64" 0.3 ML MISC<br><i>insulin syringe/needle u-100</i> | - Added to Tier 2                               |             |
| BD VEO INSULIN SYRINGE U/F 31G X 15/64" 0.5 ML MISC<br><i>insulin syringe/needle u-100</i> | - Added to Tier 2                               |             |
| <i>budesonide delayed release particles cap 3 mg</i>                                       | - Removed                                       |             |
| <i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>                        | - Added to Tier 2<br>- QL Added: 10.2 / 30 DAYS |             |
| BICILLIN L-A 1200000 UNIT/2ML SUSP PRSYR<br><i>penicillin g benzathine</i>                 | - Added to Tier 3                               |             |

| EFFECTIVE 05/2026                                                                                            |                                                 |             |
|--------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-------------|
| Drug Name                                                                                                    | Description of Change                           | Alternative |
| BUDESONIDE-FORMOTEROL FUMARATE 160-4.5<br>MCG/ACT AEROSOL<br><i>budesonide-formoterol fumarate dihydrate</i> | - Added to Tier 2<br>- QL Added: 10.2 / 30 DAYS |             |
| <i>dapagliflozin free base-metformin hcl tab er 24hr 10-1000 mg</i>                                          | - QL Added: 1 / 1 DAYS                          |             |
| <i>dapagliflozin free base-metformin hcl tab er 24hr 10-500 mg</i>                                           | - QL Added: 1 / 1 DAYS                          |             |
| <i>dapagliflozin free base-metformin hcl tab er 24hr 5-1000 mg</i>                                           | - QL Added: 2 / 1 DAYS                          |             |
| <i>dapagliflozin free base-metformin hcl tab er 24hr 5-500 mg</i>                                            | - QL Added: 1 / 1 DAYS                          |             |
| <i>dapagliflozin tab 10 mg</i>                                                                               | - Added to Tier 2<br>- QL Added: 1 / 1 DAYS     |             |
| <i>dapagliflozin tab 5 mg</i>                                                                                | - Added to Tier 2<br>- QL Added: 1 / 1 DAYS     |             |
| <i>famotidine tab 20 mg</i>                                                                                  | - Added to Tier 1                               |             |
| FARXIGA 10 MG TAB<br><i>dapagliflozin</i>                                                                    | - Added to Tier 2<br>- QL Added: 1 / 1 DAYS     |             |
| FARXIGA 5 MG TAB<br><i>dapagliflozin</i>                                                                     | - Added to Tier 2<br>- QL Added: 1 / 1 DAYS     |             |
| FLUOCINOLONE ACETONIDE 0.01 % CREAM<br><i>fluocinolone acetonide</i>                                         | - Added to Tier 1                               |             |

| EFFECTIVE 05/2026                                                             |                                        |             |
|-------------------------------------------------------------------------------|----------------------------------------|-------------|
| Drug Name                                                                     | Description of Change                  | Alternative |
| HAVRIX 1440 EL U/ML SUSP PRSYR<br><i>hepatitis a vaccine</i>                  | - Added                                |             |
| <i>isosorbide mononitrate tab 20 mg</i>                                       | - Added to Tier 1                      |             |
| IPOL SUSPENSION<br><i>poliovirus vaccine, ipv</i>                             | - Added                                |             |
| ISONIAZID 100 MG TAB<br><i>isoniazid</i>                                      | - Added to Tier 1                      |             |
| JAKAFI XR 11 MG TAB ER 24H<br><i>ruxolitinib phosphate</i>                    | - Added                                |             |
| JAKAFI XR 22 MG TAB ER 24H<br><i>ruxolitinib phosphate</i>                    | - Added                                |             |
| JAKAFI XR 33 MG TAB ER 24H<br><i>ruxolitinib phosphate</i>                    | - Added                                |             |
| JAKAFI XR 44 MG TAB ER 24H<br><i>ruxolitinib phosphate</i>                    | - Added                                |             |
| JAKAFI XR 55 MG TAB ER 24H<br><i>ruxolitinib phosphate</i>                    | - Added                                |             |
| <i>lactic acid (ammonium lactate) lotion 12%</i>                              | - Added to Tier 1                      |             |
| LIFYORLI (125 MG DOSE) 1 X 25 MG & 1 X 100 MG CAP THPK<br><i>relacorilant</i> | - LA Added<br>- QL Added: 18 / 28 DAYS |             |
| LIFYORLI (150 MG DOSE) 2 X 25 MG & 1 X 100 MG CAP THPK<br><i>relacorilant</i> | - QL Added: 27 / 28 DAYS<br>- LA Added |             |

## EFFECTIVE 05/2026

| Drug Name                                                                           | Description of Change                                                | Alternative |
|-------------------------------------------------------------------------------------|----------------------------------------------------------------------|-------------|
| LUMIGAN 0.01 % SOLUTION<br><i>bimatoprost</i>                                       | - QL Change: 5 / 30 DAYS to<br>5 ML / 30 DAYS                        |             |
| <i>macitentan tab 10 mg</i>                                                         | - Added                                                              |             |
| <i>memantine hcl-donepezil hcl cap er 24hr 14-10 mg</i>                             | - Added to Tier 1<br>- QL Added: 1 / 1 DAYS                          |             |
| <i>memantine hcl-donepezil hcl cap er 24hr 28-10 mg</i>                             | - Added to Tier 1<br>- QL Added: 1 / 1 DAYS                          |             |
| MULTI-VITAMIN/FLUORIDE 0.25 MG/ML SUSPENSION<br><i>pediatric multivitamins w/fl</i> | - Change                                                             |             |
| <i>nintedanib esylate cap 100 mg (base equivalent)</i>                              | - Added to Tier 4<br>- Added<br>- LA Added<br>- QL Added: 2 / 1 DAYS |             |
| <i>nintedanib esylate cap 150 mg (base equivalent)</i>                              | - Added to Tier 4<br>- Added<br>- LA Added<br>- QL Added: 2 / 1 DAYS |             |
| <i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>                  | - Added to Tier 1                                                    |             |
| NISOLDIPINE ER 17 MG TAB ER 24H<br><i>nisoldipine</i>                               | - Added to Tier 1                                                    |             |
| NISOLDIPINE ER 8.5 MG TAB ER 24H<br><i>nisoldipine</i>                              | - Added to Tier 1                                                    |             |

| EFFECTIVE 05/2026                                                                                        |                                                         |                              |
|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------|
| Drug Name                                                                                                | Description of Change                                   | Alternative                  |
| NIZATIDINE 300 MG CAP<br><i>nizatidine</i>                                                               | - Added to Tier 1                                       |                              |
| <i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>                                           | - Added to Tier 1                                       |                              |
| <i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>                                             | - Added to Tier 1                                       |                              |
| <i>pb-hyoscy-atrop-scopol elix 16.2-0.1037-0.0194-0.0065 mg/5ml</i>                                      | - Change                                                |                              |
| PHENOBARBITAL-BELLADONNA ALK 16.2 MG/5ML ELIXIR<br><i>phenobarbital-hyoscyamine-atropine-scopolamine</i> | - Added to Tier 1<br>- QL Added: 40 / 1 DAYS<br>- Added |                              |
| <i>pimozide tab 1 mg</i>                                                                                 | - Added to Tier 1                                       |                              |
| <i>pimozide tab 2 mg</i>                                                                                 | - Added to Tier 1                                       |                              |
| PEDIARIX SUSP PRSYR<br><i>diph-tetanus tox-acell pert-hepatitis b recomb-polio ipv vac</i>               | - Added to Tier 2                                       |                              |
| PERMETHRIN 5 % CREAM<br><i>permethrin</i>                                                                | - Added to Tier 1                                       |                              |
| PHENOBARBITAL-BELLADONNA ALK 16.2 MG/5ML ELIXIR<br><i>phenobarbital-hyoscyamine-atropine-scopolamine</i> | - Added to Tier 1<br>- QL Added: 40 / 1 DAYS<br>- Added |                              |
| POMALYST 1 MG CAP<br><i>pomalidomide</i>                                                                 | - Formulary Removal                                     | <i>pomalidomide 1 mg cap</i> |
| POMALYST 2 MG CAP<br><i>pomalidomide</i>                                                                 | - Formulary Removal                                     | <i>pomalidomide 2 mg cap</i> |

| EFFECTIVE 05/2026                                                                           |                       |                                              |
|---------------------------------------------------------------------------------------------|-----------------------|----------------------------------------------|
| Drug Name                                                                                   | Description of Change | Alternative                                  |
| POMALYST 3 MG CAP<br><i>pomalidomide</i>                                                    | - Formulary Removal   | <i>pomalidomide 3 mg cap</i>                 |
| POMALYST 4 MG CAP<br><i>pomalidomide</i>                                                    | - Formulary Removal   | <i>pomalidomide 4 mg cap</i>                 |
| POTASSIUM CHLORIDE ER 10 MEQ TAB ER<br><i>potassium chloride</i>                            | - Added to Tier 1     |                                              |
| PREMARIN 0.3 MG TAB<br><i>estrogens, conjugated</i>                                         | - Formulary Removal   | <i>estrogens conjugated 0.3 mg tab</i>       |
| PREMARIN 0.625 MG TAB<br><i>estrogens, conjugated</i>                                       | - Formulary Removal   | <i>estrogens conjugated 0.625 mg tab</i>     |
| PREMARIN 1.25 MG TAB<br><i>estrogens, conjugated</i>                                        | - Formulary Removal   | <i>estrogens conjugated 1.25 mg tab</i>      |
| PROMETHAZINE VC/CODEINE 6.25-5-10 MG/5ML SYRUP<br><i>promethazine-phenylephrine-codeine</i> | - NDS Added           |                                              |
| <i>sodium oxybate oral solution 500 mg/ml</i>                                               | - Added               |                                              |
| SUCRALFATE 1 GM/10ML SUSPENSION<br><i>sucralfate</i>                                        | - Added to Tier 1     |                                              |
| TEFLARO 400 MG RECON SOLN<br><i>ceftaroline fosamil</i>                                     | - Formulary Removal   | <i>ceftaroline fosamil 400 mg recon soln</i> |

| EFFECTIVE 05/2026                                                                       |                       |                                              |
|-----------------------------------------------------------------------------------------|-----------------------|----------------------------------------------|
| Drug Name                                                                               | Description of Change | Alternative                                  |
| TEFLARO 600 MG RECON SOLN<br><i>ceftaroline fosamil</i>                                 | - Formulary Removal   | <i>ceftaroline fosamil 600 mg recon soln</i> |
| TENIVAC 5-2 LF/0.5ML SUSPENSION<br><i>tetanus-diphtheria toxoids (td)</i>               | - Added               |                                              |
| TRUE COMFORT PRO PEN NEEDLES 31G X 8 MM MISC<br><i>insulin pen needle</i>               | - Added to Tier 2     |                                              |
| ULTICARE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC<br><i>insulin syringe/needle u-100</i> | - Added to Tier 2     |                                              |
| ULTICARE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC<br><i>insulin syringe/needle u-100</i> | - Added to Tier 2     |                                              |
| ULTICARE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC<br><i>insulin syringe/needle u-100</i> | - Added to Tier 2     |                                              |
| ULTICARE PEN NEEDLES 29G X 12.7MM MISC<br><i>insulin pen needle</i>                     | - Added to Tier 2     |                                              |
| ULTICARE SHORT PEN NEEDLES 31G X 8 MM MISC<br><i>insulin pen needle</i>                 | - Added to Tier 2     |                                              |
| <i>vilazodone hcl tab 10 mg</i>                                                         | - ST Removed          |                                              |
| <i>vilazodone hcl tab 20 mg</i>                                                         | - ST Removed          |                                              |
| <i>vilazodone hcl tab 40 mg</i>                                                         | - ST Removed          |                                              |
| XPOVIO (80 MG ONCE WEEKLY) 80 MG TAB THPK<br><i>selinexor</i>                           | - LA Removed          |                                              |

**EFFECTIVE 05/2026**

| <b>Drug Name</b>                                                                      | <b>Description of Change</b> | <b>Alternative</b>                                 |
|---------------------------------------------------------------------------------------|------------------------------|----------------------------------------------------|
| ZYLET 0.5-0.3 % SUSPENSION<br><i>loteprednol etabonate-tobramycin</i>                 | - Formulary Removal          | <i>loteprednol-tobramycin 0.5-0.3 % suspension</i> |
| AMLODIPINE-OLMESARTAN 10-20 MG TAB<br><i>amlodipine besylate-olmesartan medoxomil</i> | - Added to Tier 1            |                                                    |
| AMLODIPINE-OLMESARTAN 10-40 MG TAB<br><i>amlodipine besylate-olmesartan medoxomil</i> | - Added to Tier 1            |                                                    |
| AMLODIPINE-OLMESARTAN 5-20 MG TAB<br><i>amlodipine besylate-olmesartan medoxomil</i>  | - Added to Tier 1            |                                                    |
| AMLODIPINE-OLMESARTAN 5-40 MG TAB<br><i>amlodipine besylate-olmesartan medoxomil</i>  | - Added to Tier 1            |                                                    |

| EFFECTIVE 06/2026                                                   |                                                              |                                       |
|---------------------------------------------------------------------|--------------------------------------------------------------|---------------------------------------|
| Drug Name                                                           | Description of Change                                        | Alternative                           |
| BILDYOS 60 MG/ML SOLN PRSYR<br><i>denosumab-nxxp</i>                | - Added to Tier 3<br>- Added<br>- QL Added: 1 / 28 DAYS      |                                       |
| BILPREVDA 120 MG/1.7ML SOLUTION<br><i>denosumab-nxxp</i>            | - Added to Tier 4<br>- Added                                 |                                       |
| BRIVIACT 10 MG TAB<br><i>brivaracetam</i>                           | - Formulary Removal                                          | <i>brivaracetam 10 mg tab</i>         |
| BRIVIACT 10 MG/ML SOLUTION<br><i>brivaracetam</i>                   | - Formulary Removal                                          | <i>brivaracetam 10 mg/ml solution</i> |
| BRIVIACT 100 MG TAB<br><i>brivaracetam</i>                          | - Formulary Removal                                          | <i>brivaracetam 100 mg tab</i>        |
| BRIVIACT 25 MG TAB<br><i>brivaracetam</i>                           | - Formulary Removal                                          | <i>brivaracetam 25 mg tab</i>         |
| BRIVIACT 50 MG TAB<br><i>brivaracetam</i>                           | - Formulary Removal                                          | <i>brivaracetam 50 mg tab</i>         |
| BRIVIACT 75 MG TAB<br><i>brivaracetam</i>                           | - Formulary Removal                                          | <i>brivaracetam 75 mg tab</i>         |
| <i>dapagliflozin free base-metformin hcl tab er 24hr 10-1000 mg</i> | - Added to Tier 1<br>- QL Change: 1 / 1 DAYS to 30 / 30 DAYS |                                       |
| <i>dapagliflozin free base-metformin hcl tab er 24hr 10-500 mg</i>  | - Added to Tier 1<br>- QL Change: 1 / 1 DAYS to 30 / 30 DAYS |                                       |

| EFFECTIVE 06/2026                                                  |                                                                                                                                          |             |
|--------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| Drug Name                                                          | Description of Change                                                                                                                    | Alternative |
| <i>dapagliflozin free base-metformin hcl tab er 24hr 5-1000 mg</i> | <ul style="list-style-type: none"> <li>- Added to Tier 1</li> <li>- QL Change: 2 / 1 DAYS to 60 / 30 DAYS</li> </ul>                     |             |
| <i>dapagliflozin free base-metformin hcl tab er 24hr 5-500 mg</i>  | <ul style="list-style-type: none"> <li>- Added to Tier 1</li> <li>- QL Change: 1 / 1 DAYS to 30 / 30 DAYS</li> </ul>                     |             |
| <i>dapagliflozin tab 10 mg</i>                                     | <ul style="list-style-type: none"> <li>- Tier Decreased: Tier 2 to Tier 1</li> <li>- QL Added: 1 / 1 DAYS</li> </ul>                     |             |
| <i>dapagliflozin tab 5 mg</i>                                      | <ul style="list-style-type: none"> <li>- Tier Decreased: Tier 2 to Tier 1</li> <li>- QL Added: 1 / 1 DAYS</li> </ul>                     |             |
| <i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>    | <ul style="list-style-type: none"> <li>- QL Change: 1 / 30 DAYS to 1 / 30 OVER TIME</li> </ul>                                           |             |
| IDVYNZO 100-0.25 MG TAB<br><i>doravirine-islatravir</i>            | <ul style="list-style-type: none"> <li>- Added to Tier 3</li> <li>- QL Added: 1 / 1 DAYS</li> </ul>                                      |             |
| JAKAFI XR 11 MG TAB ER 24H<br><i>ruxolitinib phosphate</i>         | <ul style="list-style-type: none"> <li>- Added to Tier 4</li> <li>- Added</li> <li>- QL Added: 1 / 1 DAYS</li> <li>- LA Added</li> </ul> |             |
| JAKAFI XR 22 MG TAB ER 24H<br><i>ruxolitinib phosphate</i>         | <ul style="list-style-type: none"> <li>- Added to Tier 4</li> <li>- Added</li> <li>- QL Added: 1 / 1 DAYS</li> <li>- LA Added</li> </ul> |             |

**EFFECTIVE 06/2026**

| <b>Drug Name</b>                                                              | <b>Description of Change</b>                                                                                                        | <b>Alternative</b> |
|-------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| JAKAFI XR 33 MG TAB ER 24H<br><i>ruxolitinib phosphate</i>                    | <ul style="list-style-type: none"><li>- Added to Tier 4</li><li>- Added</li><li>- QL Added: 1 / 1 DAYS</li><li>- LA Added</li></ul> |                    |
| JAKAFI XR 44 MG TAB ER 24H<br><i>ruxolitinib phosphate</i>                    | <ul style="list-style-type: none"><li>- Added to Tier 4</li><li>- Added</li><li>- QL Added: 1 / 1 DAYS</li><li>- LA Added</li></ul> |                    |
| JAKAFI XR 55 MG TAB ER 24H<br><i>ruxolitinib phosphate</i>                    | <ul style="list-style-type: none"><li>- Added to Tier 4</li><li>- Added</li><li>- QL Added: 1 / 1 DAYS</li><li>- LA Added</li></ul> |                    |
| LIFYORLI (125 MG DOSE) 1 X 25 MG & 1 X 100 MG CAP THPK<br><i>relacorilant</i> | <ul style="list-style-type: none"><li>- Added to Tier 4</li><li>- Added</li></ul>                                                   |                    |
| LIFYORLI (150 MG DOSE) 2 X 25 MG & 1 X 100 MG CAP THPK<br><i>relacorilant</i> | <ul style="list-style-type: none"><li>- Added to Tier 4</li><li>- Added</li></ul>                                                   |                    |
| LYBALVI 10-10 MG TAB<br><i>olanzapine-samidorphan l-malate</i>                | <ul style="list-style-type: none"><li>- Added to Tier 4</li><li>- Added</li></ul>                                                   |                    |
| LYBALVI 15-10 MG TAB<br><i>olanzapine-samidorphan l-malate</i>                | <ul style="list-style-type: none"><li>- Added to Tier 4</li><li>- Added</li></ul>                                                   |                    |
| LYBALVI 20-10 MG TAB<br><i>olanzapine-samidorphan l-malate</i>                | <ul style="list-style-type: none"><li>- Added to Tier 4</li><li>- Added</li></ul>                                                   |                    |
| LYBALVI 5-10 MG TAB<br><i>olanzapine-samidorphan l-malate</i>                 | <ul style="list-style-type: none"><li>- Added to Tier 4</li><li>- Added</li></ul>                                                   |                    |

## EFFECTIVE 06/2026

| Drug Name                                                                  | Description of Change                                                                                                                                       | Alternative |
|----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| <i>nintedanib esylate cap 100 mg (base equivalent)</i>                     | <ul style="list-style-type: none"> <li>- Added to Tier 4</li> <li>- Added</li> <li>- QL Added: 60 / 30 DAYS</li> <li>- LA Removed</li> </ul>                |             |
| <i>nintedanib esylate cap 150 mg (base equivalent)</i>                     | <ul style="list-style-type: none"> <li>- Added to Tier 4</li> <li>- Added</li> <li>- QL Change: 2 / 1 DAYS to 60 / 30 DAYS</li> <li>- LA Removed</li> </ul> |             |
| <i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>              | <ul style="list-style-type: none"> <li>- Added to Tier 1</li> </ul>                                                                                         |             |
| <i>nitroglycerin oint 2%</i>                                               | <ul style="list-style-type: none"> <li>- Added to Tier 1</li> </ul>                                                                                         |             |
| OZEMPIC 1.5 MG TAB<br><i>semaglutide</i>                                   | <ul style="list-style-type: none"> <li>- Added to Tier 2</li> <li>- Added</li> <li>- QL Added: 1 / 1 DAYS</li> </ul>                                        |             |
| OZEMPIC 4 MG TAB<br><i>semaglutide</i>                                     | <ul style="list-style-type: none"> <li>- Added to Tier 2</li> <li>- Added</li> <li>- QL Added: 1 / 1 DAYS</li> </ul>                                        |             |
| OZEMPIC 9 MG TAB<br><i>semaglutide</i>                                     | <ul style="list-style-type: none"> <li>- Added to Tier 2</li> <li>- Added</li> <li>- QL Added: 1 / 1 DAYS</li> </ul>                                        |             |
| SECURESAFE SAFETY PEN NEEDLES 31G X 5 MM MISC<br><i>insulin pen needle</i> | <ul style="list-style-type: none"> <li>- Added to Tier 2</li> </ul>                                                                                         |             |
| TRAMADOL HCL ER (BIPHASIC) 100 MG TAB ER 24H<br><i>tramadol hcl</i>        | <ul style="list-style-type: none"> <li>- Formulary Removal</li> </ul>                                                                                       |             |

| EFFECTIVE 06/2026                                                                |                       |             |
|----------------------------------------------------------------------------------|-----------------------|-------------|
| Drug Name                                                                        | Description of Change | Alternative |
| TRAMADOL HCL ER (BIPHASIC) 200 MG TAB ER 24H<br><i>tramadol hcl</i>              | - Formulary Removal   |             |
| TRAMADOL HCL ER (BIPHASIC) 300 MG TAB ER 24H<br><i>tramadol hcl</i>              | - Formulary Removal   |             |
| XIGDUO XR 10-1000 MG TAB ER 24H<br><i>dapagliflozin free base-metformin hcl</i>  | - Removed             |             |
| XIGDUO XR 2.5-1000 MG TAB ER 24H<br><i>dapagliflozin free base-metformin hcl</i> | - Removed             |             |
| XIGDUO XR 5-1000 MG TAB ER 24H<br><i>dapagliflozin free base-metformin hcl</i>   | - Removed             |             |

| EFFECTIVE 07/2026                                                                                                          |                                                                    |             |
|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------|
| Drug Name                                                                                                                  | Description of Change                                              | Alternative |
| <i>abacavir sulfate tab 300 mg (base equiv)</i>                                                                            | - Added to Tier 1<br>- QL Added: 2 / 1 DAYS                        |             |
| <i>acyclovir cap 200 mg</i>                                                                                                | - Added to Tier 1                                                  |             |
| <i>allopurinol tab 300 mg</i>                                                                                              | - Added to Tier 1                                                  |             |
| <i>ampicillin &amp; sulbactam sodium for inj 3 (2-1) gm</i>                                                                | - Added to Tier 3                                                  |             |
| <i>atenolol tab 100 mg</i>                                                                                                 | - Added to Tier 1                                                  |             |
| <i>atenolol tab 50 mg</i>                                                                                                  | - Added to Tier 1                                                  |             |
| <i>atorvastatin calcium tab 10 mg (base equivalent)</i>                                                                    | - Added to Tier 1                                                  |             |
| <i>atorvastatin calcium tab 20 mg (base equivalent)</i>                                                                    | - Added to Tier 1                                                  |             |
| <i>atorvastatin calcium tab 40 mg (base equivalent)</i>                                                                    | - Added to Tier 1                                                  |             |
| <i>atorvastatin calcium tab 80 mg (base equivalent)</i>                                                                    | - Added to Tier 1                                                  |             |
| AUVELITY TITRATION PACK 30-105 MG & 45-105 MG TBER<br>THPK<br><i>dextromethorphan hydrobromide-bupropion hydrochloride</i> | - Added to Tier 3<br>- Added<br>- QL Added: 102 / 365 OVER<br>TIME |             |
| <i>bosutinib tab 100 mg</i>                                                                                                | - Added to Tier 4<br>- QL Added: 120 / 30 DAYS<br>- Added          |             |

| EFFECTIVE 07/2026                                                                                     |                                                          |             |
|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------|
| Drug Name                                                                                             | Description of Change                                    | Alternative |
| <i>bosutinib tab 500 mg</i>                                                                           | - Added to Tier 4<br>- Added<br>- QL Added: 30 / 30 DAYS |             |
| <i>bumetanide tab 2 mg</i>                                                                            | - Added to Tier 1                                        |             |
| <i>buprenorphine hcl sl tab 2 mg (base equiv)</i>                                                     | - Added to Tier 1                                        |             |
| <i>buprenorphine hcl sl tab 8 mg (base equiv)</i>                                                     | - Added to Tier 1                                        |             |
| <i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>                                    | - Added to Tier 1                                        |             |
| <i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>                                   | - Added to Tier 1                                        |             |
| <i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>                                     | - Added to Tier 1                                        |             |
| <i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>                                     | - Added to Tier 1                                        |             |
| <i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>                                    | - Added to Tier 1                                        |             |
| <i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>                                      | - Added to Tier 1                                        |             |
| BOSULIF 100 MG TAB<br><i>bosutinib</i>                                                                | - QL Change: 4 / 1 DAYS to<br>120 / 30 DAYS              |             |
| BOSULIF 500 MG TAB<br><i>bosutinib</i>                                                                | - QL Change: 1 / 1 DAYS to<br>30 / 30 DAYS               |             |
| BREZTRI AEROSPHERE 160-18-4.8 MCG/ACT AEROSOL<br><i>budesonide-glycopyrrolate-formoterol fumarate</i> | - Added to Tier 2<br>- QL Added: 10.7 gm / 30<br>DAYS    |             |

| EFFECTIVE 07/2026                                   |                                             |             |
|-----------------------------------------------------|---------------------------------------------|-------------|
| Drug Name                                           | Description of Change                       | Alternative |
| <i>ciprofloxacin hcl tab 250 mg (base equiv)</i>    | - Added to Tier 1                           |             |
| <i>ciprofloxacin hcl tab 500 mg (base equiv)</i>    | - Added to Tier 1                           |             |
| <i>clarithromycin tab 500 mg</i>                    | - Added to Tier 1                           |             |
| <i>clindamycin hcl cap 300 mg</i>                   | - Added to Tier 1                           |             |
| <i>colchicine tab 0.6 mg</i>                        | - Added to Tier 1<br>- QL Added: 4 / 1 DAYS |             |
| <i>cyclobenzaprine hcl tab 10 mg</i>                | - Added to Tier 1                           |             |
| <i>deferasirox tab for oral susp 250 mg</i>         | - Added to Tier 4                           |             |
| <i>deferasirox tab for oral susp 500 mg</i>         | - Added to Tier 4                           |             |
| <i>diclofenac sodium (actinic keratoses) gel 3%</i> | - Added to Tier 1<br>- Added                |             |
| <i>divalproex sodium tab er 24 hr 500 mg</i>        | - Added to Tier 1                           |             |
| <i>doxepin hcl cap 10 mg</i>                        | - Added to Tier 1<br>- Added                |             |
| <i>ethosuximide soln 250 mg/5ml</i>                 | - Added to Tier 1                           |             |
| <i>everolimus tab 0.25 mg</i>                       | - Added to Tier 1                           |             |
| <i>everolimus tab 0.5 mg</i>                        | - Added to Tier 1                           |             |
| <i>everolimus tab 0.75 mg</i>                       | - Added to Tier 1                           |             |

| EFFECTIVE 07/2026                                                                  |                                                   |             |
|------------------------------------------------------------------------------------|---------------------------------------------------|-------------|
| Drug Name                                                                          | Description of Change                             | Alternative |
| <i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>                    | - QL Change: 1 / 30 OVER TIME to 4 / 28 OVER TIME |             |
| <i>gemfibrozil tab 600 mg</i>                                                      | - Added to Tier 1                                 |             |
| <i>glimepiride tab 2 mg</i>                                                        | - Added to Tier 1                                 |             |
| <i>ibuprofen tab 800 mg</i>                                                        | - Added to Tier 1                                 |             |
| <i>levothyroxine sodium tab 112 mcg</i>                                            | - Added to Tier 1                                 |             |
| <i>levothyroxine sodium tab 88 mcg</i>                                             | - Added to Tier 1                                 |             |
| LENVIMA (10 MG DAILY DOSE) 10 MG CAP THPK<br><i>lenvatinib mesylate</i>            | - QL Change: 1 / 1 DAYS to 30 / 30 DAYS           |             |
| LENVIMA (12 MG DAILY DOSE) 3 X 4 MG CAP THPK<br><i>lenvatinib mesylate</i>         | - QL Change: 3 / 1 DAYS to 90 / 30 DAYS           |             |
| LENVIMA (14 MG DAILY DOSE) 10 & 4 MG CAP THPK<br><i>lenvatinib mesylate</i>        | - QL Change: 2 / 1 DAYS to 60 / 30 DAYS           |             |
| LENVIMA (18 MG DAILY DOSE) 10 MG & 2 X 4 MG CAP THPK<br><i>lenvatinib mesylate</i> | - QL Change: 3 / 1 DAYS to 90 / 30 DAYS           |             |
| LENVIMA (20 MG DAILY DOSE) 2 X 10 MG CAP THPK<br><i>lenvatinib mesylate</i>        | - QL Change: 2 / 1 DAYS to 60 / 30 DAYS           |             |
| LENVIMA (24 MG DAILY DOSE) 2 X 10 MG & 4 MG CAP THPK<br><i>lenvatinib mesylate</i> | - QL Change: 3 / 1 DAYS to 90 / 30 DAYS           |             |

| EFFECTIVE 07/2026                                                         |                                                          |                                      |
|---------------------------------------------------------------------------|----------------------------------------------------------|--------------------------------------|
| Drug Name                                                                 | Description of Change                                    | Alternative                          |
| LENVIMA (4 MG DAILY DOSE) 4 MG CAP THPK<br><i>lenvatinib mesylate</i>     | - QL Change: 1 / 1 DAYS to 30 / 30 DAYS                  |                                      |
| LENVIMA (8 MG DAILY DOSE) 2 X 4 MG CAP THPK<br><i>lenvatinib mesylate</i> | - QL Change: 2 / 1 DAYS to 60 / 30 DAYS                  |                                      |
| <i>macitentan tab 10 mg</i>                                               | - Added to Tier 4<br>- Added<br>- QL Added: 30 / 30 DAYS |                                      |
| <i>metoclopramide hcl tab 10 mg (base equivalent)</i>                     | - Added to Tier 1                                        |                                      |
| <i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>           | - Added to Tier 1                                        |                                      |
| <i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>            | - Added to Tier 1                                        |                                      |
| <i>nystatin cream 100000 unit/gm</i>                                      | - Added to Tier 1                                        |                                      |
| <i>olanzapine tab 20 mg</i>                                               | - Added to Tier 1                                        |                                      |
| <i>omeprazole cap delayed release 10 mg</i>                               | - Added to Tier 1                                        |                                      |
| OFEV 100 MG CAP<br><i>nintedanib esylate</i>                              | - Formulary Removal                                      | <i>nintedanib esylate 100 mg cap</i> |
| OFEV 150 MG CAP<br><i>nintedanib esylate</i>                              | - Formulary Removal                                      | <i>nintedanib esylate 150 mg cap</i> |
| <i>paliperidone tab er 24hr 1.5 mg</i>                                    | - Added to Tier 1<br>- Added<br>- QL Added: 1 / 1 DAYS   |                                      |

## EFFECTIVE 07/2026

| Drug Name                                            | Description of Change                                  | Alternative |
|------------------------------------------------------|--------------------------------------------------------|-------------|
| <i>paliperidone tab er 24hr 3 mg</i>                 | - Added to Tier 1<br>- Added<br>- QL Added: 1 / 1 DAYS |             |
| <i>paliperidone tab er 24hr 6 mg</i>                 | - Added to Tier 1<br>- Added<br>- QL Added: 2 / 1 DAYS |             |
| <i>paliperidone tab er 24hr 9 mg</i>                 | - Added to Tier 1<br>- Added<br>- QL Added: 1 / 1 DAYS |             |
| <i>pantoprazole sodium ec tab 40 mg (base equiv)</i> | - Added to Tier 1                                      |             |
| <i>pindolol tab 10 mg</i>                            | - Added to Tier 1                                      |             |
| <i>pindolol tab 5 mg</i>                             | - Added to Tier 1                                      |             |
| <i>pregabalin cap 100 mg</i>                         | - Added to Tier 1<br>- QL Added: 3 / 1 DAYS            |             |
| <i>propranolol hcl tab 20 mg</i>                     | - Added to Tier 1                                      |             |
| <i>quetiapine fumarate tab 100 mg</i>                | - Added to Tier 1                                      |             |
| <i>quetiapine fumarate tab 200 mg</i>                | - Added to Tier 1                                      |             |
| <i>quetiapine fumarate tab 300 mg</i>                | - Added to Tier 1                                      |             |
| <i>rabeprazole sodium ec tab 20 mg</i>               | - Added to Tier 1                                      |             |

## EFFECTIVE 07/2026

| Drug Name                                                 | Description of Change                                  | Alternative |
|-----------------------------------------------------------|--------------------------------------------------------|-------------|
| <i>ramelteon tab 8 mg</i>                                 | - Added to Tier 1<br>- QL Added: 1 / 1 DAYS            |             |
| REXULTI 0.5 MG TAB<br><i>brexpiprazole</i>                | - Added to Tier 4<br>- Added<br>- QL Added: 1 / 1 DAYS |             |
| REXULTI 1 MG TAB<br><i>brexpiprazole</i>                  | - Added to Tier 4<br>- Added<br>- QL Added: 1 / 1 DAYS |             |
| REXULTI 2 MG TAB<br><i>brexpiprazole</i>                  | - Added to Tier 4<br>- Added<br>- QL Added: 1 / 1 DAYS |             |
| REXULTI 3 MG TAB<br><i>brexpiprazole</i>                  | - Added to Tier 4<br>- Added<br>- QL Added: 1 / 1 DAYS |             |
| REXULTI 4 MG TAB<br><i>brexpiprazole</i>                  | - Added to Tier 4<br>- Added<br>- QL Added: 1 / 1 DAYS |             |
| <i>sildenafil citrate tab 100 mg</i>                      | - Added to Tier 1<br>- Change                          |             |
| <i>sildenafil citrate tab 25 mg</i>                       | - Added to Tier 1<br>- Change                          |             |
| <i>sildenafil citrate tab 50 mg</i>                       | - Added to Tier 1<br>- Added                           |             |
| <i>sitagliptin phosphate-metformin hcl tab 50-1000 mg</i> | - Added to Tier 1<br>- QL Added: 60 / 30 DAYS          |             |

| EFFECTIVE 07/2026                                              |                                                              |             |
|----------------------------------------------------------------|--------------------------------------------------------------|-------------|
| Drug Name                                                      | Description of Change                                        | Alternative |
| <i>sitagliptin phosphate-metformin hcl tab 50-500 mg</i>       | - Added to Tier 1<br>- QL Added: 60 / 30 DAYS                |             |
| <i>solifenacin succinate tab 10 mg</i>                         | - Added to Tier 1<br>- QL Added: 1 / 1 DAYS                  |             |
| <i>spironolactone tab 100 mg</i>                               | - Added to Tier 1                                            |             |
| <i>spironolactone tab 50 mg</i>                                | - Added to Tier 1                                            |             |
| <i>sumatriptan succinate inj 6 mg/0.5ml</i>                    | - Added to Tier 1                                            |             |
| <i>tacrolimus cap 0.5 mg</i>                                   | - Added to Tier 1                                            |             |
| <i>tofacitinib citrate oral soln 1 mg/ml (base equivalent)</i> | - Added to Tier 4<br>- QL Added: 300 ML / 30 DAYS<br>- Added |             |
| <i>tofacitinib citrate tab 10 mg (base equivalent)</i>         | - Added to Tier 4<br>- Added<br>- QL Added: 60 / 30 DAYS     |             |
| <i>tofacitinib citrate tab 5 mg (base equivalent)</i>          | - Added to Tier 4<br>- Added<br>- QL Added: 60 / 30 DAYS     |             |
| <i>tofacitinib citrate tab er 24hr 11 mg (base equivalent)</i> | - Added to Tier 4<br>- Added<br>- QL Added: 30 / 30 DAYS     |             |

## EFFECTIVE 07/2026

| Drug Name                                                                      | Description of Change                                                                                                  | Alternative                                               |
|--------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <i>tofacitinib citrate tab er 24hr 22 mg (base equivalent)</i>                 | <ul style="list-style-type: none"> <li>- Added to Tier 4</li> <li>- Added</li> <li>- QL Added: 30 / 30 DAYS</li> </ul> |                                                           |
| <i>topiramate oral soln 25 mg/ml</i>                                           | <ul style="list-style-type: none"> <li>- QL Change: 16 ML / 1 DAYS to 480 ML / 30 DAYS</li> </ul>                      |                                                           |
| <i>triazolam tab 0.25 mg</i>                                                   | <ul style="list-style-type: none"> <li>- Added to Tier 1</li> <li>- QL Added: 2 / 1 DAYS</li> </ul>                    |                                                           |
| <i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>                   | <ul style="list-style-type: none"> <li>- Added to Tier 1</li> <li>- QL Added: 2 / 1 DAYS</li> </ul>                    |                                                           |
| <i>voriconazole tab 50 mg</i>                                                  | <ul style="list-style-type: none"> <li>- Added to Tier 1</li> <li>- Added</li> </ul>                                   |                                                           |
| XIGDUO XR 10-500 MG TAB ER 24H<br><i>dapagliflozin free base-metformin hcl</i> | - Formulary Removal                                                                                                    | <i>dapaglifloz base-metformin er 10-500 mg tab er 24h</i> |
| XIGDUO XR 5-500 MG TAB ER 24H<br><i>dapagliflozin free base-metformin hcl</i>  | - Formulary Removal                                                                                                    | <i>dapaglifloz base-metformin er 5-500 mg tab er 24h</i>  |

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