



Blue Shield Inspire (HMO D-SNP)

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.

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

Drug Name	Description of Change	Alternative
Acthar 80 Unit/ML Gel	Removed from formulary (drug list)	Cortrophin 80 Unit/ML Gel - Tier 5
Advair Diskus 100-50 Mcg/Act Aer Pow Ba	Added to Tier 3	-
Advair Diskus 250-50 Mcg/Act Aer Pow Ba	Added to Tier 3	-
Advair Diskus 500-50 Mcg/Act Aer Pow Ba	Added to Tier 3	-
Advair Hfa 115-21 Mcg/Act Aerosol	Added to Tier 3	-
Advair Hfa 230-21 Mcg/Act Aerosol	Added to Tier 3	-
Advair Hfa 45-21 Mcg/Act Aerosol	Added to Tier 3	-
Albendazole 200 Mg Tab	Moved to higher tier - Tier 5	-
Amiodarone Hcl 100 Mg Tab	Moved to higher tier - Tier 4	amiodarone hcl 200 mg tab; Pacerone 200 mg tab - Tier 1
Amiodarone Hcl 400 Mg Tab	Moved to higher tier - Tier 4	amiodarone hcl 200 mg tab; Pacerone 200 mg tab - Tier 1
Amitiza 24 Mcg Cap	Removed from formulary (drug list)	Lubiprostone 24 Mcg Cap - Tier 3
Amitiza 8 Mcg Cap	Removed from formulary (drug list)	Lubiprostone 8 Mcg Cap - Tier 3
Armodafinil 150 Mg Tab	Added to Tier 4	-
Armodafinil 200 Mg Tab	Added to Tier 4	-
Armodafinil 250 Mg Tab	Added to Tier 4	-
Armodafinil 50 Mg Tab	Added to Tier 4	-
Azopt 1 % Suspension	Removed from formulary (drug list)	Brinzolamide 1 % Suspension - Tier 3
Baclofen 5 Mg Tab	Updated quantity limit	-
Breo Ellipta 100-25 Mcg/Inh Aer Pow Ba	Added to Tier 3	-
Breo Ellipta 200-25 Mcg/Inh Aer Pow Ba	Added to Tier 3	-
Breztri Aerosphere 160-9-4.8 Mcg/Act Aerosol	Added to Tier 3	-
Butorphanol Tartrate 1 Mg/ML Solution	Added BvD prior authorization	-

Drug Name	Description of Change	Alternative
Butorphanol Tartrate 2 Mg/ML Solution	Added BvD prior authorization	-
Carbidopa 25 Mg Tab	Moved to lower tier - Tier 4	-
Colcrys 0.6 Mg Tab	Removed from formulary (drug list)	Colchicine 0.6 Mg Tab - Tier 3
Compro 25 Mg Suppos	Moved to higher tier - Tier 4	meclizine hcl 12.5 mg, 25 mg tab; ondansetron 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp, prochlorperazine 5 mg, 10 mg tab - Tier 2
Diclofenac Sodium 3 % Gel	Updated quantity limit	-
Dificid 200 Mg Tab	Added to Tier 5	-
Dificid 40 Mg/ML Recon Susp	Added to Tier 5	-
Disopyramide Phosphate 100 Mg Cap	Removed from formulary (drug list)	amiodarone hcl 200 mg tab; flecainide acetate 50 mg, 100 mg, 150 mg tab; mexiletine hcl 150 mg, 200 mg, 250 mg cap; Pacerone 200 mg tab; Propafenone hcl 150 mg, 225 mg, 300 mg tab; quinidine sulfate 200 mg, 300 mg tab; sorine 80 mg, 120 mg, 160 mg, 240 mg tab; sotalol hcl (af) 80 mg, 120 mg, 160 mg; sotalol hcl 80 mg, 120 mg, 160 mg, 240 mg tab - Tier 2
Disopyramide Phosphate 150 Mg Cap	Removed from formulary (drug list)	amiodarone hcl 200 mg tab; flecainide acetate 50 mg, 100 mg, 150 mg tab; mexiletine hcl 150 mg, 200 mg, 250 mg cap; Pacerone 200 mg tab; Propafenone hcl 150 mg, 225 mg, 300 mg tab; quinidine sulfate 200 mg, 300 mg tab; sorine 80 mg, 120 mg, 160 mg, 240 mg tab; sotalol hcl (af) 80 mg, 120 mg, 160 mg; sotalol hcl 80 mg, 120 mg, 160 mg, 240 mg tab - Tier 2
Durysta 10 Mcg Implant	Added BvD prior authorization	-
Entecavir 0.5 Mg Tab	Moved to lower tier - Tier 4	-
Entecavir 1 Mg Tab	Moved to lower tier - Tier 4	-
Etidronate Disodium 200 Mg Tab	Removed from formulary (drug list)	Alendronate Sodium 40 MG TAB - Tier 1

Drug Name	Description of Change	Alternative
Fluvoxamine Maleate 100 Mg Tab	Added quantity limit	-
Fluvoxamine Maleate 25 Mg Tab	Added quantity limit	-
Fluvoxamine Maleate 50 Mg Tab	Added quantity limit	-
Gemtesa 75 Mg Tab	Added to Tier 4	-
Glassia 1000 Mg/50MI Solution	Added BvD prior authorization	-
Golytely 227.1 Gm Recon Soln	Added to Tier 3	-
Golytely 236 Gm Recon Soln	Added to Tier 3	-
Golytely 236 Gm Recon Soln	Added to Tier 3	-
Granisetron Hcl 1 Mg Tab	Moved to higher tier - Tier 4	ondansetron hcl 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp - Tier 2
Humulin R U-500 (Concentrated) 500 Unit/MI Solution	Moved to lower tier - Tier 3	-
Humulin R U-500 Kwikpen 500 Unit/MI Soln Pen	Moved to lower tier - Tier 3	-
Ilevro 0.3 % Suspension	Updated quantity limit	-
Ionosol-Mb In D5W Solution	Added BvD prior authorization	-
Kcl (In Nacl 0.9%) 30 Meq/100MI Solution	Added BvD prior authorization	-
Kcl-Lidocaine In D5W 20-10 Meq-Mg /100MI Solution	Added BvD prior authorization	-
Kerendia 10 Mg Tab	Added to Tier 4	-
Kerendia 20 Mg Tab	Added to Tier 4	-
Ketorolac Tromethamine 10 Mg Tab	Added quantity limit	-
Krystexxa 8 Mg/MI Solution	Removed from formulary (drug list) and added BvD prior authorization	Allopurinol 100 mg, 300 mg tab - Tier 2
Levalbuterol Hcl 1.25 Mg/0.5MI Nebu Soln	Moved to higher tier - Tier 4	albuterol sulfate (2.5 mg/3ml) 0.083%, (5 mg/ml) 0.5%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml nebu soln - Tier 2
Magnesium Sulfate 50 % Solution	Added to Tier 4	-
Magnesium Sulfate 50 % Solution	Added to Tier 4	-
Methylprednisolone Sodium Succ 125 Mg Recon Soln	Added BvD prior authorization	-

Drug Name	Description of Change	Alternative
Miconazole 3 200 Mg Suppos	Moved to higher tier - Tier 4	terconazole 0.4%, 0.8% cream - Tier 3
Modafinil 100 Mg Tab	Added prior authorization	-
Modafinil 200 Mg Tab	Added prior authorization	-
Morphine Sulfate (Pf) 1 Mg/MI Solution	Added BvD prior authorization	-
Naloxone Hcl 0.4 Mg/MI Soln Cart	Removed quantity limit	-
Naratriptan Hcl 1 Mg Tab	Moved to higher tier - Tier 3	sumatriptan succinate 25 mg, 50 mg, 100 mg tab; rizatriptan benzoate 5 mg, 10 mg tab, 5 mg, 10 mg tab disp - Tier 2
Naratriptan Hcl 2.5 Mg Tab	Moved to higher tier - Tier 3	sumatriptan succinate 25 mg, 50 mg, 100 mg tab; rizatriptan benzoate 5 mg, 10 mg tab, 5 mg, 10 mg tab disp - Tier 2
Narcan 4 Mg/0.1MI Liquid	Removed from formulary (drug list)	Naloxone hcl 4 mg/ 0.1 ml liquid - Tier 2
Neut 4 % Solution	Added BvD prior authorization	-
Nityr 10 Mg Tab	Removed from formulary (drug list)	nitisinone 10 mg cap - Tier 5
Nityr 2 Mg Tab	Removed from formulary (drug list)	nitisinone 2 mg cap - Tier 5
Nityr 5 Mg Tab	Removed from formulary (drug list)	nitisinone 5 mg cap - Tier 5
Normosol-R In D5W Solution	Added BvD prior authorization	-
Nulytely Lemon-Lime 420 Gm Recon Soln	Added to Tier 3	-
Nulytely With Flavor Packs 420 Gm Recon Soln	Added to Tier 3	-
Ondansetron Hcl 4 Mg/5MI Solution	Moved to higher tier - Tier 4	ondansetron hcl 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp - Tier 2
Oxbryta 300 Mg Tab Sol	Removed from formulary (drug list)	Hydroxyurea 500 mg cap - Tier 2
Oxbryta 500 Mg Tab	Removed from formulary (drug list)	Hydroxyurea 500 mg cap - Tier 2
Pacerone 100 Mg Tab	Moved to higher tier - Tier 4	amiodarone hcl 200 mg tab, Pacerone 200 mg tab - Tier 2
Pacerone 400 Mg Tab	Moved to higher tier - Tier 4	amiodarone hcl 200 mg tab, Pacerone 200 mg tab - Tier 2
Plenvu 140 Gm Recon Soln	Added to Tier 3	-
Prempro 0.3-1.5 Mg Tab	Removed quantity limit	-

Drug Name	Description of Change	Alternative
Prempro 0.45-1.5 Mg Tab	Removed quantity limit	-
Prempro 0.625-2.5 Mg Tab	Removed quantity limit	-
Prempro 0.625-5 Mg Tab	Removed quantity limit	-
Prezista 75 Mg Tab	Updated quantity limit	-
Prochlorperazine 25 Mg Suppos	Moved to higher tier - Tier 4	meclizine hcl 12.5 mg, 25 mg tab; ondansetron 4 mg, 8 mg, 24 mg tab; ondansetron 4 mg, 8 mg tab disp, prochlorperazine 5 mg, 10 mg tab - Tier 2
Prograf 1 Mg Packet	Moved to lower tier - Tier 4	-
Pyridostigmine Bromide 60 Mg Tab	Removed quantity limit	-
Revatio 10 Mg/12.5ML Solution	Added BvD prior authorization	-
Revlimid 10 Mg Cap	Added to Tier 5	-
Revlimid 15 Mg Cap	Added to Tier 5	-
Revlimid 25 Mg Cap	Added to Tier 5	-
Revlimid 5 Mg Cap	Added to Tier 5	-
Selzentry 75 Mg Tab	Updated quantity limit	-
Serostim 4 Mg Recon Soln	Removed from formulary (drug list)	-
Serostim 5 Mg Recon Soln	Removed from formulary (drug list)	-
Serostim 6 Mg Recon Soln	Removed from formulary (drug list)	-
Sildenafil Citrate 10 Mg/12.5ML Solution	Added BvD prior authorization	-
Striverdi Respimat 2.5 Mcg/Act Aero Soln	Removed from formulary (drug list)	Serevent Diskus 50 mcg/dose aer pow ba - Tier 3
Symbicort 160-4.5 Mcg/Act Aerosol	Added to Tier 3	-
Symbicort 80-4.5 Mcg/Act Aerosol	Added to Tier 3	-
Tekturna Hct 150-12.5 Mg Tab	Removed from formulary (drug list)	aliskiren fumarate 150 mg tab - Tier 3
Tekturna Hct 150-25 Mg Tab	Removed from formulary (drug list)	aliskiren fumarate 150 mg tab - Tier 3
Tekturna Hct 300-12.5 Mg Tab	Removed from formulary (drug list)	aliskiren fumarate 300 mg tab - Tier 3
Tekturna Hct 300-25 Mg Tab	Removed from formulary (drug list)	aliskiren fumarate 300 mg tab - Tier 3
Terconazole 80 Mg Suppos	Moved to higher tier - Tier 4	terconazole 0.4%, 0.8% cream - Tier 3
Tranexamic Acid 1000 Mg/10ML Solution	Removed from formulary (drug list) and added BvD prior authorization	Tranexamic acid tab 650 mg - Tier 3

Drug Name	Description of Change	Alternative
Triamterene-Hctz 37.5-25 Mg Cap	Moved to lower tier - Tier 1	-
Vyzulta 0.024 % Solution	Added to Tier 4	-
Xiidra 5 % Solution	Added to Tier 3	-
Zilretta 32 Mg Srer	Added BvD prior authorization	-

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