



**Blue Shield of California Medicare Rx Plan (PDP)**

**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 vaccines 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.

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

**EFFECTIVE 02/2026**

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

**EFFECTIVE 02/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
BOSULIF 500 MG TAB <i>bosutinib</i>	- Change	
<i>chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg</i>	- Added to Tier 1 - 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 <i>chlordiazepoxide hcl-clidinium bromide</i>	- Added to Tier 1 - QL Added: 8 / 1 DAYS	
COMFORT EZ INSULIN SYRINGE 27G X 1/2" 1 ML MISC <i>insulin syringe/needle u-100</i>	- Added to Tier 2	
COVARYX 1.25-2.5 MG TAB <i>esterified estrogens &amp; methyltestosterone</i>	- Change	
COVARYX HS 0.625-1.25 MG TAB <i>esterified estrogens &amp; methyltestosterone</i>	- Change	
DIFICID 200 MG TAB <i>fidaxomicin</i>	- Formulary Removal	<i>fidaxomicin 200 mg tab</i>
DROPSAFE AUTOPROTECT DUO 31G X 4 MM MISC <i>insulin pen needle</i>	- Added to Tier 2	
DROPSAFE AUTOPROTECT DUO 31G X 5 MM MISC <i>insulin pen needle</i>	- Added to Tier 2	
DROPSAFE AUTOPROTECT DUO 31G X 8 MM MISC <i>insulin pen needle</i>	- Added to Tier 2	

<b>EFFECTIVE 02/2026</b>		
<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
EEMT 1.25-2.5 MG TAB <i>esterified estrogens &amp; methyltestosterone</i>	- Change	
EEMT HS 0.625-1.25 MG TAB <i>esterified estrogens &amp; methyltestosterone</i>	- Change	
<i>esterified estrogens &amp; methyltestosterone tab 0.625-1.25 mg</i>	- Added to Tier 1 - Change	
<i>esterified estrogens &amp; methyltestosterone tab 1.25-2.5 mg</i>	- Added to Tier 1 - Added	
EST ESTROGENS-METHYLTEST 1.25-2.5 MG TAB <i>esterified estrogens &amp; methyltestosterone</i>	- Added to Tier 1 - Added	
EST ESTROGENS-METHYLTEST DS 1.25-2.5 MG TAB <i>esterified estrogens &amp; methyltestosterone</i>	- Change	
EST ESTROGENS-METHYLTEST HS 0.625-1.25 MG TAB <i>esterified estrogens &amp; methyltestosterone</i>	- Added to Tier 1 - Added	
ESTRATEST H.S. 0.625-1.25 MG TAB <i>esterified estrogens &amp; methyltestosterone</i>	- Added to Tier 1 - Added	
GLEOSTINE 10 MG CAP <i>lomustine</i>	- Formulary Removal	<i>lomustine 10 mg cap</i>
GLEOSTINE 100 MG CAP <i>lomustine</i>	- Formulary Removal	<i>lomustine 100 mg cap</i>
GLEOSTINE 40 MG CAP <i>lomustine</i>	- Formulary Removal	<i>lomustine 40 mg cap</i>

**EFFECTIVE 02/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
<i>hydrocortisone acetate suppos 25 mg</i>	- Added to Tier 1 - Added	
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	- Change	
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	- Added to Tier 1 - Added	
<i>hyoscyamine sulfate soln 0.125 mg/ml</i>	- Added to Tier 1 - Change	
<i>hyoscyamine sulfate tab 0.125 mg</i>	- Added to Tier 1 - Added	
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	- Added to Tier 1 - Change	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	- Change	
HEMMOREX-HC 25 MG SUPPOS <i>hydrocortisone acetate (rectal)</i>	- Change	
HYDROCORTISONE ACETATE 25 MG SUPPOS <i>hydrocortisone acetate (rectal)</i>	- Added to Tier 1 - Added	
HYOSCYAMINE SULFATE 0.125 MG SL TAB <i>hyoscyamine sulfate</i>	- Added to Tier 1 - Added	
HYOSCYAMINE SULFATE 0.125 MG TAB DISP <i>hyoscyamine sulfate</i>	- Change	

**EFFECTIVE 02/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
HYOSCYAMINE SULFATE 0.125 MG TAB <i>hyoscyamine sulfate</i>	- Added to Tier 1 - Change	
HYOSCYAMINE SULFATE 0.125 MG/5ML ELIXIR <i>hyoscyamine sulfate</i>	- Change	
HYOSCYAMINE SULFATE 0.125 MG/ML SOLUTION <i>hyoscyamine sulfate</i>	- Change	
HYOSCYAMINE SULFATE ER 0.375 MG TAB ER 12H <i>hyoscyamine sulfate</i>	- Added to Tier 1 - Added	
HYOSCYAMINE SULFATE SL 0.125 MG SL TAB <i>hyoscyamine sulfate</i>	- Change	
HYOSYNE 0.125 MG/5ML ELIXIR <i>hyoscyamine sulfate</i>	- Change	
HYOSYNE 0.125 MG/ML SOLUTION <i>hyoscyamine sulfate</i>	- Change	
JANUVIA 100 MG TAB <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 - 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 <i>leucovorin calcium</i>	- Added to Tier 1	

**EFFECTIVE 02/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
<i>methadone hcl tab for oral susp 40 mg</i>	- NDS Added - 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 <i>hyoscyamine sulfate</i>	- Change	
OSCIMIN 0.125 MG SL TAB <i>hyoscyamine sulfate</i>	- Change	
OSCIMIN 0.125 MG TAB <i>hyoscyamine sulfate</i>	- Change	
PAZOPANIB HCL 400 MG TAB <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 - Added	
PB-HYOSCY-ATROPINE-SCOPOLAMINE 16.2 MG TAB <i>phenobarbital-hyoscyamine-atropine-scopolamine</i>	- Change	
PB-HYOSCY-ATROPINE-SCOPOLAMINE 16.2 MG/5ML ELIXIR <i>phenobarbital-hyoscyamine-atropine-scopolamine</i>	- Change	
<i>phenazopyridine hcl tab 100 mg</i>	- Added to Tier 1 - Change	
<i>phenazopyridine hcl tab 200 mg</i>	- Added to Tier 1 - Change	

<b>EFFECTIVE 02/2026</b>		
<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
<i>phenobarbital elixir 20 mg/5ml</i>	- Added to Tier 1 - Added	
<i>phenobarbital tab 100 mg</i>	- Added to Tier 1 - Added	
<i>phenobarbital tab 15 mg</i>	- Added to Tier 1 - Added	
<i>phenobarbital tab 16.2 mg</i>	- Added to Tier 1 - Added	
<i>phenobarbital tab 30 mg</i>	- Added to Tier 1 - Added	
<i>phenobarbital tab 32.4 mg</i>	- Added to Tier 1 - Added	
<i>phenobarbital tab 60 mg</i>	- Added to Tier 1 - Added	
<i>phenobarbital tab 64.8 mg</i>	- Added to Tier 1 - Added	
<i>phenobarbital tab 97.2 mg</i>	- Added to Tier 1 - Added	
PHENOBARBITAL 100 MG TAB <i>phenobarbital</i>	- Added to Tier 1 - Added	

**EFFECTIVE 02/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
PHENOBARBITAL 15 MG TAB <i>phenobarbital</i>	- Added to Tier 1 - Added	
PHENOBARBITAL 16.2 MG TAB <i>phenobarbital</i>	- Added to Tier 1 - Added	
PHENOBARBITAL 20 MG/5ML ELIXIR <i>phenobarbital</i>	- Added to Tier 1 - Added	
PHENOBARBITAL 30 MG TAB <i>phenobarbital</i>	- Added to Tier 1 - Added	
PHENOBARBITAL 30 MG/7.5ML ELIXIR <i>phenobarbital</i>	- Added to Tier 1 - Added	
PHENOBARBITAL 32.4 MG TAB <i>phenobarbital</i>	- Added to Tier 1 - Added	
PHENOBARBITAL 60 MG TAB <i>phenobarbital</i>	- Added to Tier 1 - Added	
PHENOBARBITAL 60 MG/15ML ELIXIR <i>phenobarbital</i>	- Added to Tier 1 - Added	
PHENOBARBITAL 64.8 MG TAB <i>phenobarbital</i>	- Added to Tier 1 - Added	
PHENOBARBITAL 97.2 MG TAB <i>phenobarbital</i>	- Added to Tier 1 - Added	
<i>pot &amp; sod citrates w/ cit ac soln 550-500-334 mg/5ml</i>	- Change	

<b>EFFECTIVE 02/2026</b>		
<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
<i>potassium citrate &amp; citric acid soln 1100-334 mg/5ml</i>	- Change	
PHENAZOPYRIDINE HCL 100 MG TAB <i>phenazopyridine hcl</i>	- Added to Tier 1 - Added	
PHENAZOPYRIDINE HCL 200 MG TAB <i>phenazopyridine hcl</i>	- Added to Tier 1 - Added	
PHENOHYTRO 16.2 MG TAB <i>phenobarbital-hyoscyamine-atropine-scopolamine</i>	- Change	
PHENOHYTRO 16.2 MG/5ML ELIXIR <i>phenobarbital-hyoscyamine-atropine-scopolamine</i>	- Added to Tier 1 - QL Added: 40 / 1 DAYS - Change	
PHOSPHO-TRIN K500 500 MG TAB <i>potassium phosphate monobasic</i>	- Change	
POT & SOD CIT-CIT AC 550-500-334 MG/5ML SOLUTION <i>pot &amp; sod citrates w/citric ac</i>	- Change	
POTASSIUM CITRATE-CITRIC ACID 1100-334 MG/5ML SOLUTION <i>potassium citrate-citric acid</i>	- Added to Tier 1 - Added	
PREMARIN 0.45 MG TAB <i>estrogens, conjugated</i>	- Formulary Removal	<i>estrogens conjugated 0.45 mg tab</i>
PREMARIN 0.9 MG TAB <i>estrogens, conjugated</i>	- Formulary Removal	<i>estrogens conjugated 0.9 mg tab</i>

**EFFECTIVE 02/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
PREMARIN 1.25 MG TAB <i>estrogens, conjugated</i>	- Formulary Removal	<i>estrogens conjugated 1.25 mg tab</i>
PULMOSAL 7 % NEBU SOLN <i>sodium chloride (inhalant)</i>	- Change	
RYCLORA 2 MG/5ML SOLUTION <i>dexchlorpheniramine maleate</i>	- Formulary Removal	
<i>salsalate tab 500 mg</i>	- Added to Tier 1	
<i>salsalate tab 750 mg</i>	- Added to Tier 1	
SSS 10-5 10-5 % CREAM <i>sulfacetamide sodium w/ sulfur</i>	- Change	
<i>sulfacetamide sodium w/ sulfur cream 10-5%</i>	- Change	
SALSALATE 750 MG TAB <i>salsalate</i>	- Added to Tier 1	
SHINGRIX 50 MCG/0.5ML SUSP PRSYR <i>zoster vaccine recombinant adjuvanted</i>	- Added to Tier 2 - QL Added: 1 ML / 365 DAYS	
SOD CITRATE-CITRIC ACID 1.5-1 GM/15ML SOLUTION <i>sodium citrate &amp; citric acid</i>	- Added to Tier 1 - Added	
SOD CITRATE-CITRIC ACID 3-2 GM/30ML SOLUTION <i>sodium citrate &amp; citric acid</i>	- Added to Tier 1 - Change	

**EFFECTIVE 02/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
SOD CITRATE-CITRIC ACID 500-334 MG/5ML SOLUTION <i>sodium citrate &amp; citric acid</i>	- Change	
SODIUM CHLORIDE 10 % NEBU SOLN <i>sodium chloride (inhalant)</i>	- Change	
SODIUM CHLORIDE 7 % NEBU SOLN <i>sodium chloride (inhalant)</i>	- Change	
SODIUM CITRATE-CITRIC ACID 1500-1002 MG/15ML SOLUTION <i>sodium citrate &amp; citric acid</i>	- Change	
SODIUM CITRATE-CITRIC ACID 3000-2004 MG/30ML SOLUTION <i>sodium citrate &amp; citric acid</i>	- Change	
SODIUM FLUORIDE 0.55 (0.25 F) MG CHEW TAB <i>sodium fluoride</i>	- Added to Tier 1	
SODIUM FLUORIDE 1.1 (0.5 F) MG CHEW TAB <i>sodium fluoride</i>	- Added to Tier 1	
SODIUM FLUORIDE 2.2 (1 F) MG CHEW TAB <i>sodium fluoride</i>	- Added to Tier 1	
SULFACETAMIDE SODIUM-SULFUR 10-5 % CREAM <i>sulfacetamide sodium w/ sulfur</i>	- Added to Tier 1 - Added	
SULFACETAMIDE SODIUM-SULFUR 10-5 % LOTION <i>sulfacetamide sodium w/ sulfur</i>	- Change	

**EFFECTIVE 02/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
SULFACETAMIDE SODIUM-SULFUR 10-5 % SUSPENSION <i>sulfacetamide sodium w/ sulfur</i>	- Change	
TRACLEER 32 MG TAB SOL <i>bosentan</i>	- Formulary Removal	<i>bosentan 32 mg tab sol</i>
TRICITRATES 550-500-334 MG/5ML SOLUTION <i>pot &amp; sod citrates w/citric ac</i>	- Added to Tier 1 - Change	

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

**EFFECTIVE 03/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
JYNARQUE 60 & 30 MG TAB THPK <i>tolvaptan</i>	- Formulary Removal	<i>tolvaptan 60 &amp; 30 mg tab thpk</i>
JYNARQUE 90 & 30 MG TAB THPK <i>tolvaptan</i>	- Formulary Removal	<i>tolvaptan 90 &amp; 30 mg tab thpk</i>
KOMZIFTI 200 MG CAP <i>ziftomenib</i>	- Added to Tier 5 - Added	
KOSELUGO 5 MG CAP SPRINK <i>selumetinib sulfat</i>	- LA Removed	
KOSELUGO 7.5 MG CAP SPRINK <i>selumetinib sulfat</i>	- LA Removed	
LAGEVRIO 200 MG CAP <i>molnupiravir</i>	- Added to Tier 5	
<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 TAB THPK <i>nirmatrelvir-ritonavir</i>	- Added to Tier 1 - QL Added: 11 / 30 OVER TIME	

**EFFECTIVE 03/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
<i>sevelamer carbonate tab 800 mg</i>	- Added to Tier 1 - Added	
<i>sodium oxybate oral solution 500 mg/ml</i>	- Added to Tier 5 - Added - QL Added: 540 / 30 DAYS - LA Added	
SUBVENITE 10 MG/ML SUSPENSION <i>lamotrigine</i>	- Added to Tier 5 - Added	
<i>tolvaptan tab 15 mg</i>	- Added to Tier 5 - Added - QL Change: 1 / 1 DAYS to 8 / 1 DAYS	
<i>tolvaptan tab 30 mg</i>	- Added to Tier 5 - Added - QL Change: 2 / 1 DAYS to 4 / 1 DAYS	
<i>tolvaptan tab therapy pack 15 mg</i>	- Added to Tier 5 - Added	
<i>tolvaptan tab therapy pack 30 &amp; 15 mg</i>	- Added to Tier 5 - Added	
<i>tolvaptan tab therapy pack 45 &amp; 15 mg</i>	- Added to Tier 5 - Added	

**EFFECTIVE 03/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
<i>tolvaptan tab therapy pack 60 &amp; 30 mg</i>	- Added to Tier 5 - Added	
<i>tolvaptan tab therapy pack 90 &amp; 30 mg</i>	- Added to Tier 5 - Added	

**EFFECTIVE 04/2026**

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

**EFFECTIVE 04/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
CIPRO HC 0.2-1 % SUSPENSION <i>ciprofloxacin-hydrocortisone</i>	- Formulary Removal	<i>ciprofloxacin-hydrocortisone 0.2-1 % suspension</i>
FYCOMPA 0.5 MG/ML SUSPENSION <i>perampanel</i>	- Formulary Removal	<i>perampanel 0.5 mg/ml suspension</i>
HYRNUO 10 MG TAB <i>sevabertinib</i>	- LA Removed	
LACOSAMIDE 10 MG/ML SOLUTION <i>lacosamide</i>	- Added to Tier 1 - QL Added: 40 / 1 DAYS	
LAGEVRIO 200 MG CAP <i>molnupiravir</i>	- Added to Tier 5	
OFLOXACIN 400 MG TAB <i>ofloxacin</i>	- Added to Tier 1	
<i>pomalidomide cap 1 mg</i>	- Added to Tier 5 - Added - QL Added: 1 / 1 DAYS	
<i>pomalidomide cap 2 mg</i>	- Added to Tier 5 - Added - QL Added: 1 / 1 DAYS	
<i>pomalidomide cap 3 mg</i>	- Added to Tier 5 - Added - QL Added: 1 / 1 DAYS	

**EFFECTIVE 04/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
<i>pomalidomide cap 4 mg</i>	- Added to Tier 5 - Added - QL Added: 1 / 1 DAYS	
<i>rilpivirine hcl tab 25 mg (base equivalent)</i>	- Added to Tier 1 - QL Added: 2 / 1 DAYS	
<i>sevelamer carbonate tab 800 mg</i>	- Added to Tier 1 - Added	
<b>TOBRAMYCIN SULFATE 1.2 GM RECON SOLN</b> <i>tobramycin sulfate</i>	- Added to Tier 4	

**EFFECTIVE 05/2026**

<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
<i>budesonide delayed release particles cap 3 mg</i>	- Removed	
LUMIGAN 0.01 % SOLUTION <i>bimatoprost</i>	- QL Change: 5 / 30 DAYS to 5 ML / 30 DAYS	
MULTI-VITAMIN/FLUORIDE 0.25 MG/ML SUSPENSION <i>pediatric multivitamins w/fl</i>	- Change	
NISOLDIPINE ER 17 MG TAB ER 24H <i>nisoldipine</i>	- Added to Tier 1	
NISOLDIPINE ER 8.5 MG TAB ER 24H <i>nisoldipine</i>	- Added to Tier 1	
POMALYST 1 MG CAP <i>pomalidomide</i>	- Formulary Removal	<i>pomalidomide 1 mg cap</i>
POMALYST 2 MG CAP <i>pomalidomide</i>	- Formulary Removal	<i>pomalidomide 2 mg cap</i>
POMALYST 3 MG CAP <i>pomalidomide</i>	- Formulary Removal	<i>pomalidomide 3 mg cap</i>
POMALYST 4 MG CAP <i>pomalidomide</i>	- Formulary Removal	<i>pomalidomide 4 mg cap</i>
TEFLARO 400 MG RECON SOLN <i>ceftaroline fosamil</i>	- Formulary Removal	<i>ceftaroline fosamil 400 mg recon soln</i>
TEFLARO 600 MG RECON SOLN <i>ceftaroline fosamil</i>	- Formulary Removal	<i>ceftaroline fosamil 600 mg recon soln</i>

<b>EFFECTIVE 05/2026</b>		
<b>Drug Name</b>	<b>Description of Change</b>	<b>Alternative</b>
<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 <i>selinexor</i>	- LA Removed	
ZYLET 0.5-0.3 % SUSPENSION <i>loteprednol etabonate-tobramycin</i>	- Formulary Removal	<i>loteprednol-tobramycin</i> <i>0.5-0.3 % suspension</i>

The company complies with applicable state laws and federal civil rights laws and does not discriminate, exclude people, or treat them differently on the basis of race, color, national origin, ethnic group identification, medical condition, genetic information, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, mental disability, or physical disability. La compañía cumple con las leyes de derechos civiles federales y estatales aplicables, y no discrimina, ni excluye ni trata de manera diferente a las personas por su raza, color, país de origen, identificación con determinado grupo étnico, condición médica, información genética, ascendencia, religión, sexo, estado civil, género, identidad de género, orientación sexual, edad, ni discapacidad física ni mental. 本公司遵守適用的州法律和聯邦民權法律，並且不會以種族、膚色、原國籍、族群認同、醫療狀況、遺傳資訊、血統、宗教、性別、婚姻狀況、性別認同、性取向、年齡、精神殘疾或身體殘疾而進行歧視、排斥或區別對待他人。