

# PRESCRIPTION DRUG LIST CHANGES



Cigna Pharmacy Management®

2020

Below is a list of changes being made to the Cigna Prescription Drug List (formulary). **These changes may affect some of your employees and/or covered family members.** Changes are listed by formulary name, effective date and type of change. Drugs are then listed alphabetically by drug class.

## STANDARD FORMULARY

Start date of change <sup>*,**</sup>	Drug class	Drugs moving to preferred brand	
May 1, 2020	INFECTIONS	Symtuza	
March 10, 2020	ANTI-CONVULSANTS	Nayzilam	
March 1, 2020	DIABETES	Invokana	
		Invokamet	
		Invokamet XR	
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi	
January 1, 2020	ASTHMA/COPD/RESPIRATORY	albuterol HFA	
	CHOLESTEROL MEDICATIONS	Vascepa	
	DIABETES	Rybelsus	
		Segluromet	
	INFERTILITY	Gonal-F <sup>1</sup> , Gonal-F RFF <sup>1</sup>	
SEIZURE DISORDERS	Fycompa		
Start date of change <sup>*,**</sup>	Drug class	Drugs becoming non-preferred brand	Generic and/or preferred brand alternatives
July 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE	Subsys	fentanyl citrate lozenge or buccal tablet
March 25, 2020	SLEEP DISORDERS/SEDATIVES	Wakix	Customers should talk with their doctor about alternatives.
March 18, 2020	PARKINSON'S DISEASE	Nourianz	Customers should talk with their doctor about alternatives.

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

Together, all the way.®



## STANDARD FORMULARY (cont)

Start date of change**	Drug class	Drugs becoming non-preferred brand	Generic and/or preferred brand alternatives
March 17, 2020	INFECTIONS	Amzeeq	generic topical acne products (e.g. adapalene; tretinoin; clindamycin-benzoyl peroxide)
	PAIN RELIEF AND INFLAMMATORY DISEASE	Gloperba	colchicine, probenecid/colchicine
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg	pyridostigmine 60mg tablet
January 1, 2020	AIDS/HIV	Retrovir vial <sup>1</sup>	zidovudine
	BLOOD MODIFIERS/BLEEDING DISORDERS	Berinert	Customers should talk with their doctor about alternatives.
		Cinryze	
		Kalbitor	
		Ruconest	
	HORMONAL AGENTS	Cytome <sup>2</sup>	liothyronine
	INFECTIONS	Oracea	Generic products (e.g. doxycycline; minocycline)
		Stromectol <sup>2</sup>	ivermectin
	INFERTILITY	Follistim AQ <sup>1</sup>	Gonal-F, Gonal-F RFF, Gonal-F RFF Redi-ject
	NUTRITIONAL/DIETARY	VitaPearl <sup>2</sup>	generic prenatal vitamin
	PAIN RELIEF AND INFLAMMATORY DISEASE	Oxsoralen-Ultra <sup>2</sup>	methoxsalen
SKIN CONDITIONS	Ovace Plus <sup>2</sup>	sodium sulfacetamide	
	Pramosone <sup>2</sup>	hydrocortisone-pramoxine	
SLEEP DISORDERS/SEDATIVES	Seconal	eszopiclone, zaleplon, zolpidem, zolpidem ER, Silenor	

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
March 10, 2020	ANTI-CONVULSANTS	Nayzilam
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi
January 1, 2020	AIDS/HIV	abacavir <sup>5</sup>
		abacavir-lamivudine <sup>5</sup>
		abacavir-lamivudine-zidovudine <sup>5</sup>
		Aptivus <sup>5</sup>
		atazanavir <sup>5</sup>
		Atripla <sup>5</sup>
		Cimduo <sup>5</sup>
		Complera <sup>5</sup>
		Delstrigo <sup>5</sup>
		Descovy <sup>5</sup>
		Edurant <sup>5</sup>
		efavirenz <sup>5</sup>
		Emtriva <sup>5</sup>
		Evotaz <sup>5</sup>
fosamprenavir <sup>5</sup>		
Fuzeon <sup>5</sup>		

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## STANDARD FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	AIDS/HIV (cont)	Intelence <sup>5</sup>
		Invirase <sup>5</sup>
		Isentress HD <sup>5</sup>
		Juluca <sup>5</sup>
		Kaletra 100-25 mg, 200-50mg tablet <sup>5</sup>
		lamivudine <sup>5</sup>
		Lexiva suspension <sup>5</sup>
		lopinavir-ritonavir <sup>5</sup>
		nevirapine <sup>5</sup>
		nevirapine ER <sup>5</sup>
		Odefsey <sup>5</sup>
		Pifeltro <sup>5</sup>
		Prezcobix <sup>5</sup>
		Reyataz powder packet <sup>5</sup>
		Selzentry <sup>5</sup>
		Stribild <sup>5</sup>
		Symtuza <sup>5</sup>
		tenofovir <sup>5</sup>
		Viread 150mg, 200mg, 250mg, powder <sup>5</sup>
		ATTENTION DEFICIT HYPERACTIVITY DISORDER
amphetamine <sup>7</sup>		
dexamethylphenidate <sup>7</sup>		
dexamethylphenidate ER <sup>7</sup>		
dextroamphetamine <sup>7</sup>		
dextroamphetamine ER <sup>7</sup>		
dextroamphetamine-amphetamine <sup>7</sup>		
dextroamphetamine-amphetamine ER <sup>7</sup>		
Evekeo <sup>7</sup>		
Focalin <sup>7</sup>		
metadate ER <sup>7</sup>		
methamphetamine <sup>7</sup>		
Methylin <sup>7</sup>		
methylphenidate <sup>7</sup>		
methylphenidate CD <sup>7</sup>		
methylphenidate ER <sup>7</sup>		
methylphenidate ER (CD) <sup>7</sup>		
methylphenidate ER (LA) <sup>7</sup>		

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## STANDARD FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER (cont)	methylphenidate LA <sup>7</sup>
		procentra <sup>7</sup>
		Relexxii <sup>7</sup>
		Ritalin <sup>7</sup>
		Vyvanse capsule <sup>7</sup>
		Zenzedi <sup>7</sup>
	CHOLESTEROL MEDICATIONS	Praluent
		Vascepa <sup>4</sup>
	COUGH/COLD MEDICATIONS	hydrocodone-chlorpheniramine ER
		hydrocodone-homatropine MBR
		hydromet
		promethazine-codeine
		promethazine-phenylephrine-codeine
		Tuxarin ER
		Tuzistra XR
	HORMONAL AGENTS	Forteo <sup>6</sup>
	INFECTIONS	Cayston
		Coartem
		Kitabis Pak
		Plaquenil
		Qualaquin
		Tobi PodHaler
		tobramycin 300mg/5ml ampule, 300mg/5ml pak
		MISCELLANEOUS
	Ferriprox	
	Jadenu	
	OSTEOPOROSIS PRODUCTS	Tymlos <sup>6</sup>
SLEEP DISORDERS/SEDATIVES	Seconal	
	Sunosi	
WEIGHT MANAGEMENT	Adipex-P	
	Belviq	
	Belviq XR	
	Contrave	
	Qsymia	
	Saxenda	
	Xenical	

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## STANDARD FORMULARY (cont)

Start date of change <sup>*,**</sup>	Drug class	Drugs that will have a quantity limit <sup>3</sup>
March 25, 2020	SLEEP DISORDERS/SEDATIVES	Wakix
March 18, 2020	PARKINSON'S DISEASE	Nourianz
March 17, 2020	INFECTIONS	Amzeeq
March 10, 2020	ANIT-CONVULSANTS	Nayzilam
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER	Adderall XR
		Adzenys ER
		Adzenys XR-ODT
		Aptensio XR
		Concerta
		Cotempla XR-ODT
		Daytrana
		Dexedrine
		dexmethylphenidate ER <sup>7</sup>
		dextroamphetamine ER <sup>7</sup>
		dextroamphetamine-amphetamine ER <sup>7</sup>
		Dyanavel XR
		Focalin XR
		metadate ER <sup>7</sup>
		methylphenidate CD <sup>7</sup>
		methylphenidate ER <sup>7</sup>
		methylphenidate ER (CD) <sup>7</sup>
		methylphenidate ER (LA) <sup>7</sup>
		methylphenidate LA <sup>7</sup>
		Mydayis
		Quillichew ER
		Quillivant XR
		Relexxii <sup>7</sup>
		Ritalin LA
		Vyvanse capsule <sup>7</sup>
		Vyvanse chewable tablet
	DIABETES	Admelog <sup>11</sup> , Admelog Solostar <sup>11</sup>
		Afrezza
		Apidra <sup>11</sup> , Apidra Solostar <sup>11</sup>

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## STANDARD FORMULARY (cont)

Start date of change*,**	Drug class	Drugs that will have a quantity limit <sup>3</sup>
January 1, 2020	DIABETES (cont)	Basaglar <sup>11</sup>
		Farxiga 10mg
		Fiasp Flextouch <sup>11</sup>
		Glyxambi
		Humalog <sup>11</sup>
		Humulin <sup>11</sup>
		Insulin Lispro
		Invokamet
		Invokamet XR
		Invokana
		Janumet
		Janumet XR
		Januvia 100mg
		Jardiance
		Kazano
		Kombiglyze XR
		Lantus <sup>11</sup> , Lantus Solostar <sup>11</sup>
		Levemir <sup>11</sup>
		Nesina
		Novolin <sup>11</sup>
		Novolog <sup>11</sup>
		Onglyza
		Oseni
		Qtern
		Rybelsus
		Segluromet
		Steglatro
		Steglujan
		Synjardy
		Synjardy XR
		Toujeo <sup>11</sup>
Tresiba <sup>11</sup>		
Xigduo XR		
HORMONAL AGENTS	Forteo <sup>6</sup>	

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## STANDARD FORMULARY (cont)

Start date of change <sup>*,**</sup>	Drug class	Drugs that will have a quantity limit <sup>3</sup>	
January 1, 2020	INFECTIONS	Bethkis <sup>8</sup>	
		Cayston <sup>8</sup>	
		Kitabis Pak <sup>8</sup>	
		Tobi PodHaler <sup>8</sup>	
		Tobi solution <sup>8</sup>	
		tobramycin 300mg/5ml ampule, 300mg/5ml pak <sup>8</sup>	
		Xifaxan <sup>9</sup>	
	OSTEOPOROSIS PRODUCTS	Tymlos <sup>6</sup>	
	PAIN RELIEF AND INFLAMMATORY DISEASE	Actemra <sup>10</sup> , Actemra Actpen <sup>10</sup>	
		Cimzia <sup>10</sup>	
		Cosentyx <sup>10</sup>	
		Enbrel <sup>10</sup>	
		Humira <sup>10</sup>	
		Ilumya <sup>10</sup>	
		Kevzara <sup>10</sup>	
		Kineret <sup>10</sup>	
		Olumiant <sup>10</sup>	
		Orencia <sup>10</sup>	
		Otezla <sup>10</sup>	
		Siliq <sup>10</sup>	
Simponi <sup>10</sup>			
Stelara <sup>10</sup>			
Taltz <sup>10</sup>			
Tremfya <sup>10</sup>			
Xeljanz <sup>10</sup>			
Xeljanz XR <sup>10</sup>			
Start date of change <sup>*,**</sup>	Drug class	Drugs being added to Step Therapy Program <sup>3,12</sup>	Generic and/or preferred brand alternatives
July 1, 2020	DIABETES	Bydureon <sup>5</sup>	metformin
		Farxiga <sup>5</sup>	
		Glyxambi <sup>5</sup>	
		Invokamet <sup>5</sup>	
		Invokamet XR <sup>5</sup>	
		Invokana <sup>5</sup>	
		Janumet <sup>5</sup>	
		Janumet XR <sup>5</sup>	
		Januvia <sup>5</sup>	
		Jardiance <sup>5</sup>	
		Kombiglyze XR <sup>5</sup>	
		Onglyza <sup>5</sup>	
		Ozempic <sup>5</sup>	

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## STANDARD FORMULARY (cont)

Start date of change <sup>*,**</sup>	Drug class	Drugs being added to Step Therapy Program <sup>3,12</sup>	Generic and/or preferred brand alternatives
July 1, 2020	DIABETES (cont)	Qtern <sup>5</sup>	metformin
		Segluromet <sup>5</sup>	
		Synjardy <sup>5</sup>	
		Synjardy XR <sup>5</sup>	
		Trulicity <sup>5</sup>	
		Victoza <sup>5</sup>	
		Xigduo XR <sup>5</sup>	
January 1, 2020	BLOOD PRESSURE/HEART MEDICATIONS	Betapace AF	generic beta blockers (e.g. metoprolol)
		Bystolic	
		Coreg	
		Coreg CR	
		Corgard	
		Dutoprol	
		Inderal LA	
		Inderal XL	
		Innopran XL	
		Kaspargo Sprinkle	
		Lopressor	
		Lopressor HCT	
		Sotylize	
		Tenoretic 100	
		Tenoretic 50	
		Tenormin	
		Toprol XL	
		Ziac	
		DIABETES	
	Rybelsus		
Steglatro <sup>5</sup>			
Start date of change <sup>*,**</sup>	Drug class	Drugs that will no longer be covered <sup>13</sup>	Generic and/or preferred brand alternatives
July 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE	Subsys	fentanyl citrate lozenge or buccal tablet
		Xenazine	tetrabenazine
March 17, 2020	INFECTIONS	Amzeeq	generic topical acne products (e.g. adapalene, tretinoin, clindamycin-benzoyl peroxide)
	PAIN RELIEF AND INFLAMMATORY DISEASE	Gloperba	colchicine, probenecid/colchicine
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg	pyridostigmine 60mg tablet

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## STANDARD FORMULARY (cont)

Start date of change**	Drug class	Drugs that will no longer be covered <sup>13</sup>	Generic and/or preferred brand alternatives	
January 1, 2020	AIDS/HIV	Combivir	lamivudine-zidovudine	
		didanosine DR <sup>5</sup>	Customers should talk with their doctor about alternatives.	
		Epivir 10mg oral solution <sup>15</sup>	lamivudine	
		Epivir 150mg, 300mg tablet	lamivudine	
		Epzicom	abacavir-lamivudine	
		Retrovir syrup, capsule	zidovudine 100mg capsule, syrup	
		stavudine <sup>5</sup>	Customers should talk with their doctor about alternatives.	
		Trizivir	abacavir-lamivudine-zidovudine	
		Viramune suspension	nevirapine oral suspension	
		Viread 300mg tablet	tenofovir 300mg tablet	
		Ziagen	abacavir	
		ASTHMA/COPD/RESPIRATORY	Spiriva, Spiriva Respimat	Incruse Ellipta
			Stiolto Respimat	Anoro Ellipta
Striverdi Respimat	Serevent			
BLOOD MODIFIERS/BLEEDING DISORDERS	Firazyr	icatibant		
CANCER	Tarceva <sup>14</sup>	erlotinib		
	Zytiga 250mg <sup>16</sup>	abiraterone		
	Zytiga 500mg <sup>15</sup>	abiraterone		
DIABETES	alogliptin <sup>5</sup>	metformin, Janumet, Janumet XR, Januvia, Kombiglyze XR, Onglyza		
	alogliptin-metformin <sup>5</sup>	Janumet, Janumet XR, Januvia, Kombiglyze XR, Onglyza		
	alogliptin-pioglitazone <sup>5</sup>	pioglitazone, Janumet, Janumet XR, Januvia, Kombiglyze XR, Onglyza		
GASTROINTESTINAL/HEARTBURN	Colyte With Flavor Packets	Clenpiq, GaviLyte-C, GaviLyte-G, GaviLyte-N, Peg 3350-Electrolyte, Prepopik, SuPrep		
	Golytey	Clenpiq, GaviLyte-C, GaviLyte-G, GaviLyte-N, Peg 3350-Electrolyte, Prepopik, SuPrep		
	Moviprep	Clenpiq, GaviLyte-C, GaviLyte-G, GaviLyte-N, Peg 3350-Electrolyte, Prepopik, SuPrep		
	Nulytely With Flavor Packs	Clenpiq, GaviLyte-C, GaviLyte-G, GaviLyte-N, Peg 3350-Electrolyte, Prepopik, SuPrep		
	Osmoprep	Clenpiq, GaviLyte-C, GaviLyte-G, GaviLyte-N, Peg 3350-Electrolyte, Prepopik, SuPrep		

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## STANDARD FORMULARY (cont)

Start date of change <sup>*,**</sup>	Drug class	Drugs that will no longer be covered <sup>13</sup>	Generic and/or preferred brand alternatives
January 1, 2020	GASTROINTESTINAL/HEARTBURN (cont)	Plenvu	Clenpiq, GaviLyte-C, GaviLyte-G, GaviLyte-N, Peg 3350-Electrolyte, Prepopik, SuPrep
	INFECTIONS	doxycycline IR-DR	doxycycline, doxycycline monohydrate, minocycline ER
		Seysara	doxycycline, doxycycline monohydrate, minocycline ER
	MISCELLANEOUS	Syprine	Depen, penicillamine, trientine
	MULTIPLE SCLEROSIS	Aubagio <sup>5</sup>	Gilenya, Mayzent, Tecfidera
	NUTRITIONAL/DIETARY	Nascobal <sup>15</sup>	cyanocobalamin injection
	SKIN CONDITIONS	Enstilar	calcipotriene-betamethasone DP ointment, calcipotriene plus topical betamethasone, tazarotene cream
Taclonex		calcipotriene-betamethasone DP ointment, calcipotriene plus topical betamethasone, tazarotene cream	
Start date of change <sup>*,**</sup>	Drug class	Drugs that will be excluded from coverage	Additional information
January 1, 2020	INFECTIONS	Avidoxy DK	Customers should talk with their doctor about their options.
		Morgidox	

## VALUE FORMULARY

Start date of change <sup>*,**</sup>	Drug class	Drugs moving to preferred brand	
May 1, 2020	INFECTIONS	Symtuza	
March 10, 2020	ANTI-CONVULSANTS	Nayzilam	
March 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE	Morphabond	
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi	
January 1, 2020	ASTHMA/COPD/RESPIRATORY	albuterol HFA	
	CHOLESTEROL MEDICATIONS	Vascepa	
	DIABETES	Rybelsus	
		Segluromet	
		Steglatro	
	INFERTILITY	Gonal-F <sup>1</sup> , Gonal-F RFF <sup>1</sup>	
SEIZURE DISORDERS	Fycompa		
Start date of change <sup>*,**</sup>	Drug class	Drugs moving to non-preferred brand	Generic and/or preferred brand alternatives
March 25, 2020	SLEEP DISORDERS/SEDATIVES	Wakix	Customers should talk with their doctor about alternatives.
March 18, 2020	PARKINSON'S DISEASE	Nouriaz	Customers should talk with their doctor about alternatives.

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## VALUE FORMULARY (cont)

Start date of change**	Drug class	Drugs moving to non-preferred brand	Generic and/or preferred brand alternatives
March 17, 2020	INFECTIONS	Amzeeq	generic topical acne products (e.g. adapalene; tretinoin; clindamycin-benzoyl peroxide)
	PAIN RELIEF AND INFLAMMATORY DISEASE	Gloperba	colchicine, probenecid/colchicine
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg	pyridostigmine 60mg tablet
January 1, 2020	AIDS/HIV	Retrovir vial <sup>1</sup>	zidovudine
	BLOOD MODIFIERS/BLEEDING DISORDERS	Berinert	Customers should talk with their doctor about alternatives.
		Cinryze	Customers should talk with their doctor about alternatives.
		Kalbitor	Customers should talk with their doctor about alternatives.
		Ruconest	Customers should talk with their doctor about alternatives.
INFERTILITY	Follistim AQ <sup>1</sup>	Gonal-F, Gonal-F RFF, Gonal-F RFF Redi-ject	
Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>	
March 10, 2020	ANTI-CONVULSANTS	Nayzilam	
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi	
January 1, 2020	AIDS/HIV	abacavir <sup>5</sup>	
		abacavir-lamivudine <sup>5</sup>	
		abacavir-lamivudine-zidovudine <sup>5</sup>	
		Aptivus <sup>5</sup>	
		atazanavir <sup>5</sup>	
		Atripla <sup>5</sup>	
		Cimduo <sup>5</sup>	
		Complera <sup>5</sup>	
		Delstrigo <sup>5</sup>	
		Descovy <sup>5</sup>	
		Edurant <sup>5</sup>	
		efavirenz <sup>5</sup>	
		Emtriva <sup>5</sup>	
		Evotaz <sup>5</sup>	
		fosamprenavir <sup>5</sup>	
		Fuzeon <sup>5</sup>	
		Intelence <sup>5</sup>	
		Invirase <sup>5</sup>	
		Isentress HD <sup>5</sup>	
		Juluca <sup>5</sup>	
Kaletra 100-25 mg, 200-50mg tablet <sup>5</sup>			
lamivudine <sup>5</sup>			
Lexiva suspension <sup>5</sup>			
lopinavir-ritonavir <sup>5</sup>			
nevirapine <sup>5</sup>			
nevirapine ER <sup>5</sup>			

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## VALUE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	AIDS/HIV (cont)	Odefsey <sup>5</sup>
		Pifeltro <sup>5</sup>
		Prezcobix <sup>5</sup>
		Reyataz powder packet <sup>5</sup>
		Selzentry <sup>5</sup>
		Stribild <sup>5</sup>
		Symtuza <sup>5</sup>
		tenofovir <sup>5</sup>
		Viread 150mg, 200mg, 250mg, powder <sup>5</sup>
		ATTENTION DEFICIT HYPERACTIVITY DISORDER
amphetamine <sup>7</sup>		
dexmethylphenidate <sup>7</sup>		
dexmethylphenidate ER <sup>7</sup>		
dextroamphetamine <sup>7</sup>		
dextroamphetamine ER <sup>7</sup>		
dextroamphetamine-amphetamine <sup>7</sup>		
dextroamphetamine-amphetamine ER <sup>7</sup>		
Evekeo <sup>7</sup>		
Focalin <sup>7</sup>		
metadate ER <sup>7</sup>		
methamphetamine <sup>7</sup>		
Methylin <sup>7</sup>		
methylphenidate <sup>7</sup>		
methylphenidate CD <sup>7</sup>		
methylphenidate ER <sup>7</sup>		
methylphenidate ER (CD) <sup>7</sup>		
methylphenidate ER (LA) <sup>7</sup>		
methylphenidate LA <sup>7</sup>		
procentra <sup>7</sup>		
Relexxii <sup>7</sup>		
Ritalin <sup>7</sup>		
Zenzedi <sup>7</sup>		
CHOLESTEROL MEDICATIONS		Praluent
		Vascepa <sup>4</sup>
COUGH/COLD MEDICATIONS		hydrocodone-chlorpheniramine ER
		hydrocodone-homatropine MBR
		hydromet
		promethazine-codeine

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## VALUE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	COUGH/COLD MEDICATIONS (cont)	promethazine-phenylephrine-codeine
		Tuxarin ER
		Tuzistra XR
	HORMONAL AGENTS	Forteo <sup>6</sup>
	INFECTIONS	Cayston
		Coartem
		Kitabis Pak
		Plaquenil
		Qualaquin
		Tobi PodHaler
		tobramycin 300mg/5ml ampule, 300mg/5ml pak
	MISCELLANEOUS	Exjade
		Ferriprox
		Jadenu
	OSTEOPOROSIS PRODUCTS	Tymlos <sup>6</sup>
	SLEEP DISORDERS/SEDATIVES	Seconal
	WEIGHT MANAGEMENT	Adipex-P
Belviq		
Belviq XR		
Contrave		
Qsymia		
Saxenda		
Xenical		
Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>
March 25, 2020	SLEEP DISORDERS/SEDATIVES	Wakix
March 18, 2020	PARKINSON'S DISEASE	Nourianz
March 17, 2020	INFECTIONS	Amzeeq
March 10, 2020	ANTI-CONVULSANTS	Nayzilam
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER	Adderall XR
		Adzenys ER
		Adzenys XR-ODT
		Aptensio XR
		Concerta
		Cotempla XR-ODT
		Daytrana
Dexedrine		

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## VALUE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>		
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER (cont)	dexmethylphenidate ER		
		dextroamphetamine ER		
		dextroamphetamine-amphetamine ER		
		Dyanavel XR		
		Focalin XR		
		metadate ER		
		methylphenidate CD		
		methylphenidate ER		
		methylphenidate ER (CD)		
		methylphenidate ER (LA)		
		methylphenidate LA		
		Mydayis		
		Quillichew ER		
		Quillivant XR		
		Relexxii		
		Ritalin LA		
		Vyvanse capsule		
		Vyvanse chewable tablet		
		DIABETES		Admelog <sup>11</sup> , Admelog Solostar <sup>11</sup>
				Afrezza <sup>11</sup>
Apidra <sup>11</sup> , Apidra Solostar <sup>11</sup>				
Basaglar <sup>11</sup>				
Farxiga 10mg <sup>11</sup>				
Glyxambi				
Humalog <sup>11</sup>				
Humulin <sup>11</sup>				
Insulin Lispro <sup>11</sup>				
Invokamet				
Invokamet XR				
Invokana				
Janumet				
Janumet XR				
Januvia 100mg				
Jardiance				
Kazano				
Kombiglyze XR				
Lantus <sup>11</sup> , Lantus Solostar <sup>11</sup>				
Levemir <sup>11</sup>				

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## VALUE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>
January 1, 2020	DIABETES (cont)	Nesina
		Novolin <sup>11</sup>
		Novolog <sup>11</sup>
		Onglyza
		Oseni
		Qtern
		Rybelsus
		Segluromet
		Steglatro
		Steglujan
		Synjardy
		Synjardy XR
		Toujeo
		Tresiba
	Xigduo XR	
	HORMONAL AGENTS	Forteo <sup>6</sup>
	INFECTIONS	Bethkis <sup>8</sup>
		Cayston <sup>8</sup>
		Kitabis Pak <sup>8</sup>
		Tobi PodHaler <sup>8</sup>
		Tobi solution <sup>8</sup>
		tobramycin 300mg/5ml ampule, 300mg/5ml pak <sup>8</sup>
		Xifaxan <sup>9</sup>
	OSTEOPOROSIS PRODUCTS	Tymlos <sup>6</sup>
	PAIN RELIEF AND INFLAMMATORY DISEASE	Actemra <sup>10</sup> , Actemra Actpen <sup>10</sup>
		Cimzia <sup>10</sup>
		Cosentyx <sup>10</sup>
		Enbre <sup>10</sup>
		Humira <sup>10</sup>
		Ilumya <sup>10</sup>
		Kevzara <sup>10</sup>
		Kineret <sup>10</sup>
		Olumiant <sup>10</sup>
		Orencia <sup>10</sup>
		Otezla <sup>10</sup>
		Siliq <sup>10</sup>
		Simponi <sup>10</sup>
		Stelara <sup>10</sup>
		Taltz <sup>10</sup>
		Tremfya <sup>10</sup>
Xeljanz <sup>10</sup>		
Xeljanz XR <sup>10</sup>		

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## VALUE FORMULARY (cont)

Start date of change**	Drug class	Drugs being added to Step Therapy Program <sup>3,12</sup>	Generic and/or preferred brand alternatives
July 1, 2020	DIABETES	Bydureon <sup>5</sup>	metformin
		Farxiga <sup>5</sup>	
		Glyxambi <sup>5</sup>	
		Invokamet <sup>5</sup>	
		Invokamet XR <sup>5</sup>	
		Invokana <sup>5</sup>	
		Janumet <sup>5</sup>	
		Janumet XR <sup>5</sup>	
		Januvia <sup>5</sup>	
		Jardiance <sup>5</sup>	
		Kombiglyze XR <sup>5</sup>	
		Onglyza <sup>5</sup>	
		Ozempic <sup>5</sup>	
		Qtern <sup>5</sup>	
		Segluromet <sup>5</sup>	
		Synjardy <sup>5</sup>	
		Synjardy XR <sup>5</sup>	
		Trulicity <sup>5</sup>	
Victoza <sup>5</sup>			
Xigduo XR <sup>5</sup>			
January 1, 2020	BLOOD PRESSURE/HEART MEDICATIONS	Betapace AF	generic beta blockers (e.g. metoprolol)
		Coreg	
		Coreg CR	
		Corgard	
		Dutoprol	
		Inderal LA	
		Inderal XL	
		Innopran XL	
		Kapspargo Sprinkle	
		Lopressor	
		Lopressor HCT	
		Sotylize	
		Tenoretic 100	
		Tenoretic 50	
		Tenormin	
		Toprol XL	
		Ziac	
		DIABETES	
	Rybelsus		
	Steglatro <sup>5</sup>		

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## VALUE FORMULARY (cont)

Start date of change**	Drug class	Medications that will no longer be covered <sup>13</sup>	Generic and/or preferred brand alternatives
July 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE	Xenazine	tetrabenazine
March 17, 2020	INFECTIONS	Amzeeq	generic topical acne products (e.g. adapalene; tretinoin; clindamycin-benzoyl peroxide)
	PAIN RELIEF AND INFLAMMATORY DISEASE	Gloperba	colchicine, probenecid/colchicine
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg	pyridostigmine 60mg tablet
January 1, 2020	AIDS/HIV	Combivir	lamivudine-zidovudine
		didanosine DR <sup>5</sup>	Customers should talk with their doctor about alternatives.
		Epivir 10mg oral solution <sup>15</sup>	lamivudine
		Epivir 150mg, 300mg tablet	lamivudine
		Epzicom	abacavir-lamivudine
		Retrovir syrup, capsule	zidovudine 100mg capsule, syrup
		stavudine <sup>5</sup>	Customers should talk with their doctor about alternatives.
		Trizivir	abacavir-lamivudine-zidovudine
		Viramune suspension	nevirapine oral suspension
		Viread 300mg	tenofovir 300mg tablet
	Ziagen	abacavir	
	ASTHMA/COPD/RESPIRATORY	Striverdi Respimat	Serevent
	BLOOD MODIFIERS/BLEEDING DISORDERS	Firazyr	icatibant
	CANCER	Tarceva <sup>14</sup>	erlotinib
		Zytiga 250mg <sup>16</sup>	abiraterone
		Zytiga 500mg <sup>15</sup>	abiraterone
	DIABETES	alogliptin <sup>5</sup>	metformin, Janumet, Janumet XR, Januvia, Kombiglyze XR, Onglyza
alogliptin-metformin <sup>5</sup>		Janumet, Janumet XR, Januvia, Kombiglyze XR, Onglyza	
alogliptin-pioglitazone <sup>5</sup>		pioglitazone, Janumet, Janumet XR, Januvia, Kombiglyze XR, Onglyza	
GASTROINTESTINAL/HEARTBURN	Colyte With Flavor Packets	Clenpiq, GaviLyte-C, GaviLyte-G, GaviLyte-N, Peg 3350-Electrolyte, Prepopik, SuPrep	
	Golytely packet		
	Golytely solution		
	Moviprep		
	Nulytely With Flavor Packs		
	Osmoprep		
INFECTIONS	doxycycline IR-DR	doxycycline, doxycycline monohydrate, minocycline ER	
	Seysara		
MISCELLANEOUS	Syprine	Depen, penicillamine, trientine	
MULTIPLE SCLEROSIS	Aubagio <sup>5</sup>	Gilenya, Tecfidera	
NUTRITIONAL/DIETARY	Nascobal <sup>15</sup>	cyanocobalamin injection	

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## VALUE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will be excluded from coverage	Additional information
January 1, 2020	GASTROINTESTINAL/HEARTBURN	cimetidine tablet	Customers should talk with their doctor about their options.
		famotidine tablet	
		nizatidine capsule	
		pepcid	
		ranitidine	
	INFECTIONS	Avidoxy DK	
		Morgidox	

## LEGACY (STANDARD) FORMULARY

Start date of change**	Drug class	Drugs moving to preferred brand	
May 1, 2020	INFECTIONS	Symtuza	
March 10, 2020	ANTI-CONVULSANTS	Nayzilam	
March 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE	Morphabond	
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi	
January 1, 2020	ASTHMA/COPD/RESPIRATORY	albuterol HFA	
	CHOLESTEROL MEDICATIONS	Vascepa <sup>4</sup>	
	DIABETES	Rybelsus	
		Segluromet	
		Steglatro	
	INFERTILITY	Gonal-F <sup>1</sup> , Gonal-F RFF <sup>1</sup>	
SEIZURE DISORDERS	Fycompa		
Start date of change**	Drug class	Drugs moving to non-preferred brand	Generic and/or preferred brand alternatives
July 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE	Subsys	fentanyl citrate lozenge or buccal tablet
March 25, 2020	SLEEP DISORDERS/SEDATIVES	Wakix	Customers should talk with their doctor about alternatives.
March 18, 2020	PARKINSON'S DISEASE	Nouriaz	Customers should talk with their doctor about alternatives.
March 17, 2020	INFECTIONS	Amzeeq	generic topical acne products (e.g. adapalene; tretinoin; clindamycin-benzoyl peroxide)
	PAIN RELIEF AND INFLAMMATORY DISEASE	Gloperba	colchicine, probenecid/colchicine
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg	pyridostigmine 60mg tablet
January 1, 2020	AIDS/HIV	Epivir 10mg oral solution <sup>1</sup>	lamivudine
		Retrovir vial <sup>1</sup>	zidovudine
	ASTHMA/COPD/RESPIRATORY	Spiriva, Spiriva Respimat	Incruse Ellipta
		Stiolto Respimat	Anoro Ellipta
		Striverdi Respimat	Serevent

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## LEGACY (STANDARD) FORMULARY (cont)

Start date of change**	Drug class	Drugs moving to non-preferred brand	Generic and/or preferred brand alternatives
January 1, 2020	BLOOD MODIFIERS/BLEEDING DISORDERS	Berinert	Customers should talk with their doctor about alternatives.
		Cinryze	Customers should talk with their doctor about alternatives.
		Kalbitor	Customers should talk with their doctor about alternatives.
		Ruconest	Customers should talk with their doctor about alternatives.
	CANCER	Tarceva <sup>1,14</sup>	erlotinib
	CHOLESTEROL MEDICATIONS	Colestid	Colestipol tablet; granules; or packet
	GASTROINTESTINAL/HEARTBURN	Golytely packet	Clenpiq, GaviLyte-C, GaviLyte-G, GaviLyte-N, Peg 3350-Electrolyte, Prepopik, SuPrep
	HORMONAL AGENTS	AndroGel <sup>2</sup>	testosterone
		Cytome <sup>2</sup>	liothyronine
	INFECTIONS	Oracea	Generic products (e.g. doxycycline; minocycline)
		Stromectol <sup>2</sup>	ivermectin
	INFERTILITY	Follistim AQ <sup>1</sup>	Gonal-F, Gonal-F RFF, Gonal-F RFF Redi-ject
	MULTIPLE SCLEROSIS	Aubagio <sup>1</sup>	Gilenya, Tecfidera
	NUTRITIONAL/DIETARY	Nascobal	cyanocobalamin injection
		VitaPearl <sup>2</sup>	generic prenatal vitamin
	PAIN RELIEF AND INFLAMMATORY DISEASE	Oxsoralen-Ultra <sup>2</sup>	methoxsalen
	SKIN CONDITIONS	Ovace Plus <sup>2</sup>	sodium sulfacetamide
		Pramosone <sup>2</sup>	hydrocortisone-pramoxine
		Taclonex suspension	calcipotriene-betamethasone DP ointment, calcipotriene plus topical betamethasone, tazarotene cream
	SLEEP DISORDERS/SEDATIVES	Seconal	eszopiclone, zaleplon, zolpidem, zolpidem ER, Silenor
Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>	
March 17, 2020	INFECTIONS	Amzeeq	
	PAIN RELIEF AND INFLAMMATORY DISEASE	Gloperba	
March 10, 2020	ANTI-CONVULSANTS	Nayzilam	
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg	
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi	
January 1, 2020	AIDS/HIV	abacavir <sup>5</sup>	
		abacavir-lamivudine <sup>5</sup>	
		abacavir-lamivudine-zidovudine <sup>5</sup>	

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## LEGACY (STANDARD) FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	AIDS/HIV (cont)	Aptivus <sup>5</sup>
		atazanavir <sup>5</sup>
		Atripla <sup>5</sup>
		Cimduo <sup>5</sup>
		Combivir
		Complera <sup>5</sup>
		Crixivan <sup>5</sup>
		Delstrigo <sup>5</sup>
		Descovy <sup>5</sup>
		didanosine DR
		Edurant <sup>5</sup>
		efavirenz <sup>5</sup>
		Emtriva <sup>5</sup>
		Epivir 10mg oral solution
		Epivir 150mg, 300mg tablet
		Epzicom
		Evotaz <sup>5</sup>
		fosamprenavir <sup>5</sup>
		Fuzeon <sup>5</sup>
		Intelence <sup>5</sup>
		Invirase <sup>5</sup>
		Isentress HD <sup>5</sup>
		Juluca <sup>5</sup>
		Kaletra 100-25 mg, 200-50mg tablet <sup>5</sup>
		Kaletra solution
		lamivudine <sup>5</sup>
		Lexiva suspension <sup>5</sup>
		Lexiva tablet
		lopinavir-ritonavir <sup>5</sup>
		nevirapine <sup>5</sup>
		nevirapine ER <sup>5</sup>
		Norvir
		Odefsey <sup>5</sup>
		Pifeltro <sup>5</sup>
		Prezcobix <sup>5</sup>
		Rescriptor <sup>5</sup>
		Retrovir syrup, capsule
		Reyataz capsule
		Reyataz powder packet <sup>5</sup>
		Selzentry <sup>5</sup>
stavudine		

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## LEGACY (STANDARD) FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>	
January 1, 2020	AIDS/HIV (cont)	Stribild <sup>5</sup>	
		Sustiva	
		Symtuza <sup>5</sup>	
		tenofovir <sup>5</sup>	
		Trizivir	
		Videx <sup>5</sup>	
		Videx EC <sup>5</sup>	
		Viracept <sup>5</sup>	
		Viramune suspension, tablet	
		Viramune XR	
		Viread 150mg, 200mg, 250mg, powder <sup>5</sup>	
		Viread 300mg	
		Ziagen	
		ATTENTION DEFICIT HYPERACTIVITY DISORDER	Adderall <sup>7</sup>
			Adderall XR <sup>7</sup>
amphetamine <sup>7</sup>			
Aptensio XR <sup>7</sup>			
Concerta <sup>7</sup>			
Desoxyn <sup>7</sup>			
Dexedrine <sup>7</sup>			
dexamethylphenidate <sup>7</sup>			
dexamethylphenidate ER <sup>7</sup>			
dextroamphetamine <sup>7</sup>			
dextroamphetamine ER <sup>7</sup>			
dextroamphetamine-amphetamine <sup>7</sup>			
dextroamphetamine-amphetamine ER <sup>7</sup>			
Evekeo <sup>7</sup>			
Focalin <sup>7</sup>			
Focalin XR <sup>7</sup>			
metadate ER <sup>7</sup>			
methamphetamine <sup>7</sup>			
Methylin <sup>7</sup>			
methylphenidate <sup>7</sup>			
methylphenidate CD <sup>7</sup>			
methylphenidate ER <sup>7</sup>			
methylphenidate ER (CD) <sup>7</sup>			
methylphenidate ER (LA) <sup>7</sup>			
methylphenidate LA <sup>7</sup>			
Mydayis <sup>7</sup>			
procentra <sup>7</sup>			
Relexxii <sup>7</sup>			

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## LEGACY (STANDARD) FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER (cont)	Ritalin <sup>7</sup>
		Ritalin LA <sup>7</sup>
		Vyvanse capsule <sup>7</sup>
		Zenzedi <sup>7</sup>
	CHOLESTEROL MEDICATIONS	Vascepa <sup>4</sup>
	COUGH/COLD MEDICATIONS	hydrocodone-chlorpheniramine ER
		hydrocodone-homatropine MBR
		hydromet
		promethazine-codeine
		promethazine-phenylephrine-codeine
		Tussicaps
		Tuxarin ER
	DIABETES	Tuzistra XR
		alogliptin <sup>5</sup>
		alogliptin-metformin <sup>5</sup>
		alogliptin-pioglitazone <sup>5</sup>
		Jentadueto <sup>5</sup>
		Jentadueto XR <sup>5</sup>
		Kazano
		Nesina
	GASTROINTESTINAL/HEARTBURN	Oseni
		Tradjenta <sup>5</sup>
		Colyte With Flavor Packets
		Golytely packet
		Golytely solution
		Moviprep
		Nulytely With Flavor Packs
HORMONAL AGENTS	Osmoprep	
HORMONAL AGENTS	Plenvu	
HORMONAL AGENTS	Forteo <sup>6</sup>	
INFECTIONS	Arakoda	
	Bethkis <sup>17</sup>	
	Cayston <sup>17</sup>	
	Coartem	
	Kitabis Pak <sup>17</sup>	
	Plaquenil	
	Qualaquin	
	Seysara	
	Tobi PodHaler, 300mg/5ml solution <sup>17</sup>	
	tobramycin 300mg/5ml ampule, 300mg/5ml pak <sup>17</sup>	
MISCELLANEOUS	Exjade	
	Ferriprox	
	Jadenu	

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## LEGACY (STANDARD) FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	NUTRITIONAL/DIETARY	Nascobal
	OSTEOPOROSIS PRODUCTS	Tymlos <sup>6</sup>
	SKIN CONDITIONS	Enstilar
		Taclonex ointment
		Taclonex suspension
	SLEEP DISORDERS/SEDATIVES	Seconal
	WEIGHT MANAGEMENT	Adipex-P
		Belviq
		Belviq XR
		Contrave
		Qsymia
		Saxenda
		Xenical
Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>
March 25, 2020	SLEEP DISORDERS/SEDATIVES	Wakix
March 18, 2020	PARKINSON'S DISEASE	Nourianz
March 17, 2020	INFECTIONS	Amzeeq
March 10, 2020	ANTI-CONVULSANTS	Nayzilam
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER	Adderall XR
		Adzenys ER
		Adzenys XR-ODT
		Aptensio XR
		Concerta
		Cotempla XR-ODT
		Daytrana
		Dexedrine
		dexmethylphenidate ER
		dextroamphetamine ER
		dextroamphetamine-amphetamine ER
		Dyanavel XR
		Focalin XR
		metadate ER
		methylphenidate CD
methylphenidate ER		
methylphenidate ER (CD)		
methylphenidate ER (LA)		

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## LEGACY (STANDARD) FORMULARY (cont)

Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER (cont)	methylphenidate LA Mydayis Quillichew ER Quillivant XR Relexxii Ritalin LA Vyvanse capsule Vyvanse chewable tablet
	DIABETES	Admelog <sup>11</sup> , Admelog Solostar <sup>11</sup> Afrezza <sup>11</sup> alogliptin alogliptin-metformin alogliptin-pioglitazone Apidra <sup>11</sup> , Apidra Solostar <sup>11</sup> Basaglar <sup>11</sup> Farxiga 10mg Fiasp <sup>11</sup> Glyxambi Humalog <sup>11</sup> Humulin <sup>11</sup> Insulin Lispro <sup>11</sup> Invokamet Invokamet XR Invokana Janumet Janumet XR Januvia 100mg Jardiance Kazano Kombiglyze XR Lantus <sup>11</sup> , Lantus Solostar <sup>11</sup> Levemir <sup>11</sup> Nesina Novolin <sup>11</sup> Novolog <sup>11</sup> Onglyza Oseni Qtern Rybelsus Segluromet Steglatro Steglujan Synjardy

Generic medications start with a lowercase letter and brand name medications start with a capital letter.



## LEGACY (STANDARD) FORMULARY (cont)

Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>	
January 1, 2020	DIABETES (cont)	Synjardy XR	
		Toujeo <sup>11</sup>	
		Tresiba <sup>11</sup>	
		Xigduo XR	
	HORMONAL AGENTS	Forteo <sup>6</sup>	
	INFECTIONS	Bethkis <sup>17</sup>	
		Cayston <sup>17</sup>	
		Kitabis Pak <sup>17</sup>	
		Tobi PodHaler, 300mg/5ml solution <sup>17</sup>	
		tobramycin 300mg/5ml ampule, 300mg/5ml pak <sup>17</sup>	
	Xifaxan <sup>9</sup>		
	OSTEOPOROSIS PRODUCTS	Tymlos <sup>6</sup>	
	PAIN RELIEF AND INFLAMMATORY DISEASE	Actemra <sup>10</sup> , Actemra Actpen <sup>10</sup>	
		Cimzia <sup>10</sup>	
		Cosentyx <sup>10</sup>	
		Enbrel <sup>10</sup>	
		Humira <sup>10</sup>	
		Ilumya <sup>10</sup>	
		Kevzara <sup>10</sup>	
		Kineret <sup>10</sup>	
Olumiant <sup>10</sup>			
Orencia <sup>10</sup>			
Otezla <sup>10</sup>			
Siliq <sup>10</sup>			
Simponi <sup>10</sup>			
Stelara <sup>10</sup>			
Taltz <sup>10</sup>			
Tremfya <sup>10</sup>			
Xeljanz <sup>10</sup>			
Xeljanz XR <sup>10</sup>			
Start date of change**	Drug class	Drugs being added to Step Therapy Program <sup>3,12</sup>	Generic and/or preferred brand alternatives
July 1, 2020	DIABETES	Bydureon <sup>5</sup>	metformin
		Farxiga <sup>5</sup>	
		Glyxambi <sup>5</sup>	
		Invokamet <sup>5</sup>	
		Invokamet XR <sup>5</sup>	
		Invokana <sup>5</sup>	
		Janumet <sup>5</sup>	
		Janumet XR <sup>5</sup>	
		Januvia <sup>5</sup>	
Jardiance <sup>5</sup>			

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## LEGACY (STANDARD) FORMULARY (cont)

Start date of change**	Drug class	Drugs being added to Step Therapy Program <sup>3,12</sup>	Generic and/or preferred brand alternatives	
July 1, 2020	DIABETES (cont)	Kombiglyze XR <sup>5</sup>	metformin	
		Onglyza <sup>5</sup>		
		Ozempic <sup>5</sup>		
		Qtern <sup>5</sup>		
		Segluromet <sup>5</sup>		
		Synjardy <sup>5</sup>		
		Synjardy XR <sup>5</sup>		
		Trulicity <sup>5</sup>		
		Victoza <sup>5</sup>		
		Xigduo XR <sup>5</sup>		
January 1, 2020	ASTHMA/COPD/RESPIRATORY	Spiriva, Spiriva Respimat	Incruse Ellipta	
		Stiolto Respimat	Anoro Ellipta	
		Striverdi Respimat	Serevent	
	BLOOD PRESSURE/HEART MEDICATIONS	Betapace	generic beta blockers (e.g. metoprolol)	
		Betapace AF		
		Bystolic		
		Coreg		
		Coreg CR		
		Corgard		
		Dutoprol		
		Inderal LA		generic beta blockers (e.g. metoprolol)
		Inderal XL		
		Innopran XL		
		Kapspargo Sprinkle		
		Lopressor		
		Lopressor HCT		
		Sotylize		
		Tenoretic 100		
		Tenoretic 50		
		Tenormin		
Toprol XL				
Ziac				
DIABETES	Adlyxin <sup>5</sup>	metformin		
	Byetta <sup>5</sup>			
	Rybelsus			
	Steglatro <sup>5</sup>			
	Steglujan <sup>5</sup>			
	Victoza <sup>5</sup>			

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## LEGACY (STANDARD) FORMULARY (cont)

Start date of change <sup>*,**</sup>	Drug class	Drugs being added to Step Therapy Program <sup>3,12</sup>	Generic and/or preferred brand alternatives
January 1, 2020	INFECTIONS	Doryx	doxycycline
		Doryx MPC	doxycycline
		doxycycline IR-DR	Generic products (e.g. doxycycline; minocycline)
		Minocin	minocycline
		Oracea	Generic products (e.g. doxycycline; minocycline)
		Targadox	doxycycline
		Vibramycin capsule	doxycycline
Start date of change <sup>*,**</sup>	Drug class	Drugs that will be excluded from coverage	Additional information
January 1, 2020	INFECTIONS	Avidoxy DK	Customers should talk with their doctor about their options.
		Morgidox	

## PERFORMANCE FORMULARY

Start date of change <sup>*,**</sup>	Drug class	Drugs moving to preferred brand	
May 1, 2020	INFECTIONS	Symtuza	
March 10, 2020	ANTI-CONVULSANTS	Nayzilam	
March 1, 2020	DIABETES	Invokana	
		Invokamet	
		Invokamet XR	
	PAIN RELIEF AND INFLAMMATORY DISEASE	Morphabond	
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi	
January 1, 2020	ASTHMA/COPD/RESPIRATORY	albuterol HFA	
	CHOLESTEROL MEDICATIONS	Vascepa	
	DIABETES	Rybelsus	
		Segluromet <sup>5</sup>	
		Steglatro	
	INFERTILITY	Gonal-F1, Gonal-F RFF1	
	SEIZURE DISORDERS	Fycompa	
Start date of change <sup>*,**</sup>	Drug class	Drugs moving to non-preferred brand	Generic and/or preferred brand alternatives
July 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE	Subsys	fentanyl citrate lozenge or buccal tablet
March 25, 2020	SLEEP DISORDERS/SEDATIVES	Wakix	Customers should talk with their doctor about alternatives.
March 18, 2020	PARKINSON'S DISEASE	Nourianz	Customers should talk with their doctor about alternatives.
March 17, 2020	INFECTIONS	Amzeeq	generic topical acne products (e.g. adapalene; tretinoin; clindamycin-benzoyl peroxide)

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## PERFORMANCE FORMULARY (cont)

Start date of change <sup>*,**</sup>	Drug class	Drugs moving to non-preferred brand	Generic and/or preferred brand alternatives
March 17, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE	Gloperba	colchicine, probenecid/colchicine
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg	pyridostigmine 60mg tablet
January 1, 2020	HORMONAL AGENTS	AndroGel <sup>2</sup>	testosterone
		Cytome <sup>2</sup>	liothyronine
	INFECTIONS	Stromectol <sup>2</sup>	ivermectin
	INFERTILITY	Follistim AQ <sup>1</sup>	Gonal-F, Gonal-F RFF, Gonal-F RFF Redi-ject
	NUTRITIONAL/DIETARY	VitaPearl <sup>2</sup>	generic prenatal vitamin
	PAIN RELIEF AND INFLAMMATORY DISEASE	Oxsoralen-Ultra <sup>2</sup>	methoxsalen
	SKIN CONDITIONS	Ovace Plus <sup>2</sup>	sodium sulfacetamide
		Pramosone <sup>2</sup>	hydrocortisone-pramoxine
SUBSTANCE ABUSE	Suboxone	Buprenorphine/naloxone SL tab	
Start date of change <sup>*,**</sup>	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>	
March 10, 2020	ANTI-CONVULSANTS	Nayzilam	
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi	
January 1, 2020	AIDS/HIV	abacavir <sup>5</sup>	
		abacavir-lamivudine <sup>5</sup>	
		abacavir-lamivudine-zidovudine <sup>5</sup>	
		Aptivus <sup>5</sup>	
		atazanavir <sup>5</sup>	
		Atripla <sup>5</sup>	
		Cimduo <sup>5</sup>	
		Complera <sup>5</sup>	
		Delstrigo <sup>5</sup>	
		Descovy <sup>5</sup>	
		Edurant <sup>5</sup>	
		efavirenz <sup>5</sup>	
		Emtriva <sup>5</sup>	
		Evotaz <sup>5</sup>	
		fosamprenavir <sup>5</sup>	
		Fuzeon <sup>5</sup>	
Intelence <sup>5</sup>			
Invirase <sup>5</sup>			
Isentress HD <sup>5</sup>			
Juluca <sup>5</sup>			

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## PERFORMANCE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	AIDS/HIV (cont)	Kaletra 100-25 mg, 200-50mg tablet <sup>5</sup> lamivudine <sup>5</sup> Lexiva suspension <sup>5</sup> lopinavir-ritonavir <sup>5</sup> nevirapine <sup>5</sup> nevirapine ER <sup>5</sup> Odefsey <sup>5</sup> Pifeltro <sup>5</sup> Prezcoibix <sup>5</sup> Retrovir vial <sup>5</sup> Reyataz powder packet <sup>5</sup> Selzentry <sup>5</sup> Stribild <sup>5</sup> Symtuza <sup>5</sup> tenofovir <sup>5</sup> Viread 150mg, 200mg, 250mg, powder <sup>5</sup>
	ATTENTION DEFICIT HYPERACTIVITY DISORDER	Adderall <sup>7</sup> amphetamine <sup>7</sup> dexamethylphenidate <sup>7</sup> dexamethylphenidate ER <sup>7</sup> dextroamphetamine <sup>7</sup> dextroamphetamine ER <sup>7</sup> dextroamphetamine-amphetamine <sup>7</sup> dextroamphetamine-amphetamine ER <sup>7</sup> Evekeo <sup>7</sup> Focalin <sup>7</sup> metadate ER <sup>7</sup> methamphetamine <sup>7</sup> Methylin <sup>7</sup> methylphenidate <sup>7</sup> methylphenidate CD <sup>7</sup> methylphenidate ER <sup>7</sup> methylphenidate ER (CD) <sup>7</sup> methylphenidate ER (LA) <sup>7</sup> methylphenidate LA <sup>7</sup> procentra <sup>7</sup> Relexxii <sup>7</sup>

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## PERFORMANCE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER (cont)	Ritalin <sup>7</sup>
		Vyvanse capsule <sup>7</sup>
		Zenzedi <sup>7</sup>
	CHOLESTEROL MEDICATIONS	Praluent
		Vascepa <sup>4</sup>
	COUGH/COLD MEDICATIONS	hydrocodone-chlorpheniramine ER
		hydrocodone-homatropine MBR
		hydromet
		promethazine-codeine
		promethazine-phenylephrine-codeine
Tuxarin ER		
Tuzistra XR		
HORMONAL AGENTS	Cetrotide	
	Forteo <sup>6</sup>	
	ganirelix	
INFECTIONS	Cayston	
	Coartem	
	Kitabis Pak	
	Krintafel	
	Malarone	
	Plaquenil	
	Qualaquin	
	Tobi PodHaler	
	tobramycin 300mg/5ml ampule, 300mg/5ml pak	
	INFERTILITY	chorionic gonadotropin
Follistim AQ		
Gonal-F, Gonal-F RFF		
Menopur		
Novarel		
Ovidrel		
Pregnyl		
MISCELLANEOUS	Exjade	
	Ferriprox	
	Jadenu	
OSTEOPOROSIS PRODUCTS	Tymlos <sup>6</sup>	
PAIN RELIEF AND INFLAMMATORY DISEASE	alfentanil	
	Demerol	

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## PERFORMANCE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>		
January 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE (cont)	Dilaudid		
		Duramorph		
		Humira (CF) Pen		
		hydromorphone		
		Infumorph		
		meperidine		
		methadone		
		mitigo		
		morphine injectable		
		remifentanyl		
		sufentanyl		
		Ultiva		
		SLEEP DISORDERS/SEDATIVES		Nembutal
				pentobarbital
Seconal				
WEIGHT MANAGEMENT		Adipex-P		
		Belviq		
		Belviq XR		
		Contrave		
		Qsymia		
		Saxenda		
		Xenical		
Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>		
March 25, 2020	SLEEP DISORDERS/SEDATIVES	Wakix		
March 18, 2020	PARKINSON'S DISEASE	Nourianz		
March 17, 2020	INFECTIONS	Amzeeq		
March 10, 2020	ANTI-CONVULSANTS	Nayzilam		
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg		
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi		
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER	Adderall XR		
		Adzenys ER		
		Adzenys XR-ODT		
		Aptensio XR		
		Concerta		
		Cotempla XR-ODT		
		Daytrana		
		Dexedrine		
dexmethylphenidate ER				

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## PERFORMANCE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>		
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER (cont)	dextroamphetamine ER		
		dextroamphetamine-amphetamine ER		
		Dyanavel XR		
		Focalin XR		
		metadate ER		
		methylphenidate CD		
		methylphenidate ER		
		methylphenidate ER (CD)		
		methylphenidate ER (LA)		
		methylphenidate LA		
		Mydayis		
		Quillichew ER		
		Quillivant XR		
		Relexxii		
		Ritalin LA		
		Vyvanse capsule		
		Vyvanse chewable tablet		
		DIABETES		Admelog <sup>11</sup> , Admelog Solostar <sup>11</sup>
				Afrezza <sup>11</sup>
				Apidra <sup>11</sup> , Apidra Solostar <sup>11</sup>
Basaglar <sup>11</sup>				
Farxiga 10mg				
Fiasp Flextouch <sup>11</sup>				
Glyxambi				
Humalog <sup>11</sup>				
Humulin <sup>11</sup>				
Insulin Lispro <sup>11</sup>				
Invokamet				
Invokamet XR				
Invokana				
Janumet				
Janumet XR				
Januvia 100mg				
Januvia 25mg				
Jardiance				
Kazano				
Kombiglyze XR				
Lantus <sup>11</sup> , Lantus Solostar <sup>11</sup>				
Levemir <sup>11</sup>				
Nesina				

Generic medications start with a lowercase letter and brand name medications start with a capital letter.



## PERFORMANCE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>
January 1, 2020	DIABETES (cont)	Novolin <sup>11</sup>
		Novolog <sup>11</sup>
		Onglyza
		Oseni
		Qtern
		Rybelsus
		Segluromet
		Steglatro
		Steglujan
		Synjardy
		Synjardy XR
		Toujeo <sup>11</sup>
		Tresiba <sup>11</sup>
		Xigduo XR
		HORMONAL AGENTS
INFECTIONS	Bethkis <sup>8</sup>	
	Cayston <sup>8</sup>	
	Kitabis Pak <sup>8</sup>	
	Tobi PodHaler <sup>8</sup>	
	Tobi solution <sup>8</sup>	
	tobramycin 300mg/5ml ampule, 300mg/5ml pak <sup>8</sup>	
	Xifaxan <sup>9</sup>	
OSTEOPOROSIS PRODUCTS	Tymlos <sup>6</sup>	
PAIN RELIEF AND INFLAMMATORY DISEASE	Actemra <sup>10</sup> , Actemra Actpen <sup>10</sup>	
	Cimzia <sup>10</sup>	
	Cosentyx <sup>10</sup>	
	Enbrel <sup>10</sup>	
	Humira <sup>10</sup>	
	Ilumya <sup>10</sup>	
	Kevzara <sup>10</sup>	
	Kineret <sup>10</sup>	
	Olumiant <sup>10</sup>	
	Orencia <sup>10</sup>	
	Otezla <sup>10</sup>	
	Siliq <sup>10</sup>	
	Simponi <sup>10</sup>	
	Stelara <sup>10</sup>	
	Taltz <sup>10</sup>	
Tremfya <sup>10</sup>		
Xeljanz <sup>10</sup>		
Xeljanz XR <sup>10</sup>		

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## PERFORMANCE FORMULARY (cont)

Start date of change**	Drug class	Drugs being added to Step Therapy Program <sup>3,12</sup>	Generic and/or preferred brand alternatives	
July 1, 2020	DIABETES	Bydureon <sup>5</sup>	metformin	
		Farxiga <sup>5</sup>		
		Glyxambi <sup>5</sup>		
		Invokamet <sup>5</sup>		
		Invokamet XR <sup>5</sup>		
		Invokana <sup>5</sup>		
		Janumet <sup>5</sup>		
		Janumet XR <sup>5</sup>		
		Januvia <sup>5</sup>		
		Jardiance <sup>5</sup>		
		Kombiglyze XR <sup>5</sup>		
		Onglyza <sup>5</sup>		
		Ozempic <sup>5</sup>		
		Qtern <sup>5</sup>		
		Segluromet <sup>5</sup>		
		Synjardy <sup>5</sup>		
		Synjardy XR <sup>5</sup>		
		Trulicity <sup>5</sup>		
Victoza <sup>5</sup>				
Xigduo XR <sup>5</sup>				
January 1, 2020	BLOOD PRESSURE/HEART MEDICATIONS	Betapace AF	generic beta blockers (e.g. metoprolol)	
		Bystolic		
		Coreg		
		Coreg CR		
		Corgard		
		Dutoprol		
		Inderal LA		
		Inderal XL		
		Innopran XL		
		Kaspargo Sprinkle		
		Lopressor		
		Lopressor HCT		
		Sotylize		
		Tenoretic 100		
		Tenoretic 50		
		Tenormin		
		Toprol XL		
		Ziac		
	DIABETES		Byetta <sup>5</sup>	metformin
			Rybelsus	
Steglatro <sup>5</sup>				

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## PERFORMANCE FORMULARY (cont)

Start date of change**	Drug class	Medications that will no longer be covered <sup>13</sup>	Generic and/or preferred brand alternatives	
July 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE	Subsys	fentanyl citrate lozenge or buccal tablet	
		Xenazine	tetrabenazine	
March 17, 2020	INFECTIONS	Amzeeq	generic topical acne products (e.g. adapalene; tretinoin; clindamycin-benzoyl peroxide)	
	PAIN RELIEF AND INFLAMMATORY DISEASE	Gloperba	colchicine, probenecid/colchicine	
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg	pyridostigmine 60mg tablet	
January 1, 2020	AIDS/HIV	Combivir	lamivudine-zidovudine	
		didanosine DR <sup>5</sup>	Customers should talk with their doctor about alternatives.	
		Epivir 10mg oral solution <sup>15</sup>	lamivudine	
		Epivir 150mg, 300mg tablet	lamivudine	
		Epzicom	abacavir-lamivudine	
		Retrovir syrup, capsule	zidovudine 100mg capsule, syrup	
		stavudine <sup>5</sup>	Customers should talk with their doctor about alternatives.	
		Trizivir	abacavir-lamivudine-zidovudine	
		Viramune suspension	nevirapine oral suspension	
		Viread 300mg	tenofovir 300mg tablet	
		Ziagen	abacavir	
		ASTHMA/COPD/RESPIRATORY	Spiriva, Spiriva Respimat	Incruse Ellipta
			Stiolto Respimat	Anoro Ellipta
			Striverdi Respimat	Serevent
BLOOD MODIFIERS/BLEEDING DISORDERS	Firazyr	icatibant		
CANCER	Tarceva <sup>14</sup>	erlotinib		
	Zytiga 250mg <sup>16</sup>	abiraterone		
	Zytiga 500mg <sup>15</sup>	abiraterone		
DIABETES	alogliptin <sup>5</sup>	metformin, Janumet, Janumet XR, Januvia, Kombiglyze XR, Onglyza		
	alogliptin-metformin <sup>5</sup>	metformin, Janumet, Janumet XR, Januvia, Kombiglyze XR, Onglyza		
	alogliptin-pioglitazone <sup>5</sup>	metformin, Janumet, Janumet XR, Januvia, Kombiglyze XR, Onglyza		
GASTROINTESTINAL/HEARTBURN	Colyte With Flavor Packets	Clenpiq, GaviLyte-C, GaviLyte-G, GaviLyte-N, Peg 3350-Electrolyte, Prepopik, SuPrep		
	Golytely packet			
	Golytely solution			
	Moviprep			
	Nulytely With Flavor Packs			
	Osmoprep			
	Plenvu			

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## PERFORMANCE FORMULARY (cont)

Start date of change <sup>*,**</sup>	Drug class	Medications that will no longer be covered <sup>13</sup>	Generic and/or preferred brand alternatives
January 1, 2020	INFECTIONS	doxycycline IR-DR Seysara	doxycycline, doxycycline monohydrate, minocycline ER
	MISCELLANEOUS	Syprine	Depen, penicillamine, trientine
	MULTIPLE SCLEROSIS	Aubagio <sup>5</sup>	Gilenya, Mayzent, Tecfidera
	NUTRITIONAL/DIETARY	Nascobal	cyanocobalamin injection
	SKIN CONDITIONS	Enstilar Taclonex ointment Taclonex suspension	calcipotriene-betamethasone DP ointment, calcipotriene plus topical betamethasone, tazarotene cream
Start date of change <sup>*,**</sup>	Drug class	Drugs that will be excluded from coverage	Additional information
January 1, 2020	INFECTIONS	Avidoxy DK Morgidox	Customers should talk with their doctor about their options.

## ADVANTAGE FORMULARY

Start date of change <sup>*,**</sup>	Drug class	Drugs moving to preferred brand		
May 1, 2020	INFECTIONS	Symtuza		
March 10, 2020	ANTI-CONVULSANTS	Nayzilam		
March 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE	Morphabond		
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi		
January 1, 2020	ASTHMA/COPD/RESPIRATORY	albuterol HFA Xolair		
		CHOLESTEROL MEDICATIONS	Vascepa	
	DIABETES	Rybelsus Segluromet Steglatro		
		INFERTILITY	Gonal-F <sup>1</sup> , Gonal-F RFF <sup>1</sup>	
		SEIZURE DISORDERS	Fycompa	
	Start date of change <sup>*,**</sup>	Drug class	Drugs moving to non-preferred brand	Generic and/or preferred brand alternatives
March 25, 2020	SLEEP DISORDERS/SEDATIVES	Wakix	Customers should talk with their doctor about alternatives.	
March 18, 2020	PARKINSON'S DISEASE	Nouriaz	Customers should talk with their doctor about alternatives.	
March 17, 2020	INFECTIONS	Amzeeq	generic topical acne products (e.g. adapalene; tretinoin; clindamycin-benzoyl peroxide)	
	PAIN RELIEF AND INFLAMMATORY DISEASE	Gloperba	colchicine, probenecid/colchicine	
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg	pyridostigmine 60mg tablet	

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## ADVANTAGE FORMULARY (cont)

Start date of change <sup>*,**</sup>	Drug class	Drugs moving to non-preferred brand	Generic and/or preferred brand alternatives
January 1, 2020	AIDS/HIV	Retrovir vial <sup>1</sup>	zidovudine
	HORMONAL AGENTS	AndroGel <sup>2</sup>	testosterone
	INFERTILITY	Follistim AQ <sup>1</sup>	Gonal-F, Gonal-F RFF, Gonal-F RFF Redi-ject
Start date of change <sup>*,**</sup>	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>	
March 10, 2020	ANTI-CONVULSANTS	Nayzilam	
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi	
January 1, 2020	AIDS/HIV	abacavir <sup>5</sup>	
		abacavir-lamivudine <sup>5</sup>	
		abacavir-lamivudine-zidovudine <sup>5</sup>	
		Aptivus <sup>5</sup>	
		atazanavir <sup>5</sup>	
		Atripla <sup>5</sup>	
		Cimduo <sup>5</sup>	
		Complera <sup>5</sup>	
		Delstrigo <sup>5</sup>	
		Descovy <sup>5</sup>	
		Edurant <sup>5</sup>	
		efavirenz <sup>5</sup>	
		Emtriva <sup>5</sup>	
		Evotaz <sup>5</sup>	
		fosamprenavir <sup>5</sup>	
		Fuzeon <sup>5</sup>	
		Intelence <sup>5</sup>	
		Invirase <sup>5</sup>	
		Isentress HD <sup>5</sup>	
		Juluca <sup>5</sup>	
		Kaletra 100-25 mg, 200-50mg tablet <sup>5</sup>	
		lamivudine <sup>5</sup>	
		Lexiva suspension <sup>5</sup>	
		lopinavir-ritonavir <sup>5</sup>	
		nevirapine <sup>5</sup>	
nevirapine ER <sup>5</sup>			
Odefsey <sup>5</sup>			
Pifeltro <sup>5</sup>			
Prezcobix <sup>5</sup>			
Retrovir vial <sup>5</sup>			
Reyataz powder packet <sup>5</sup>			
Selzentry <sup>5</sup>			

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## ADVANTAGE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	AIDS/HIV (cont)	Stribild <sup>5</sup>
		Symtuza <sup>5</sup>
		tenofovir <sup>5</sup>
		Viread 150mg, 200mg, 250mg, powder <sup>5</sup>
ATTENTION DEFICIT HYPERACTIVITY DISORDER	Adderall <sup>7</sup>	
	amphetamine <sup>7</sup>	
	dexamethylphenidate <sup>7</sup>	
	dexamethylphenidate ER <sup>7</sup>	
	dextroamphetamine <sup>7</sup>	
	dextroamphetamine ER <sup>7</sup>	
	dextroamphetamine-amphetamine <sup>7</sup>	
	dextroamphetamine-amphetamine ER <sup>7</sup>	
	Evekeo <sup>7</sup>	
	Focalin <sup>7</sup>	
	metadate ER <sup>7</sup>	
	methamphetamine <sup>7</sup>	
	Methylin <sup>7</sup>	
	methylphenidate <sup>7</sup>	
	methylphenidate CD <sup>7</sup>	
	methylphenidate ER <sup>7</sup>	
	methylphenidate ER (CD) <sup>7</sup>	
	methylphenidate ER (LA) <sup>7</sup>	
	methylphenidate LA <sup>7</sup>	
	procentra <sup>7</sup>	
	Relexii <sup>7</sup>	
	Ritalin <sup>7</sup>	
	Zenzedi <sup>7</sup>	
CHOLESTEROL MEDICATIONS	Praluent	
	Vascepa <sup>4</sup>	
COUGH/COLD MEDICATIONS	hydrocodone-chlorpheniramine ER	
	hydrocodone-homatropine MBR	
	hydromet	
	promethazine-codeine	
	promethazine-phenylephrine-codeine	
	Tuxarin ER	
	Tuzistra XR	
HORMONAL AGENTS	Cetrotide	
	Forteo <sup>6</sup>	
	ganirelix	

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## ADVANTAGE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	INFECTIONS	Cayston
		Coartem
		Kitabis Pak
		Krintafel
		Malarone
		Plaquenil
		Qualaquin
		Tobi PodHaler
		tobramycin 300mg/5ml ampule, 300mg/5ml pak
	INFERTILITY	chorionic gonadotropin
		Follistim AQ
		Gonal-F, Gonal-F RFF
		Menopur
		Novarel
		Ovidrel
		Pregnyl
	MISCELLANEOUS	Exjade
		Ferriprox
		Jadenu
	OSTEOPOROSIS PRODUCTS	Tymlos <sup>6</sup>
	PAIN RELIEF AND INFLAMMATORY DISEASE	alfentanil
		Demerol
		Dilaudid
		Duramorph
		Humira (CF) Pen
		hydromorphone
		Infumorph
		meperidine
		methadone
		mitigo
		morphine injectable
		remifentanil
		sufentanil
Ultiva		
SLEEP DISORDERS/SEDATIVES	Nembutal	
	pentobarbital	
	Seconal	

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## ADVANTAGE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	WEIGHT MANAGEMENT	Adipex-P
		Belviq
		Belviq XR
		Contrave
		Qsymia
		Saxenda
		Xenical
Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>
March 25, 2020	SLEEP DISORDERS/SEDATIVES	Wakix
March 18, 2020	PARKINSON'S DISEASE	Nourianz
March 17, 2020	INFECTIONS	Amzeeq
March 10, 2020	ANTI-CONVULSANTS	Nayzilam
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER	Adderall XR
		Adzenys ER
		Adzenys XR-ODT
		Aptensio XR
		Concerta
		Cotempla XR-ODT
		Daytrana
		Dexedrine
		dexamethylphenidate ER
		dextroamphetamine ER
		dextroamphetamine-amphetamine ER
		Dyanavel XR
		Focalin XR
		metadate ER
		methylphenidate CD
		methylphenidate ER
		methylphenidate ER (CD)
		methylphenidate ER (LA)
		methylphenidate LA
		Mydayis
		Quillichew ER
		Quillivant XR
		Relexxii
Ritalin LA		
Vyvanse capsule		
Vyvanse chewable tablet		

Generic medications start with a lowercase letter and brand name medications start with a capital letter.



## ADVANTAGE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>
January 1, 2020	DIABETES	Admelog <sup>11</sup> , Admelog Solostar <sup>11</sup>
		Afrezza <sup>11</sup>
		Apidra <sup>11</sup> , Apidra Solostar <sup>11</sup>
		Basaglar <sup>11</sup>
		Farxiga
		Fiasp Flextouch <sup>11</sup>
		Glyxambi
		Humalog <sup>11</sup>
		Humulin <sup>11</sup>
		Insulin Lispro <sup>11</sup>
		Invokamet
		Invokamet XR
		Invokana
		Janumet
		Janumet XR
		Januvia 100mg
		Jardiance
		Kazano
		Kombiglyze XR
		Lantus <sup>11</sup> , Lantus Solostar <sup>11</sup>
		Levemir <sup>11</sup>
		Nesina
		Novolin <sup>11</sup>
		Novolog <sup>11</sup>
		Onglyza
		Oseni
		Qtern
		Rybelsus
		Segluromet
		Steglatro
		Steglujan
		Synjardy
		Synjardy XR
Toujeo <sup>11</sup>		
Tresiba <sup>11</sup>		
Xigduo XR		
HORMONAL AGENTS	Forteo <sup>6</sup>	

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## ADVANTAGE FORMULARY (cont)

Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>	
January 1, 2020	INFECTIONS	Bethkis <sup>8</sup>	
		Cayston <sup>8</sup>	
		Kitabis Pak <sup>8</sup>	
		Tobi PodHaler <sup>8</sup>	
		Tobi solution <sup>8</sup>	
		tobramycin 300mg/5ml ampule, 300mg/5ml pak <sup>8</sup>	
		Xifaxan <sup>9</sup>	
	OSTEOPOROSIS PRODUCTS	Tymlos <sup>6</sup>	
	PAIN RELIEF AND INFLAMMATORY DISEASE	Actemra <sup>10</sup> , Actemra Actpen <sup>10</sup>	
		Cimzia <sup>10</sup>	
		Cosentyx <sup>10</sup>	
		Enbrel <sup>19</sup>	
		Humira <sup>10</sup>	
		Ilumya <sup>10</sup>	
		Kevzara <sup>10</sup>	
		Kineret <sup>10</sup>	
		Olumiant <sup>10</sup>	
		Orencia <sup>10</sup>	
		Otezla <sup>10</sup>	
		Siliq <sup>10</sup>	
Simponi <sup>10</sup>			
Stelara <sup>10</sup>			
Taltz <sup>10</sup>			
Tremfya <sup>10</sup>			
Xeljanz <sup>10</sup>			
Xeljanz XR <sup>10</sup>			
Start date of change**	Drug class	Drugs being added to Step Therapy Program <sup>3,12</sup>	Generic and/or preferred brand alternatives
July 1, 2020	DIABETES	Bydureon <sup>5</sup>	metformin
		Farxiga <sup>5</sup>	
		Glyxambi <sup>5</sup>	
		Invokamet <sup>5</sup>	
		Invokamet XR <sup>5</sup>	
		Invokana <sup>5</sup>	
		Janumet <sup>5</sup>	
		Janumet XR <sup>5</sup>	
		Januvia <sup>5</sup>	
		Jardiance <sup>5</sup>	

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## ADVANTAGE FORMULARY (cont)

Start date of change**	Drug class	Drugs being added to Step Therapy Program <sup>3,12</sup>	Generic and/or preferred brand alternatives
July 1, 2020	DIABETES (cont)	Kombiglyze XR <sup>5</sup> Onglyza <sup>5</sup> Ozempic <sup>5</sup> Qtern <sup>5</sup> Segluromet <sup>5</sup> Synjardy <sup>5</sup> Synjardy XR <sup>5</sup> Trulicity <sup>5</sup> Victoza <sup>5</sup> Xigduo XR <sup>5</sup>	metformin
January 1, 2020	BLOOD PRESSURE/HEART MEDICATIONS	Betapace AF Coreg Coreg CR Corgard Dutoprol Inderal LA Inderal XL Innopran XL Kapsargo Sprinkle Lopressor Lopressor HCT Sotylize Tenoretic 100 Tenoretic 50 Tenormin Toprol XL Ziac	generic beta blockers (e.g. metoprolol)
	DIABETES	Byetta <sup>5</sup> Rybelsus Steglatro <sup>5</sup>	metformin
Start date of change**	Drug class	Medications that will no longer be covered <sup>13</sup>	Generic and/or preferred brand alternatives
July 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE	Xenazine	tetrabenazine
March 17, 2020	INFECTIONS	Amzeeq	generic topical acne products (e.g. adapalene; tretinoin; clindamycin-benzoyl peroxide)
	PAIN RELIEF AND INFLAMMATORY DISEASE	Gloperba	colchicine, probenecid/colchicine
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg	pyridostigmine 60mg tablet
January 1, 2020	AIDS/HIV	Combivir didanosine DR <sup>5</sup> Epivir 10mg oral solution <sup>15</sup> Epivir 150mg, 300mg tablet	lamivudine-zidovudine Customers should talk with their doctor about alternatives. lamivudine lamivudine

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## ADVANTAGE FORMULARY (cont)

Start date of change**	Drug class	Medications that will no longer be covered <sup>13</sup>	Generic and/or preferred brand alternatives
January 1, 2020	AIDS/HIV (cont)	Epzicom	abacavir-lamivudine
		Retrovir syrup, capsule	zidovudine 100mg capsule, syrup
		stavudine <sup>5</sup>	Customers should talk with their doctor about alternatives.
		Trizivir	abacavir-lamivudine-zidovudine
		Viramune suspension	nevirapine oral suspension
		Viread 300mg	tenofovir 300mg tablet
		Ziagen	abacavir
	ASTHMA/COPD/RESPIRATORY	Striverdi Respimat	Serevent
	BLOOD MODIFIERS/BLEEDING DISORDERS	Firazyr	icatibant
	CANCER	Tarceva <sup>14</sup>	erlotinib
		Zytiga 250mg <sup>16</sup>	abiraterone
		Zytiga 500mg <sup>15</sup>	abiraterone
	DIABETES	alogliptin <sup>5</sup>	metformin, Janumet, Janumet XR, Januvia, Kombiglyze XR, Onglyza
		alogliptin-metformin <sup>5</sup>	
		alogliptin-pioglitazone <sup>5</sup>	
	GASTROINTESTINAL/HEARTBURN	Colyte With Flavor Packets	Clenpiq, GaviLyte-C, GaviLyte-G, GaviLyte-N, Peg 3350-Electrolyte, Prepopik, SuPrep
Golytely packet			
Golytely solution			
Moviprep			
Nulytely With Flavor Packs			
Osmoprep			
INFECTIONS	doxycycline IR-DR	doxycycline, doxycycline monohydrate, minocycline ER	
	Seysara		
MISCELLANEOUS	Syprine	Depen, penicillamine, trientine	
MULTIPLE SCLEROSIS	Aubagio <sup>5</sup>	Gilenya, Mayzent, Tecfidera	
NUTRITIONAL/DIETARY	Nascobal	cyanocobalamin injection	
Start date of change**	Drug class	Drugs that will be excluded from coverage	Additional information
January 1, 2020	INFECTIONS	Avidoxy DK	Customers should talk with their doctor about their options.
		Morgidox	

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## LEGACY (PERFORMANCE) FORMULARY

Start date of change**	Drug class	Drugs moving to preferred brand	
May 1, 2020	INFECTIONS	Symtuza	
March 10, 2020	ANTI-CONVULSANTS	Nayzilam	
March 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE	Morphabond	
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi	
January 1, 2020	ASTHMA/COPD/RESPIRATORY	albuterol HFA	
	CHOLESTEROL MEDICATIONS	Vascepa	
	DIABETES	Rybelsus	
		Segluromet	
		Steglatro	
	INFERTILITY	Gonal-F <sup>1</sup> , Gonal-F RFF <sup>1</sup>	
SEIZURE DISORDERS	Fycompa		
Start date of change**	Drug class	Drugs moving to non-preferred brand	Generic and/or preferred brand alternatives
July 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE	Subsys	fentanyl citrate lozenge or buccal tablet
March 25, 2020	SLEEP DISORDERS/SEDATIVES	Wakix	Customers should talk with their doctor about alternatives.
March 18, 2020	PARKINSON'S DISEASE	Nouriaz	Customers should talk with their doctor about alternatives.
March 17, 2020	INFECTIONS	Amzeeq	generic topical acne products (e.g. adapalene; tretinoin; clindamycin-benzoyl peroxide)
	PAIN RELIEF AND INFLAMMATORY DISEASE	Gloperba	colchicine, probenecid/colchicine
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg	pyridostigmine 60mg tablet
January 1, 2020	AIDS/HIV	Epivir 10mg oral solution <sup>1</sup>	lamivudine
	ASTHMA/COPD/RESPIRATORY	Spiriva, Spiriva Respimat	Incruse Ellipta
		Stiolto Respimat	Anoro Ellipta
		Striverdi Respimat	Serevent
	CANCER	Tarceva <sup>1, 14</sup>	erlotinib
	GASTROINTESTINAL/HEARTBURN	Golytely packet	Clenpiq, GaviLyte-C, GaviLyte-G, GaviLyte-N, Peg 3350-Electrolyte, Prepopik, SuPrep
	HORMONAL AGENTS	Androgel <sup>2</sup>	testosterone
		CytomeI <sup>2</sup>	liothyronine
	INFECTIONS	Stromectol <sup>2</sup>	ivermectin
	INFERTILITY	Follistim AQ <sup>1</sup>	Gonal-F, Gonal-F RFF, Gonal-F RFF Redi-ject
	MULTIPLE SCLEROSIS	Aubagio <sup>1</sup>	Gilenya, Tecfidera
	NUTRITIONAL/DIETARY	VitaPearl <sup>2</sup>	generic prenatal vitamin
PAIN RELIEF AND INFLAMMATORY DISEASE	Oxsoralen-Ultra <sup>2</sup>	methoxsalen	
SKIN CONDITIONS	Ovace Plus <sup>2</sup>	sodium sulfacetamide	
	Pramosone <sup>2</sup>	hydrocortisone-pramoxine	

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## LEGACY (PERFORMANCE) FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
March 17, 2020	INFECTIONS	Amzeeq
	PAIN RELIEF AND INFLAMMATORY DISEASE	Gloperba
March 10, 2020	ANTI-CONVULSANTS	Nayzilam
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi
January 1, 2020	AIDS/HIV	abacavir <sup>5</sup>
		abacavir-lamivudine <sup>5</sup>
		abacavir-lamivudine-zidovudine <sup>5</sup>
		Aptivus <sup>5</sup>
		atazanavir <sup>5</sup>
		Atripla <sup>5</sup>
		Cimduo <sup>5</sup>
		Combivir
		Complera <sup>5</sup>
		Crixivan <sup>5</sup>
		Delstrigo <sup>5</sup>
		Descovy <sup>5</sup>
		didanosine DR
		Edurant <sup>5</sup>
		efavirenz <sup>5</sup>
		Emtriva <sup>5</sup>
		Epivir 10mg oral solution
		Epivir 150mg, 300mg tablet
		Epzicom
		Evotaz <sup>5</sup>
		fosamprenavir <sup>5</sup>
		Fuzeon <sup>5</sup>
		Intelence <sup>5</sup>
		Invirase <sup>5</sup>
		Isentress HD <sup>5</sup>
		Juluca <sup>5</sup>
Kaletra 100-25 mg, 200-50mg tablet <sup>5</sup>		
Kaletra solution		
lamivudine <sup>5</sup>		
Lexiva suspension <sup>5</sup>		
Lexiva tablet		
lopinavir-ritonavir <sup>5</sup>		

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## LEGACY (PERFORMANCE) FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>	
January 1, 2020	AIDS/HIV (cont)	nevirapine <sup>5</sup>	
		nevirapine ER <sup>5</sup>	
		Norvir	
		Odefsey <sup>5</sup>	
		Pifeltro <sup>5</sup>	
		Prezcobix <sup>5</sup>	
		Rescriptor <sup>5</sup>	
		Retrovir syrup, capsule, vial	
		Reyataz capsule	
		Reyataz powder packet <sup>5</sup>	
		Selzentry <sup>5</sup>	
		stavudine <sup>5</sup>	
		Stribild <sup>5</sup>	
		Sustiva	
		Symtuza <sup>5</sup>	
		tenofovir <sup>5</sup>	
		Trizivir	
		Videx <sup>5</sup>	
		Videx EC <sup>5</sup>	
		Viracept <sup>5</sup>	
		Viramune suspension	
		Viramune tablet	
		Viramune XR	
		Viread 150mg, 200mg, 250mg, powder <sup>5</sup>	
		Viread 300mg	
		Ziagen	
		ATTENTION DEFICIT HYPERACTIVITY DISORDER	Adderall <sup>7</sup>
			Adderall XR <sup>7</sup>
			amphetamine <sup>7</sup>
			Aptensio XR <sup>7</sup>
			Concerta <sup>7</sup>
			Desoxyn <sup>7</sup>
			Dexedrine <sup>7</sup>
dexmethylphenidate <sup>7</sup>			
dexmethylphenidate ER <sup>7</sup>			
dextroamphetamine <sup>7</sup>			
dextroamphetamine ER <sup>7</sup>			
dextroamphetamine-amphetamine <sup>7</sup>			
dextroamphetamine-amphetamine ER <sup>7</sup>			

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## LEGACY (PERFORMANCE) FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER (cont)	Evekeo <sup>7</sup>
		Focalin <sup>7</sup>
		Focalin XR <sup>7</sup>
		metadate ER <sup>7</sup>
		methamphetamine <sup>7</sup>
		Methylin <sup>7</sup>
		methylphenidate <sup>7</sup>
		methylphenidate CD <sup>7</sup>
		methylphenidate ER <sup>7</sup>
		methylphenidate ER (CD) <sup>7</sup>
		methylphenidate ER (LA) <sup>7</sup>
		methylphenidate LA <sup>7</sup>
		Mydayis <sup>7</sup>
		procentra <sup>7</sup>
		Relexxii <sup>7</sup>
		Ritalin <sup>7</sup>
		Ritalin LA <sup>7</sup>
		Vyvanse capsule <sup>7</sup>
		Zenzedi <sup>7</sup>
	COUGH/COLD MEDICATIONS	hydrocodone-chlorpheniramine ER
		hydrocodone-homatropine MBR
		hydromet
		promethazine-codeine
		promethazine-phenylephrine-codeine
		Tussicaps
		Tuxarin ER
		Tuzistra XR
	DIABETES	alogliptin <sup>5</sup>
		alogliptin-metformin <sup>5</sup>
		alogliptin-pioglitazone <sup>5</sup>
		Jentadueto <sup>5</sup>
		Jentadueto XR <sup>5</sup>
		Kazano
		Nesina
		Oseni
	Tradjenta <sup>5</sup>	
	GASTROINTESTINAL/HEARTBURN	Colyte With Flavor Packets
		Golytely packet

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## LEGACY (PERFORMANCE) FORMULARY (cont)

Start date of change**	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>	
January 1, 2020	GASTROINTESTINAL/HEARTBURN (cont)	Golytely solution	
		Moviprep	
		Nulytely With Flavor Packs	
		Osmoprep	
		Plenvu	
	HORMONAL AGENTS	Cetrotide	
		Forteo <sup>6</sup>	
		ganirelix	
	INFECTIONS	Arakoda	
		Bethkis	
		Cayston	
		Coartem	
		Kitabis Pak	
		Krintafel	
		Malarone	
		Plaquenil	
		Qualaquin	
		Seysara	
		Tobi PodHaler	
		Tobi solution	
		tobramycin 300mg/5ml ampule, 300mg/5ml pak	
		INFERTILITY	chorionic gonadotropin
			Follistim AQ
	Gonal-F, Gonal-F RFF		
	Menopur		
	Novarel		
	Ovidrel		
	Pregnyl		
	MISCELLANEOUS	Exjade	
		Ferriprox	
		Jadenu	
	NUTRITIONAL/DIETARY	Nascobal	
	OSTEOPOROSIS PRODUCTS	Tymlos <sup>6</sup>	
PAIN RELIEF AND INFLAMMATORY DISEASE	alfentanil		
	Demerol		
	Dilaudid		
	Duramorph		
	Humira (CF) Pen		

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## LEGACY (PERFORMANCE) FORMULARY (cont)

Start date of change <sup>*,**</sup>	Drug class	Drugs that will require approval (prior authorization) <sup>3</sup>
January 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE (cont)	hydromorphone
		Infumorph
		meperidine
		methadone
		mitigo
		morphine injectable
		remifentanil
		sufentanil
	Ultiva	
	SKIN CONDITIONS	Enstilar
		Taclonex ointment
		Taclonex suspension
	SLEEP DISORDERS/SEDATIVES	Nembutal
		pentobarbital
		Seconal
	WEIGHT MANAGEMENT	Adipex-P
		Belviq
		Belviq XR
		Contrave
		Qsymia
Saxenda		
Xenical		
Start date of change <sup>*,**</sup>	Drug class	Drugs that will have a quantity limit <sup>3</sup>
March 25, 2020	SLEEP DISORDERS/SEDATIVES	Wakix
March 18, 2020	PARKINSON'S DISEASE	Nourianz
March 17, 2020	INFECTIONS	Amzeeq
March 10, 2020	ANTI-CONVULSANTS	Nayzilam
January 27, 2020	ALZHEIMER'S DISEASE	pyridostigmine 30mg
January 6, 2020	SLEEP DISORDERS/SEDATIVES	Sunosi
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER	Adderall XR
		Adzenys ER
		Adzenys XR-ODT
		Aptensio XR
		Concerta
		Cotempla XR-ODT
		Daytrana
		Dexedrine
		dexmethylphenidate ER
		dextroamphetamine ER

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## LEGACY (PERFORMANCE) FORMULARY (cont)

Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>
January 1, 2020	ATTENTION DEFICIT HYPERACTIVITY DISORDER (cont)	dextroamphetamine-amphetamine ER
		Dyanavel XR
		Focalin XR
		metadate ER
		methylphenidate CD
		methylphenidate ER
		methylphenidate ER (CD)
		methylphenidate ER (LA)
		methylphenidate LA
		Mydayis
		Quillichew ER
		Quillivant XR
		Relexxii
		Ritalin LA
		Vyvanse capsule
		Vyvanse chewable tablet
	DIABETES	Admelog <sup>11</sup> , Admelog Solostar <sup>11</sup>
		Afrezza <sup>11</sup>
		alogliptin
		alogliptin-metformin
		alogliptin-pioglitazone
		Apidra <sup>11</sup> , Apidra Solostar <sup>11</sup>
		Basaglar <sup>11</sup>
		Farxiga 10mg
		Fiasp Flextouch <sup>11</sup>
		Glyxambi
Humalog <sup>11</sup>		
Humulin <sup>11</sup>		
Insulin Lispro <sup>11</sup>		
Invokamet		
Invokamet XR		
Invokana		
Janumet		
Janumet XR		
Januvia 100mg		
Jardiance		
Kazano		

Generic medications start with a lowercase letter and brand name medications start with a capital letter.

## LEGACY (PERFORMANCE) FORMULARY (cont)

Start date of change**	Drug class	Drugs that will have a quantity limit <sup>3</sup>	
January 1, 2020	DIABETES (cont)	Kombiglyze XR	
		Lantus <sup>11</sup> , Lantus Solostar <sup>11</sup>	
		Levemir <sup>11</sup>	
		Nesina	
		Novolin <sup>11</sup>	
		Novolog <sup>11</sup>	
		Onglyza	
		Oseni	
		Qtern	
		Rybelsus	
		Segluromet	
		Steglatro	
		Steglujan	
		Synjardy	
		Synjardy XR	
	Toujeo <sup>11</sup>		
	Tresiba <sup>11</sup>		
	Xigduo XR		
		HORMONAL AGENTS	Forteo <sup>6</sup>
		INFECTIONS	Bethkis <sup>17</sup>
	Cayston <sup>17</sup>		
	Kitabis Pak <sup>17</sup>		
	Tobi PodHaler <sup>17</sup>		
	Tobi solution <sup>17</sup>		
	tobramycin 300mg/5ml ampule, 300mg/5ml pak <sup>17</sup>		
	Xifaxan <sup>9</sup>		
	OSTEOPOROSIS PRODUCTS	Tymlos <sup>6</sup>	
	PAIN RELIEF AND INFLAMMATORY DISEASE	Actemra <sup>10</sup> , Actemra Actpen <sup>10</sup>	
		Cimzia <sup>10</sup>	
		Cosentyx <sup>10</sup>	
		Enbre <sup>10</sup>	
		Humira <sup>10</sup>	
		Ilumya <sup>10</sup>	
		Kevzara <sup>10</sup>	
		Kineret <sup>10</sup>	
		Olumiant <sup>10</sup>	
		Orencia <sup>10</sup>	
		Otezla <sup>10</sup>	
	Siliq <sup>10</sup>		

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## LEGACY (PERFORMANCE) FORMULARY (cont)

Start date of change <sup>*,**</sup>	Drug class	Drugs that will have a quantity limit <sup>3</sup>	
January 1, 2020	PAIN RELIEF AND INFLAMMATORY DISEASE (cont)	Simponi <sup>10</sup>	
		Stelara <sup>10</sup>	
		Taltz <sup>10</sup>	
		Tremfya <sup>10</sup>	
		Xeljanz <sup>10</sup>	
		Xeljanz XR <sup>10</sup>	
Start date of change <sup>*,**</sup>	Drug class	Drugs being added to Step Therapy Program <sup>3,12</sup>	Generic and/or preferred brand alternatives
July 1, 2020	DIABETES	Bydureon <sup>5</sup>	
		Farxiga <sup>5</sup>	
		Glyxambi <sup>5</sup>	
		Invokamet <sup>5</sup>	
		Invokamet XR <sup>5</sup>	
		Invokana <sup>5</sup>	
		Janumet <sup>5</sup>	
		Janumet XR <sup>5</sup>	
		Januvia <sup>5</sup>	
		Jardiance <sup>5</sup>	
		Kombiglyze XR <sup>5</sup>	
		Onglyza <sup>5</sup>	
		Ozempic <sup>5</sup>	
		Qtern <sup>5</sup>	
		Segluromet <sup>5</sup>	
		Synjardy <sup>5</sup>	
		Synjardy XR <sup>5</sup>	
		Trulicity <sup>5</sup>	
Victoza <sup>5</sup>			
Xigduo XR <sup>5</sup>			
January 1, 2020	ASTHMA/COPD/RESPIRATORY	Spiriva, Spiriva Respimat	
		Stiolto Respimat	
		Striverdi Respimat	
	BLOOD PRESSURE/HEART MEDICATIONS	Betapace	
		Betapace AF	
		Bystolic	
		Coreg	
		Coreg CR	
		Corgard	
		Dutoprol	
		Inderal LA	
		Inderal XL	
		Innopran XL	
		Kapsargo Sprinkle	
		Lopressor	
Lopressor HCT			
Incruse Ellipta			
Anoro Ellipta			
Serevent			
generic beta blockers (e.g. metoprolol)			

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## LEGACY (PERFORMANCE) FORMULARY (cont)

Start date of change <sup>*,**</sup>	Drug class	Drugs being added to Step Therapy Program <sup>3,12</sup>	Generic and/or preferred brand alternatives
January 1, 2020	BLOOD PRESSURE/HEART MEDICATIONS (cont)	Sotylize	generic beta blockers (e.g. metoprolol)
		Tenoretic 100	
		Tenoretic 50	
		Tenormin	
		Toprol XL	
		Ziac	
	DIABETES	Adlyxin <sup>5</sup>	metformin
		alogliptin <sup>5</sup>	
		Byetta <sup>5</sup>	
		Rybelsus <sup>5</sup>	
		Steglatro <sup>5</sup>	
		Steglujan <sup>5</sup>	
	INFECTIONS	Doryx	doxycycline
		Doryx MPC	doxycycline
		doxycycline IR-DR	Generic products (e.g. doxycycline; minocycline)
		Minocin	minocycline
		Oracea	Generic products (e.g. doxycycline; minocycline)
		Targadox	doxycycline
Vibramycin capsule		doxycycline	
Start date of change <sup>*,**</sup>	Drug class	Drugs that will be excluded from coverage	Additional information
January 1, 2020	INFECTIONS	Avidoxy DK	Customers should talk with their doctor about their options.
		Morgidox	

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1. This is a specialty drug. Some plans cover these drugs on a specialty tier, may limit coverage to a 30-day supply and/or require the use of Accredo, a Cigna specialty pharmacy, to receive coverage. For plans that cover these drugs on a specialty tier, this change won't affect the cost of the drug.
2. If your plan has Member Pay Difference (MPD), the MPD penalty will apply to this drug as of 1/1/20. However, if your plan allows for Dispense as Written (DAW) and the doctor requests the brand, the penalty won't apply.
3. **These changes may not apply to your specific plan.** Not all plans include requirements for prior authorization, quantity limits and/or Step Therapy.
4. This change won't affect customers who received approval for coverage in 2017 through a "medical necessity" review process.
5. For new prescriptions only. This change won't affect customers currently taking this drug.
6. For customers currently taking this drug, this change won't affect them until January 1, 2022.
7. **This change may not apply to your specific plan.** If it does, it will only affect customers age 18 and over.
8. Applies to all customers, including those who currently have approval to receive coverage for this drug.
9. This change doesn't affect customers currently taking this drug to treat hepatic encephalopathy.
10. Depending on the health condition this drug is being used to treat, customers may be able to receive coverage for more than the new quantity limit.
11. This change won't affect customers who are consistently exceeding the quantity limit.
12. There is a "medical necessity" review process in place for customers who have proven they have exhausted drug alternatives and would like to use a Step Therapy drug.
13. There is a "medical necessity" review process in place for customers who have proven they have exhausted drug alternatives and would like to use a drug moving to not-covered status.
14. For customers who currently have approval to receive coverage for this drug, that approval will end on 1/1/20. To receive continued coverage, the customer's doctor's office will have to request approval through a "medical necessity" review process. If Cigna approves continued coverage of this drug, the customer will pay a higher cost-share to fill the prescription. They'll pay their tier 3 (non-preferred brand) copay or coinsurance.
15. If Cigna approves coverage of this drug through a "medical necessity" review process, the customer will pay a higher cost-share to fill the prescription. They'll pay their tier 3 (non-preferred brand) copay or coinsurance.
16. If Cigna approves coverage of this drug through a "medical necessity" review process, the customer will pay a higher cost-share to fill the prescription. They'll pay their tier 3 (non-preferred brand) copay or coinsurance. If your plan has Member Pay Difference (MPD), the MPD penalty will also apply to this drug as of 1/1/20. However, if your plan allows for Dispense as Written (DAW) and the doctor requests the brand, the penalty won't apply.
17. This change doesn't affect customers currently taking this drug to treat cystic fibrosis.
18. Current authorizations will expire on July 1, 2020.



\* State laws in **Texas** and **Louisiana** may require your plan to cover these medications at the current benefit level until your plan renews. This means that if the medication is taken off the drug list, is moved to a higher cost-share tier or needs approval from Cigna before your plan will cover it, these changes may not begin until your plan's renewal date. Customers can call the number on their Cigna ID card to find out if these state laws apply to your plan.

\*\* State law in **Illinois** may require your plan to cover these medications at your current benefit level until your plan renews. This means that if customers currently have approval through a review process for your plan to cover the medication, the drug list change(s) listed here may not affect them until your plan renewal date. If customers do not currently have approval through a coverage review process, they may continue to receive coverage at the current benefit level if their doctor requests it. Customers can call the number on their Cigna ID card to find out if this state law applies to your plan.

Cigna reserves the right to make changes to the Drug List without notice. Your plan may cover additional medications; please refer to your enrollment materials for details. Cigna does not take responsibility for any medication decisions made by the doctor or pharmacist. Cigna may receive payments from manufacturers of certain preferred brand medications, and in limited instances, certain non-preferred brand medications, that may or may not be shared with your plan depending on its arrangement with Cigna. Depending upon plan design, market conditions, the extent to which manufacturer payments are shared with your plan and other factors as of the date of service, the preferred brand medication may or may not represent the lowest-cost brand medication within its class for you and/or your plan. Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. If your plan provides coverage for certain prescription drugs with no cost-share, you may be required to use an in-network pharmacy to fill the prescription. If you use a pharmacy that does not participate in your plan's network, your prescription may not be covered, or reimbursement may be limited by your plan's copayment, coinsurance or deductible requirements. Certain features described in this document may not be applicable to your specific health plan, and plan features may vary by location and plan type. Refer to your plan documents for costs and complete details of your plan's prescription drug coverage.

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