



For information on How to Request a Coverage Determination or Exception, please see the [Pharmacy Coverage Determinations](#) section on our website.

For information on the expected cost-sharing of covered drugs, please see the “What you pay for your Part D prescription drugs” chapter of your Evidence of Coverage (EOC). You may access a copy of your EOC by clicking on the [View My Benefits](#) section of our website.

The table below outlines changes to our formulary that may impact you:

Effective Date	Drug	Change	Reason
March	Acetasol HC Sol Otic	Addition (Tier 1)	Formulary Enhancement
March	Adcirca Tab 20mg	Addition (Tier 4, PA)	Formulary Enhancement
March	A-Methapred Inj 125mg	Addition (Tier 1, PA)	Formulary Enhancement
March	Aminosyn Inj 3.5%/D5w	Addition (Tier 2, PA)	Formulary Enhancement
March	Aminosyn Inj 8.5/Lyte	Addition (Tier 2, PA)	Formulary Enhancement
March	Amoclan Sus 200/5ml	Addition (Tier 1)	Formulary Enhancement
March	Amoclan Sus 400/5ml	Addition (Tier 1)	Formulary Enhancement
March	Anestacon Gel 2% Jelly	Addition (Tier 1)	Formulary Enhancement
March	Apraclonidin Sol 0.5% Op	Addition (Tier 1)	Formulary Enhancement
March	Avonex Kit 30mcg	Addition (Tier 4, PA)	Formulary Enhancement
March	Avonex Prefl Kit 30mcg	Addition (Tier 4, PA)	Formulary Enhancement
March	Azelastine Drop 0.05%	Addition (Tier 1)	Formulary Enhancement
March	Budeprion XL Tab 150mg	Addition (Tier 1)	Formulary Enhancement
March	Buprenorphin Sub 2mg	Addition (Tier 1)	Formulary Enhancement
March	Buprenorphin Sub 8mg	Addition (Tier 1)	Formulary Enhancement
March	Buproban Tab 150mg	Addition (Tier 1)	Formulary Enhancement
March	Byetta Inj 5mcg	Addition (Tier 2, PA)	Formulary Enhancement
March	Aminess Inj 5.2%	Deletion	CMS Removal
March	Geodon Cap 60mg	ST Removal	Formulary Enhancement
March	Geodon Cap 20mg	ST Removal	Formulary Enhancement
March	Geodon Cap 40mg	ST Removal	Formulary Enhancement
March	Geodon Cap 80mg	ST Removal	Formulary Enhancement
March	Compro Sup 25mg	Addition (Tier 1)	Formulary Enhancement
March	D5W/LR Inj	Addition (Tier 1, PA)	Formulary Enhancement
March	Diltzac Cap 120mg/24	Addition (Tier 1)	Formulary Enhancement
March	Diltzac Cap 180mg/24	Addition (Tier 1)	Formulary Enhancement

Effective Date	Drug	Change	Reason
March	Diltzac Cap 240mg/24	Addition (Tier 1)	Formulary Enhancement
March	Diltzac Cap 300mg/24	Addition (Tier 1)	Formulary Enhancement
March	Diltzac Cap 360mg/24	Addition (Tier 1)	Formulary Enhancement
March	Doxycyc Mono Tab 150mg	Addition (Tier 1)	Formulary Enhancement
March	Doxycyc Mono Tab 50mg	Addition (Tier 1)	Formulary Enhancement
March	Doxycyc Mono Tab 75mg	Addition (Tier 1)	Formulary Enhancement
March	Doxycycl Hyc Cap 75mg	Addition (Tier 1)	Formulary Enhancement
March	Doxycycl Hyc Cap 75mg	Addition (Tier 1)	Formulary Enhancement
March	Doxycycl Hyc Inj 100mg	Addition (Tier 1, PA)	Formulary Enhancement
March	Emend Cap 40mg	Addition (Tier 2, PA)	Formulary Enhancement
March	Enbrel Srclk Inj 50mg/MI	Addition (Tier 3, PA)	Formulary Enhancement
March	Endocet Tab 10-325mg	Addition (Tier 1)	Formulary Enhancement
March	Endocet Tab 7.5-325mg	Addition (Tier 1)	Formulary Enhancement
March	Endocet Tab 7.5-500mg	Addition (Tier 1)	Formulary Enhancement
March	Extavia Inj 0.3mg	Addition (Tier 4)	Formulary Enhancement
March	Fanapt Pak	Addition (Tier 4)	Formulary Enhancement
March	Fanapt Tab 10mg	Addition (Tier 4)	Formulary Enhancement
March	Fanapt Tab 12mg	Addition (Tier 4)	Formulary Enhancement
March	Fanapt Tab 1mg	Addition (Tier 4)	Formulary Enhancement
March	Fanapt Tab 2mg	Addition (Tier 4)	Formulary Enhancement
March	Fanapt Tab 4mg	Addition (Tier 4)	Formulary Enhancement
March	Fanapt Tab 6mg	Addition (Tier 4)	Formulary Enhancement
March	Fanapt Tab 8mg	Addition (Tier 4)	Formulary Enhancement
March	Gavilyte-C Sol	Addition (Tier 1)	Formulary Enhancement
March	Gavilyte-N Sol Flav Pk	Addition (Tier 1)	Formulary Enhancement
March	Gentam/NaCL Inj 0.9mg/ml	Addition (Tier 1, PA)	Formulary Enhancement
March	Gentam/NaCL Inj 1.4mg/ml	Addition (Tier 1, PA)	Formulary Enhancement
March	Gentam/NaCL Inj 10mg/ml	Addition (Tier 1, PA)	Formulary Enhancement
March	Gentam/NaCL Inj 40mg/ml	Addition (Tier 1, PA)	Formulary Enhancement
March	Gentam/NaCL Inj 60mg	Addition (Tier 1, PA)	Formulary Enhancement
March	Gentam/NaCL Inj 80mg	Addition (Tier 1, PA)	Formulary Enhancement
March	Hep Sod/NaCL Inj 25000unt	Addition (Tier 2, PA)	Formulary Enhancement
March	Hep Sod/NaCL Inj 25000unt	Addition (Tier 2, PA)	Formulary Enhancement
March	Hep Sod/NaCL Inj 2unit/MI	Addition (Tier 2, PA)	Formulary Enhancement
March	Humira Kit 20mg/0.4	Addition (Tier 3, PA)	Formulary Enhancement
March	Invega Sust Inj 117/0.75	Addition (Tier 4, PA)	Formulary Enhancement
March	Invega Sust Inj 156mg/ml	Addition (Tier 4, PA)	Formulary Enhancement

Effective Date	Drug	Change	Reason
March	Invega Sust Inj 234/1.5	Addition (Tier 4, PA)	Formulary Enhancement
March	Invega Sust Inj 39/0.25	Addition (Tier 4, PA)	Formulary Enhancement
March	Invega Sust Inj 78/0.5ml	Addition (Tier 4, PA)	Formulary Enhancement
March	Invega Tab 1.5mg	Addition (Tier 4, PA)	Formulary Enhancement
March	Ipratropium/Sol Albuterol	Addition (Tier 1, PA)	Formulary Enhancement
March	Ketorolac Sol 0.4%	Addition (Tier 1)	Formulary Enhancement
March	Ketorolac Sol 0.5%	Addition (Tier 1)	Formulary Enhancement
March	Kuric Cre 2%	Addition (Tier 1)	Formulary Enhancement
March	Lactated Ringer's Inj	Addition (Tier 1, PA)	Formulary Enhancement
March	Lidocaine Gel 2%	Addition (Tier 1)	Formulary Enhancement
March	Multaq Tab 400mg	Addition (Tier 2)	Formulary Enhancement
March	Mydral Sol 0.5% Op	Addition (Tier 1)	Formulary Enhancement
March	Naproxen Sod Tab 275mg	Addition (Tier 1)	Formulary Enhancement
March	Naproxen Sod Tab 550mg	Addition (Tier 1)	Formulary Enhancement
March	Nateglinide Tab 120mg	Addition (Tier 1)	Formulary Enhancement
March	Nateglinide Tab 60mg	Addition (Tier 1)	Formulary Enhancement
March	Oxcarbazepin Sus 300mg/5ml	Addition (Tier 1)	Formulary Enhancement
March	Parcaine Sol 0.5% Op	Addition (Tier 1)	Formulary Enhancement
March	Piper/Tazoba Inj 3-0.375g	Addition (Tier 1, PA)	Formulary Enhancement
March	Polyeth Glyc Pow 3350 NF	Addition (Tier 1)	Formulary Enhancement
March	Prevalite Pow 4gm	Addition (Tier 1)	Formulary Enhancement
March	Quinaretic Tab 10-12.5mg	Addition (Tier 1)	Formulary Enhancement
March	Quinaretic Tab 20-12.5mg	Addition (Tier 1)	Formulary Enhancement
March	Quinaretic Tab 20-25mg	Addition (Tier 1)	Formulary Enhancement
March	Renagel Tab 400mg	Addition (Tier 2)	Formulary Enhancement
March	Renagel Tab 800mg	Addition (Tier 2)	Formulary Enhancement
March	Risperidone Tab 1mg ODT	Addition (Tier 1)	Formulary Enhancement
March	Sabril Pow 500mg	Addition (Tier 4, PA)	Formulary Enhancement
March	Sabril Tab 500mg	Addition (Tier 4, PA)	Formulary Enhancement
March	Saphris Sub 10mg	Addition (Tier 4)	Formulary Enhancement
March	Saphris Sub 5mg	Addition (Tier 4)	Formulary Enhancement
March	Sronyx Tab	Addition (Tier 1)	Formulary Enhancement
March	Symlinpen 60 Inj 1000mcg	Addition (Tier 2, PA)	Formulary Enhancement
March	Tacrolimus Cap 0.5mg	Addition (Tier 1, PA)	Formulary Enhancement
March	Tacrolimus Cap 1mg	Addition (Tier 1, PA)	Formulary Enhancement
March	Tacrolimus Cap 5mg	Addition (Tier 1, PA)	Formulary Enhancement
March	Thermazene Cre 1%	Addition (Tier 1)	Formulary Enhancement

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March	Timolol Gel Sol 0.25% Op	Addition (Tier 1)	Formulary Enhancement
March	Timolol Gel Sol 0.5% Op	Addition (Tier 1)	Formulary Enhancement
March	Trilipix Cap 135mg	Addition (Tier 2)	Formulary Enhancement
March	Trilipix Cap 45mg	Addition (Tier 2)	Formulary Enhancement
March	Tropicacyl Sol 0.5% Op	Addition (Tier 1)	Formulary Enhancement
March	Uloric Tab 40mg	Addition (Tier 4)	Formulary Enhancement
March	Uloric Tab 80mg	Addition (Tier 4)	Formulary Enhancement
March	Valacyclovir Tab 1gm	Addition (Tier 1)	Formulary Enhancement
March	Valacyclovir Tab 500mg	Addition (Tier 1)	Formulary Enhancement
April	Abilify Inj 9.75mg	ST Removal	Formulary Enhancement
April	Ciclopirox 1%	Addition (Tier 1)	Formulary Enhancement
April	Cimzia Kit 200mg/MI	Addition (Tier 3, PA)	Formulary Enhancement
April	Dexmethylph Tab 10mg	Addition (Tier 1)	Formulary Enhancement
April	Dexmethylph Tab 2.5mg	Addition (Tier 1)	Formulary Enhancement
April	Dexmethylph Tab 5mg	Addition (Tier 1)	Formulary Enhancement
April	Effient Tab 10mg	Addition (Tier 4)	Formulary Enhancement
April	Effient Tab 5mg	Addition (Tier 4)	Formulary Enhancement
April	Letairis Tab 10mg	Addition (Tier 2, PA)	Formulary Enhancement
April	Levaquin/D5W Inj 250/50ml	Addition (Tier 2, PA)	Formulary Enhancement
April	Lotrel Cap 10-40mg	Addition (Tier 2)	Formulary Enhancement
April	Megace Es Sus	Addition (Tier 2)	Formulary Enhancement
April	Methylpred Tab 4mg	Addition (Tier 1)	Formulary Enhancement
April	Morphine Sul Sol 20mg/MI	Addition (Tier 1)	Formulary Enhancement
April	Pramipexole Tab 0.125mg	Addition (Tier 1)	Formulary Enhancement
April	Pramipexole Tab 0.25mg	Addition (Tier 1)	Formulary Enhancement
April	Pramipexole Tab 0.5mg	Addition (Tier 1)	Formulary Enhancement
April	Pramipexole Tab 1.5mg	Addition (Tier 1)	Formulary Enhancement
April	Pramipexole Tab 1mg	Addition (Tier 1)	Formulary Enhancement
April	Primaxin IM Inj 500mg	Addition (Tier 2, PA)	Formulary Enhancement
April	Sumatriptan Inj 6mg/0.5	Addition (Tier 1, QL)	Formulary Enhancement
April	Sutent Cap 12.5mg	Addition (Tier 3, PA)	Formulary Enhancement
April	Sutent Cap 50mg	Addition (Tier 3, PA)	Formulary Enhancement
April	Tyzine Ped Drop 0.05%	Addition (Tier 2)	Formulary Enhancement
April	Vancomycin Inj 10gm	Addition (Tier 1, PA)	Formulary Enhancement
May	Mozobil Inj	Addition (Tier 3, PA)	Formulary Enhancement
May	Enbrel Inj 25/0.5ml	Addition (Tier 3, PA)	Formulary Enhancement
May	Votrient Tab 200mg	Addition (Tier 3, PA)	Formulary Enhancement

Effective Date	Drug	Change	Reason
May	Prednisone Con 5mg/ml	Addition (Tier 1)	Formulary Enhancement
May	Prednisone Sol 5mg/5ml	Addition (Tier 1)	Formulary Enhancement
May	Sumatriptan Inj 6mg/0.5ml	Deletion	CMS Removal
May	Zyprexa Inj 10mg	ST Removal	Formulary Enhancement
May	Ciprofloxacin Sol 0.3% Op	Addition (Tier 1)	Formulary Enhancement
May	Phenytoin Ex Cap 300mg	Addition (Tier 1)	Formulary Enhancement
May	Phenytoin Ex Cap 200mg	Addition (Tier 1)	Formulary Enhancement
May	Astepro Spr 0.15%	Addition (Tier 2)	Formulary Enhancement
May	Valcyte Sol 50mg/ML	Addition (Tier 2)	Formulary Enhancement
May	Alphagan P Sol 0.1%	Addition (Tier 2)	Formulary Enhancement
June	Amantadine Syp 50mg/5ml	Addition (Tier 1)	Formulary Enhancement
June	Acular Sol 0.5% Op	Deletion	Formulary Generic (Ketorolac)
June	Acular LS Sol 0.4%	Deletion	Formulary Generic (Ketorolac)
June	Alkeran Inj 50mg	Deletion	Formulary Generic (Melphalan)
June	Catapres-TTS Dis 0.1/24hr	Deletion	Formulary Generic (Clonidine)
June	Catapres-TTS Dis 0.2/24hr	Deletion	Formulary Generic (Clonidine)
June	Catapres-TTS Dis 0.3/24hr	Deletion	Formulary Generic (Clonidine)
June	Cogentin Inj 1mg/ml	Deletion	Formulary Generic (Benztropone Mesylate)
June	Eloxatin Inj 100mg	Deletion	Formulary Generic (Oxaliplatin)
June	Optivar Dro 0.05%	Deletion	Formulary Generic (Azelastine)
June	Ovide Lot 0.5%	Deletion	Formulary Generic (Malathion)
June	Prograf Cap 0.5mg	Deletion	Formulary Generic (Tacrolimus)
June	Prograf Cap 1mg	Deletion	Formulary Generic (Tacrolimus)
June	Prograf Cap 5mg	Deletion	Formulary Generic (Tacrolimus)
June	Starlix Tab 120mg	Deletion	Formulary Generic (Nateglinide)
June	Starlix Tab 60mg	Deletion	Formulary Generic (Nateglinide)
June	Trileptal Sus 300mg/5ml	Deletion	Formulary Generic (Oxcarbazepine)

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June	Valtrex Tab 1gm	Deletion	Formulary Generic (Valacyclovir)
June	Valtrex Tab 500mg	Deletion	Formulary Generic (Valacyclovir)
June	Augmentin Sus 250/5ml	Deletion	Formulary Generic (Amoxicillin)
June	Plan B Tab	Deletion	Formulary Alternative (Next Choice)
June	Risperdal M Tab 1mg	Deletion	Formulary Generic (Risperidone)
June	Subutex Sub 2mg	Deletion	Formulary Generic (Buprenorphine)
June	Subutex Sub 8mg	Deletion	Formulary Generic (Buprenorphine)
June	Extavia Inj 0.3mg	Tier Change (Tier 3)	Formulary Enhancement
June	Gentamicin Cre 0.1%	Addition (Tier 1)	Formulary Enhancement
June	Imiquimod Cre 5%	Addition (Tier 1)	Formulary Enhancement
June	Tamsulosin Cap 0.4mg	Addition (Tier 1)	Formulary Enhancement
June	Asmanex 30 Aer 110mcg	Addition (Tier 2)	Formulary Enhancement
June	SymInpen 120 Inj 1000mcg	Addition (Tier 2, PA)	Formulary Enhancement
June	Valturna Tab 150-160	Addition (Tier 2)	Formulary Enhancement
June	Valturna Tab 300-320	Addition (Tier 2)	Formulary Enhancement
June	Stelara Inj 45mg/0.5	Addition (Tier 3, PA)	Formulary Enhancement
June	Stelara Inj 45mg/0.5	Addition (Tier 3, PA)	Formulary Enhancement
June	Stelara Inj 90mg/MI	Addition (Tier 3, PA)	Formulary Enhancement
June	Coartem Tab 20-120mg	Addition (Tier 4)	Formulary Enhancement
June	Travatan Z Dro 0.004%	Addition (Tier 4)	Formulary Enhancement
July	Mirapex Tab 0.125mg	Deletion	Formulary Generic (Pramipexole)
July	Mirapex Tab 0.25mg	Deletion	Formulary Generic (Pramipexole)
July	Mirapex Tab 0.5mg	Deletion	Formulary Generic (Pramipexole)
July	Mirapex Tab 1.5mg	Deletion	Formulary Generic (Pramipexole)
July	Mirapex Tab 1mg	Deletion	Formulary Generic (Pramipexole)
July	Lipram-PN10 Cap	Deletion	CMS Removal
July	Lipram-PN16 Cap	Deletion	CMS Removal
July	Lipram-PN20 Cap	Deletion	CMS Removal
July	Pancrease MT Cap 10	Deletion	CMS Removal
July	Pancrease MT Cap 16	Deletion	CMS Removal

Effective Date	Drug	Change	Reason
July	Pancrease MT Cap 20	Deletion	CMS Removal
July	Pancrease MT Cap 4	Deletion	CMS Removal
July	Pancrelipase Cap MST-16	Deletion	CMS Removal
July	Pancrelipase Cap	Deletion	CMS Removal
July	Pancron-10 Cap EC	Deletion	CMS Removal
July	Ixiaro Inj	Addition (Tier 2)	Formulary Enhancement
July	Dexilant Cap 60mg DR	Addition (Tier 2)	Formulary Enhancement
July	Dexilant Cap 30mg DR	Addition (Tier 2)	Formulary Enhancement
July	Zenpep Cap 20000unt	Addition (Tier 2)	Formulary Enhancement
July	Zenpep Cap 15000unt	Addition (Tier 2)	Formulary Enhancement
July	Zenpep Cap 10000unt	Addition (Tier 2)	Formulary Enhancement
July	Zenpep Cap 5000unit	Addition (Tier 2)	Formulary Enhancement
July	Actemra Inj 200/10ml	Addition (Tier 3, PA)	Formulary Enhancement
July	Istodax Inj 10mg	Addition (Tier 3, PA)	Formulary Enhancement
July	Clindamycin Aer 1%	Addition (Tier 1)	Formulary Enhancement
July	Clotrimazole Cre 1%	Addition (Tier 1)	Formulary Enhancement
July	Amox-Pot Cla Tab ER	Addition (Tier 1)	Formulary Enhancement