

**Virginia Premier Advantage Elite**  
**2019**  
**Formulary Addendum**

**BvD – Part B vs. Part D, NF - Non-Formulary, PA - Prior Authorization (1=all members, 2=new starts),  
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<b>2019 FORMULARY CHANGES</b>				
<b>Drug Name</b>	<b>Current Drug Tier</b>	<b>New Drug Tier</b>	<b>Reason For Change</b>	<b>Alternative Drug, Alternative Drug Tier</b>
<b>EFFECTIVE 01/01/2019</b>				
AMPHETAMINE- DEXTROAMPHET ER CAPSULE EXTENDED RELEASE 24 HOUR 10 MG ORAL	NF	1 + QL 30	Formulary Enhancement	N/A
AMPHETAMINE- DEXTROAMPHET ER CAPSULE EXTENDED RELEASE 24 HOUR 15 MG ORAL	NF	1 + QL 30	Formulary Enhancement	N/A
AMPHETAMINE- DEXTROAMPHET ER CAPSULE EXTENDED RELEASE 24 HOUR 20 MG ORAL	NF	1 + QL 30	Formulary Enhancement	N/A
AMPHETAMINE- DEXTROAMPHET ER CAPSULE EXTENDED RELEASE 24 HOUR 25 MG ORAL	NF	1 + QL 30	Formulary Enhancement	N/A
AMPHETAMINE- DEXTROAMPHET ER CAPSULE EXTENDED RELEASE 24 HOUR 30 MG ORAL	NF	1 + QL 30	Formulary Enhancement	N/A
AMPHETAMINE- DEXTROAMPHET ER CAPSULE EXTENDED RELEASE 24 HOUR 5 MG ORAL	NF	1 + QL 30	Formulary Enhancement	N/A
ANORO ELLIPTA AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/INH INHALATION	NF	1 + QL 60	Formulary Enhancement	N/A
AURYXIA TABLET 1 GM 210 MG(FE) ORAL	1	1 + PA1	Formulary Update	N/A
BROMSITE SOLUTION 0.075 % OPHTHALMIC	NF	1	Formulary Enhancement	N/A

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CIMDUO TABLET 300-300 MG ORAL	NF	1 + QL 30	Formulary Enhancement	N/A
DALFAMPRIDIN TABLET EXTENDED RELEASE 12 HOUR 10 MG ORAL	NF	1 + PA1 + LA	Formulary Enhancement	N/A
DIAZEPAM GEL 10 MG RECTAL	NF	1	Formulary Enhancement	N/A
DIAZEPAM GEL 2.5 MG RECTAL	NF	1	Formulary Enhancement	N/A
DIAZEPAM GEL 20 MG RECTAL	NF	1	Formulary Enhancement	N/A
ESTROPIPATE TABLET 1.5 MG ORAL	1 + PA2	NF	CMS Required Deletion	N/A
HUMIRA PEN-CD/UC/HS STARTER PEN-INJECTOR KIT 80 MG/0.8ML SUBCUTANEOUS	NF	1 + PA1	Formulary Enhancement	N/A
HUMIRA PEN-PS/UV STARTER PEN-INJECTOR KIT 80 MG/0.8ML & 40MG/0.4ML SUBCUTANEOUS	NF	1 + PA1	Formulary Enhancement	N/A
INCASSIA TABLET 0.35 MG ORAL	NF	1	Formulary Enhancement	N/A
KETOPROFEN CAPSULE 75 MG ORAL	1	NF	CMS Required Deletion	N/A
PROLIA SOLUTION 60 MG/ML SUBCUTANEOUS	1 + PA1	1	Formulary Enhancement	N/A
SOTALOL HCL (AF) TABLET 160 MG ORAL	NF	1	Formulary Enhancement	N/A
SOTALOL HCL (AF) TABLET 80 MG ORAL	NF	1	Formulary Enhancement	N/A
SOTALOL HCL TABLET 120 MG ORAL	NF	1	Formulary Enhancement	N/A
SYNJARDY XR TABLET EXTENDED RELEASE 24 HOUR 12.5-1000 MG ORAL	NF	1 + QL 60	Formulary Enhancement	N/A

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SYNJARDY XR TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG ORAL	NF	1 + QL 60	Formulary Enhancement	N/A
THALOMID CAPSULE 100 MG ORAL	1 + PA2	1	Formulary Enhancement	N/A
THALOMID CAPSULE 150 MG ORAL	1 + PA2	1	Formulary Enhancement	N/A
THALOMID CAPSULE 200 MG ORAL	1 + PA2	1	Formulary Enhancement	N/A
THALOMID CAPSULE 50 MG ORAL	1 + PA2	1	Formulary Enhancement	N/A
TRELEGY ELLIPTA AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/INH INHALATION	NF	1 + QL 60 + ST1	Formulary Enhancement	N/A
VESTURA TABLET 3-0.02 MG ORAL	1	NF	CMS Required Deletion	N/A
XELJANZ TABLET 10 MG ORAL	NF	1 + PA1	Formulary Enhancement	N/A
ZENPEP CAPSULE DELAYED RELEASE PARTICLES 15000 UNIT ORAL	1	NF	CMS Required Deletion	N/A
ZENPEP CAPSULE DELAYED RELEASE PARTICLES 15000-47000 UNIT ORAL	NF	1	Formulary Enhancement	N/A
ZENPEP CAPSULE DELAYED RELEASE PARTICLES 25000 UNIT ORAL	1	NF	CMS Required Deletion	N/A
ZENPEP CAPSULE DELAYED RELEASE PARTICLES 3000-10000 UNIT ORAL	1	NF	CMS Required Deletion	N/A

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ZENPEP CAPSULE DELAYED RELEASE PARTICLES 3000-14000 UNIT ORAL	NF	1	Formulary Enhancement	N/A
ZENPEP CAPSULE DELAYED RELEASE PARTICLES 5000 UNIT ORAL	1	NF	CMS Required Deletion	N/A
<b>EFFECTIVE 02/01/2019</b>				
ABIRATERONE ACETATE TABLET 250 MG ORAL	N/F	1 + PA2	Formulary Enhancement	N/A
ADAPALENE SOLUTION 0.1 % EXTERNAL	N/F	1 + PA1	Formulary Enhancement	N/A
AMPYRA TABLET EXTENDED RELEASE 12 HOUR 10 MG ORAL	1 + PA1 + LA	NF	Formulary Update	dalfampridine 10 mg, 1 + PA1
ANDROGEL GEL 20.25 MG/1.25GM (1.62%) TRANSDERMAL	1 + PA2	NF	Formulary Update	testosterone 0.0162 mg/mg, 1 + PA2
ANDROGEL GEL 40.5 MG/2.5GM (1.62%) TRANSDERMAL	1 + PA2	NF	Formulary Update	testosterone 0.0162 mg/mg, 1 + PA2
ANDROGEL PUMP GEL 20.25 MG/ACT (1.62%) TRANSDERMAL	1 + PA2	NF	Formulary Update	testosterone 20.25 mg/actuat, 1 + PA2
ARIKAYCE SUSPENSION 590 MG/8.4ML INHALATION	N/F	1 + PA1	Formulary Enhancement	N/A
BRAFTOVI CAPSULE 50 MG ORAL	N/F	1 + PA2 + LA	Formulary Enhancement	N/A
BRAFTOVI CAPSULE 75 MG ORAL	N/F	1 + PA2 + LA	Formulary Enhancement	N/A
BUPROPION HCL ER (XL) TABLET EXTENDED RELEASE 24 HOUR 450 MG ORAL	N/F	1 + QL 30	Formulary Enhancement	N/A
CLINIMIX/DEXTROSE (2.75/5) SOLUTION 2.75 % INTRAVENOUS	1 + BvD	NF	CMS Required Deletion	N/A

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CLINIMIX/DEXTROSE (4.25/20) SOLUTION 4.25 % INTRAVENOUS	1 + BvD	NF	CMS Required Deletion	N/A
CLOBAZAM SUSPENSION 2.5 MG/ML ORAL	N/F	1 + QL 480	Formulary Enhancement	N/A
CLOBAZAM TABLET 10 MG ORAL	N/F	1 + QL 120	Formulary Enhancement	N/A
CLOBAZAM TABLET 20 MG ORAL	N/F	1 + QL 60	Formulary Enhancement	N/A
COLESEVELAM HCL PACKET 3.75 GM ORAL	N/F	1	Formulary Enhancement	N/A
COPIKTRA CAPSULE 15 MG ORAL	N/F	1 + PA2	Formulary Enhancement	N/A
COPIKTRA CAPSULE 25 MG ORAL	N/F	1 + PA2	Formulary Enhancement	N/A
CYRED EQ TABLET 0.15-30 MG-MCG ORAL	N/F	1	Formulary Enhancement	N/A
DAPTOMYCIN SOLUTION RECONSTITUTED 350 MG INTRAVENOUS	N/F	1 + BvD	Formulary Enhancement	N/A
DELSTRIGO TABLET 100-300-300 MG ORAL	N/F	1 + QL 30	Formulary Enhancement	N/A
DICLOFENAC SODIUM GEL 1 % TRANSDERMAL	1 + PA1	1	Formulary Enhancement	N/A
DORZOLAMIDE HCL-TIMOLOL MAL PF SOLUTION 22.3-6.8 MG/ML OPHTHALMIC	N/F	1	Formulary Enhancement	N/A
EPIDIOLEX SOLUTION 100 MG/ML ORAL	N/F	1 + PA2	Formulary Enhancement	N/A
ERTAPENEM SODIUM SOLUTION RECONSTITUTED 1 GM INJECTION	N/F	1 + BvD	Formulary Enhancement	N/A

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GALAFOLD CAPSULE 123 MG ORAL	N/F	1 + PA1	Formulary Enhancement	N/A
HEXALEN CAPSULE 50 MG ORAL	1 + PA2	NF	CMS Required Deletion	N/A
HYDROCORTISONE BUTYRATE LOTION 0.1 % EXTERNAL	N/F	1	Formulary Enhancement	N/A
INVANZ SOLUTION RECONSTITUTED 1 GM INJECTION	1 + BvD	NF	Formulary Update	ertapenem 1000 mg, 1 + BvD
KETOPROFEN CAPSULE 25 MG ORAL	N/F	1	Formulary Enhancement	N/A
KIMIDESS TABLET 0.15-0.02/0.01 MG (21/5) ORAL	1	NF	CMS Required Deletion	N/A
LENVIMA 12 MG DAILY DOSE CAPSULE THERAPY PACK 4 (3) MG ORAL	N/F	1 + PA2	Formulary Enhancement	N/A
LENVIMA 4 MG DAILY DOSE CAPSULE THERAPY PACK 4 MG ORAL	N/F	1 + PA2	Formulary Enhancement	N/A
LORBRENA TABLET 100 MG ORAL	N/F	1 + PA2	Formulary Enhancement	N/A
LORBRENA TABLET 25 MG ORAL	N/F	1 + PA2	Formulary Enhancement	N/A
MEKTOVI TABLET 15 MG ORAL	N/F	1 + PA2 + LA	Formulary Enhancement	N/A
MOLINDONE HCL TABLET 10 MG ORAL	N/F	1	Formulary Enhancement	N/A
MOLINDONE HCL TABLET 25 MG ORAL	N/F	1	Formulary Enhancement	N/A
MOLINDONE HCL TABLET 5 MG ORAL	N/F	1	Formulary Enhancement	N/A
MORPHINE SULFATE ER CAPSULE EXTENDED RELEASE 24 HOUR 40 MG ORAL	N/F	1	Formulary Enhancement	N/A

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NAFCILLIN SODIUM SOLUTION RECONSTITUTED 2 GM INJECTION	N/F	1 + BvD	Formulary Enhancement	N/A
NECON 7/7/7 TABLET 0.5/0.75/1-35 MG-MCG ORAL	1	NF	CMS Requird Deletion	N/A
NORVIR CAPSULE 100 MG ORAL	1 + QL 360	NF	CMS Requird Deletion	N/A
NUPLAZID CAPSULE 34 MG ORAL	N/F	1 + QL 30 + PA2 + LA + ST2	Formulary Enhancement	N/A
NUPLAZID TABLET 10 MG ORAL	N/F	1 + QL 30 + PA2 + LA + ST2	Formulary Enhancement	N/A
ONFI SUSPENSION 2.5 MG/ML ORAL	1 + QL 480	NF	Formulary Update	clobazam 2.5 mg/ml, 1 + QL 480
ONFI TABLET 10 MG ORAL	1 + QL 120	NF	Formulary Update	clobazam 10 mg, 1 + QL 120
ONFI TABLET 20 MG ORAL	1 + QL 60	NF	Formulary Update	clobazam 20 mg, 1 + QL 60
ORKAMBI PACKET 100-125 MG ORAL	N/F	1 + PA1 + LA	Formulary Enhancement	N/A
ORKAMBI PACKET 150-188 MG ORAL	N/F	1 + PA1 + LA	Formulary Enhancement	N/A
PIFELTRO TABLET 100 MG ORAL	N/F	1 + QL 30	Formulary Enhancement	N/A
SODIUM CHLORIDE SOLUTION 2.5 MEQ/ML INJECTION	1 + BvD	NF	CMS Requird Deletion	N/A
SUMATRIPTAN SUCCINATE REFILL SOLUTION CARTRIDGE 6 MG/0.5ML SUBCUTANEOUS	N/F	1 + QL 8	Formulary Enhancement	N/A
SYM TUZA TABLET 800-150-200-10 MG ORAL	N/F	1 + QL 30	Formulary Enhancement	N/A

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TAKHZYRO SOLUTION 300 MG/2ML SUBCUTANEOUS	N/F	1 + PA1	Formulary Enhancement	N/A
TALZENNA CAPSULE 0.25 MG ORAL	N/F	1 + PA2 + LA	Formulary Enhancement	N/A
TALZENNA CAPSULE 1 MG ORAL	N/F	1 + PA2 + LA	Formulary Enhancement	N/A
TESTOSTERONE GEL 20.25 MG/1.25GM (1.62%) TRANSDERMAL	N/F	1 + PA2	Formulary Enhancement	N/A
TESTOSTERONE GEL 20.25 MG/ACT (1.62%) TRANSDERMAL	N/F	1 + PA2	Formulary Enhancement	N/A
TESTOSTERONE GEL 40.5 MG/2.5GM (1.62%) TRANSDERMAL	N/F	1 + PA2	Formulary Enhancement	N/A
TIBSOVO TABLET 250 MG ORAL	N/F	1 + PA2 + LA	Formulary Enhancement	N/A
TIGLUTIK SUSPENSION 50 MG/10ML ORAL	N/F	1 + PA1	Formulary Enhancement	N/A
VANCOMYCIN HCL SOLUTION RECONSTITUTED 250 MG INTRAVENOUS	N/F	1 + BvD	Formulary Enhancement	N/A
VANCOMYCIN HCL SOLUTION RECONSTITUTED 750 MG INTRAVENOUS	N/F	1 + BvD	Formulary Enhancement	N/A
VERSACLOZ SUSPENSION 50 MG/ML ORAL	1 + ST2	NF	CMS Requird Deletion	N/A
VIZIMPRO TABLET 15 MG ORAL	N/F	1 + PA2	Formulary Enhancement	N/A
VIZIMPRO TABLET 30 MG ORAL	N/F	1 + PA2	Formulary Enhancement	N/A
VIZIMPRO TABLET 45 MG ORAL	N/F	1 + PA2	Formulary Enhancement	N/A
WELCHOL PACKET 3.75 GM ORAL	1	NF	Formulary Update	colesevelam hydrochloride 3750 mg, 1
XARELTO TABLET 2.5 MG ORAL	N/F	1 + QL 120	Formulary Enhancement	N/A

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XOFLUZA TABLET THERAPY PACK 20 (2) MG ORAL	N/F	1	Formulary Enhancement	N/A
XOFLUZA TABLET THERAPY PACK 40 (2) MG ORAL	N/F	1	Formulary Enhancement	N/A
XOLAIR SOLUTION PREFILLED SYRINGE 150 MG/ML SUBCUTANEOUS	N/F	1 + PA1	Formulary Enhancement	N/A
XOLAIR SOLUTION PREFILLED SYRINGE 75 MG/0.5ML SUBCUTANEOUS	N/F	1 + PA1	Formulary Enhancement	N/A
ZORTRESS TABLET 1 MG ORAL	N/F	1 + PA2	Formulary Enhancement	N/A
ZYTIGA TABLET 250 MG ORAL	1 + PA2	NF	Formulary Update	abiraterone acetate 250 mg, 1 + PA2
<b>EFFECTIVE 03/01/2019</b>				
ABILIFY MAINTENA PREFILLED SYRINGE 300 MG INTRAMUSCULAR	1 + QL 1/28	1	Formulary Enhancement	N/A
ABILIFY MAINTENA PREFILLED SYRINGE 400 MG INTRAMUSCULAR	1 + QL 1/28	1	Formulary Enhancement	N/A
ABILIFY MAINTENA SUSPENSION RECONSTITUTED ER 300 MG INTRAMUSCULAR	1 + QL 1/28	1	Formulary Enhancement	N/A
ABILIFY MAINTENA SUSPENSION RECONSTITUTED ER 400 MG INTRAMUSCULAR	1 + QL 1/28	1	Formulary Enhancement	N/A
ACTEMRA ACTPEN SOLUTION AUTO-INJECTOR 162 MG/0.9ML SUBCUTANEOUS	NF	1 + PA1	Formulary Enhancement	N/A

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BUPRENORPHINE HCL-NALOXONE HCL TABLET SUBLINGUAL 2-0.5 MG SUBLINGUAL	1 + PA1	1	Formulary Enhancement	N/A
BUPRENORPHINE HCL-NALOXONE HCL TABLET SUBLINGUAL 8-2 MG SUBLINGUAL	1 + PA1	1	Formulary Enhancement	N/A
CLINIMIX E/DEXTROSE (5/25) SOLUTION 5 % INTRAVENOUS	1 + BvD	NF	CMS Required Deletion	N/A
DAURISMO TABLET 100 MG ORAL	NF	1 + PA2	Formulary Enhancement	N/A
DAURISMO TABLET 25 MG ORAL	NF	1 + PA2	Formulary Enhancement	N/A
FIRVANQ SOLUTION RECONSTITUTED 25 MG/ML ORAL	NF	1	Formulary Enhancement	N/A
FIRVANQ SOLUTION RECONSTITUTED 50 MG/ML ORAL	NF	1	Formulary Enhancement	N/A
HAILEY 24 FE TABLET 1-20 MG-MCG(24) ORAL	NF	1	Formulary Enhancement	N/A
INVIRASE CAPSULE 200 MG ORAL	1 + QL 300	NF	CMS Required Deletion	N/A
LOKELMA PACKET 10 GM ORAL	NF	1	Formulary Enhancement	N/A
LOKELMA PACKET 5 GM ORAL	NF	1	Formulary Enhancement	N/A
LYNPARZA CAPSULE 50 MG ORAL	1 + PA2 + LA	NF	CMS Required Deletion	N/A
MESALAMINE SUPPOSITORY 1000 MG RECTAL	NF	1	Formulary Enhancement	N/A
METIPRANOLOL SOLUTION 0.3 % OPHTHALMIC	1	NF	CMS Required Deletion	N/A

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MODERIBA 800 DOSE PACK TABLET 400 MG ORAL	1	NF	CMS Required Deletion	N/A
NOCDURNA TABLET SUBLINGUAL 27.7 MCG SUBLINGUAL	NF	1	Formulary Enhancement	N/A
NOCDURNA TABLET SUBLINGUAL 55.3 MCG SUBLINGUAL	NF	1	Formulary Enhancement	N/A
OXERVATE SOLUTION 0.002 % OPHTHALMIC	NF	1 + PA1	Formulary Enhancement	N/A
POLYETHYLENE GLYCOL 3350 POWDER ORAL	1	NF	CMS Required Deletion	N/A
POTASSIUM CHLORIDE PACKET 20 MEQ ORAL	NF	1	Formulary Enhancement	N/A
RETACRIT SOLUTION 10000 UNIT/ML INJECTION	NF	1 + PA1	Formulary Enhancement	N/A
RETACRIT SOLUTION 2000 UNIT/ML INJECTION	NF	1 + PA1	Formulary Enhancement	N/A
RETACRIT SOLUTION 3000 UNIT/ML INJECTION	NF	1 + PA1	Formulary Enhancement	N/A
RETACRIT SOLUTION 4000 UNIT/ML INJECTION	NF	1 + PA1	Formulary Enhancement	N/A
RETACRIT SOLUTION 40000 UNIT/ML INJECTION	NF	1 + PA1	Formulary Enhancement	N/A
SILODOSIN CAPSULE 4 MG ORAL	NF	1 + QL 30	Formulary Enhancement	N/A
SILODOSIN CAPSULE 8 MG ORAL	NF	1 + QL 30	Formulary Enhancement	N/A
SOFOSBUVIR-VELPATASVIR TABLET 400-100 MG ORAL	NF	1 + PA1	Formulary Enhancement	N/A
SUMATRIPTAN SUCCINATE SOLUTION PREFILLED SYRINGE 6 MG/0.5ML SUBCUTANEOUS	NF	1 + QL 8	Formulary Enhancement	N/A

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<b>2019 FORMULARY CHANGES</b>				
<b>Drug Name</b>	<b>Current Drug Tier</b>	<b>New Drug Tier</b>	<b>Reason For Change</b>	<b>Alternative Drug, Alternative Drug Tier</b>
TEGSEDI SOLUTION PREFILLED SYRINGE 284 MG/1.5ML SUBCUTANEOUS	NF	1 + PA1	Formulary Enhancement	N/A
TRI-ESTARYLLA TABLET 0.18/0.215/0.25 MG-35 MCG ORAL	NF	1	Formulary Enhancement	N/A
VITRAKVI CAPSULE 100 MG ORAL	NF	1 + PA2	Formulary Enhancement	N/A
VITRAKVI CAPSULE 25 MG ORAL	NF	1 + PA2	Formulary Enhancement	N/A
VITRAKVI SOLUTION 20 MG/ML ORAL	NF	1 + PA2	Formulary Enhancement	N/A
XOSPATA TABLET 40 MG ORAL	NF	1 + PA2	Formulary Enhancement	N/A
ZENCHENT TABLET 0.4-35 MG-MCG ORAL	1	NF	CMS Required Deletion	N/A
ZERIT SOLUTION RECONSTITUTED 1 MG/ML ORAL	1 + QL 2480	NF	CMS Required Deletion	N/A
<b>EFFECTIVE 04/01/2019</b>				
ALBENDAZOLE TABLET 200 MG ORAL	NF	1	Formulary Enhancement	N/A
BUPRENORPHINE PATCH WEEKLY 10 MCG/HR TRANSDERMAL	1 + PA1	1	Formulary Enhancement	N/A
BUPRENORPHINE PATCH WEEKLY 15 MCG/HR TRANSDERMAL	1 + PA1	1	Formulary Enhancement	N/A
BUPRENORPHINE PATCH WEEKLY 20 MCG/HR TRANSDERMAL	1 + PA1	1	Formulary Enhancement	N/A
BUPRENORPHINE PATCH WEEKLY 5 MCG/HR TRANSDERMAL	1 + PA1	1	Formulary Enhancement	N/A

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**Last Updated: 03/26/2019**  
**Effective date: 04/01/2019**

**Virginia Premier Advantage Elite**  
**2019**  
**Formulary Addendum**

**BvD – Part B vs. Part D, NF - Non-Formulary, PA - Prior Authorization (1=all members, 2=new starts),  
 QL – Quantity Limit per 30 days, ST - Step Therapy (1=all members, 2=new starts),  
 LA - This prescription may be available only at certain pharmacies.**

<b>2019 FORMULARY CHANGES</b>				
<b>Drug Name</b>	<b>Current Drug Tier</b>	<b>New Drug Tier</b>	<b>Reason For Change</b>	<b>Alternative Drug, Alternative Drug Tier</b>
BUPRENORPHINE PATCH WEEKLY 7.5 MCG/HR TRANSDERMAL	NF	1	Formulary Enhancement	N/A
MODERIBA 1200 DOSE PACK TABLET 600 MG ORAL	1	NF	CMS Required Deletion	N/A
MODERIBA TABLET 200 MG ORAL	1	NF	CMS Required Deletion	N/A
NEVIRAPINE SUSPENSION 50 MG/5ML ORAL	NF	1 + QL 1200	Formulary Enhancement	N/A
PERSERIS PREFILLED SYRINGE 120 MG SUBCUTANEOUS	NF	1 + QL 1	Formulary Enhancement	N/A
PERSERIS PREFILLED SYRINGE 90 MG SUBCUTANEOUS	NF	1 + QL 1	Formulary Enhancement	N/A
PIMECROLIMUS CREAM 1 % EXTERNAL	NF	1	Formulary Enhancement	N/A
PROMACTA PACKET 12.5 MG ORAL	NF	1 + QL 360 + PA1	Formulary Enhancement	N/A
RAPAFLO CAPSULE 4 MG ORAL	1 + QL 30	NF	Formulary Update	silodosin capsule 4 mg oral, 1 + QL 30
RAPAFLO CAPSULE 8 MG ORAL	1 + QL 30	NF	Formulary Update	silodosin capsule 8 mg oral, 1 + QL 30
SYMPAZAN FILM 10 MG ORAL	NF	1 + QL 120	Formulary Enhancement	N/A
SYMPAZAN FILM 20 MG ORAL	NF	1 + QL 60	Formulary Enhancement	N/A
SYMPAZAN FILM 5 MG ORAL	NF	1 + QL 240	Formulary Enhancement	N/A
TRI-VYLIBRA LO TABLET 0.18/0.215/0.25 MG-25 MCG ORAL	NF	1	Formulary Enhancement	N/A
VYZULTA SOLUTION 0.024 % OPHTHALMIC	NF	1 + QL 2.5/25	Formulary Enhancement	N/A

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