



PRESCRIPTION DRUG PROGRAM FORMULARY UPDATES

Generic Additions

These generic drugs recently became available in the marketplace. When these generic drugs became available, we began covering them at the appropriate generic formulary level of cost-sharing:

Generic drug	Brand drug	Formulary chapter	Effective date
dutasteride/tamsulosin hcl	Jalyn®	Chapter 13. Urinary & Prostate Meds	November 23, 2015
imatinib mesylate*	Gleevec®	Chapter 2. Cancer & Organ Transplant Drugs	January 25, 2016
lamotrigine odt	Lamictal® ODT	Chapter 3. Pain, Nervous System, & Psych	November 2, 2015
linezolid susp*	Zyvox® susp	Chapter 1. Antibiotics & Other Drugs Used for Infection	November 23, 2015
metoclopramide odt	Metozolv® ODT	Chapter 8. Stomach, Ulcer, & Bowel Meds	November 2, 2015
molindone hcl	Moban®	Chapter 3. Pain, Nervous System, & Psych	November 23, 2015
nevirapine er	Viramune® XR	Chapter 1. Antibiotics & Other Drugs Used for Infection	November 16, 2015
norgestimate-ethinyl estradiol	Ortho Tri-Cyclen Lo®	Chapter 10. Female, Hormone Replacement, & Birth Control	January 11, 2016
olopatadine hcl 0.1%	Patanol® 0.1%	Chapter 11. Eye Medications	December 14, 2015
pramipexole er 2.25 mg	Mirapex® ER 2.25 mg	Chapter 3. Pain, Nervous System, & Psych	November 30, 2015
repaglinide-metformin hcl	Prandimet™	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones	November 23, 2015
tobramycin/nebulizer	Kitabis® Pak	Chapter 12. Allergy, Cough & Cold, Lung Meds	November 9, 2015

*Generic requires prior authorization.

Brand Additions

This brand drug was added to the formulary as of the date indicated below and is covered at the appropriate brand formulary level of cost-sharing:

Effective July 1, 2016

Brand drug	Generic drug	Formulary chapter
Cimzia®	N/A	Chapter 9. Bone, Joint, & Muscle

Brand Deletions

These brand drugs will be covered at the appropriate non-formulary level of cost-sharing:

Effective July 1, 2016

Brand drug	Generic drug	Formulary chapter
Gleevec®	imatinib mesylate	Chapter 2. Cancer & Organ Transplant Drugs
Mirapex® ER 2.25 mg	pramipexole er 2.25 mg	Chapter 3. Pain, Nervous System, & Psych
Ortho Tri-Cyclen Lo®	norgestimate-ethinyl estradiol	Chapter 10. Female, Hormone Replacement, & Birth Control
Patanol® 0.1%	olopatadine hcl 0.1%	Chapter 11. Eye Medications

The generic for the above brand drugs are on our formulary and available at the generic formulary level of cost-sharing.

Brand Deletions

This brand drug will be covered at the appropriate non-formulary level of cost-sharing:

Effective July 1, 2016

Brand drug	Formulary Therapeutic Alternatives	Formulary chapter
Acanya®	clindamycin phos-benzoyl perox 1%-5% gel	Chapter 5. Skin Medications

(continued)

Brand Deletions

This brand drug will be covered at the appropriate non-formulary level of cost-sharing:

Effective July 1, 2016

Enbrel® Cimzia®, Humira® Chapter 9. Bone, Joint, & Muscle

There is no generic equivalent for the above brand drug; however, there is a formulary therapeutic alternative drug. This therapeutic alternative drug is available at the appropriate formulary level of cost-sharing. Contact your doctor to discuss formulary alternatives.

Drugs Requiring Prior Authorization

The prior authorization requirement for the following drugs was effective at the time the drugs became available in the marketplace:

Brand drug	Generic drug	Formulary chapter	Effective date
Adynovate®	N/A	Chapter 4. Heart, Blood Pressure, & Cholesterol	November 30, 2015
Alecensa®	N/A	Chapter 2. Cancer & Organ Transplant Drugs	December 21, 2015
Belbuca™ 300 mcg, 450 mcg, 600 mcg, 750 mcg, 900 mcg	N/A	Chapter 3. Pain, Nervous System, & Psych	November 30, 2015
Coagadex®	N/A	Chapter 4. Heart, Blood Pressure, & Cholesterol	November 30, 2015
Cotellic™	N/A	Chapter 2. Cancer & Organ Transplant Drugs	November 16, 2015
Enstilar® 0.005-.064 foam	N/A	Chapter 5. Skin Medications	January 11, 2016
Ferriprox® 100mg/ml solution	N/A	Chapter 15. Diagnostics & Miscellaneous Agents	December 7, 2015
Narcan® 4 mg/actuation spray	N/A	Chapter 3. Pain, Nervous System, & Psych	December 7, 2015
Ninlaro®	N/A	Chapter 2. Cancer & Organ Transplant Drugs	November 30, 2015
Nuwiq®	N/A	Chapter 4. Heart, Blood Pressure, & Cholesterol	November 2, 2015
Riastap®	N/A	Chapter 4. Heart, Blood Pressure, & Cholesterol	June 1, 2016
Strensiq™	N/A	Chapter 15. Diagnostics & Miscellaneous Agents	November 2, 2015
Tagrisso™	N/A	Chapter 2. Cancer & Organ Transplant Drugs	November 23, 2015
Upravi®	N/A	Chapter 4. Heart, Blood Pressure, & Cholesterol	January 4, 2016
Utibron™ Neohaler	N/A	Chapter 12. Allergy, Cough & Cold, Lung Meds	November 16, 2015
Zepatier™	N/A	Chapter 1. Antibiotics & Other Drugs Used for Infection	February 8, 2016

Drugs Requiring Prior Authorization

The following non-formulary drugs have been added to the list of drugs requiring prior authorization:

Effective July 1, 2016

Brand drug	Generic drug	Formulary chapter
Acanya®	N/A	Chapter 5. Skin Medications
Adderall®	dextroamphetamine-amphetamine	Chapter 3. Pain, Nervous System, & Psych
brand prenatal vitamins	various	Chapter 14. Vitamins & Electrolytes
Concerta®	methylphenidate er	Chapter 3. Pain, Nervous System, & Psych
Desoxyn®	methamphetamine hcl	Chapter 3. Pain, Nervous System, & Psych
Dexedrine®	dextroamphetamine sulfate	Chapter 3. Pain, Nervous System, & Psych
Focalin® XR 5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 40 mg	dexmethylphenidate hcl er	Chapter 3. Pain, Nervous System, & Psych
Metadate® CD	methylphenidate hcl cd	Chapter 3. Pain, Nervous System, & Psych
Ritalin® LA 20 mg, 30 mg, 40 mg	methylphenidate er	Chapter 3. Pain, Nervous System, & Psych
Zegerid® 40 mg/1.1 g cap	omeprazole/ sodium bicarbonate 40 mg/1.1 g cap*	Chapter 8. Stomach, Ulcer, & Bowel Meds

*Generic requires prior authorization.

Drugs With Quantity Limits

Quantity limits will be added or updated for the following drugs as of the date indicated below:

Brand drug	Generic drug	Quantity limit	Effective date
Belbuca™	N/A	30 films per 30 days	November 30, 2015
Dyanavel® XR	N/A	240 ml per 30 days	January 25, 2016
Narcan® 4 mg/ actuation spray	N/A	4 units per 30 days	December 7, 2015