

## Summary of Formulary Changes

Effective Date	Affected Drugs	Description of Change
June 14 <sup>th</sup> , 2024	Triderm 0.1% Cream	<ul style="list-style-type: none"> <li>Add to formulary</li> </ul>
June 14 <sup>th</sup> , 2024	Deflazacort 18 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary with PA</li> </ul>
June 14 <sup>th</sup> , 2024	Deflazacort 30 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary with PA</li> </ul>
June 14 <sup>th</sup> , 2024	Deflazacort 36 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary with PA</li> </ul>
June 14 <sup>th</sup> , 2024	Deflazacort 6 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary with PA</li> </ul>
June 14 <sup>th</sup> , 2024	Triderm 0.5% Cream	<ul style="list-style-type: none"> <li>Add to formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Aquaphor Itch Relief 1% Ointment	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
June 14 <sup>th</sup> , 2024	Fluocinonide 0.1% Cream	<ul style="list-style-type: none"> <li>Add to formulary</li> </ul>
June 14 <sup>th</sup> , 2024	Augtyro 40 Mg Capsule	<ul style="list-style-type: none"> <li>Add to formulary with QL 240/30 days and PA</li> </ul>
June 14 <sup>th</sup> , 2024	Iwilfin 192 Mg Tablet	<ul style="list-style-type: none"> <li>Add PA and QL 240/30 days</li> </ul>
June 14 <sup>th</sup> , 2024	Wainua 45 Mg/0.8 MI Autoinject	<ul style="list-style-type: none"> <li>Add PA</li> </ul>
June 14 <sup>th</sup> , 2024	Zilbrysq 16.6 Mg/0.416 MI Syringe	<ul style="list-style-type: none"> <li>Add to formulary with QL 11.648/28 days and PA</li> </ul>
June 14 <sup>th</sup> , 2024	Zilbrysq 23 Mg/0.574 MI Syringe	<ul style="list-style-type: none"> <li>Add to formulary with QL 16.072/28 days and PA</li> </ul>
June 14 <sup>th</sup> , 2024	Zilbrysq 32.4 Mg/0.81 MI Syringe	<ul style="list-style-type: none"> <li>Add to formulary with QL 22.68/28 days and PA</li> </ul>
June 14 <sup>th</sup> , 2024	Fabhalta 200 Mg Capsule	<ul style="list-style-type: none"> <li>Add to formulary with QL 60/30 days and PA</li> </ul>

PA= Prior Authorization; ST= Step Therapy; QL= Quantity Limit; AR= Age Restriction

## Summary of Formulary Changes

Effective Date	Affected Drugs	Description of Change
June 14 <sup>th</sup> , 2024	Empaveli 1,080 Mg/20 MI Vial	<ul style="list-style-type: none"> <li>Add to formulary with QL 160/30 days, Add PA</li> </ul>
June 14 <sup>th</sup> , 2024	Rivfloza 160 Mg/MI Syringe	<ul style="list-style-type: none"> <li>Add PA and QL 1/30 days</li> </ul>
June 14 <sup>th</sup> , 2024	Rivfloza 128 Mg/0.8 MI Syringe	<ul style="list-style-type: none"> <li>Add PA and QL 0.8/30 days</li> </ul>
June 14 <sup>th</sup> , 2024	Agamree 40 Mg/MI Suspension	<ul style="list-style-type: none"> <li>Add PA</li> </ul>
June 14 <sup>th</sup> , 2024	Ojjaara 200 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary with QL 30/30 days and PA</li> </ul>
June 14 <sup>th</sup> , 2024	Ojjaara 150 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary with QL 30/30 days and PA</li> </ul>
June 14 <sup>th</sup> , 2024	Ojjaara 100 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary with QL 30/30 days and PA</li> </ul>
June 14 <sup>th</sup> , 2024	Stivarga 40 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary with PA</li> </ul>
July 1 <sup>st</sup> , 2024	Lenalidomide 2.5 Mg Capsule	<ul style="list-style-type: none"> <li>Add QL 21/28 days</li> </ul>
July 1 <sup>st</sup> , 2024	Lenalidomide 5 Mg Capsule	<ul style="list-style-type: none"> <li>Add QL 21/28 days</li> </ul>
July 1 <sup>st</sup> , 2024	Lenalidomide 10 Mg Capsule	<ul style="list-style-type: none"> <li>Add QL 21/28 days</li> </ul>
July 1 <sup>st</sup> , 2024	Lenalidomide 20 Mg Capsule	<ul style="list-style-type: none"> <li>Add QL 21/28 days</li> </ul>
July 1 <sup>st</sup> , 2024	Lenalidomide 25 Mg Capsule	<ul style="list-style-type: none"> <li>Add QL 21/28 days</li> </ul>
July 1 <sup>st</sup> , 2024	QC Lo-Dose Aspirin EC 81 Mg Tb	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Glucagon 1 Mg Vial	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>

PA= Prior Authorization; ST= Step Therapy; QL= Quantity Limit; AR= Age Restriction

## Summary of Formulary Changes

Effective Date	Affected Drugs	Description of Change
July 1 <sup>st</sup> , 2024	Metolazone 2.5 Mg Tablet	<ul style="list-style-type: none"> <li>Add QL 30/30 days</li> </ul>
July 1 <sup>st</sup> , 2024	Metolazone 5 Mg Tablet	<ul style="list-style-type: none"> <li>Add QL 30/30 days</li> </ul>
July 1 <sup>st</sup> , 2024	Metolazone 10 Mg Tablet	<ul style="list-style-type: none"> <li>Add QL 60/30 days</li> </ul>
June 14 <sup>th</sup> , 2024	Ondansetron 4 Mg/5 MI Solution	<ul style="list-style-type: none"> <li>Remove QL</li> </ul>
June 14 <sup>th</sup> , 2024	Doptelet (10 Tab Pk) 20 Mg Tab	<ul style="list-style-type: none"> <li>Add to formulary with PA</li> </ul>
June 14 <sup>th</sup> , 2024	Doptelet (15 Tab Pk) 20 Mg Tab	<ul style="list-style-type: none"> <li>Add to formulary with PA</li> </ul>
June 14 <sup>th</sup> , 2024	Doptelet (30 Tab Pk) 20 Mg Tab	<ul style="list-style-type: none"> <li>Add to formulary with PA</li> </ul>
July 1 <sup>st</sup> , 2024	Ogsiveo 50 Mg Tablet	<ul style="list-style-type: none"> <li>Update QL to 60/30 days</li> </ul>
June 14 <sup>th</sup> , 2024	Freestyle Libre 2 Sensor	<ul style="list-style-type: none"> <li>Add to formulary with PA and QL 2/28 days</li> </ul>
June 14 <sup>th</sup> , 2024	Freestyle Libre 2 Reader	<ul style="list-style-type: none"> <li>Add to formulary with PA and QL 1/365 days</li> </ul>
June 14 <sup>th</sup> , 2024	Freestyle Libre 14 Day Reader	<ul style="list-style-type: none"> <li>Add to formulary with PA and QL 1/365 days</li> </ul>
June 14 <sup>th</sup> , 2024	Freestyle Libre 14 Day Sensor	<ul style="list-style-type: none"> <li>Add to formulary with PA and QL 2/28 days</li> </ul>
July 1 <sup>st</sup> , 2024	Lidocaine HCL 4% Solution	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Morphine Sulf 5 Mg Suppository	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Morphine Sulf 10 Mg Suppository	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>

PA= Prior Authorization; ST= Step Therapy; QL= Quantity Limit; AR= Age Restriction

## Summary of Formulary Changes

Effective Date	Affected Drugs	Description of Change
July 1 <sup>st</sup> , 2024	Morphine Sulf 20 Mg Suppository	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Morphine Sulf 30 Mg Suppository	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Acetaminophen-Codeine 300-30 Mg/12.5	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
June 14 <sup>th</sup> , 2024	Junior Pain Reliever 160 Mg	<ul style="list-style-type: none"> <li>Add to formulary</li> </ul>
June 14 <sup>th</sup> , 2024	Jr Pain-Fever 160 Mg Rapid Tab	<ul style="list-style-type: none"> <li>Add to formulary</li> </ul>
June 14 <sup>th</sup> , 2024	EQL Jr Acetaminophen 160Mg Tab	<ul style="list-style-type: none"> <li>Add to formulary</li> </ul>
June 14 <sup>th</sup> , 2024	QC Jr. Non-Aspirin 160 Mg Tab	<ul style="list-style-type: none"> <li>Add to formulary</li> </ul>
June 14 <sup>th</sup> , 2024	Zavzpret 10 Mg Nasal Spray	<ul style="list-style-type: none"> <li>Update QL to 8/30 days</li> </ul>
July 1 <sup>st</sup> , 2024	GS Ibuprofen Pm Caplet	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Otezla Starter Pack	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Meloxicam 7.5 Mg Tablet	<ul style="list-style-type: none"> <li>Add QL 30/30 days</li> </ul>
July 1 <sup>st</sup> , 2024	SM Ibuprofen 200 Mg Tablet	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	EQL Sleep Aid 50 Mg Softgel	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
June 14 <sup>th</sup> , 2024	Alka-Seltzer Plus Allergy Tab	<ul style="list-style-type: none"> <li>Add to formulary</li> </ul>
June 14 <sup>th</sup> , 2024	Eszopiclone 2 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary with QL 15/30 days</li> </ul>

PA= Prior Authorization; ST= Step Therapy; QL= Quantity Limit; AR= Age Restriction

## Summary of Formulary Changes

Effective Date	Affected Drugs	Description of Change
June 14 <sup>th</sup> , 2024	Eszopiclone 3 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary with QL 15/30 days</li> </ul>
June 14 <sup>th</sup> , 2024	Eszopiclone 1 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary with QL 15/30 days</li> </ul>
June 14 <sup>th</sup> , 2024	Banzel 40 Mg/MI Suspension	<ul style="list-style-type: none"> <li>Remove PA</li> </ul>
July 1 <sup>st</sup> , 2024	Carbamazepine 200 Mg/10 MI Cup	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Clobazam 2.5 Mg/MI Suspension	<ul style="list-style-type: none"> <li>Add AR 0-12 years</li> </ul>
June 14 <sup>th</sup> , 2024	Nayzilam 5 Mg Nasal Spray	<ul style="list-style-type: none"> <li>Add to formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Pregabalin 20 Mg/MI Solution	<ul style="list-style-type: none"> <li>Add AR 0-12 years</li> </ul>
July 1 <sup>st</sup> , 2024	Promethegan 50 Mg Suppository	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Siladryl 12.5 Mg/5 MI Liquid	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Child Diphenhydramine 25Mg/10MI	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
June 14 <sup>th</sup> , 2024	Child All Day Allergy 1 Mg/MI	<ul style="list-style-type: none"> <li>Add to formulary</li> </ul>
June 14 <sup>th</sup> , 2024	24Hour Allergy 10 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary</li> </ul>
July 1 <sup>st</sup> , 2024	CVS Allergy (Diphen) 25 Mg Chew	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
June 14 <sup>th</sup> , 2024	Olopatadine HCL 0.1% Eye Drops	<ul style="list-style-type: none"> <li>Add to formulary with AR 0-20 years</li> </ul>
June 14 <sup>th</sup> , 2024	Olopatadine HCL 0.2% Eye Drops	<ul style="list-style-type: none"> <li>Add to formulary with AR 0-20 years</li> </ul>

PA= Prior Authorization; ST= Step Therapy; QL= Quantity Limit; AR= Age Restriction

## Summary of Formulary Changes

Effective Date	Affected Drugs	Description of Change
July 1 <sup>st</sup> , 2024	Diphenhist 25 Mg Capsule	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
June 14 <sup>th</sup> , 2024	Ranolazine ER 500 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary with QL 60/30 days</li> </ul>
June 14 <sup>th</sup> , 2024	Ranolazine ER 1,000 Mg Tablet	<ul style="list-style-type: none"> <li>Add to formulary with QL 60/30 days</li> </ul>
July 1 <sup>st</sup> , 2024	Sorine 80 Mg Tablet	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Sorine 120 Mg Tablet	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Sorine 160 Mg Tablet	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Sorine 240 Mg Tablet	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Diltiazem 12Hr ER 120 Mg Cap	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Diltiazem 12Hr ER 60 Mg Cap	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Diltiazem 12Hr ER 90 Mg Cap	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>
July 1 <sup>st</sup> , 2024	Quinidine Gluc ER 324 Mg Tab	<ul style="list-style-type: none"> <li>Remove from formulary</li> </ul>