



***Memorial Hermann Advantage HMO***  
***November 2019***  
***Formulary Addendum***

Changes may have occurred since the printing of your current Memorial Hermann Advantage HMO Formulary. Medications that may have been added or removed from the Formulary are listed below.

Please retain this with your copy of the Formulary.

This is not a complete list of drugs covered by our plan. For a complete listing or other questions, please call Customer Service at 844-860-6750 (TTY users call 711), 24 hours a day, seven (7) days a week or visit [healthplan.memorialhermann.org/medicare](http://healthplan.memorialhermann.org/medicare).

The Formulary may change at any time. You will receive notice when necessary.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2019, and from time to time during the year.

Memorial Hermann Advantage HMO is provided by Memorial Hermann Health Plan, Inc., a Medicare Advantage organization with a Medicare contract. Enrollment in this plan depends on contract renewal.

**BvD** – May be covered under Medicare Part B or D depending upon the circumstances; **NF** – Non-Formulary; **PA** – Prior Authorization; **QL** – Quantity Limit, dispense limit for 30 days unless otherwise noted; **ST** – Step Therapy; **LA** – Limited Access (This prescription may be available only at certain pharmacies)

**2019 FORMULARY CHANGES**

<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>				
Auryxia TABLET 1 GM 210 MG(Fe) ORAL	4	4 + PA1	Formulary Update	N/A
BromSite SOLUTION 0.075 % OPHTHALMIC	NF	4	Formulary Enhancement	N/A
Cimduo Tablet 300-300 MG Oral	NF	5	Formulary Enhancement	N/A
Estropipate TABLET 1.5 MG ORAL	1	NF	CMS Required Deletion	N/A

**Formulary ID: 19563 Version 15**

**Last Updated: 10/02/2019**

**Effective date: 11/01/2019**

**Y0110\_PH\_RXFormularyAdd NM 01/10/2017**

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Humira Pen-CD/UC/HS Starter Pen-Injector Kit 80 MG/0.8ML Subcutaneous	NF	5 + PA1	Formulary Enhancement	N/A
Humira Pen-Ps/UV Starter Pen-Injector Kit 80 MG/0.8ML & 40MG/0.4ML Subcutaneous	NF	5 + PA1	Formulary Enhancement	N/A
Incassia Tablet 0.35 MG Oral	NF	1	Formulary Enhancement	N/A
Ketoprofen CAPSULE 75 MG Oral	2	NF	CMS Required Deletion	N/A
Trelegy Ellipta Aerosol Powder Breath Activated 100-62.5-25 MCG/INH Inhalation	NF	3 + ST1	Formulary Enhancement	N/A
Vestura TABLET 3-0.02 MG ORAL	2	NF	CMS Required Deletion	N/A
Xeljanz Tablet 10 MG Oral	NF	5 + PA1	Formulary Enhancement	N/A
Zenpep CAPSULE DELAYED RELEASE PARTICLES 15000 UNIT ORAL	3	NF	CMS Required Deletion	N/A
Zenpep Capsule Delayed Release Particles 15000-47000 UNIT Oral	NF	3	Formulary Enhancement	N/A
Zenpep CAPSULE DELAYED RELEASE PARTICLES 25000 UNIT ORAL	3	NF	CMS Required Deletion	N/A
Zenpep CAPSULE DELAYED RELEASE PARTICLES 3000-10000 UNIT ORAL	3	NF	CMS Required Deletion	N/A
Zenpep Capsule Delayed Release Particles 3000-14000 UNIT Oral	NF	3	Formulary Enhancement	N/A
Zenpep CAPSULE DELAYED RELEASE PARTICLES 5000 UNIT ORAL	3	NF	CMS Required Deletion	N/A
<b>EFFECTIVE 02/01/2019</b>				
Abiraterone Acetate Tablet 250 MG Oral	NF	5 + QL 120 + PA2	Formulary Enhancement	N/A
Adapalene Solution 0.1 % External	NF	4 + PA1	Formulary Enhancement	N/A
Afeditab CR Tablet Extended Release 24 Hour 60 MG Oral	1	NF	CMS Required Deletion	N/A
Ampyra Tablet Extended Release 12 Hour 10 MG Oral	5 + QL 60 + PA2 + LA	NF	Formulary Update	dalfampridine 10mg, 5 + QL 60 + PA2

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AndroGel GEL 20.25 MG/1.25GM (1.62%) TRANSDERMAL	3 + PA2	NF	Formulary Update	testosterone 0.0162mg/mg, 3 + PA2
AndroGel GEL 40.5 MG/2.5GM (1.62%) TRANSDERMAL	3 + PA2	NF	Formulary Update	testosterone 0.0162mg/mg, 3 + PA2
AndroGel Pump GEL 20.25 MG/ACT (1.62%) TRANSDERMAL	3 + PA2	NF	Formulary Update	testosterone 20.25mg/actua, 3 + PA2
Arikayce Suspension 590 MG/8.4ML Inhalation	NF	2 + PA1	Formulary Enhancement	N/A
Azelaic Acid Gel 15 % External	NF	4	Formulary Enhancement	N/A
Braftovi Capsule 50 MG Oral	NF	5 + PA2 + LA	Formulary Enhancement	N/A
Braftovi Capsule 75 MG Oral	NF	5 + PA2 + LA	Formulary Enhancement	N/A
BuPROPion HCl ER (XL) Tablet Extended Release 24 Hour 450 MG Oral	NF	4 + QL 30 + ST2	Formulary Enhancement	N/A
Cefotaxime Sodium Solution Reconstituted 2 GM Injection	2	NF	CMS Required Deletion	N/A
Clinimix/Dextrose (2.75/5) SOLUTION 2.75 % Intravenous	4 + BvD	NF	CMS Required Deletion	N/A
Clinimix/Dextrose (4.25/20) SOLUTION 4.25 % Intravenous	4 + BvD	NF	CMS Required Deletion	N/A
CloBAZam Suspension 2.5 MG/ML Oral	NF	4 + PA2	Formulary Enhancement	N/A
CloBAZam Tablet 10 MG Oral	NF	4 + QL 60 + PA2	Formulary Enhancement	N/A
CloBAZam Tablet 20 MG Oral	NF	4 + QL 60 + PA2	Formulary Enhancement	N/A
Colesevelam HCl Packet 3.75 GM Oral	NF	3	Formulary Enhancement	N/A
Copiktra Capsule 15 MG Oral	NF	5 + QL 60 + PA2 + LA	Formulary Enhancement	N/A
Copiktra Capsule 25 MG Oral	NF	5 + QL 60 + PA2 + LA	Formulary Enhancement	N/A
Cyred EQ Tablet 0.15-30 MG-MCG Oral	NF	1	Formulary Enhancement	N/A
DAPTOmycin Solution Reconstituted 350 MG Intravenous	NF	4 + PA1	Formulary Enhancement	N/A
Delstrigo Tablet 100-300-300 MG Oral	NF	5	Formulary Enhancement	N/A

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Epidiolex Solution 100 MG/ML Oral	NF	4 + PA2	Formulary Enhancement	N/A
Ertapenem Sodium Solution Reconstituted 1 GM Injection	NF	4	Formulary Enhancement	N/A
Finacea GEL 15 % EXTERNAL	4	NF	Formulary Update	azelaic acid 0.15mg/mg, 4
Forfivo XL Tablet Extended Release 24 Hour 450 MG Oral	4 + QL 30 + ST2	NF	Formulary Update	bupropion hydrochloride 450mg, 4 + QL 30 + ST2
Hexalen CAPSULE 50 MG ORAL	5 + PA2	NF	CMS Required Deletion	N/A
INVanz Solution Reconstituted 1 GM Injection	4	NF	Formulary Update	ertapenem 1000mg, 4
Itraconazole Solution 10 MG/ML Oral	NF	4 + PA1	Formulary Enhancement	N/A
Ketoprofen Capsule 25 MG Oral	NF	2	Formulary Enhancement	N/A
Kimidess Tablet 0.15-0.02/0.01 MG (21/5) Oral	2	NF	CMS Required Deletion	N/A
Lenvima 12 MG Daily Dose Capsule Therapy Pack 4 (3) MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Lenvima 4 MG Daily Dose Capsule Therapy Pack 4 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Lorbrena Tablet 100 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Lorbrena Tablet 25 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Mektovi Tablet 15 MG Oral	NF	5 + PA2 + LA	Formulary Enhancement	N/A
Molindone HCl Tablet 10 MG Oral	NF	2	Formulary Enhancement	N/A
Molindone HCl Tablet 25 MG Oral	NF	2	Formulary Enhancement	N/A
Molindone HCl Tablet 5 MG Oral	NF	2	Formulary Enhancement	N/A
Morphine Sulfate ER Capsule Extended Release 24 Hour 40 MG Oral	NF	2	Formulary Enhancement	N/A
Nafcillin Sodium Solution Reconstituted 2 GM Injection	NF	2	Formulary Enhancement	N/A
Necon 7/7/7 Tablet 0.5/0.75/1-35 MG-MCG Oral	1	NF	CMS Required Deletion	N/A
Norvir CAPSULE 100 MG ORAL	4	NF	CMS Required Deletion	N/A
Onfi SUSPENSION 2.5 MG/ML ORAL	5 + PA2	NF	Formulary Update	clobazam 2.5mg/ml, 4 + PA2
Onfi TABLET 10 MG Oral	4 + QL 60 +PA2	NF	Formulary Update	clobazam 10mg, 4 + QL 60 + PA2

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Onfi TABLET 20 MG Oral	5 + QL 60 + PA2	NF	Formulary Update	clobazam 20mg, 4 + QL 60 + PA2
Orilissa Tablet 150 MG Oral	NF	5 + PA1	Formulary Enhancement	N/A
Orilissa Tablet 200 MG Oral	NF	5 + PA1	Formulary Enhancement	N/A
Orkambi Packet 100-125 MG Oral	NF	5 + PA1 + LA	Formulary Enhancement	N/A
Orkambi Packet 150-188 MG Oral	NF	5 + PA1 + LA	Formulary Enhancement	N/A
Periogard Solution 0.12 % Mouth/Throat	2	NF	CMS Required Deletion	N/A
Pifeltro Tablet 100 MG Oral	NF	5	Formulary Enhancement	N/A
Sodium Chloride Solution 2.5 MEQ/ML Injection	2	NF	CMS Required Deletion	N/A
Symtuza Tablet 800-150-200-10 MG Oral	NF	5	Formulary Enhancement	N/A
Takhzyro Solution 300 MG/2ML Subcutaneous	NF	5 + PA1 + LA	Formulary Enhancement	N/A
Talzenna Capsule 0.25 MG Oral	NF	5 + PA2 + LA	Formulary Enhancement	N/A
Talzenna Capsule 1 MG Oral	NF	5 + PA2 + LA	Formulary Enhancement	N/A
Testosterone Gel 20.25 MG/1.25GM (1.62%) Transdermal	NF	3 + PA2	Formulary Enhancement	N/A
Testosterone Gel 20.25 MG/ACT (1.62%) Transdermal	NF	3 + PA2	Formulary Enhancement	N/A
Testosterone Gel 40.5 MG/2.5GM (1.62%) Transdermal	NF	3 + PA2	Formulary Enhancement	N/A
Tibsovo Tablet 250 MG Oral	NF	5 + PA2 + LA	Formulary Enhancement	N/A
Tiglutik Suspension 50 MG/10ML Oral	NF	4 + PA1	Formulary Enhancement	N/A
Triamcinolone Acetonide Aerosol 55 MCG/ACT Nasal	2	NF	CMS Required Deletion	N/A
Vancomycin HCl Solution Reconstituted 250 MG Intravenous	NF	2 + BvD	Formulary Enhancement	N/A
Versacloz Suspension 50 MG/ML Oral	5 + ST2	NF	CMS Required Deletion	N/A
Vizimpro Tablet 15 MG Oral	NF	5 + QL 30 + PA2	Formulary Enhancement	N/A
Vizimpro Tablet 30 MG Oral	NF	5 + QL 30 + PA2	Formulary Enhancement	N/A
Vizimpro Tablet 45 MG Oral	NF	5 + QL 30 + PA2	Formulary Enhancement	N/A

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Welchol Packet 3.75 GM Oral	3	NF	Formulary Update	colesevelam hydrochloride 3750mg, 2
Xarelto Tablet 2.5 MG Oral	NF	3	Formulary Enhancement	N/A
Xofluza Tablet Therapy Pack 20 (2) MG Oral	NF	4 + QL 2/365	Formulary Enhancement	N/A
Xofluza Tablet Therapy Pack 40 (2) MG Oral	NF	4 + QL 2/365	Formulary Enhancement	N/A
Xolair Solution Prefilled Syringe 150 MG/ML Subcutaneous	NF	5 + QL 6/28 + PA1 + LA	Formulary Enhancement	N/A
Xolair Solution Prefilled Syringe 75 MG/0.5ML Subcutaneous	NF	5 + QL 6/28 + PA1 + LA	Formulary Enhancement	N/A
Zortress Tablet 1 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Zytiga TABLET 250 MG ORAL	5 + QL 120 + PA2	NF	Formulary Update	abiraterone acetate 250mg, 5 + QL 120 + PA2
<b>EFFECTIVE 03/01/2019</b>				
Actemra ACTPen Solution Auto-Injector 162 MG/0.9ML Subcutaneous	NF	5 + PA1	Formulary Enhancement	N/A
Afeditab CR Tablet Extended Release 24 Hour 30 MG Oral	1	NF	CMS Required Deletion	N/A
Clinimix E/Dextrose (5/25) Solution 5 % Intravenous	4 + BvD	NF	CMS Required Deletion	N/A
Daurismo Tablet 100 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Daurismo Tablet 25 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Hailey 24 Fe Tablet 1-20 MG-MCG(24) Oral	NF	2	Formulary Enhancement	N/A
Invirase CAPSULE 200 MG Oral	5	NF	CMS Required Deletion	N/A
Lokelma Packet 10 GM Oral	NF	4	Formulary Enhancement	N/A
Lokelma Packet 5 GM Oral	NF	4	Formulary Enhancement	N/A
Lynparza Capsule 50 MG Oral	5 + PA2 + LA	NF	CMS Required Deletion	N/A
Mesalamine Suppository 1000 MG Rectal	NF	4	Formulary Enhancement	N/A
Metipranolol Solution 0.3 % Ophthalmic	2	NF	CMS Required Deletion	N/A
Moderiba 800 Dose Pack Tablet 400 MG Oral	5	NF	CMS Required Deletion	N/A

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Nocdurna Tablet Sublingual 27.7 MCG Sublingual	NF	4	Formulary Enhancement	N/A
Nocdurna Tablet Sublingual 55.3 MCG Sublingual	NF	4	Formulary Enhancement	N/A
Oxervate Solution 0.002 % Ophthalmic	NF	5 + PA1	Formulary Enhancement	N/A
Polyethylene Glycol 3350 Powder Oral	1	NF	CMS Required Deletion	N/A
Potassium Chloride PACKET 20 MEQ Oral	NF	2	Formulary Enhancement	N/A
Retacrit Solution 10000 UNIT/ML Injection	NF	4 + PA1	Formulary Enhancement	N/A
Retacrit Solution 2000 UNIT/ML Injection	NF	4 + PA1	Formulary Enhancement	N/A
Retacrit Solution 3000 UNIT/ML Injection	NF	4 + PA1	Formulary Enhancement	N/A
Retacrit Solution 4000 UNIT/ML Injection	NF	4 + PA1	Formulary Enhancement	N/A
Retacrit Solution 40000 UNIT/ML Injection	NF	4 + PA1	Formulary Enhancement	N/A
Shingrix Suspension Reconstituted 50 MCG/0.5ML Intramuscular	3 + BvD	3	Formulary Enhancement	N/A
Silodosin Capsule 4 MG Oral	NF	4	Formulary Enhancement	N/A
Silodosin Capsule 8 MG Oral	NF	4	Formulary Enhancement	N/A
Sofosbuvir-Velpatasvir Tablet 400-100 MG Oral	NF	5 + PA1	Formulary Enhancement	N/A
SUMatriptan Succinate Solution Prefilled Syringe 6 MG/0.5ML Subcutaneous	NF	2	Formulary Enhancement	N/A
Tecfidera 120 & 240 MG ORAL	5 + QL 60 + PA2	5 + PA2	Formulary Enhancement	N/A
Tecfidera CAPSULE DELAYED RELEASE 120 MG ORAL	5 + QL 60 + PA2	5 + PA2	Formulary Enhancement	N/A
Tecfidera CAPSULE DELAYED RELEASE 240 MG ORAL	5 + QL 60 + PA2	5 + PA2	Formulary Enhancement	N/A
Tegsedi Solution Prefilled Syringe 284 MG/1.5ML Subcutaneous	NF	5 + QL 6/28 + 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	5 + PA2	Formulary Enhancement	N/A
Vitrakvi Capsule 25 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A

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Vitrakvi Solution 20 MG/ML Oral	NF	5 + PA2	Formulary Enhancement	N/A
Xospata Tablet 40 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Xtandi CAPSULE 40 MG ORAL	5 + QL 120 + PA2 + LA + ST2	5 + QL 120 + PA2 + LA	Formulary Enhancement	N/A
Zenchant Tablet 0.4-35 MG-MCG Oral	1	NF	CMS Required Deletion	N/A
Zerit Solution Reconstituted 1 MG/ML Oral	3	NF	CMS Required Deletion	N/A
<b>EFFECTIVE 04/01/2019</b>				
Albendazole Tablet 200 MG Oral	NF	4	Formulary Enhancement	N/A
Assure ID Insulin Safety Syr 29G X 1/2" 1 ML	4	1	Formulary Enhancement	N/A
BCG Vaccine INJECTABLE INJECTION	3 + BvD	3	Formulary Enhancement	N/A
Clobetasol Propionate Emulsion Foam 0.05 % External	NF	2	Formulary Enhancement	N/A
Comfort Assist Insulin Syringe 29G X 1/2" 1 ML	4	1	Formulary Enhancement	N/A
CVS Gauze Sterile PAD 2"X2"	4	1	Formulary Enhancement	N/A
Exel Comfort Point Pen Needle 29G X 12MM	4	1	Formulary Enhancement	N/A
Global Alcohol Prep Ease PAD 70 %	2	1	Formulary Enhancement	N/A
Moderiba 1200 Dose Pack Tablet 600 MG Oral	5	NF	CMS Required Deletion	N/A
Moderiba TABLET 200 MG ORAL	4	NF	CMS Required Deletion	N/A
Nevirapine Suspension 50 MG/5ML Oral	NF	3	Formulary Enhancement	N/A
Perseris Prefilled Syringe 120 MG Subcutaneous	NF	5 + ST2	Formulary Enhancement	N/A
Perseris Prefilled Syringe 90 MG Subcutaneous	NF	5 + ST2	Formulary Enhancement	N/A
Pimecrolimus Cream 1 % External	NF	4 + ST1	Formulary Enhancement	N/A
Preferred Plus Insulin Syringe 28G X 1/2" 0.5 ML	4	1	Formulary Enhancement	N/A
Promacta Packet 12.5 MG Oral	NF	5 + QL 360 + PA1	Formulary Enhancement	N/A
Rapaflo Capsule 4 MG Oral	4	NF	Formulary Update	silodosin 4 mg, 4

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Rapaflo Capsule 8 MG Oral	4	NF	Formulary Update	silodosin 8 mg, 4
Reli-On Insulin Syringe 29G 0.3 ML	4	1	Formulary Enhancement	N/A
Sympazan Film 10 MG Oral	NF	5 + QL 60 + PA2	Formulary Enhancement	N/A
Sympazan Film 20 MG Oral	NF	5 + QL 60 + PA2	Formulary Enhancement	N/A
Sympazan Film 5 MG Oral	NF	4 + QL 60 + PA2	Formulary Enhancement	N/A
Tri-VyLibra Lo Tablet 0.18/0.215/0.25 MG-25 MCG Oral	NF	2	Formulary Enhancement	N/A
<b>EFFECTIVE 05/01/2019</b>				
Albenza Tablet 200 MG Oral	5	NF	Formulary Update	alendazole 200mg, 4
Codeine Sulfate Tablet 15 MG Oral	1	NF	CMS Required Deletion	N/A
Dupixent Solution Prefilled Syringe 200 MG/1.14ML Subcutaneous	NF	5 + PA1	Formulary Enhancement	N/A
Dupixent Solution Prefilled Syringe 300 MG/2ML Subcutaneous	NF	5 + PA1	Formulary Enhancement	N/A
Elidel Cream 1 % External	4 + ST1	NF	Formulary Update	pimecrolimus 10mg/ml, 4 + ST1
Jasmiel Tablet 3-0.02 MG Oral	NF	2	Formulary Enhancement	N/A
Sirolimus Solution 1 MG/ML Oral	NF	5 + BvD	Formulary Enhancement	N/A
Toremifene Citrate Tablet 60 MG Oral	NF	5 + QL 30 + PA2	Formulary Enhancement	N/A
Tresiba Solution 100 UNIT/ML Subcutaneous	NF	3	Formulary Enhancement	N/A
Vigabatrin Tablet 500 MG Oral	NF	5 + PA2 + LA	Formulary Enhancement	N/A
Viramune Suspension 50 MG/5ML Oral	3	NF	Formulary Update	nevirapine 10mg/ml, 3
<b>EFFECTIVE 06/01/2019</b>				
Aliskiren Fumarate Tablet 150 MG Oral	NF	3	Formulary Enhancement	N/A
Aliskiren Fumarate Tablet 300 MG Oral	NF	3	Formulary Enhancement	N/A
Carimune NF Solution Reconstituted 6 GM Intravenous	5 + PA1	NF	CMS Required Deletion	N/A

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Ciprofloxacin SUSPENSION RECONSTITUTED 250 MG/5ML (5%) Oral	4	NF	CMS Required Deletion	N/A
Clinimix E/Dextrose (2.75/10) Solution 2.75 % Intravenous	4 + BvD	NF	CMS Required Deletion	N/A
Clinimix E/Dextrose (4.25/25) SOLUTION 4.25 % Intravenous	4 + BvD	NF	CMS Required Deletion	N/A
Dovato Tablet 50-300 MG Oral	NF	5	Formulary Enhancement	N/A
Estropipate Tablet 0.75 MG Oral	1	NF	CMS Required Deletion	N/A
Fareston TABLET 60 MG Oral	5 + QL 30 + PA2	NF	Formulary Update	toremifene citrate tablet 60 mg oral, 5 + QL 30 + PA2
HYDROcodone-Acetaminophen Tablet 2.5-325 MG Oral	2	NF	CMS Required Deletion	N/A
Klor-Con Sprinkle Capsule Extended Release 10 MEQ Oral	3	NF	CMS Required Deletion	N/A
Lotemax SM Gel 0.38 % Ophthalmic	NF	4	Formulary Enhancement	N/A
Moexipril-hydroCHLOROthiazide Tablet 15-12.5 MG Oral	1	NF	CMS Required Deletion	N/A
Moexipril-hydroCHLOROthiazide Tablet 15-25 MG Oral	1	NF	CMS Required Deletion	N/A
Moexipril-hydroCHLOROthiazide Tablet 7.5-12.5 MG Oral	1	NF	CMS Required Deletion	N/A
Nadolol-Bendroflumethiazide Tablet 80-5 MG Oral	2	NF	CMS Required Deletion	N/A
Nivestym Solution 300 MCG/ML Injection	NF	4 + PA1	Formulary Enhancement	N/A
Nivestym Solution 480 MCG/1.6ML Injection	NF	4 + PA1	Formulary Enhancement	N/A
Nuplazid Tablet 17 MG Oral	5 + LA + ST2	NF	CMS Required Deletion	N/A
Prograf Packet 0.2 MG Oral	NF	4 + BvD	Formulary Enhancement	N/A
Prograf Packet 1 MG Oral	NF	4 + BvD	Formulary Enhancement	N/A
Pyridostigmine Bromide Solution 60 MG/5ML Oral	NF	1	Formulary Enhancement	N/A
Quasense Tablet 0.15-0.03 MG Oral	1	NF	CMS Required Deletion	N/A
Ranolazine ER Tablet Extended Release 12 Hour 1000 MG Oral	NF	3 + PA1	Formulary Enhancement	N/A

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Ranolazine ER Tablet Extended Release 12 Hour 500 MG Oral	NF	3 + PA1	Formulary Enhancement	N/A
Rapamune SOLUTION 1 MG/ML ORAL	5 + BvD	NF	Formulary Update	sirolimus solution 1 mg/ml oral, 5 + BvD
Rescriptor Tablet 100 MG Oral	3	NF	CMS Required Deletion	N/A
Ribasphere RibaPak Tablet 400 MG Oral	5	NF	CMS Required Deletion	N/A
Ribasphere RibaPak Tablet Therapy Pack 200 & 400 MG Oral	5	NF	CMS Required Deletion	N/A
Ribasphere TABLET 200 MG ORAL	4	NF	CMS Required Deletion	N/A
Ribasphere Tablet 400 MG Oral	5	NF	CMS Required Deletion	N/A
Sabril TABLET 500 MG Oral	5 + PA2	NF	Formulary Update	vigabatrin tablet 500 mg oral, 5 + PA2
Tarina 24 Fe Tablet 1-20 MG-MCG(24) Oral	NF	2	Formulary Enhancement	N/A
TriNessa (28) Tablet 0.18/0.215/0.25 MG-35 MCG Oral	1	NF	CMS Required Deletion	N/A
Versacloz Suspension 50 MG/ML Oral	NF	4 + ST2	Formulary Enhancement	N/A
<b>EFFECTIVE 07/01/2019</b>				
Albuterol Sulfate HFA Aerosol Solution 108 (90 Base) MCG/ACT Inhalation	NF	2 + QL 17	Formulary Enhancement	N/A
Ambrisentan Tablet 10 MG Oral	NF	5 + QL 30 + PA1	Formulary Enhancement	N/A
Ambrisentan Tablet 5 MG Oral	NF	5 + QL 30 + PA1	Formulary Enhancement	N/A
Aminosyn II SOLUTION 8.5 % Intravenous	4 + BvD	NF	CMS Required Deletion	N/A
Aminosyn II/Electrolytes SOLUTION 8.5 % Intravenous	3 + BvD	NF	CMS Required Deletion	N/A
Aminosyn/Electrolytes SOLUTION 7 % Intravenous	4 + BvD	NF	CMS Required Deletion	N/A
Aminosyn/Electrolytes SOLUTION 8.5 % Intravenous	3 + BvD	NF	CMS Required Deletion	N/A
Aminosyn-HBC SOLUTION 7 % Intravenous	4 + BvD	NF	CMS Required Deletion	N/A

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Aminosyn-RF SOLUTION 5.2 % Intravenous	4 + BvD	NF	CMS Required Deletion	N/A
Balversa Tablet 3 MG Oral	NF	5 + PA2 + LA	Formulary Enhancement	N/A
Balversa Tablet 4 MG Oral	NF	5 + PA2 + LA	Formulary Enhancement	N/A
Balversa Tablet 5 MG Oral	NF	5 + PA2 + LA	Formulary Enhancement	N/A
Blisovi FE 1/20 TABLET 1-20 MG-MCG ORAL	1	NF	CMS Required Deletion	N/A
Bromfenac Sodium (Once-Daily) SOLUTION 0.09 % Ophthalmic	NF	2	Formulary Enhancement	N/A
Cablivi Kit 11 MG Injection	NF	5 + PA1 + LA	Formulary Enhancement	N/A
Chlorzoxazone Tablet 375 MG Oral	NF	1	Formulary Enhancement	N/A
Chlorzoxazone Tablet 750 MG Oral	NF	1	Formulary Enhancement	N/A
Deferasirox Tablet Soluble 125 MG Oral	NF	5 + PA1	Formulary Enhancement	N/A
Deferasirox Tablet Soluble 250 MG Oral	NF	5 + PA1	Formulary Enhancement	N/A
Deferasirox Tablet Soluble 500 MG Oral	NF	5 + PA1	Formulary Enhancement	N/A
Emgality Solution Auto-Injector 120 MG/ML Subcutaneous	NF	3 + PA1	Formulary Enhancement	N/A
Emgality Solution Prefilled Syringe 120 MG/ML Subcutaneous	NF	3 + PA1	Formulary Enhancement	N/A
Erythromycin Ethylsuccinate Suspension Reconstituted 400 MG/5ML Oral	NF	3	Formulary Enhancement	N/A
Ranexa Tablet Extended Release 12 Hour 1000 MG Oral	3 + PA1	NF	Formulary Update	ranolazine er tablet extended release 12 hour 1000 mg oral, 3 + PA1
Ranexa Tablet Extended Release 12 Hour 500 MG Oral	3 + PA1	NF	Formulary Update	ranolazine er tablet extended release 12 hour 500 mg oral, 3 + PA1
Tekturna Tablet 150 MG Oral	3	NF	Formulary Update	aliskiren fumarate tablet 150 mg oral, 3

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Tekturna Tablet 300 MG Oral	3	NF	Formulary Update	aliskiren fumarate tablet 300 mg oral, 3
<b>EFFECTIVE 08/01/2019</b>				
Bosentan Tablet 125 MG Oral	NF	5 + QL 60 + PA1	Formulary Enhancement	N/A
Bosentan Tablet 62.5 MG Oral	NF	5 + QL 60 + PA1	Formulary Enhancement	N/A
Cinacalcet HCl Tablet 30 MG Oral	NF	3 + QL 120 + BvD	Formulary Enhancement	N/A
Cinacalcet HCl Tablet 60 MG Oral	NF	5 + QL 150 + BvD	Formulary Enhancement	N/A
Cinacalcet HCl Tablet 90 MG Oral	NF	5 + QL 120 + BvD	Formulary Enhancement	N/A
Ciprofloxacin-Ciproflox HCl ER Tablet Extended Release 24 Hour 1000 MG Oral	2	NF	CMS Required Deletion	N/A
Ciprofloxacin-Ciproflox HCl ER Tablet Extended Release 24 Hour 500 MG Oral	2	NF	CMS Required Deletion	N/A
Erlotinib HCl Tablet 100 MG Oral	NF	5 + QL 30 + PA2	Formulary Enhancement	N/A
Erlotinib HCl Tablet 150 MG Oral	NF	5 + QL 30 + PA2	Formulary Enhancement	N/A
Erlotinib HCl Tablet 25 MG Oral	NF	5 + QL 90 + PA2	Formulary Enhancement	N/A
EryPed 400 Suspension Reconstituted 400 MG/5ML Oral	3	NF	Formulary Update	erythromycin ethylsuccinate suspension reconstituted 400 mg/ml oral, 3
Exjade Tablet Soluble 125 MG Oral	5 + PA1	NF	Formulary Update	deferasirox tablet soluble 125 mg oral, 5 + PA1

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Exjade Tablet Soluble 250 MG Oral	5 + PA1	NF	Formulary Update	deferasirox tablet soluble 250 mg oral, 5 + PA1
Exjade Tablet Soluble 500 MG Oral	5 + PA1	NF	Formulary Update	deferasirox tablet soluble 500 mg oral, 5 + PA1
Kalydeco Packet 25 MG Oral	NF	5 + PA1	Formulary Enhancement	N/A
Letairis Tablet 10 MG Oral	5 + QL 30 + PA1	NF	Formulary Update	ambrisentan tablet 10 mg oral, 5 + QL 30 + PA1
Letairis Tablet 5 MG Oral	5 + QL 30 + PA1	NF	Formulary Update	ambrisentan tablet 5 mg oral, 5 + QL 30 + PA1
Loteprednol Etabonate Suspension 0.5 % Ophthalmic	NF	4	Formulary Enhancement	N/A
Mayzent Tablet 0.25 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Mayzent Tablet 2 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Methyclothiazide Tablet 5 MG Oral	1	NF	CMS Required Deletion	N/A
Zykadia Tablet 150 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
<b>EFFECTIVE 09/01/2019</b>				
Braftovi Capsule 50 MG Oral	5 + PA2 + LA	NF	CMS Required Deletion	N/A
Doripenem SOLUTION RECONSTITUTED 500 MG Intravenous	3 + BvD	NF	CMS Required Deletion	N/A
Emgality 300 Dose Solution Prefilled Syringe 100 MG/ML Subcutaneous	NF	3 + PA1	Formulary Enhancement	N/A
Lotemax Suspension 0.5 % Ophthalmic	4	NF	Formulary Update	loteprednol etabonate suspension 0.5 % ophthalmic, 4
Mitigare Capsule 0.6 MG Oral	4	3	Formulary Enhancement	N/A
Nucala Solution Auto-Injector 100 MG/ML Subcutaneous	NF	5 + PA1 + LA	Formulary Enhancement	N/A

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Nucala Solution Prefilled Syringe 100 MG/ML Subcutaneous	NF	5 + PA1 + LA	Formulary Enhancement	N/A
Piqray 200MG Daily Dose Tablet Therapy Pack 200 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Piqray 250MG Daily Dose Tablet Therapy Pack 200 & 50 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Piqray 300MG Daily Dose Tablet Therapy Pack 2x150 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Pyridostigmine Bromide Tablet 30 MG Oral	NF	1	Formulary Enhancement	N/A
Sensipar Tablet 30 MG Oral	3 + QL 120 + BvD	NF	Formulary Update	cinacalcet hcl tablet 30 mg oral, 3 + QL 120 + BvD
Sensipar Tablet 60 MG Oral	5 + QL 150 + BvD	NF	Formulary Update	cinacalcet hcl tablet 60 mg oral, 5 + QL 150 + BvD
Sensipar Tablet 90 MG Oral	5 + QL 120 + BvD	NF	Formulary Update	cinacalcet hcl tablet 90 mg oral, 5 + QL 120 + BvD
Tarceva Tablet 100 MG Oral	5 + QL 30 + PA2	NF	Formulary Update	erlotinib hcl tablet 100 mg oral, 5 + QL 30 + PA2
Tarceva Tablet 150 MG Oral	5 + QL 30 + PA2	NF	Formulary Update	erlotinib hcl tablet 150 mg oral, 5 + QL 30 + PA2
Tarceva Tablet 25 MG Oral	5 + QL 90 + PA2	NF	Formulary Update	erlotinib hcl tablet 25 mg oral, 5 + QL 90 + PA2
Tracleer Tablet 125 MG Oral	5 + QL 60 + PA1 + LA	NF	Formulary Update	bosentan tablet 125 mg oral, 5 + QL 60 + PA1

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Tracleer Tablet 62.5 MG Oral	5 + QL 60 + PA1 + LA	NF	Formulary Update	bosentan tablet 62.5 mg oral, 5 + QL 60 + PA1
<b>EFFECTIVE 10/01/2019</b>				
Abilify MyCite Tablet 10 MG Oral	NF	5 + ST2	Formulary Enhancement	N/A
Abilify MyCite Tablet 15 MG Oral	NF	5 + ST2	Formulary Enhancement	N/A
Abilify MyCite Tablet 2 MG Oral	NF	5 + ST2	Formulary Enhancement	N/A
Abilify MyCite Tablet 20 MG Oral	NF	5 + ST2	Formulary Enhancement	N/A
Abilify MyCite Tablet 30 MG Oral	NF	5 + ST2	Formulary Enhancement	N/A
Abilify MyCite Tablet 5 MG Oral	NF	5 + ST2	Formulary Enhancement	N/A
Avonex Kit 30 MCG Intramuscular	5 + PA2	NF	CMS Required Deletion	N/A
Cefixime Capsule 400 MG Oral	NF	3	Formulary Enhancement	N/A
Erythromycin Base Tablet Delayed Release 250 MG Oral	NF	3	Formulary Enhancement	N/A
Erythromycin Base Tablet Delayed Release 333 MG Oral	NF	3	Formulary Enhancement	N/A
Erythromycin Base Tablet Delayed Release 500 MG Oral	NF	3	Formulary Enhancement	N/A
Febuxostat Tablet 40 MG Oral	NF	3 + ST1	Formulary Enhancement	N/A
Febuxostat Tablet 80 MG Oral	NF	3 + ST1	Formulary Enhancement	N/A
Jolivette Tablet 0.35 MG Oral	1	NF	CMS Required Deletion	N/A
Metaproterenol Sulfate Tablet 10 MG Oral	4	NF	CMS Required Deletion	N/A
Metaproterenol Sulfate Tablet 20 MG Oral	4	NF	CMS Required Deletion	N/A
MonoNessa Tablet 0.25-35 MG-MCG Oral	1	NF	CMS Required Deletion	N/A
Morphine Sulfate SOLUTION 2 MG/ML Injection	4 + BvD	NF	CMS Required Deletion	N/A
Morphine Sulfate SOLUTION 5 MG/ML INJECTION	2	NF	CMS Required Deletion	N/A
Nubega Tablet 300 MG Oral	NF	5 + PA2 + LA	Formulary Enhancement	N/A
Pregabalin Capsule 100 MG Oral	NF	3 + QL 120	Formulary Enhancement	N/A
Pregabalin Capsule 150 MG Oral	NF	3 + QL 120	Formulary Enhancement	N/A
Pregabalin Capsule 200 MG Oral	NF	3 + QL 120	Formulary Enhancement	N/A
Pregabalin Capsule 225 MG Oral	NF	3 + QL 120	Formulary Enhancement	N/A
Pregabalin Capsule 25 MG Oral	NF	3 + QL 120	Formulary Enhancement	N/A
Pregabalin Capsule 300 MG Oral	NF	3 + QL 60	Formulary Enhancement	N/A
Pregabalin Capsule 50 MG Oral	NF	3 + QL 120	Formulary Enhancement	N/A

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Pregabalin Capsule 75 MG Oral	NF	3 + QL 120	Formulary Enhancement	N/A
Pregabalin Solution 20 MG/ML Oral	NF	3 + QL 900	Formulary Enhancement	N/A
Symdeko Tablet Therapy Pack 50-75 & 75 MG Oral	NF	5 + PA1 + LA	Formulary Enhancement	N/A
TOLAZamide Tablet 250 MG Oral	2	NF	CMS Required Deletion	N/A
TOLAZamide Tablet 500 MG Oral	2	NF	CMS Required Deletion	N/A
Turalio Capsule 200 MG Oral	NF	5 + QL 120 + PA2	Formulary Enhancement	N/A
Xpovio (100 MG Once Weekly) Tablet Therapy Pack 20 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Xpovio (60 MG Once Weekly) Tablet Therapy Pack 20 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Xpovio (80 MG Once Weekly) Tablet Therapy Pack 20 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Xpovio (80 MG Twice Weekly) Tablet Therapy Pack 20 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
<b>EFFECTIVE 11/01/2019</b>				
Corlanor Solution 5 MG/5ML Oral	NF	4 + QL 450 + PA1	Formulary Enhancement	N/A
Enbrel Mini Solution Cartridge 50 MG/ML Subcutaneous	NF	5 + PA1	Formulary Enhancement	N/A
Inrebic Capsule 100 MG Oral	NF	5 + PA2	Formulary Enhancement	N/A
Soliqua Solution Pen-injector 100-33 UNT-MCG/ML Subcutaneous	3 + QL 18 + ST1	3 + QL 18	Formulary Enhancement	N/A
Theophylline ER Tablet Extended Release 12 Hour 100 MG Oral	1	NF	CMS Required Deletion	N/A
Theophylline ER Tablet Extended Release 12 Hour 200 MG Oral	1	NF	CMS Required Deletion	N/A
Xultophy Solution Pen-injector 100-3.6 UNIT-MG/ML Subcutaneous	3 + QL 15 + ST1	3 + QL 15	Formulary Enhancement	N/A

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