Liberty Formulary Updates
February, 2026

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The changes below are reflective of Prime Therapeutics P&T Committee decisions.

Key
Tier: Tier 1= Preferred Generics, Tier 2=Preferred Brands, Tier 3=Non-Preferred Brands, X=Excluded NF=Non-Formulary
Formulary Edits: QL=Quantity Limit, QLC=Quantity Limit (Custom), PA=Prior Authorization, ST=Step Therapy, AL1=Age Limit, GL=Gender Limit, S=Specialty Drug, ACA=Affordable Care Act, HCB=High-Cost Brand, HCG=High-Cost Generic

Drugs may be subject to coverage requirements or limits such as prior authorization. Refer to your formulary or plan documents for additional information.

2025 Formulary Changes			
Therapeutic Class	**Medication**	**Formulary Changes**	**Effective Date**
Antibiotics	CEFIXIME 400 MG TABLET	NF --> Tier 3 (Non-Preferred Brand), HCB	2/1/2026
Antipsychotics	VRAYLAR 0.5 MG CAPSULE	NF --> Tier 2 (Preferred Brand) QL (30/30 days)	2/1/2026
Antipsychotics	VRAYLAR 0.75 MG CAPSULE	NF --> Tier 2 (Preferred Brand) QL (30/30 days)	2/1/2026
Cardiovascular Agents	METOPROLOL TARTRATE 12.5 MG TABLET	NF --> Tier 3 (Non-Preferred Brand), HCB	2/1/2026
Central Nervous System Agent	DAYBUE STIX 5000 MG PACKET	NF --> Tier 3 (Non-Preferred Brand), Specialty, PA QL (120/30 days)	2/1/2026
Central Nervous System Agent	DAYBUE STIX 6000 MG PACKET	NF --> Tier 3 (Non-Preferred Brand), Specialty, PA QL (120/30 days)	2/1/2026
Central Nervous System Agent	DAYBUE STIX 8000 MG PACKET	NF --> Tier 3 (Non-Preferred Brand), Specialty, PA QL (60/30 days)	2/1/2026

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Therapeutic Class	**Medication**	**Formulary Changes**	**Effective Date**
Dental Agents	PREVIDENT 0.2% SOLUTION	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Dental Agents	PREVIDENT 1.1% GEL	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Dental Agents	PREVIDENT 5000 BOOSTER PLUS 1.1 % PASTE	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Dental Agents	PREVIDENT 5000 DRY MOUTH 1.1 % GEL	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Dental Agents	PREVIDENT 5000 KIDS 1.1 % PASTE	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Dental Agents	PREVIDENT 5000 PLUS 1.1 % CREAM	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
HIV	YEZTUGO 300 MG TABLET	Tier 3 --> Tier 2 (Preferred Brand) QLC (4/365 days)	2/1/2026
HIV	YEZTUGO 463.5 MG/1.5ML SOLUTION	NF --> Tier 2 (Preferred Brand)	2/1/2026
Immunological Agents	ANDEMBRY 200 MG/1.2ML AUTO-INJECTOR SOLUTION	NF --> Tier 2 (Preferred Brand), Specialty, PA QL (1.2/30 days)	2/1/2026
Immunological Agents	DAWNZERA 80 MG/0.8ML SOLN A-INJ	NF --> Tier 2 (Preferred Brand), Specialty, PA QL (0.8/28 days)	2/1/2026
Miscellaneous	HYPERSAL 7 % NEBULIZER SOLUTION	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Miscellaneous	K-PHOS 500 MG TAB	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026

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Therapeutic Class	**Medication**	**Formulary Changes**	**Effective Date**
Miscellaneous	K-PHOS-NEUTRAL 155-852-130 MG TAB	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Miscellaneous	POTASSIUM CHLORIDE 40 MEQ PACKET	NF --> Tier 3 (Non-Preferred Brand), HCB	2/1/2026
Oncology	XPOVIO (80 MG ONCE WEEKLY) 80 MG TABLET THERAPY PACK	NF --> Tier 3 (Non-Preferred Brand), Specialty, PA QL (4/28 days)	2/1/2026
Ophthalmic Agents	BESIFLOXACIN 0.6% SUSPENSION	NF --> Tier 3 (Non-Preferred Brand), HCB	2/1/2026
Ophthalmic Agents	loteprednol-tobramycin 0.5-0.3% suspension	NF --> Tier 3 (Non-Preferred Brand), HCG	2/1/2026
Ophthalmic Agents	TRYPTYR 0.003 % SOLUTION	NF --> Tier 3 (Non-Preferred Brand) QL (60/30 days)	2/1/2026
Potassium Binders	sodium polystyrene sulfonate 15 gm/6ml suspension	NF -> Tier 1 (Generics)	2/1/2026
Pulmonary Arterial Hypertension (PAH)	TYVASO DPI MAINTENANCE KIT 112 X 32MCG & 112 X64MCG POWDER (POWDER)	NF --> Tier 3 (Non-Preferred Brand), Specialty, PA QL (224/28 days)	2/1/2026
Pulmonary Arterial Hypertension (PAH)	TYVASO DPI MAINTENANCE KIT 112 X 48MCG & 112 X64MCG POWDER (POWDER)	NF --> Tier 3 (Non-Preferred Brand), Specialty, PA QL (224/28 days)	2/1/2026
Pulmonary Arterial Hypertension (PAH)	TYVASO DPI MAINTENANCE KIT 80 MCG POWDER (POWDER)	NF --> Tier 3 (Non-Preferred Brand), Specialty, PA QL (112/28 days)	2/1/2026

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Therapeutic Class	**Medication**	**Formulary Changes**	**Effective Date**
Weight Management	WEGOVY 1.5 MG TABLET	NF --> Tier 2 (Preferred Brand), PA QLC (60/180 days)	2/1/2026
Weight Management	WEGOVY 25 MG TABLET	NF --> Tier 2 (Preferred Brand), PA QL (30/30 days)	2/1/2026
Weight Management	WEGOVY 4 MG TABLET	NF --> Tier 2 (Preferred Brand), PA QLC (60/180 days)	2/1/2026
Weight Management	WEGOVY 9 MG TABLET	NF --> Tier 2 (Preferred Brand), PA QLC (60/180 days)	2/1/2026

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