



## 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
abacavir sulfate/lamivudine	Epzicom <sup>®</sup>	Chapter 1. Antibiotics & Other Drugs Used for Infection	October 10, 2016
amlodipine besylate/ olmesartan	Azor <sup>®</sup>	Chapter 4. Heart, Blood Pressure, & Cholesterol	October 31, 2016
drospire/eth/estra/levomefol	Beyaz <sup>™</sup>	Chapter 10. Female, Hormone Replacement, & Birth Control	October 17, 2016
erythrom eth susp 200/5 ml	E.E.S. 200 <sup>®</sup>	Chapter 5. Skin Medications	September 26, 2016
flurandrenol lot 0.5%	Cordran <sup>®</sup>	Chapter 5. Skin Medications	October 10, 2016
levalbuterol 45 mcg/act aer	Xopenex <sup>®</sup> HFA	Chapter 12. Allergy, Cough & Cold, Lung Meds	October 10, 2016
mesalamine dr 800 mg	Asacol <sup>®</sup> HD	Chapter 8. Stomach, Ulcer, & Bowel Meds	August 8, 2016
metoprolol succinate/hctz 25-12.5 mg	Dutoprol <sup>™</sup>	Chapter 4. Heart, Blood Pressure, & Cholesterol	October 17, 2016
nitroglycerin sub 0.3 mg, 0.4 mg, 0.6 mg	Nitrostat <sup>®</sup>	Chapter 4. Heart, Blood Pressure, & Cholesterol	September 5, 2016
olmesartan/amlodipine/hctz	Tribenzor <sup>™</sup>	Chapter 4. Heart, Blood Pressure, & Cholesterol	October 31, 2016
olmesartan/hctz	Benicar HCT <sup>®</sup>	Chapter 4. Heart, Blood Pressure, & Cholesterol	October 31, 2016
olmesartan medoxomil	Benicar <sup>®</sup>	Chapter 4. Heart, Blood Pressure, & Cholesterol	October 31, 2016
valganciclov sol 50 mg/ml	Valcyte <sup>®</sup>	Chapter 1. Antibiotics & Other Drugs Used for Infection	September 5, 2016
yuvafem	Vagifem <sup>®</sup>	Chapter 10. Female, Hormone Replacement, & Birth Control	October 17, 2016

### Brand Additions

These brand drugs were added to the formulary as of the date indicated below and are covered at the appropriate brand formulary level of cost-sharing:

Brand drug	Formulary chapter	Effective date
Jardiance <sup>®</sup>	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones	February 1, 2017
Lantus <sup>®</sup>	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones	February 1, 2017
Synjardy <sup>®</sup>	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones	February 1, 2017
Toujeo <sup>®</sup> Solostar	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones	February 1, 2017
Tresiba <sup>®</sup>	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones	February 1, 2017
Triumeq <sup>®</sup>	Chapter 1. Antibiotics & Other Drugs Used for Infection	January 1, 2017
Viagra <sup>®</sup>	Chapter 13. Urinary & Prostate Meds	February 1, 2017

### Brand Deletions

These brand drugs will be covered at the appropriate non-formulary level of cost sharing:  
*Effective April 1, 2017*

Brand drug	Generic drug	Formulary chapter
Androgel <sup>®</sup> 1%	testosterone 1% gel	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones
Azor <sup>®</sup>	amlodipine besylate/olmesartan	Chapter 4. Heart, Blood Pressure, & Cholesterol
Benicar <sup>®</sup>	olmesartan medoxomil	Chapter 4. Heart, Blood Pressure, & Cholesterol
Benicar HCT <sup>®</sup>	olmesartan/hctz	Chapter 4. Heart, Blood Pressure, & Cholesterol

## Brand Deletions

**These brand drugs will be covered at the appropriate non-formulary level of cost sharing:  
Effective April 1, 2017**

Brand drug	Generic drug	Formulary chapter
Epzicom® tab 600-300	abacavir sulfate/lamvudine	Chapter 1. Antibiotics & Other Drugs Used for Infection
Nitrostat® tab	nitroglycerin sub tab	Chapter 4. Heart, Blood Pressure, & Cholesterol
Tribenzor™	olmesartan/amlodipine/hctz	Chapter 4. Heart, Blood Pressure, & Cholesterol

The generics 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 April 1, 2017**

Brand drug	Formulary Therapeutic Alternatives	Formulary chapter
Axiron®	testosterone gel	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones

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

## Generic Deletions

**These generic drugs will be covered at the appropriate non-formulary level of cost-sharing:  
Effective April 1, 2017**

Generic drug	Formulary Therapeutic Alternatives	Formulary chapter
diclofenac 1.5% sol	ibuprofen, indomethacin, flurbiprofen	Chapter 9. Bone, Joint, & Muscle
metaxolone	cyclobenzaprine, chlorzoxazone	Chapter 9. Bone, Joint, & Muscle
naproxen sodium CR	ibuprofen, indomethacin, flurbiprofen	Chapter 9. Bone, Joint, & Muscle
naproxen sodium ER	ibuprofen, indomethacin, flurbiprofen	Chapter 9. Bone, Joint, & Muscle

## 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
Basaglar®	N/A	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones	November 23, 2016
Yosprala™ 325/40 mg, 81/40 mg	N/A	Chapter 4. Heart, Blood Pressure, & Cholesterol	August 29, 2016
Zurampic® 200 mg	N/A	Chapter 9. Bone, Joint, & Muscle	August 29, 2016

## Drugs Requiring Prior Authorization

**The following non-formulary drugs will be added to the list of drugs requiring prior authorization:  
Effective April 1, 2017**

Brand drug	Generic drug	Formulary chapter
Anaprox® DS	naproxen sodium	Chapter 9. Bone, Joint, & Muscle
Colcrys®	colchicine	Chapter 9. Bone, Joint, & Muscle
EC-Naprosyn®	naproxen sodium	Chapter 9. Bone, Joint, & Muscle
Lidoderm®	lidocaine	Chapter 5. Skin Medications
Mitigare®	colchicine	Chapter 9. Bone, Joint, & Muscle
Naprelan®	naproxen sodium	Chapter 9. Bone, Joint, & Muscle
Naprosyn®	naproxen sodium	Chapter 9. Bone, Joint, & Muscle
Targadox™	N/A	Chapter 1. Antibiotics & Other Drugs Used for Infection
Thiola®	N/A	Chapter 12. Allergy, Cough & Cold, Lung Meds
Uloric®	N/A	Chapter 9. Bone, Joint, & Muscle

## Drugs No Longer Requiring Prior Authorization

Prior authorization has been removed for the following drugs:

*Effective April 1, 2017*

Brand drug	Generic drug	Formulary chapter
Glyxambi®	N/A	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones
Jardiance®	N/A	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones
Lantus®	N/A	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones
Novarel®	chorionic gonadotropin	Chapter 15. Diagnostics & Miscellaneous Agents
Pregnyl®	chorionic gonadotropin	Chapter 15. Diagnostics & Miscellaneous Agents
Synjardy®	N/A	Chapter 7. Diabetes, Thyroid, Steroids, & Other Miscellaneous Hormones
Voltaren® gel	diclofenac sodium	Chapter 3. Pain, Nervous System, & Psych