

Source Rx Formulary Updates



April 2020

This list is based on the full NetResults formulary with a 4-tier design. If your benefits administrator chose a non-standard formulary design, your coverage may be different than what is listed below. Please visit myprime.com for the most current and complete list.

- Tier 1 = preferred generic
- Tier 2 = non-preferred generic
- Tier 3 = preferred brand
- Tier 4 = non-preferred brand

Positive Changes

This list includes any additions or positive changes to the formulary.

TRADE NAME (generic name) or generic name	Brand/Generic Product	Effective Date	Description of Change
bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)	Generic	10/13/19	Move from Tier 4 to Tier 2
bupropion hcl tab er 24hr 150 mg	Generic	1/1/20	Move from Tier 2 to Tier 1
CEQUR SIMPLICITY (injection device for insulin)	Brand	10/13/19	Addition to Tier 3
CEQUR SIMPLICITY INSERTER (*injection device for insulin - accessories***)	Brand	12/8/19	Addition to Tier 3
COMPACT SPACE CHAMBER/ANTI-STATIC/LARGE MASK (*spacer/ aerosol-holding chambers - device***)	Brand	12/1/19	Addition to Tier 3
COMPACT SPACE CHAMBER/ANTI-STATIC/MEDIUM MASK (*spacer/ aerosol-holding chambers - device***)	Brand	12/1/19	Addition to Tier 3
COMPACT SPACE CHAMBER/ANTI-STATIC/SMALL MASK (*spacer/ aerosol-holding chambers - device***)	Brand	12/1/19	Addition to Tier 3
deferasirox tab 360 mg	Generic	11/24/19	Addition to Tier 2, generic for JADENU
deferasirox tab 90 mg	Generic	11/24/19	Addition to Tier 2, generic for JADENU
digoxin oral soln 0.05 mg/ml	Generic	10/13/19	Addition to Tier 2, generic for DIGOXIN
doxycycline hyclate tab 100 mg	Generic	1/1/20	Move from Tier 2 to Tier 1
duloxetine hcl enteric coated pellets cap 20 mg (base eq)	Generic	1/1/20	Move from Tier 2 to Tier 1
FASENRA PEN (benralizumab subcutaneous soln auto-injector 30 mg/ml)	Brand	4/1/20	Addition to Tier 4
fenofibrate tab 145 mg	Generic	1/1/20	Move from Tier 2 to Tier 1
fenofibrate tab 160 mg	Generic	1/1/20	Move from Tier 2 to Tier 1
FIASP PENFILL (insulin aspart (with niacinamide) soln cartridge 100 unit/ml)	Brand	9/29/19	Addition to Tier 3
GVOKE PFS (glucagon subcutaneous soln pref syringe 0.5 mg/0.1ml)	Brand	1/1/20	Addition to Tier 3
GVOKE PFS (glucagon subcutaneous soln pref syringe 1 mg/0.2ml)	Brand	1/1/20	Addition to Tier 3
HARVONI (ledipasvir-sofosbuvir tab 45-200 mg)	Brand	10/13/19	Addition to Tier 3
HEPARIN SODIUM (heparin sodium (porcine) pf inj 5000 unit/ml)	Brand	4/1/20	Addition to Tier 4
INREBIC (fedratinib hcl cap 100 mg)	Brand	4/1/20	Addition to Tier 4
mesalamine cap er 24hr 0.375 gm	Generic	12/1/19	Addition to Tier 2, generic for APRISO
metoprolol tartrate tab 37.5 mg	Generic	10/27/19	Move from Tier 4 to Tier 2

continued

TRADE NAME (generic name) or generic name	Brand/Generic Product	Effective Date	Description of Change
metoprolol tartrate tab 75 mg	Generic	10/27/19	Move from Tier 4 to Tier 2
morphine sulfate tab er 15 mg	Generic	1/1/20	Move from Tier 2 to Tier 1
NAYZILAM (midazolam nasal spray soln 5 mg/0.1 ml)	Brand	4/1/20	Addition to Tier 4
nitisinone cap 10 mg	Generic	9/29/19	Addition to Tier 2, generic for ORFADIN
nitisinone cap 2 mg	Generic	9/29/19	Addition to Tier 2, generic for ORFADIN
nitisinone cap 5 mg	Generic	9/29/19	Addition to Tier 2, generic for ORFADIN
NUBEQA (darolutamide tab 300 mg)	Brand	1/1/20	Addition to Tier 3
oxybutynin chloride tab er 24hr 10 mg	Generic	1/1/20	Move from Tier 2 to Tier 1
OXYMORPHONE HYDROCHLORIDE ER (oxymorphone hcl tab er 12hr 15 mg)	Brand	10/27/19	Addition to Tier 4
pentamidine isethionate for nebulization soln 300 mg	Generic	12/8/19	Addition to Tier 2, generic for NEBUPENT
PREDNISOLONE SODIUM PHOSPHATE (prednisolone sodium phosphate oral soln 25 mg/5ml (base eq))	Brand	11/17/19	Addition to Tier 4
prednisone tab 50 mg	Generic	10/27/19	Move from Tier 4 to Tier 2
ROZLYTREK (entrectinib cap 100 mg)	Brand	4/1/20	Addition to Tier 3
ROZLYTREK (entrectinib cap 200 mg)	Brand	4/1/20	Addition to Tier 3
RUBRACA (rucaparib camsylate tab 200 mg (base equivalent))	Brand	4/1/20	Move from Tier 4 to Tier 3
RUBRACA (rucaparib camsylate tab 250 mg (base equivalent))	Brand	4/1/20	Move from Tier 4 to Tier 3
RUBRACA (rucaparib camsylate tab 300 mg (base equivalent))	Brand	4/1/20	Move from Tier 4 to Tier 3
RYBELSUS (semaglutide tab 14 mg)	Brand	4/1/20	Addition to Tier 3
RYBELSUS (semaglutide tab 3 mg)	Brand	4/1/20	Addition to Tier 3
RYBELSUS (semaglutide tab 7 mg)	Brand	4/1/20	Addition to Tier 3
SOVALDI (sofosbuvir tab 200 mg)	Brand	10/13/19	Addition to Tier 3
SYNTHROID (levothyroxine sodium tab 100 mcg)	Brand	4/1/20	Move from Tier 4 to Tier 3
SYNTHROID (levothyroxine sodium tab 112 mcg)	Brand	4/1/20	Move from Tier 4 to Tier 3
SYNTHROID (levothyroxine sodium tab 125 mcg)	Brand	4/1/20	Move from Tier 4 to Tier 3
SYNTHROID (levothyroxine sodium tab 137 mcg)	Brand	4/1/20	Move from Tier 4 to Tier 3
SYNTHROID (levothyroxine sodium tab 150 mcg)	Brand	4/1/20	Move from Tier 4 to Tier 3
SYNTHROID (levothyroxine sodium tab 175 mcg)	Brand	4/1/20	Move from Tier 4 to Tier 3
SYNTHROID (levothyroxine sodium tab 200 mcg)	Brand	4/1/20	Move from Tier 4 to Tier 3
SYNTHROID (levothyroxine sodium tab 25 mcg)	Brand	4/1/20	Move from Tier 4 to Tier 3
SYNTHROID (levothyroxine sodium tab 300 mcg)	Brand	4/1/20	Move from Tier 4 to Tier 3
SYNTHROID (levothyroxine sodium tab 50 mcg)	Brand	4/1/20	Move from Tier 4 to Tier 3
SYNTHROID (levothyroxine sodium tab 75 mcg)	Brand	4/1/20	Move from Tier 4 to Tier 3
SYNTHROID (levothyroxine sodium tab 88 mcg)	Brand	4/1/20	Move from Tier 4 to Tier 3
TEMIXYS (lamivudine-tenofovir disoproxil fumarate tab 300-300 mg)	Brand	4/1/20	Addition to Tier 3
TRIFLURIDINE (trifluridine ophth soln 1%)	Brand	1/1/20	Move from Tier 4 to Tier 3
TRIKAFTA (elexacaf-tezacaf-ivacaf 100-50-75 mg & ivacaftor 150 mg tbpk)	Brand	1/1/20	Addition to Tier 3
TURALIO (pexidartinib hcl cap 200 mg (base equivalent))	Brand	4/1/20	Addition to Tier 4
VYLEESI (bremelanotide acetate subcutaneous soln auto-injector 1.75 mg/0.3 ml)	Brand	4/1/20	Addition to Tier 4 of the <i>Optional Sexual Dysfunction Component</i>
XENLETA (lefamulin acetate tab 600 mg)	Brand	4/1/20	Addition to Tier 4

continued

Negative Changes

This list includes any removals or negative changes to the formulary.

TRADE NAME (generic name) or generic name	Brand/ Generic Product	Effective Date	Description of Change
ALENDRONATE SODIUM (alendronate sodium tab 5 mg)	Brand	4/1/20	Move from Tier 1 to Tier 4
AMICAR (aminocaproic acid oral soln 0.25 gm/ml)	Brand	7/1/20	Removal from Tier 4, no longer covered
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	Generic	1/1/20	Move from Tier 1 to Tier 2
APRISO (mesalamine cap er 24hr 0.375 gm)	Brand	7/1/20	Removal from Tier 3, no longer covered
buspirone hcl tab 7.5 mg	Generic	7/1/20	Removal from Tier 2, no longer covered
CHLOROTHIAZIDE (chlorothiazide tab 500 mg)	Brand	4/1/20	Move from Tier 2 to Tier 4
desoximetasone gel 0.05%	Generic	4/1/20	Removal from Tier 2, no longer covered, generic for TOPICORT gel
diclofenac sodium tab er 24hr 100 mg	Generic	1/1/20	Move from Tier 1 to Tier 2
DIDANOSINE (didanosine delayed release capsule 400 mg)	Brand	7/1/20	Move from Tier 2 to Tier 4
DILT-XR (diltiazem hcl cap er 24hr 180 mg)	Brand	7/1/20	Move from Tier 2 to Tier 4
DILT-XR (diltiazem hcl cap er 24hr 240 mg)	Brand	7/1/20	Move from Tier 2 to Tier 4
DORAL (quazepam tab 15 mg)	Brand	7/1/20	Removal from Tier 4, no longer covered
dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml	Generic	1/1/20	Move from Tier 1 to Tier 2
doxycycline monohydrate cap 150 mg	Generic	7/1/20	Removal from Tier 2, no longer covered
doxycycline monohydrate cap 75 mg	Generic	7/1/20	Removal from Tier 2, no longer covered
DYRENIUM (triamterene cap 100 mg)	Brand	4/1/20	Removal from Tier 4, no longer covered
DYRENIUM (triamterene cap 50 mg)	Brand	4/1/20	Removal from Tier 4, no longer covered
ERY (erythromycin pads 2%)	Brand	7/1/20	Move from Tier 2 to Tier 4
FIRAZYR (icatibant acetate inj 30 mg/3ml (base equivalent))	Brand	4/1/20	Removal from Tier 3, no longer covered
fluoxetine hcl tab 10 mg	Generic	7/1/20	Removal from Tier 2, no longer covered
fluoxetine hcl tab 20 mg	Generic	7/1/20	Removal from Tier 2, no longer covered
JADENU (deferasirox tab 360 mg)	Brand	7/1/20	Removal from Tier 4, no longer covered
JADENU (deferasirox tab 90 mg)	Brand	7/1/20	Removal from Tier 4, no longer covered
KETOPROFEN (ketoprofen cap 25 mg)	Brand	7/1/20	Removal from Tier 4, no longer covered
levetiracetam oral soln 100 mg/ml	Generic	1/1/20	Move from Tier 1 to Tier 2
levetiracetam tab 750 mg	Generic	1/1/20	Move from Tier 1 to Tier 2
lidocaine hcl soln 4%	Generic	1/1/20	Move from Tier 1 to Tier 2
LYRICA (pregabalin cap 100 mg)	Brand	4/1/20	Removal from Tier 3, no longer covered
LYRICA (pregabalin cap 150 mg)	Brand	4/1/20	Removal from Tier 3, no longer covered
LYRICA (pregabalin cap 200 mg)	Brand	4/1/20	Removal from Tier 3, no longer covered
LYRICA (pregabalin cap 225 mg)	Brand	4/1/20	Removal from Tier 3, no longer covered
LYRICA (pregabalin cap 25 mg)	Brand	4/1/20	Removal from Tier 3, no longer covered
LYRICA (pregabalin cap 300 mg)	Brand	4/1/20	Removal from Tier 3, no longer covered
LYRICA (pregabalin cap 50 mg)	Brand	4/1/20	Removal from Tier 3, no longer covered
LYRICA (pregabalin cap 75 mg)	Brand	4/1/20	Removal from Tier 3, no longer covered
LYRICA (pregabalin soln 20 mg/ml)	Brand	4/1/20	Removal from Tier 3, no longer covered
mefenamic acid cap 250 mg	Generic	7/1/20	Removal from Tier 2, no longer covered
metoprolol succinate tab er 24hr 100 mg (tartrate equiv)	Generic	1/1/20	Move from Tier 1 to Tier 2
mometasone furoate cream 0.1%	Generic	1/1/20	Move from Tier 1 to Tier 2
MORPHINE SULFATE (morphine sulfate tab 15 mg)	Brand	4/1/20	Removal from Tier 3, no longer covered
MORPHINE SULFATE (morphine sulfate tab 30 mg)	Brand	4/1/20	Removal from Tier 3, no longer covered
naproxen susp 125 mg/5ml	Generic	7/1/20	Removal from Tier 2, no longer covered
NEVIRAPINE ER (nevirapine tab er 24hr 100 mg)	Brand	7/1/20	Move from Tier 2 to Tier 4
NITROGLYCERIN ER (nitroglycerin cap er 6.5 mg)	Brand	4/1/20	Move from Tier 2 to Tier 4
NITROGLYCERIN ER (nitroglycerin cap er 9 mg)	Brand	4/1/20	Move from Tier 2 to Tier 4
NITROGLYCERIN ER (nitroglycerin cap er 2.5 mg)	Brand	7/1/20	Move from Tier 2 to Tier 4
nitroglycerin sl tab 0.4 mg	Generic	1/1/20	Move from Tier 1 to Tier 2
NITRO-TIME (nitroglycerin cap er 6.5 mg)	Brand	4/1/20	Move from Tier 2 to Tier 4
NITRO-TIME (nitroglycerin cap er 9 mg)	Brand	4/1/20	Move from Tier 2 to Tier 4

continued

TRADE NAME (generic name) or generic name	Brand/ Generic Product	Effective Date	Description of Change
NITRO-TIME (nitroglycerin cap er 2.5 mg)	Brand	7/1/20	Move from Tier 2 to Tier 4
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	Generic	1/1/20	Move from Tier 1 to Tier 2
NOXAFIL (posaconazole tab delayed release 100 mg)	Brand	4/1/20	Removal from Tier 3, no longer covered
OCTREOTIDE ACETATE (octreotide acetate inj 1000 mcg/ml (1 mg/ml))	Brand	7/1/20	Removal from Tier 2, no longer covered
OCTREOTIDE ACETATE (octreotide acetate inj 200 mcg/ml (0.2 mg/ml))	Brand	7/1/20	Removal from Tier 2, no longer covered
ONDANSETRON HCL (ondansetron hcl tab 24 mg)	Brand	7/1/20	Move from Tier 2 to Tier 4
ORFADIN (nitisinone cap 10 mg)	Brand	7/1/20	Removal from Tier 3, no longer covered
ORFADIN (nitisinone cap 2 mg)	Brand	7/1/20	Removal from Tier 3, no longer covered
ORFADIN (nitisinone cap 5 mg)	Brand	7/1/20	Removal from Tier 3, no longer covered
OXAZEPAM (oxazepam cap 15 mg)	Brand	4/1/20	Move from Tier 2 to Tier 4
OXYCODONE/ASPIRIN (oxycodone-aspirin tab 4.8355-325 mg)	Brand	4/1/20	Move from Tier 2 to Tier 4
potassium chloride cap er 10 meq	Generic	1/1/20	Move from Tier 1 to Tier 2
PREDNISOLONE ACETATE (prednisolone acetate ophth susp 1%)	Brand	1/1/20	Move from Tier 2 to Tier 4
PROMETHAZINE/DEXTROMETHOR PHAN (promethazine-dm syrup 6.25-15 mg/5ml)	Brand	4/1/20	Move from Tier 1 to Tier 4
PROMETHAZINE-DM (promethazine-dm syrup 6.25-15 mg/5ml)	Brand	4/1/20	Move from Tier 1 to Tier 4
propranolol hcl tab 40 mg	Generic	1/1/20	Move from Tier 1 to Tier 2
QUAZEPAM (quazepam tab 15 mg)	Brand	7/1/20	Removal from Tier 4, no longer covered
SAVELLA (milnacipran hcl tab 100 mg)	Brand	7/1/20	Removal from Tier 4, no longer covered
SAVELLA (milnacipran hcl tab 12.5 mg)	Brand	7/1/20	Removal from Tier 4, no longer covered
SAVELLA (milnacipran hcl tab 25 mg)	Brand	7/1/20	Removal from Tier 4, no longer covered
SAVELLA (milnacipran hcl tab 50 mg)	Brand	7/1/20	Removal from Tier 4, no longer covered
SAVELLA TITRATION PACK (milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak)	Brand	7/1/20	Removal from Tier 4, no longer covered
SELEGILINE HCL (selegiline hcl tab 5 mg)	Brand	4/1/20	Move from Tier 2 to Tier 4
THEOCHRON (theophylline tab er 12hr 100 mg)	Brand	4/1/20	Move from Tier 1 to Tier 4
THEOCHRON (theophylline tab er 12hr 200 mg)	Brand	4/1/20	Move from Tier 1 to Tier 4
THEOPHYLLINE ER (theophylline tab er 12hr 450 mg)	Brand	4/1/20	Move from Tier 2 to Tier 4
TRANSDERM SCOP (scopolamine td patch 72hr 1 mg/3days)	Brand	4/1/20	Removal from Tier 4, no longer covered
TRANSDERM-SCOP (scopolamine td patch 72hr 1 mg/3days)	Brand	4/1/20	Removal from Tier 4, no longer covered
triamcinolone acetonide aerosol soln 0.147 mg/gm	Generic	4/1/20	Removal from Tier 2, no longer covered, generic for KENALOG spray
ULESFIA (benzyl alcohol lotion 5%)	Brand	7/1/20	Removal from Tier 4, no longer covered

continued

New-to-Market Drugs that are Non-Covered

These new-to-market drugs have been evaluated and are non-covered on the NetResults formulary

TRADE NAME (generic name) or generic name	Brand/Generic Product	Effective Date	Description of Change
ACTICOAT 7 2"X2" (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ACTICOAT 7 4"X5" (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ACTICOAT ABSORBENT ANTIMICROBIAL DRESSING 4"X5" (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ACTICOAT ANTIMICROBIAL DRESSING 2"X2" (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ACTICOAT ANTIMICROBIAL DRESSING 4"X4" (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ADAKVEO (crizanlizumab-tmca iv soln 100 mg/10ml)	Brand	11/24/19	Non-covered
ADRENALIN (epinephrine inj 1 mg/ml (1:1000))	Brand	9/29/19	Non-covered
ALLEVYN AG ADHESIVE (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ALLEVYN AG ADHESIVE (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ALLEVYN AG ADHESIVE (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ALLEVYN AG GENTLE BORDER (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ALLEVYN AG GENTLE BORDER (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ALLEVYN AG GENTLE BORDER (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ALLEVYN AG NON-ADHESIVE (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ALLEVYN AG NON-ADHESIVE (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ALLEVYN AG NON-ADHESIVE (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ALLEVYN AG NON-ADHESIVE (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ALLEVYN AG SACRUM (*wound dressings - pads***)	Brand	9/29/19	Non-covered
ARIDOL (mannitol (diagnostic) inhalation powder capsule kit)	Brand	9/22/19	Non-covered
arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)	Generic	9/22/19	Non-covered, generic for TRISENOX
ASCENIV (immune globulin (human)-slra iv soln 5 gm/50ml)	Brand	11/24/19	Non-covered
ASPARLAS (calaspargase pegol-mknl iv soln 3750 unit/5ml (750 unit/ml))	Brand	10/6/19	Non-covered
ASPIRIN/OMEPRAZOLE (aspirin-omeprazole tab delayed release 81-40 mg)	Brand	12/8/19	Non-covered
ASTERO (lidocaine hcl gel 4%)	Brand	9/22/19	Non-covered
ATROPINE SULFATE (atropine sulfate soln prefill syr 0.25 mg/5ml (0.05 mg/ml))	Brand	11/10/19	Non-covered
BAQSIMI ONE PACK (glucagon nasal powder 3 mg/dose)	Brand	4/1/20	Non-covered
BAQSIMI TWO PACK (glucagon nasal powder 3 mg/dose)	Brand	4/1/20	Non-covered
BIORPHEN (phenylephrine hcl (pf) iv soln 0.5 mg/5ml (100 mcg/ml))	Brand	11/3/19	Non-covered
BORTEZOMIB (bortezomib for iv inj 3.5 mg)	Brand	11/24/19	Non-covered
BOTTLE/6OZ/WHITE/HDPE/WITH TWIST TOP SIFTER CAP (*misc. devices**)	Brand	11/3/19	Non-covered
CATHFLO ACTIVASE (alteplase for inj 2 mg)	Brand	10/20/19	Non-covered
CEQUR SIMPLICITY STARTERKIT (*injection device - kit***)	Brand	10/13/19	Non-covered
CIPROFLOXACIN/FLUOCINOLONE ACETONIDE PF (ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%)	Brand	11/10/19	Non-covered
CLEOCIN PHOSPHATE (clindamycin phosphate inj 300 mg/2ml)	Brand	11/10/19	Non-covered
CLEOCIN PHOSPHATE (clindamycin phosphate inj 600 mg/4ml)	Brand	11/10/19	Non-covered
CLEOCIN PHOSPHATE (clindamycin phosphate inj 900 mg/6ml)	Brand	11/10/19	Non-covered
CLOCORTOLONE PIVALATE (clocortolone pivalate cream 0.1%)	Brand	11/24/19	Non-covered
CLODERM (clocortolone pivalate cream 0.1%)	Brand	10/6/19	Non-covered
colchicine tab 0.6 mg	Generic	12/1/19	Non-covered, generic for COLCRYS
CYSTO-CONRAY II (iothalamate meglumine inj 17.2%)	Brand	11/10/19	Non-covered
CYTOVENE (ganciclovir sodium for inj 500 mg)	Brand	10/6/19	Non-covered
DANDELION ALLERGENIC EXTRACT (dandelion inj 1:20)	Brand	9/29/19	Non-covered
DAPTOMYCIN (daptomycin for iv soln 350 mg)	Brand	9/29/19	Non-covered

continued

TRADE NAME (generic name) or generic name	Brand/Generic Product	Effective Date	Description of Change
DEXAMETHASONE SODIUM PHOSPHATE (dexamethasone sod phos inj sol pref syr 10 mg/ml (pf))	Brand	11/3/19	Non-covered
DEXAMETHASONE SODIUM PHOSPHATE (dexamethasone sodium phosphate inj 10 mg/ml)	Brand	11/17/19	Non-covered
DEXTROSE (dextrose inj 20%)	Brand	11/24/19	Non-covered
DEXTROSE/SODIUM CHLORIDE (dextrose 5% w/ sodium chloride 0.225%)	Brand	9/29/19	Non-covered
DISPENSER MD PUMP BOTTLE240ML/VIEW WINDOW/AIRLESS (*misc. devices**)	Brand	11/3/19	Non-covered
docetaxel for inj conc 160 mg/8ml (20 mg/ml)	Generic	10/6/19	Non-covered, generic for DOCETAXEL
DOTATOC GA 68 (gallium ga 68 dotatoc iv soln 0.5-4 mci/ml (18.5-148 mbq/ml))	Brand	9/22/19	Non-covered
DOXIL (doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml)	Brand	9/29/19	Non-covered
DRIZALMA SPRINKLE (duloxetine hcl cap delayed release sprinkle 20 mg (base eq))	Brand	4/1/20	Non-covered
DRIZALMA SPRINKLE (duloxetine hcl cap delayed release sprinkle 30 mg (base eq))	Brand	4/1/20	Non-covered
DRIZALMA SPRINKLE (duloxetine hcl cap delayed release sprinkle 40 mg (base eq))	Brand	4/1/20	Non-covered
DRIZALMA SPRINKLE (duloxetine hcl cap delayed release sprinkle 60 mg (base eq))	Brand	4/1/20	Non-covered
DUAKLIR PRESSAIR (aclidinium br-formoterol fum aero pow br act 400-12 mcg/act)	Brand	4/1/20	Non-covered
EGRIFTA (tesamorelin acetate for inj 2 mg (base equiv))	Brand	9/22/19	Non-covered
EGRIFTA SV (tesamorelin acetate for inj 2 mg (base equiv))	Brand	11/24/19	Non-covered
EYLEA (aflibercept intravitreal soln pref syr 2 mg/0.05ml)	Brand	12/8/19	Non-covered
FORAXA (*wound dressings - emulsion**)	Brand	11/10/19	Non-covered
FOSAPREPITANT DIMEGLUMINE (fosaprepitant dimeglumine for iv infusion 150 mg (base eq))	Brand	9/22/19	Non-covered
GLASS BOTTLE 60ML (*misc. devices**)	Brand	11/3/19	Non-covered
GUARDIAN CONNECT TRANSMITTER (*continuous blood glucose system transmitter***)	Brand	10/13/19	Non-covered
GUARDIAN LINK 3 (*continuous blood glucose system transmitter***)	Brand	10/13/19	Non-covered
HALOBETASOL PROPIONATE (halobetasol propionate foam 0.05%)	Brand	11/13/19	Non-covered
HEAD COVER/BOUFAANT CAP/CIRCULAR/21"/SAFE-SENSE (*misc. devices**)	Brand	11/3/19	Non-covered
HEPAGAM B (hepatitis b immune globulin (human) inj soln)	Brand	11/3/19	Non-covered
ivermectin cream 1%	Generic	10/20/19	Non-covered, generic for SOOLANTRA
KANJINTI (trastuzumab-anns for iv soln 150 mg)	Brand	11/3/19	Non-covered
methylprednisolone sod succ for inj 500 mg (base equiv)	Generic	10/27/19	Non-covered, generic for SOLU-MEDROL
MICROAIR VIBRATING MESH NEBULIZER (*nebulizers***)	Brand	10/20/19	Non-covered
NEEDLELESS PRN CONNECTORS (*parenteral therapy supplies - misc**)	Brand	10/13/19	Non-covered
NEEDLELESS PRN PRE-PIERCED PORT CONVERTER (*parenteral therapy supplies - misc**)	Brand	10/13/19	Non-covered
NEONATAL COMPLETE (*prenatal vit w/ fe fumarate-fa tab 27-1 mg***)	Brand	9/29/19	Non-covered
NOURIANZ (istradefylline tab 20 mg)	Brand	4/1/20	Non-covered
NOURIANZ (istradefylline tab 40 mg)	Brand	4/1/20	Non-covered
NPLATE (romiplostim for inj 125 mcg)	Brand	11/24/19	Non-covered
OGIVRI (trastuzumab-dkst for iv soln 150 mg)	Brand	11/3/19	Non-covered
OGIVRI (trastuzumab-dkst for iv soln 420 mg)	Brand	11/3/19	Non-covered
OLUMIANT (baricitinib tab 1 mg)	Brand	11/3/19	Non-covered
OZOBAX (baclofen oral soln 5 mg/5ml)	Brand	4/1/20	Non-covered
POTASSIUM CHLORIDE (potassium chloride inj 10 meq/50ml)	Brand	11/24/19	Non-covered
POTASSIUM CHLORIDE (potassium chloride inj 20 meq/50ml)	Brand	12/1/19	Non-covered

continued

TRADE NAME (generic name) or generic name	Brand/Generic Product	Effective Date	Description of Change
PRALUENT (alirocumab subcutaneous solution auto-injector 75 mg/ml)	Brand	10/20/19	Non-covered
PREGENNA (*prenat vit w/fe bisglyc chelate-fa tab 20-1mg (1.7mg dfe)**)	Brand	9/22/19	Non-covered
PRIALT (ziconotide acetate intrathecal inj 100 mcg/ml)	Brand	11/10/19	Non-covered
PRIALT (ziconotide acetate intrathecal inj 500 mcg/20ml (25 mcg/ml))	Brand	9/22/19	Non-covered
PRIALT (ziconotide acetate intrathecal inj 500 mcg/5ml)	Brand	11/10/19	Non-covered
PROAIR DIGIHALER (albuterol sulfate aer pow ba 108 mcg/act with sensor)	Brand	4/1/20	Non-covered
PURAPLY XT ANTIMICROBIAL/5CM X 5CM (*collagen-antimicrobial sheet***)	Brand	11/24/19	Non-covered
PURAPLY XT ANTIMICROBIAL/6CM X 9CM (*collagen-antimicrobial sheet***)	Brand	11/24/19	Non-covered
RASUVO (methotrexate soln pf auto-injector 15 mg/0.3ml)	Brand	9/19/19	Non-covered
RASUVO (methotrexate soln pf auto-injector 17.5 mg/0.35ml)	Brand	9/19/19	Non-covered
RASUVO (methotrexate soln pf auto-injector 20 mg/0.4ml)	Brand	9/19/19	Non-covered
RELAFEN DS (nabumetone tab 1000 mg)	Brand	10/6/19	Non-covered
RELION PREMIER BLOOD GLUCOSE TEST STRIPS (glucose blood test strip)	Brand	9/22/19	Non-covered
RESTORE SILVER DRESSING 2"X2" (*wound dressings - pads***)	Brand	9/29/19	Non-covered
RESTORE SILVER DRESSING 4"X4" NON-ADHESIVE (*wound dressings - pads***)	Brand	9/29/19	Non-covered
RESTORE SILVER DRESSING 4"X4.75" (*wound dressings - pads***)	Brand	9/29/19	Non-covered
RESTORE SILVER DRESSING 4"X5" CONTACT LAYER (*wound dressings - pads***)	Brand	9/29/19	Non-covered
RESTORE SILVER DRESSING 6"X8" CONTACT LAYER (*wound dressings - pads***)	Brand	9/29/19	Non-covered
RESTORE SILVER DRESSING 6"X8" NON-ADHESIVE (*wound dressings - pads***)	Brand	9/29/19	Non-covered
RETROVIR IV INFUSION (zidovudine iv soln 10 mg/ml)	Brand	9/19/19	Non-covered
RHOPHYLAC (rho d immune globulin sol pref syr 1500 unt/2ml (300mcg/2ml))	Brand	10/27/19	Non-covered
SELENIOUS ACID (selenious acid inj 60 mcg/ml (selenium equiv))	Brand	10/13/19	Non-covered
SILVASORB (*silver - gel***)	Brand	9/29/19	Non-covered
SILVASORB (*wound dressings - gel***)	Brand	9/29/19	Non-covered
sodium bicarbonate iv soln 4.2%	Generic	10/27/19	Non-covered
SOLU-MEDROL (methylprednisolone sod succ for inj 2000 mg (base equiv))	Brand	11/24/19	Non-covered
sucalfate susp 1 gm/10ml	Generic	12/8/19	Non-covered, generic for CARAFATE susp
TEGADERM AG MESH DRESSING WITH SILVER 2"X2" (*wound dressings - pads***)	Brand	9/29/19	Non-covered
TEGADERM AG MESH DRESSING WITH SILVER 4"X5" (*wound dressings - pads***)	Brand	9/29/19	Non-covered
TEGADERM AG MESH DRESSING WITH SILVER 4"X8" (*wound dressings - pads***)	Brand	9/29/19	Non-covered
TEGADERM AG MESH DRESSING WITH SILVER 8"X8" (*wound dressings - pads***)	Brand	9/29/19	Non-covered
TNKASE (tenecteplase for iv soln kit 50 mg)	Brand	9/22/19	Non-covered
TOSYMRA (sumatriptan nasal spray 10 mg/act)	Brand	4/1/20	Non-covered
triamcinolone acetonide oint 0.05%	Generic	12/1/19	Non-covered
TRILURON (sodium hyaluronate intra-articular soln pref syr 20 mg/2ml)	Brand	12/8/19	Non-covered
TRUXIMA (rituximab-abbs iv soln 100 mg/10ml (10 mg/ml))	Brand	11/17/19	Non-covered
TRUXIMA (rituximab-abbs iv soln 500 mg/50ml (10 mg/ml))	Brand	11/17/19	Non-covered
VANCOMYCIN HYDROCHLORIDE (vancomycin hcl iv soln 500 mg/100ml (base equivalent))	Brand	10/20/19	Non-covered
VITATHELY/GINGER (*prenatal vit w/ fe fumarate-fa tab 27-1 mg***)	Brand	11/24/19	Non-covered

continued

TRADE NAME (generic name) or generic name	Brand/Generic Product	Effective Date	Description of Change
WAKIX (pitolisant hcl tab 17.8 mg (base equivalent))	Brand	4/1/20	Non-covered
WAKIX (pitolisant hcl tab 4.45 mg (base equivalent))	Brand	4/1/20	Non-covered
WESTAB MAX (folic acid-pyridoxine-cyanocobalamin tab 2.5-25-2 mg)	Brand	1/1/20	Non-covered
XEMBIFY (immune globulin (human)-klhw subcutaneous inj 1 gm/5ml)	Brand	4/1/20	Non-covered
XEMBIFY (immune globulin (human)-klhw subcutaneous inj 10 gm/50ml)	Brand	4/1/20	Non-covered
XEMBIFY (immune globulin (human)-klhw subcutaneous inj 2 gm/10ml)	Brand	4/1/20	Non-covered
XEMBIFY (immune globulin (human)-klhw subcutaneous inj 4 gm/20ml)	Brand	4/1/20	Non-covered
XYLOCAINE (lidocaine hcl local inj 1%)	Brand	11/10/19	Non-covered
XYLOCAINE (lidocaine hcl local inj 2%)	Brand	11/10/19	Non-covered
XYLOCAINE/EPINEPHRINE (lidocaine inj 0.5% w/ epinephrine-1:200000)	Brand	11/10/19	Non-covered
XYLOCAINE/EPINEPHRINE (lidocaine inj 1% w/ epinephrine-1:100000)	Brand	11/3/19	Non-covered
XYLOCAINE/EPINEPHRINE (lidocaine inj 2% w/ epinephrine-1:100000)	Brand	11/10/19	Non-covered
XYLOCAINE-MPF (lidocaine hcl local preservative free (pf) inj 0.5%)	Brand	11/10/19	Non-covered
XYLOCAINE-MPF (lidocaine hcl local preservative free (pf) inj 1%)	Brand	11/10/19	Non-covered
XYLOCAINE-MPF (lidocaine hcl local preservative free (pf) inj 1.5%)	Brand	11/10/19	Non-covered
XYLOCAINE-MPF (lidocaine hcl local preservative free (pf) inj 2%)	Brand	11/10/19	Non-covered
XYLOCAINE-MPF/EPINEPHRINE (lidocaine inj 1% w/epinephrine-1:200000)	Brand	11/10/19	Non-covered
XYLOCAINE-MPF/EPINEPHRINE (lidocaine inj 1.5% w/epinephrine-1:200000)	Brand	11/10/19	Non-covered
XYLOCAINE-MPF/EPINEPHRINE (lidocaine inj 2% w/epinephrine-1:200000)	Brand	11/10/19	Non-covered
ZALVIT (*prenatal vit w/ fe gluconate-fa tab 13-1 mg***)	Brand	10/6/19	Non-covered
ZELNORM (tegaserod maleate tab 6 mg (base equivalent))	Brand	4/1/20	Non-covered