

# UPMC *for Life*

UPMC Health Plan Medicare Program

## Addendum

### Changes to 2016 UPMC *for Life* Formulary (List of Covered Drugs)

UPMC *for Life* may add or remove drugs from our formulary during the year. If we remove drugs from our formulary, add prior authorization, quantity limits and/or step therapy restrictions on a drug and/or move a drug to a higher cost-sharing tier, we will notify you of the change at least 60 days before the date that the change becomes effective.\* However, if the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our formulary. The table below outlines changes to our formulary that will impact you.

You may request a coverage determination or exception by contacting UPMC *for Life* Member Services at **1-877-539-3080** or, for TTY users, **1-800-361-2629**, from October 1 through February 14, from 8 a.m. to 8 p.m., seven days a week. From February 15 through September 30 from 8 a.m. to 8 p.m., Monday through Friday, and 8 a.m. to 3 p.m. on Saturday. \*\* Generally, UPMC *for Life* will only approve your request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug, or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

Effective Date of Change	Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug***	Alternative Drug Tier
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Actemra solution 80 mg/4 mL(20 mg/mL)	Additions	Drug added to Tier 4 Quantity Limits with PA	N/A	N/A
3/1/2016	Actemra solution 400 mg/20 mL(20 mg/mL)	Additions	Drug added to Tier 4 Quantity Limits with PA	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Afrezza cartridge, w/inhalation device 8 unit (60)/12 unit (30)	Additions	Drug added to Tier 3 with PA	N/A	N/A
3/1/2016	Alecensa capsule 150mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	amino acids 15 % parenteral solution 15%	Additions	Drug added to Tier 1 and Part B vs Part D Determination	N/A	N/A
3/1/2016	aripiprazole tablet,disintegrating 10mg	Additions	Drug added to Tier 2 with Quantity Limits and PA	N/A	N/A
3/1/2016	aripiprazole tablet,disintegrating 15mg	Additions	Drug added to Tier 2 with Quantity Limits and PA	N/A	N/A
3/1/2016	aspirin-dipyridamole capsule, ER multiphase 12 hr 25-200mg	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Avastin solution 25mg/mL (16 mL)	Additions	Drug added to Tier 4	N/A	N/A
3/1/2016	azithromycin tablet 250mg (6 pack)	Additions	Drug added to Tier 1	N/A	N/A

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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Bekyree (28) tablet 0.15-0.02 mgx21/0.01 mg x 5	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Betimol drops 0.25%	Additions	Drug added to Tier 3	N/A	N/A
3/1/2016	bexarotene capsule 75mg	Additions	Drug added to Tier 4 with PA	N/A	N/A
3/1/2016	Blisovi 24 Fe tablet 1 mg-20 mcg(24)/75 mg (4)	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Blisovi Fe 1/20 (28) tablet 1 mg-20 mcg(21)/75 mg (7)	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	BRILINTA tablet 60mg	Additions	Drug added to Tier 2 with Quantity Limits	N/A	N/A
3/1/2016	Copaxone syringe 40mg/mL	Additions	Drug added to Tier 4 with Quantity Limits	N/A	N/A
3/1/2016	Cotellic tablet 20mg	Additions	Drug added to Tier 4 Quantity Limits with PA	N/A	N/A
3/1/2016	Crestor tablet 40mg	Additions	Drug added to Tier 3 with PA	N/A	N/A

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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Crestor tablet 5mg	Additions	Drug added to Tier 3 with PA	N/A	N/A
3/1/2016	Crestor tablet 10mg	Additions	Drug added to Tier 3 with PA	N/A	N/A
3/1/2016	Crestor tablet 20mg	Additions	Drug added to Tier 3 with PA	N/A	N/A
3/1/2016	Cyramza solution 10mg/mL	Additions	Drug added to Tier 4 and Part B vs Part D Determination	N/A	N/A
3/1/2016	Cyramza solution 10mg/mL (50 mL)	Additions	Drug added to Tier 4 and Part B vs Part D Determination	N/A	N/A
3/1/2016	Daklinza tablet 30mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Daklinza tablet 60mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Darzalex solution 20mg/mL	Additions	Drug added to Tier 4	N/A	N/A
3/1/2016	drospirenone-ethinyl estradiol tablet 3-0.02mg	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	dutasteride capsule 0.5mg	Additions	Drug added to Tier 1	N/A	N/A

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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	dutasteride-tamsulosin capsule, ER multiphase 24 hr 0.5-0.4mg	Additions	Drug added to Tier 2	N/A	N/A
3/1/2016	Empliciti recon soln 300mg	Additions	Drug added to Tier 4 with Part B vs Part D Determination	N/A	N/A
3/1/2016	Entresto tablet 24-26mg	Additions	Drug added to Tier 2 with Quantity Limits and PA	N/A	N/A
3/1/2016	Entresto tablet 49-51mg	Additions	Drug added to Tier 2 with Quantity Limits and PA	N/A	N/A
3/1/2016	Entresto tablet 97-103mg	Additions	Drug added to Tier 2 with Quantity Limits and PA	N/A	N/A
3/1/2016	erythromycin capsule, delayed release(DR/EC) 250mg	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	fenofibric acid tablet 105mg	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Ferriprox solution 100mg/mL	Additions	Drug added to Tier 4 with PA	N/A	N/A
3/1/2016	GaviLyte-H and Bisacodyl kit 5-210mg-gram	Additions	Drug added to Tier 3	N/A	N/A

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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Genvoya tablet 150-150-200-10mg	Additions	Drug added to Tier 4	N/A	N/A
3/1/2016	Gleostine capsule 5mg	Additions	Drug added to Tier 3 with PA	N/A	N/A
3/1/2016	Iressa tablet 250mg	Additions	Drug added to Tier 4 Quantity Limits with PA	N/A	N/A
3/1/2016	Jadenu tablet 180mg	Additions	Drug added to Tier 4 with PA	N/A	N/A
3/1/2016	Jadenu tablet 360mg	Additions	Drug added to Tier 4 with PA	N/A	N/A
3/1/2016	Jadenu tablet 90mg	Additions	Drug added to Tier 4 with PA	N/A	N/A
3/1/2016	Juleber tablet 0.15-0.03mg	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Keytruda solution 100 mg/ 4 mL(25 mg/mL)	Additions	Drug added to Tier 4	N/A	N/A

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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Kimidess (28) tablet 0.15-0.02 mgx21/0.01 mg x 5	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Klor-Con Sprinkle capsule, extended release 8mEq	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Klor-Con Sprinkle capsule, extended release 10mEq	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Layolis Fe tablet, chewable 0.8mg-25mcg(24)and 75 mg (4)	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	levofloxacin in D5W piggyback 750mg/150 mL	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	levonorg-eth estrad triphasic tablet 50-30 (6)/75-40(5)/125-30(10)	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	linezolid suspension for reconstitution 100mg/5 mL	Additions	Drug added to Tier 4	N/A	N/A
3/1/2016	Lonsurf tablet 15-6.14mg	Additions	Drug added to Tier 4	N/A	N/A
3/1/2016	Lonsurf tablet 20-8.19mg	Additions	Drug added to Tier 4	N/A	N/A

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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	memantine tablet 10mg	Additions	Drug added to Tier 1 with PA	N/A	N/A
3/1/2016	memantine tablet 5mg	Additions	Drug added to Tier 1 with PA	N/A	N/A
3/1/2016	memantine tablets,dose pack 5-10mg	Additions	Drug added to Tier 2 with Quantity Limits and PA	N/A	N/A
3/1/2016	memantine solution 2mg/mL	Additions	Drug added to Tier 1 with PA	N/A	N/A
3/1/2016	methyltestosterone capsule 10mg	Additions	Drug added to Tier 3 with PA	N/A	N/A
3/1/2016	molindone tablet 10mg	Additions	Drug added to Tier 3 with PA	N/A	N/A
3/1/2016	molindone tablet 25mg	Additions	Drug added to Tier 3 with PA	N/A	N/A
3/1/2016	molindone tablet 5mg	Additions	Drug added to Tier 3 with PA	N/A	N/A
3/1/2016	moxifloxacin-sod.ace,sul-water piggyback 400mg/250 mL	Additions	Drug added to Tier 3	N/A	N/A
3/1/2016	Myorisan capsule 30mg	Additions	Drug added to Tier 3	N/A	N/A



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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	nevirapine tablet extended release 24 hr 100mg	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Ninlaro capsule 2.3mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Ninlaro capsule 3mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Ninlaro capsule 4mg	Additions	Drug added to Tier 4 Quantity Limits with PA	N/A	N/A
3/1/2016	nitrofurantoin monohyd/ m-cryst capsule 100mg (75/25)	Additions	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	Nucala recon soln 100mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Odomzo capsule 200mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Orbactiv recon soln 400mg	Additions	Drug added to Tier 4	N/A	N/A
3/1/2016	Orkambi tablet 200-125mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Otrexup (PF) auto-injector 7.5mg/0.4 mL	Additions	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A

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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	paliperidone tablet extended release 24hr 3mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	paliperidone tablet extended release 24hr 6mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	paliperidone tablet extended release 24hr 9mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	paliperidone tablet extended release 24hr 1.5mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	peg-electrolyte soln recon soln 420gram	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	phenoxybenzamine capsule 10mg	Additions	Drug added to Tier 4	N/A	N/A
3/1/2016	pimozide tablet 2mg	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	pimozide tablet 1mg	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Plegridy syringe 125mcg/0.5 mL	Additions	Drug added to Tier 4 with Quantity Limits	N/A	N/A
3/1/2016	Plegridy pen injector 63 mcg/0.5 mL-94 mcg/0.5 mL	Additions	Drug added to Tier 4 with Quantity Limits	N/A	N/A

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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Pradaxa capsule 110mg	Additions	Drug added to Tier 3 with Quantity Limits	N/A	N/A
3/1/2016	Praluent Pen pen injector 150mg/mL	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Praluent Pen pen injector 75mg/mL	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Praluent Syringe syringe 150mg/mL	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Praluent Syringe syringe 75mg/mL	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Repatha SureClick pen injector 140mg/mL	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Repatha Syringe syringe 140mg/mL	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Rexulti tablet 0.25mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Rexulti tablet 0.5mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Rexulti tablet 1mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A

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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Rexulti tablet 2mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Rexulti tablet 3mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Rexulti tablet 4mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	risedronate tablet, delayed release (DR/EC) 35mg	Additions	Drug added to Tier 1 with Quantity Limits and Step Therapy	N/A	N/A
3/1/2016	risedronate tablet 35mg	Additions	Drug added to Tier 1 with Quantity Limits and Step Therapy	N/A	N/A
3/1/2016	risedronate tablet 35mg (4 pack)	Additions	Drug added to Tier 1 with Quantity Limits and Step Therapy	N/A	N/A
3/1/2016	risedronate tablet 35mg (12 pack)	Additions	Drug added to Tier 1 with Quantity Limits and Step Therapy	N/A	N/A
3/1/2016	rivastigmine patch 24 hour 13.3mg/24 hour	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	rivastigmine patch 24 hour 4.6mg/24 hr	Additions	Drug added to Tier 1	N/A	N/A

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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	rivastigmine patch 24 hour 9.5mg/24 hr	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Setlakin tablets,dose pack,3 month 0.15-30mg-mcg	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Spiriva Respimat mist 1.25mcg/actuation	Additions	Drug added to Tier 2	N/A	N/A
3/1/2016	Stiolto Respimat mist 2.5- 2.5mcg/actuation	Additions	Drug added to Tier 2	N/A	N/A
3/1/2016	sumatriptan succinate pen injector 6mg/0.5 mL (auto-Injector)	Additions	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	sumatriptan succinate cartridge 6mg/0.5 mL	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	sumatriptan succinate cartridge 4mg/0.5 mL	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Synjardy tablet 5-500mg	Additions	Drug added to Tier 2 with Quantity Limits	N/A	N/A
3/1/2016	Synjardy tablet 12.5-500mg	Additions	Drug added to Tier 2 with Quantity Limits	N/A	N/A

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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Synjardy tablet 5-1,000mg	Additions	Drug added to Tier 2 with Quantity Limits	N/A	N/A
3/1/2016	Synjardy tablet 12.5-1,000mg	Additions	Drug added to Tier 2 with Quantity Limits	N/A	N/A
3/1/2016	Synthroid tablet 25mcg	Additions	Drug added to Tier 3	N/A	N/A
3/1/2016	Synthroid tablet 75mcg	Additions	Drug added to Tier 3	N/A	N/A
3/1/2016	Synthroid tablet 112mcg	Additions	Drug added to Tier 3	N/A	N/A
3/1/2016	Synthroid tablet 125mcg	Additions	Drug added to Tier 3	N/A	N/A
3/1/2016	Synthroid tablet 150mcg	Additions	Drug added to Tier 3	N/A	N/A
3/1/2016	Synthroid tablet 175mcg	Additions	Drug added to Tier 3	N/A	N/A
3/1/2016	Synthroid tablet 300mcg	Additions	Drug added to Tier 3	N/A	N/A
3/1/2016	Synthroid tablet 50mcg	Additions	Drug added to Tier 3	N/A	N/A
3/1/2016	Synthroid tablet 100mcg	Additions	Drug added to Tier 3	N/A	N/A
3/1/2016	Synthroid tablet 200mcg	Additions	Drug added to Tier 3	N/A	N/A
3/1/2016	Synthroid tablet 137mcg	Additions	Drug added to Tier 3	N/A	N/A

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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Synthroid tablet 88mcg	Additions	Drug added to Tier 3	N/A	N/A
3/1/2016	Tagrisso tablet 40mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Tagrisso tablet 80mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Technivie tablet 12.5-75-50mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	tetrabenazine tablet 25mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	tetrabenazine tablet 12.5mg	Additions	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	thiotepa recon soln 15mg	Additions	Drug added to Tier 4	N/A	N/A
3/1/2016	Toujeo SoloStar insulin pen 300 unit/mL(1.5 mL)	Additions	Drug added to Tier 2 with Quantity Limits	N/A	N/A
3/1/2016	trimipramine capsule 100mg	Additions	Drug added to Tier 1 with PA	N/A	N/A
3/1/2016	trimipramine capsule 25mg	Additions	Drug added to Tier 1 with PA	N/A	N/A

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3/1/2016	trimipramine capsule 50mg	Additions	Drug added to Tier 1 with PA	N/A	N/A
3/1/2016	verapamil tablet extended release 120mg	Additions	Drug added to Tier 1	N/A	N/A
3/1/2016	Zarxio syringe 300mcg/0.5 mL	Additions	Drug added to Tier 4 with PA	N/A	N/A
3/1/2016	Zarxio syringe 480mcg/0.8 mL	Additions	Drug added to Tier 4 with PA	N/A	N/A
3/1/2016	Zubsolv tablet 11.4-2.9mg	Additions	Drug added to Tier 2 with Quantity Limits and PA	N/A	N/A
3/1/2016	Zubsolv tablet 2.9-0.71mg	Additions	Drug added to Tier 2 with Quantity Limits and PA	N/A	N/A
3/1/2016	Abilify Maintena suspension,extended rel syring 300mg	UPDATE - quantity limit changed from 1 per 28 days to 2 per 28	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Amethia tablets,dose pack,3 month 0.15 mg-30 mcg(84)/10 mcg (7)	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Amethyst tablet 90-20mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Aranelle (28) tablet 0.5/1/0.5-35mg-mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A



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<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Ashlyna tablets,dose pack,3 month 0.15 mg-30 mcg(84)/10 mcg (7)	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Briellyn tablet 0.4-35mg-mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	bupirone tablet 7.5mg	UPDATE - Moved from tier 2 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	doxycycline monohydrate tablet 50mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	drospirenone-ethinyl estradiol tablet 3-0.03mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Endocet tablet 10-325mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	Endocet tablet 7.5-325mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	estradiol patch weekly 0.025mg/24 hr	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A

Effective Date of Change	Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug***	Alternative Drug Tier
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	estradiol patch weekly 0.05mg/24 hr	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	estradiol patch weekly 0.1mg/24 hr	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	Gianvi (28) tablet 3-0.02mg	UPDATE - Moved from tier 2 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Gildagia tablet 0.4-35mg-mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Humira Pen Crohn's-UC-HS Start pen injector kit 40mg/0.8 mL	UPDATE - quantity limit changed from 9.6 per 365 days to 19.2 per 365 days	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
3/1/2016	Introvale tablets,dose pack,3 month 0.15-30mg-mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Jinteli tablet 1-5mg-mcg	UPDATE - Moved from tier 2 to tier 1	Drug added to Tier 1	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Larin 1/20 (21) tablet 1-20mg-mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Levonest (28) tablet 50-30 (6)/75-40(5)/125-30(10)	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Lorcet (hydrocodone) tablet 5-325mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	Lorcet HD tablet 10-325mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	Lorcet Plus tablet 7.5-325mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	Lortab 10-325 tablet 10-325mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	Lortab 5-325 tablet 5-325mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	Lortab 7.5-325 tablet 7.5-325mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Loryna (28) tablet 3-0.02mg	UPDATE - Moved from tier 2 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Lyza tablet 0.35mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Mimvey tablet 1-0.5mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Mimvey Lo tablet 0.5-0.1mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Necon 10/11 (28) tablet 0.5-35/1-35mg-mcg/mg-mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Nortrel 1/35 (21) tablet 1-35mg-mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Nortrel 7/7/7 (28) tablet 0.5/0.75/1 mg-35 mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Ogestrel (28) tablet 0.5-50mg-mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A

Effective Date of Change	Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug***	Alternative Drug Tier
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	oxycodone-acetaminophen tablet 10-325mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	oxycodone-acetaminophen tablet 2.5-325mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	oxycodone-acetaminophen tablet 7.5-325mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1 with Quantity Limits	N/A	N/A
3/1/2016	Pimtrex (28) tablet 0.15-0.02 mgx21/0.01 mg x 5	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Pirmella tablet 1-35mg-mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	potassium citrate tablet extended release 5mEq (540 mg)	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	potassium citrate tablet extended release 10mEq (1,080 mg)	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	potassium citrate tablet extended release 15mEq	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	propranolol capsule,extended release 24 hr 60mg	UPDATE - Moved from tier 2 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	propranolol capsule,extended release 24 hr 80mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	propranolol capsule,extended release 24 hr 120mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	propranolol capsule,extended release 24 hr 160mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Trivora (28) tablet 50-30 (6)/75-40(5)/125-30(10)	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Vestura (28) tablet 3-0.02mg	UPDATE - Moved from tier 2 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Vyfemla (28) tablet 0.4-35mg-mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	ZenChent (28) tablet 0.4-35mg-mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A

Effective Date of Change	Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug***	Alternative Drug Tier
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
3/1/2016	Zenchant Fe tablet, chewable 0.4mg-35mcg(21) and 75 mg (7)	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
3/1/2016	Zovia 1/50E (28) tablet 1-50mg-mcg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
4/1/2016	alendronate solution 70mg/75 mL	Addition	Drug added to Tier 3	N/A	N/A
4/1/2016	Blisovi Fe 1.5/30 (28) tablet 1.5 mg-30 mcg(21)/75 mg (7)	Addition	Drug added to Tier 1	N/A	N/A
4/1/2016	Duopa intestinal pump suspension 4.63-20mg/mL	Addition	Drug added to Tier 4 with PA	N/A	N/A
4/1/2016	Emend recon soln 150mg	Addition	Drug added to Tier 3	N/A	N/A
4/1/2016	Empliciti recon soln 400mg	Addition	Drug added to Tier 4 and Part B vs Part D Determination	N/A	N/A
4/1/2016	fenofibric acid tablet 35mg	Addition	Drug added to Tier 1	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
4/1/2016	Humira Pediatric Crohn's Start syringe kit 40mg/0.8 mL (6 pack)	Addition	Drug added to Tier 4 with PA	N/A	N/A
4/1/2016	Humira Pediatric Crohn's Start syringe kit 40mg/0.8 mL	Addition	Drug added to Tier 4 with PA	N/A	N/A
4/1/2016	Humira Pen pen injector kit 40mg/0.8 mL	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
4/1/2016	Invega Trinza syringe 273mg/0.875 mL	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
4/1/2016	Invega Trinza syringe 410mg/1.315 mL	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
4/1/2016	Invega Trinza syringe 546mg/1.75 mL	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
4/1/2016	Invega Trinza syringe 819mg/2.625 mL	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
4/1/2016	Kaitlib Fe tablet, chewable 0.8mg-25mcg(24)and 75 mg (4)	Addition	Drug added to Tier 1	N/A	N/A



<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
4/1/2016	Keveyis tablet 50mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
4/1/2016	lincomycin solution 300mg/mL	Addition	Drug added to Tier 3	N/A	N/A
4/1/2016	Nipent recon soln 10mg	Addition	Drug added to Tier 4	N/A	N/A
4/1/2016	norgestimate-ethinyl estradiol tablet 0.18/0.215/0.25mg-25 mcg	Addition	Drug added to Tier 1	N/A	N/A
4/1/2016	phenytoin sodium extended capsule 200mg	Addition	Drug added to Tier 1	N/A	N/A
4/1/2016	phenytoin sodium extended capsule 300mg	Addition	Drug added to Tier 1	N/A	N/A
4/1/2016	Strensiq solution 40mg/mL	Addition	Drug added to Tier 4 with PA	N/A	N/A
4/1/2016	Strensiq solution 80mg/0.8 mL	Addition	Drug added to Tier 4 with PA	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
4/1/2016	Tri-Lo-Estarylla tablet 0.18/0.215/0.25mg-25 mcg	Addition	Drug added to Tier 1	N/A	N/A
4/1/2016	Tri-Lo-Sprintec tablet 0.18/0.215/0.25mg-25 mcg	Addition	Drug added to Tier 1	N/A	N/A
4/1/2016	Veltassa powder in packet 8.4gram	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
4/1/2016	Veltassa powder in packet 16.8gram	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
4/1/2016	Veltassa powder in packet 25.2gram	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
4/1/2016	Viberzi tablet 75mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
4/1/2016	Viberzi tablet 100mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
4/1/2016	Vienva tablet 0.1-20mg-mcg	Addition	Drug added to Tier 1	N/A	N/A
4/1/2016	Viibryd tablets,dose pack 10 mg (7)-20 mg (23)	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
4/1/2016	doxycycline hyclate recon soln 100mg	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
4/1/2016	Enbrel recon soln 25mg (1 mL)	UPDATE - quantity limit changed from 8/28 to 16/28	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
4/1/2016	EpiPen 2-Pak auto-injector 0.3mg/0.3 mL	UPDATE - Moved from tier 2 to tier 1	Drug added to Tier 1	N/A	N/A
4/1/2016	EpiPen Jr 2-Pak auto-injector 0.15mg/0.3 mL	UPDATE - Moved from tier 2 to tier 1	Drug added to Tier 1	N/A	N/A
4/1/2016	GaviLyte-H and Bisacodyl kit 5-210mg-gram	UPDATE - Moved from tier 3 to tier 1	Drug added to Tier 1	N/A	N/A
4/1/2016	Lupron Depot (4 Month) syringe kit 30mg	UPDATE - quantity limit changed from 1/112 to 1/84	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
4/1/2016	risedronate tablet 35mg (12 pack)	UPDATE - quantity limit changed from 4/28 to 12/84	Drug added to Tier 1 with Quantity Limits and Step Therapy	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
4/1/2016	Zyprexa Relprevv suspension for reconstitution 210mg	UPDATE - quantity limit changed from 2/28 to 3/28	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
5/1/2016	fluconazole in dextrose(iso-o) piggyback 400mg/200 mL	Addition	Drug added to Tier 1	N/A	N/A
5/1/2016	Fyavolv tablet 1-5mg-mcg	Addition	Drug added to Tier 1	N/A	N/A
5/1/2016	Nutropin AQ Nuspin pen injector 20 mg/2 mL (10 mg/mL)	Addition	Drug added to Tier 4 with PA	N/A	N/A
5/1/2016	Nutropin AQ Nuspin pen injector 10 mg/2 mL (5 mg/mL)	Addition	Drug added to Tier 4 with PA	N/A	N/A
5/1/2016	Plegridy pen injector 125mcg/0.5 mL	Addition	Drug added to Tier 4 with Quantity Limits	N/A	N/A
5/1/2016	Plegridy pen injector 63 mcg/0.5 mL-94 mcg/0.5 mL	Addition	Drug added to Tier 4 with Quantity Limits	N/A	N/A
5/1/2016	Vraylar capsule 1.5mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
5/1/2016	Vraylar capsule 3mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
5/1/2016	Vraylar capsule 4.5mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
5/1/2016	Vraylar capsule 6mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
5/1/2016	Abilify Maintena suspension,extended rel recon 300mg	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Abilify Maintena suspension,extended rel syring 300mg	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Abilify Maintena suspension,extended rel syring 400mg	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Crestor tablet 40mg	UPDATE	Drug added as perquisite for Vytorin with PA	N/A	N/A
5/1/2016	Crestor tablet 5mg	UPDATE	Drug added as perquisite for Vytorin with PA	N/A	N/A
5/1/2016	Crestor tablet 10mg	UPDATE	Drug added as perquisite for Vytorin with PA	N/A	N/A

Effective Date of Change	Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug***	Alternative Drug Tier
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
5/1/2016	Crestor tablet 20mg	UPDATE	Drug added as prerequisite for Vytorin with PA	N/A	N/A
5/1/2016	Duramorph (PF) solution 0.5mg/mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Duramorph (PF) solution 1mg/mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Invega Sustenna syringe 78mg/0.5 mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Invega Sustenna syringe 234mg/1.5 mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Invega Sustenna syringe 156mg/mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Invega Sustenna syringe 117mg/0.75 mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Invega Sustenna syringe 39mg/0.25 mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Invega Trinza syringe 273mg/0.875 mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
5/1/2016	Invega Trinza syringe 410mg/1.315 mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Invega Trinza syringe 546mg/1.75 mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Invega Trinza syringe 819mg/2.625 mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Risperdal Consta syringe 12.5mg/2 mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Risperdal Consta syringe 37.5mg/2 mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Risperdal Consta syringe 50mg/2 mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	Risperdal Consta syringe 25mg/2 mL	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
5/1/2016	testosterone gel in packet 1 % (50 mg/5 gram)	UPDATE	Drug added to Tier 3 with PA	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
5/1/2016	Zyprexa Relprevv suspension for reconstitution 210mg	UPDATE	Prior authorization requirement removed with Quantity Limits	N/A	N/A
6/1/2016	Namenda 10 mg tablet	Removal	Generic will be available in Tier 1	memantine hcl 10 mg tablet	N/A
6/1/2016	Namenda 5 mg tablet	Removal	Generic will be available in Tier 1	memantine hcl 5 mg tablet	N/A
6/1/2016	Namenda 5-10 mg Titration pack	Removal	Generic will be available in Tier 2	memantine 5-10 mg titration pack	N/A
6/1/2016	Namenda 10 mg/5 ml oral solution	Removal	Generic will be available in Tier 1	memantine hydrochloride 2 mg/ml oral solution	N/A
6/1/2016	Aggrenox 25 mg -200 mg capsule	Removal	Generic will be available in Tier 1	aspirin-dipyridam ER 25-200 mg	N/A
6/1/2016	Targretin 75 mg capsule	Removal	Generic will be available in Tier 4	bexarotene 75 mg capsule	N/A
6/1/2016	Xenazine 12.5 mg tablet	Removal	Generic will be available in Tier 4	tetrabenazine 12.5 mg tablet	N/A
6/1/2016	Xenazine 25 mg tablet	Removal	Generic will be available in Tier 4	tetrabenazine 25 mg tablet	N/A



<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
6/1/2016	Viramune XR 100 mg tablet	Removal	Generic will be available in Tier 1	nevirapine 100 mg extended release tablet	N/A
6/1/2016	Exelon 13.3 mg/hr patch transdermal	Removal	Generic will be available in Tier 1	rivastigmine 0.554 mg/hr patch, transdermal	N/A
6/1/2016	Exelon 4.6 mg/hr patch transdermal	Removal	Generic will be available in Tier 1	rivastigmine 0.192 mg/hr patch, transdermal	N/A
6/1/2016	Exelon 9.5 mg/hr patch transdermal	Removal	Generic will be available in Tier 1	rivastigmine 0.396 mg/hr patch, transdermal	N/A
6/1/2016	Android 10 mg capsule	Removal	Generic will be available in Tier 3	methyltestosterone 10 mg capsule	N/A
6/1/2016	Orap 2 mg tablet	Removal	Generic will be available in Tier 1	pimozide 2 mg tablet	N/A
6/1/2016	Orap 1 mg tablet	Removal	Generic will be available in Tier 1	pimozide 1 mg tablet	N/A
6/1/2016	Zyvox 100 mg/5 ml oral suspension	Removal	Generic will be available in Tier 4	linezolid 20 mg/ml oral suspension	N/A
6/1/2016	Avodart 0.5 mg capsule	Removal	Generic will be available in Tier 1	dutasteride 0.5 mg capsule	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
6/1/2016	Jalyn 0.5 mg/0.4 mg capsule	Removal	Generic will be available in Tier 2	dutasteride 0.5 mg/tamsulosin hydrochloride 0.4 mg capsule	N/A
6/1/2016	Invega 3 mg extended release tablet	Removal	Generic will be available in Tier 4	paliperidone 3 mg extended release tablet	N/A
6/1/2016	Invega 6 mg extended release tablet	Removal	Generic will be available in Tier 4	paliperidone 6 mg extended release tablet	N/A
6/1/2016	Invega 9 mg extended release tablet	Removal	Generic will be available in Tier 4	paliperidone 9 mg extended release tablet	N/A
6/1/2016	Invega 1.5 mg extended release tablet	Removal	Generic will be available in Tier 4	paliperidone 1.5 mg extended release tablet	N/A
6/1/2016	Albuterol sulfate solution for nebulization 5mg/mL	Update	Drug added to Tier 1 with Part B vs Part D Determination and Removed from the Step Therapy Requirement	N/A	N/A
6/1/2016	Albuterol sulfate solution for nebulization 1.25mg/3 mL	Update	Drug added to Tier 1 with Part B vs Part D Determination and Removed from the Step Therapy Requirement	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
6/1/2016	Albuterol sulfate solution for nebulization 0.63mg/3 mL	Update	Drug added to Tier 1 with Part B vs Part D Determination and Removed from the Step Therapy Requirement	N/A	N/A
6/1/2016	Albuterol sulfate solution for nebulization 2.5 mg/3 mL (0.083 %)	Update	Drug added to Tier 1 with Part B vs Part D Determination and Removed from the Step Therapy Requirement	N/A	N/A
6/1/2016	Benlysta recon soln 400mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
6/1/2016	Budesonide suspension for nebulization 1mg/2 mL	Addition	Drug added to Tier 1 with Part B vs Part D Determination	N/A	N/A
6/1/2016	Carbamazepine tablet extended release 12 hr 100mg	Addition	Drug added to Tier 1	N/A	N/A
6/1/2016	Cefazolin recon soln 1gram	Addition	Drug added to Tier 1	N/A	N/A
6/1/2016	Erygel gel 2%	Addition	Drug added to Tier 1	N/A	N/A
6/1/2016	Fluconazole in NaCl (iso-osm) piggyback 200mg/100 mL	Addition	Drug added to Tier 1	N/A	N/A

Effective Date of Change	Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug***	Alternative Drug Tier
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
6/1/2016	Humulin R U-500 (Conc) Kwikpen insulin pen 500 unit/mL(3 mL)	Addition	Drug added to Tier 2 with Quantity Limits	N/A	N/A
6/1/2016	Ibandronate solution 3mg/3 mL	Update	Drug added to Tier 1 with Quantity Limits and removed from the Step Therapy Requirement	N/A	N/A
6/1/2016	Levalbuterol HCl solution for nebulization 1.25mg/0.5 mL	Update	Drug added to Tier 1 with Part B vs Part D Determination and Removed from the Step Therapy Requirement	N/A	N/A
6/1/2016	Levalbuterol HCl solution for nebulization 0.63mg/3 mL	Update	Drug added to Tier 1 with Part B vs Part D Determination and Removed from the Step Therapy Requirement	N/A	N/A
6/1/2016	Levalbuterol HCl solution for nebulization 0.31mg/3 mL	Update	Drug added to Tier 1 with Part B vs Part D Determination and Removed from the Step Therapy Requirement	N/A	N/A
6/1/2016	Omega-3 acid ethyl esters capsule 1gram	Update	Drug moved from Tier 3 to Tier 2	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
6/1/2016	Subsys spray,non-aerosol 100mcg/spray	Update	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
6/1/2016	Subsys spray,non-aerosol 200mcg/spray	Update	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
6/1/2016	Subsys spray,non-aerosol 400mcg/spray	Update	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
6/1/2016	Subsys spray,non-aerosol 600mcg/spray	Update	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
6/1/2016	Subsys spray,non-aerosol 800mcg/spray	Update	Drug added to Tier 4 with Quantity Limits and PA and limited access removed	N/A	N/A
6/1/2016	Versacloz suspension 50mg/mL	Update	Drug added to Tier 4 with Quantity Limits and PA and limited access removed	N/A	N/A
6/1/2016	Zyprexa Relprevv suspension for reconstitution 210mg	Update	Drug added to Tier 4 with Quantity Limits and limited access removed	N/A	N/A
6/1/2016	Makena oil 250mg/mL (1 mL)	Addition	Drug added to Tier 4 with PA	N/A	N/A
6/1/2016	Metoprolol tartrate syringe 5mg/5 mL	Addition	Drug added to Tier 1	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
6/1/2016	Odefsey tablet 200-25-25mg	Addition	Drug added to Tier 4	N/A	N/A
6/1/2016	Spritam tablet for suspension 1,000mg	Addition	Drug added to Tier 3 with PA	N/A	N/A
6/1/2016	Spritam tablet for suspension 250mg	Addition	Drug added to Tier 3 with PA	N/A	N/A
6/1/2016	Spritam tablet for suspension 500mg	Addition	Drug added to Tier 3 with PA	N/A	N/A
6/1/2016	Spritam tablet for suspension 750mg	Addition	Drug added to Tier 3 with PA	N/A	N/A
6/1/2016	Uptravi tablet 1,000mcg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
6/1/2016	Uptravi tablet 1,200mcg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
6/1/2016	Uptravi tablet 1,400mcg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
6/1/2016	Uptravi tablet 1,600mcg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
6/1/2016	Uptravi tablet 200mcg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
6/1/2016	Uptravi tablet 400mcg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
6/1/2016	Uptravi tablet 600mcg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
6/1/2016	Uptravi tablet 800mcg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
6/1/2016	Uptravi tablets,dose pack 200 mcg (140)-800 mcg (60)	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
6/1/2016	Vraylar capsule,dose pack 1.5 mg (1)-3 mg (6)	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
6/1/2016	Xeljanz XR tablet extended release 24 hr 11mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
7/1/2016	Avycaz recon soln 2.5gram	Addition	Drug added to Tier 4	N/A	N/A
7/1/2016	Azathioprine sodium recon soln 100mg	Addition	Drug added to Tier 1 and Part B vs Part D Determination	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
7/1/2016	Butalbital Compound W/Codeine capsule 30-50-325-40mg	Addition	Drug added to Tier 1 with Quantity Limits	N/A	N/A
7/1/2016	Coly-Mycin S drops,suspension 3.3-3-10-0.5mg/mL	Addition	Drug added to Tier 3	N/A	N/A
7/1/2016	Descovy tablet 200-25mg	Addition	Drug added to Tier 4	N/A	N/A
7/1/2016	Diclofenac sodium gel 1%	Addition	Drug added to Tier 3 with Quantity Limits	N/A	N/A
7/1/2016	Kuvan powder in packet 100mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
7/1/2016	Menhibrix (PF) recon soln 5-2.5mcg/0.5 mL	Addition	Drug added to Tier 2	N/A	N/A
7/1/2016	Oralair tablet 300indx reactivity	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
7/1/2016	Otrexup (PF) auto-injector 17.5mg/0.4 mL	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
7/1/2016	Otrexup (PF) auto-injector 22.5mg/0.4 mL	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A



<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
7/1/2016	pantoprazole recon soln 40mg	Addition	Drug added to Tier 1 with Quantity Limits	N/A	N/A
7/1/2016	Roweepra tablet 500mg	Addition	Drug added to Tier 1	N/A	N/A
7/1/2016	Taltz Autoinjector auto-injector 80mg/mL	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
7/1/2016	Taltz Syringe syringe 80mg/mL	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
7/1/2016	Tresiba FlexTouch U-100 insulin pen 100 unit/mL(3 mL)	Addition	Drug added to Tier 2 with Quantity Limits	N/A	N/A
7/1/2016	Tresiba FlexTouch U-200 insulin pen 200 unit/mL(3 mL)	Addition	Drug added to Tier 2 with Quantity Limits	N/A	N/A
7/1/2016	Uptravi tablets,dose pack 200 mcg (140)-800 mcg (60)	Quantity Limit Changed	Quantity Limits changed 400 in 365 days with PA	N/A	N/A
7/1/2016	Venclexta Starting Pack tablets,dose pack 10 mg-50 mg-100 mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
7/1/2016	Venclexta tablet 100mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
7/1/2016	Venclexta tablet 10mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
7/1/2016	Venclexta tablet 50mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
8/1/2016	Briviact solution 50mg/5 mL	Addition	Drug added to Tier 4 with PA	N/A	N/A
8/1/2016	Briviact tablet 10mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
8/1/2016	Briviact tablet 100mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
8/1/2016	Briviact tablet 25mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
8/1/2016	Briviact tablet 50mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
8/1/2016	Briviact tablet 75mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
8/1/2016	Briviact solution 10mg/mL	Addition	Drug added to Tier 4 with PA	N/A	N/A
8/1/2016	Buphenyl tablet 500mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
8/1/2016	Cabometyx tablet 20mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
8/1/2016	Cabometyx tablet 40mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
8/1/2016	Cabometyx tablet 60mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
8/1/2016	Dysport recon soln 500unit	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
8/1/2016	Elitek recon soln 7.5mg	Addition	Drug added to Tier 4	N/A	N/A
8/1/2016	Lenvima capsule 8 mg/day(4 mg x 2)	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
8/1/2016	Lenvima capsule 18 mg/day (10mg x 1-4 mg x2)	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
8/1/2016	miglitol tablet 25mg	Addition	Drug added to Tier 3	N/A	N/A
8/1/2016	miglitol tablet 50mg	Addition	Drug added to Tier 3	N/A	N/A
8/1/2016	miglitol tablet 100mg	Addition	Drug added to Tier 3	N/A	N/A
8/1/2016	naloxone solution 0.4mg/mL	Addition	Drug added to Tier 1	N/A	N/A
8/1/2016	Nuplazid tablet 17mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
8/1/2016	Procto-Med HC cream 2.5%	Addition	Drug added to Tier 1	N/A	N/A
8/1/2016	rosuvastatin tablet 40mg	Addition	Drug added to Tier 3 with PA	N/A	N/A
8/1/2016	rosuvastatin tablet 5mg	Addition	Drug added to Tier 3 with PA	N/A	N/A
8/1/2016	rosuvastatin tablet 10mg	Addition	Drug added to Tier 3 with PA	N/A	N/A
8/1/2016	rosuvastatin tablet 20mg	Addition	rosuvastatin tablet 20mg	N/A	N/A
8/1/2016	Tecentriq solution 1,200 mg/20 mL(60 mg/mL)	Addition	Drug added to Tier 4	N/A	N/A
8/1/2016	Trintellix tablet 10mg	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
8/1/2016	Trintellix tablet 20mg	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
8/1/2016	Trintellix tablet 5mg	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
8/1/2016	Truvada tablet 100-150mg	Addition	Drug added to Tier 4	N/A	N/A
8/1/2016	Truvada tablet 133-200mg	Addition	Drug added to Tier 4	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
8/1/2016	Truvada tablet 167-250mg	Addition	Drug added to Tier 4	N/A	N/A
8/1/2016	Uceris foam 2mg/actuation	Addition	Drug added to Tier 3 with PA	N/A	N/A
8/1/2016	Venclexta tablet 10mg	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
8/1/2016	Venclexta tablet 50mg	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
8/1/2016	Intron A recon soln 18 millionunit (1 mL)	Update	Tier 4 drug and removed Prior Authorization	N/A	N/A
8/1/2016	Intron A solution 6 millionunit/mL	Update	Tier 4 drug and removed Prior Authorization	N/A	N/A
8/1/2016	Intron A recon soln 50 millionunit (1 mL)	Update	Tier 4 drug and removed Prior Authorization	N/A	N/A
8/1/2016	Intron A recon soln 10 millionunit (1 mL)	Update	Tier 4 drug and removed Prior Authorization	N/A	N/A
10/1/2016	Tegretol XR 100 mg tablet 12hr	Removal	Generic will be available in Tier 3	Carbamazepine Extended release 100 mg tablet 12hr	1
9/1/2016	Briviact solution 50mg/5 mL	Addition	Drug added to Tier 4 with PA	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
9/1/2016	Briviact tablet 10mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
9/1/2016	Briviact tablet 100mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
9/1/2016	Briviact tablet 25mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
9/1/2016	Briviact tablet 50mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
9/1/2016	Briviact tablet 75mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
9/1/2016	Briviact solution 10mg/mL	Addition	Drug added to Tier 4 with PA	N/A	N/A
9/1/2016	Buphenyl tablet 500mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
9/1/2016	Cabometyx tablet 20mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
9/1/2016	Cabometyx tablet 40mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
9/1/2016	Cabometyx tablet 60mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
9/1/2016	Dysport recon soln 500unit	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
9/1/2016	Elitek recon soln 7.5mg	Addition	Drug added to Tier 4	N/A	N/A
9/1/2016	Lenvima capsule 8 mg/day (4 mg x 2)	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
9/1/2016	Lenvima capsule 18 mg/day (10mg x 1-4 mg x2)	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
9/1/2016	miglitol tablet 25mg	Addition	Drug added to Tier 3	N/A	N/A
9/1/2016	miglitol tablet 50mg	Addition	Drug added to Tier 3	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
9/1/2016	miglitol tablet 100mg	Addition	Drug added to Tier 3	N/A	N/A
9/1/2016	naloxone solution 0.4mg/mL	Addition	Drug added to Tier 1	N/A	N/A
9/1/2016	Nuplazid tablet 17mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
9/1/2016	Procto-Med HC cream 2.5%	Addition	Drug added to Tier 1	N/A	N/A
9/1/2016	rosuvastatin tablet 40mg	Addition	Drug added to Tier 3 with PA	N/A	N/A
9/1/2016	rosuvastatin tablet 5mg	Addition	Drug added to Tier 3 with PA	N/A	N/A
9/1/2016	rosuvastatin tablet 10mg	Addition	Drug added to Tier 3 with PA	N/A	N/A
9/1/2016	rosuvastatin tablet 20mg	Addition	Drug added to Tier 3 with PA	N/A	N/A



<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
9/1/2016	Tecentriq solution 1,200 mg/20 mL(60 mg/mL)	Addition	Drug added to Tier 4	N/A	N/A
9/1/2016	Trintellix tablet 10mg	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
9/1/2016	Trintellix tablet 20mg	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
9/1/2016	Trintellix tablet 5mg	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
9/1/2016	Truvada tablet 100-150mg	Addition	Drug added to Tier 4	N/A	N/A
9/1/2016	Truvada tablet 133-200mg	Addition	Drug added to Tier 4	N/A	N/A
9/1/2016	Truvada tablet 167-250mg	Addition	Drug added to Tier 4	N/A	N/A
9/1/2016	Uceris foam 2mg/actuation	Addition	Drug added to Tier 3 with PA	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
9/1/2016	Venclexta tablet 10mg	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
9/1/2016	Venclexta tablet 50mg	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
9/1/2016	Intron A recon soln 18 millionunit (1 mL)	Update	Tier 4 drug and removed Prior Authorization	N/A	N/A
9/1/2016	Intron A solution 6 millionunit/mL	Update	Prior Authorization removed	N/A	N/A
9/1/2016	Intron A recon soln 50 millionunit (1 mL)	Update	Prior Authorization removed	N/A	N/A
9/1/2016	Intron A recon soln 10 millionunit (1 mL)	Update	Prior Authorization removed	N/A	N/A
10/1/2016	ampicillin-sulbactam recon soln 1.5gram	Addition	Drug added to Tier 1	N/A	N/A
10/1/2016	bupropion HCl (smoking deter) tablet extended release 150mg	Addition	Drug added to Tier 1	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
10/1/2016	Cholestyramine Light powder 4gram	Addition	Drug added to Tier 1	N/A	N/A
10/1/2016	Emend suspension for reconstitution 125 mg (25 mg/mL final conc.)	Addition	Drug added to Tier 3 with Quantity Limits with Part B vs Part D Determination	N/A	N/A
10/1/2016	Fluocinonide-E cream 0.05%	Addition	Drug added to Tier 2	N/A	N/A
10/1/2016	Fulyzaq tablet, delayed release (DR/EC) 125mg	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
10/1/2016	Gengraf capsule 50mg	Addition	Drug added to Tier 1 with Part B vs Part D Determination	N/A	N/A
10/1/2016	Humira Pen Psoriasis-Uveitis pen injector kit 40mg/0.8 mL	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
10/1/2016	nilutamide tablet 150mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
10/1/2016	norgestimate-ethinyl estradiol tablet 0.18/0.215/0.25mg-35 mcg (28)	Addition	Drug added to Tier 1	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
10/1/2016	Ocaliva tablet 5mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
10/1/2016	Ocaliva tablet 10mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
10/1/2016	Orencia ClickJect auto-injector 125mg/mL	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
10/1/2016	Otrexup (PF) auto-injector 12.5mg/0.4 mL	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
10/1/2016	prednisone tablets,dose pack 5mg (48 pack)	Addition	Drug added to Tier 1	N/A	N/A
10/1/2016	prednisone tablets,dose pack 5mg	Addition	Drug added to Tier 1	N/A	N/A
10/1/2016	prednisone tablets,dose pack 10mg (48 pack)	Addition	Drug added to Tier 1	N/A	N/A
10/1/2016	prednisone tablets,dose pack 10mg	Addition	Drug added to Tier 1	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
10/1/2016	Repatha Pushtronex wearable injector 420mg/3.5 mL	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
10/1/2016	SPS suspension 15gram/60 mL	Addition	Drug added to Tier 1	N/A	N/A
10/1/2016	sumatriptan succinate pen injector 4mg/0.5 mL	Addition	Drug added to Tier 1	N/A	N/A
10/1/2016	Zinbryta syringe 150mg/mL	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
10/1/2016	Tegretol XR tablet extended release 12 hr 100mg	Removal	Brand removed replaced by generic	Generic will be available in Tier 1	Carbamazepine ER
10/1/2016	Jentadueto XR tablet, IR - ER, biphasic 24hr 2.5-1,000mg	Update	Tier 2 drug and Quantity Limit requirement removed	N/A	N/A
10/1/2016	Jentadueto XR tablet, IR - ER, biphasic 24hr 5-1,000mg	Update	Tier 2 drug and Quantity Limit requirement removed	N/A	N/A
11/1/2016	Afrezza cartridge with inhaler 4 unit (90)/8 unit (90)	Addition	Drug added to Tier 3 with PA	N/A	N/A

<b>Effective Date of Change</b>	<b>Name of Affected Drug</b>	<b>Description of Change</b>	<b>Reason for Change</b>	<b>Alternative Drug***</b>	<b>Alternative Drug Tier</b>
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
11/1/2016	Caziant (28) tablet 0.1/.125/.15-25mg-mcg	Addition	Drug added to Tier 1	N/A	N/A
11/1/2016	Epclusa tablet 400-100mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A
11/1/2016	Eraxis(Water Diluent) recon soln 50mg	Addition	Drug added to Tier 3	N/A	N/A
11/1/2016	Floxin drops 0.3%	Addition	Drug added to Tier 1	N/A	N/A
11/1/2016	Larissia tablet 0.1-20mg-mcg	Addition	Drug added to Tier 1	N/A	N/A
11/1/2016	Low-Ogestrel (28) tablet 0.3- 30mg-mcg	Addition	Drug added to Tier 1	N/A	N/A
11/1/2016	Prolastin-C recon soln 1mg	Addition	Drug added to Tier 4 with PA	N/A	N/A
11/1/2016	Relistor tablet 150mg	Addition	Drug added to Tier 4 with Quantity Limits and PA	N/A	N/A

Effective Date of Change	Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug***	Alternative Drug Tier
<b>Please refer to the formulary drug tier chart at that end of this document for the member cost-sharing by tier level.</b>					
11/1/2016	Yondelis recon soln 1mg	Addition	Drug added to Tier 4	N/A	N/A
11/1/2016	Zurampic tablet 200mg	Addition	Drug added to Tier 3 with Quantity Limits and PA	N/A	N/A
11/1/2016	Aristada suspension,extended rel syring 441mg/1.6 mL	Update	Tier 4 drug and Prior Authorization removed with Quantity Limits	N/A	N/A
11/1/2016	Aristada suspension,extended rel syring 662mg/2.4 mL	Update	Tier 4 drug and Prior Authorization removed with Quantity Limits	N/A	N/A
11/1/2016	Aristada suspension,extended rel syring 882mg/3.2 mL	Update	Tier 4 drug and Prior Authorization removed with Quantity Limits	N/A	N/A

\*For non-maintenance prescription drug changes, UPMC *for Life* will continue to cover the prescription drugs for enrollees taking the drug at the time of the change for the remainder of the plan year, as long as that drug continues to be medically necessary and prescribed by your physician and the drug was **not** removed for safety reasons. The appropriate member cost-sharing will apply based on what tier or exception tier the prescription drug is on and what stage of coverage (e.g., Initial Coverage Stage, Coverage Gap Stage) the member is in.

\*\*We are available to take your call: October 1 through February 14, from 8 a.m. to 8 p.m., seven days a week. From February 15 through September 30 from 8 a.m. to 8 p.m., Monday through Friday, and 8 a.m. to 3 p.m. on Saturday.

\*\*\*Alternative drugs are drugs in the same therapeutic category/class or cost-sharing tier as the affected drug. Only your physician can determine if the alternate drug listed here is appropriate for you given the individualized nature of drug therapy. Please consult with your physician whether this is an appropriate drug for you.

UPMC *for Life* has a contract with Medicare to provide HMO and PPO Plans. Enrollment in UPMC *for Life* depends on contract renewal. UPMC *for Life* is a product of and operated by UPMC Health Plan, Inc., UPMC Health Network, Inc., and UPMC Health Benefits, Inc.

The benefit information provided is a brief summary, not a complete description of benefits. For more information contact the plan. Limitations, copayments, and restrictions may apply.

Benefits, formulary, pharmacy network, premium, and/or copayments/coinsurance may change on January 1 of each year.

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## Formulary Drug Tiers

The formulary drug tier table provides the tier description (e.g., generic) and member cost-sharing for prescription drugs on each drug tier. Please refer to the tables below based on the UPMC *for Life* HMO or PPO plan you are enrolled in.

**NOTE: For employer group-sponsored plans, please refer to your Evidence of Coverage for the formulary drug tier member cost-sharing amounts.**

If you have additional questions, please contact Member Services at **1-877-539-3080** or, for TTY users, **1-800-361-2629**. We are available to take your call: October 1 through February 14, from 8 a.m. to 8 p.m., seven days a week. From February 15 through September 30 from 8 a.m. to 8 p.m., Monday through Friday, and 8 a.m. to 3 p.m. on Saturday.

### UPMC *for Life* drug tiers and cost-sharing amounts for 2016:

- UPMC *for Life* HMO Rx
- UPMC *for Life* HMO Rx Enhanced
- UPMC *for Life* PPO Rx Enhanced

Drug Tier Number	Drug Tier Description	Member Cost-Sharing (30- or 90-day supply) Retail	Member Cost-Sharing (30- or 90-day supply) Mail-order
1	Generic drug tier	<ul style="list-style-type: none"> <li>• \$12 copay for a 30-day retail supply</li> <li>• \$36 copay for a 90-day retail supply</li> </ul>	<ul style="list-style-type: none"> <li>• \$24 copay for a 90-day mail-order supply</li> </ul>
2	Preferred Brand drug tier	<ul style="list-style-type: none"> <li>• \$47 copay for a 30-day retail supply</li> <li>• \$141 copay for a 90-day retail supply</li> </ul>	<ul style="list-style-type: none"> <li>• \$117.50 copay for a 90-day mail-order supply</li> </ul>
3	Non-preferred Brand drug tier	<ul style="list-style-type: none"> <li>• \$100 copay for a 30-day retail supply</li> <li>• \$300 copay for a 90-day retail supply</li> </ul>	<ul style="list-style-type: none"> <li>• \$300 copay for a 90-day mail-order supply</li> </ul>
4	Specialty drug tier	<ul style="list-style-type: none"> <li>• 33% coinsurance for a 30-day retail supply (only)</li> </ul>	<ul style="list-style-type: none"> <li>• 33% coinsurance for a 30-day mail-order supply (only)</li> </ul>
5	Select Care drug tier	<ul style="list-style-type: none"> <li>• \$0 copay for a 30-day retail supply</li> <li>• \$0 copay for a 90-day retail supply</li> </ul>	<ul style="list-style-type: none"> <li>• \$0 copay for a 90-day mail-order supply</li> </ul>

**NOTE:** Drugs are provided in a Long-term Care Facility up to a 31-day supply.

**UPMC for Life drug tiers and cost-sharing amounts for 2016:**

- UPMC for Life HMO Deductible with Rx
- UPMC for Life PPO High Deductible with Rx

<b>Drug Tier Number</b>	<b>Drug Tier Description</b>	<b>Member Cost-Sharing (30-or 90-day supply) Retail</b>	<b>Member Cost-Sharing (30-or 90-day supply) Mail-order</b>
<b>1</b>	Generic drug tier	<ul style="list-style-type: none"> <li>• \$14 copay for a 30-day retail supply</li> <li>• \$42 copay for a 90-day retail supply</li> </ul>	<ul style="list-style-type: none"> <li>• \$28 copay for a 90-day mail-order supply</li> </ul>
<b>2</b>	Preferred Brand drug tier	<ul style="list-style-type: none"> <li>• \$47 copay for a 30-day retail supply</li> <li>• \$141 copay for a 90-day retail supply</li> </ul>	<ul style="list-style-type: none"> <li>• \$117.50 copay for a 90-day mail-order supply</li> </ul>
<b>3</b>	Non-preferred Brand drug tier	<ul style="list-style-type: none"> <li>• \$100 copay for a 30-day retail supply</li> <li>• \$300 copay for a 90-day retail supply</li> </ul>	<ul style="list-style-type: none"> <li>• \$300 copay for a 90-day mail-order supply</li> </ul>
<b>4</b>	Specialty drug tier	<ul style="list-style-type: none"> <li>• 33% coinsurance for a 30-day retail supply (only)</li> </ul>	<ul style="list-style-type: none"> <li>• 33% coinsurance for a 30-day mail-order supply (only)</li> </ul>
<b>5</b>	Select Care drug tier	<ul style="list-style-type: none"> <li>• \$0 copay for a 30-day retail supply</li> <li>• \$0 copay for a 90-day retail supply</li> </ul>	<ul style="list-style-type: none"> <li>• \$0 copay for a 90-day mail-order supply</li> </ul>

**NOTE:** Drugs are provided in a Long-term Care Facility up to a 31-day supply.





