



## 2018 Year-to-date Formulary Additions

Revised 10/01/2018

Health Choice Generations 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 at 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 tables below provide information about changes to our formulary that may impact you.** You can also view the most recent formulary changes on our website at [HealthChoiceGenerations.com](http://HealthChoiceGenerations.com). If you have any questions or concerns, please call us. We always want to help you.

This information is available for free in other languages. Please call our customer service number at 800-656-8991 (TTY 711), 8 a.m. - 8 p.m., 7 days a week.

Definitions:

**PA = Prior Authorization:** Health Choice Generations requires your physician to get prior authorization for certain drugs. This means that you will need to get approval from our plan before you fill your prescriptions. If you don't get approval, Health Choice Generations may not cover the drug.

**ST = Step Therapy:** In some cases, Health Choice Generations requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, Health Choice Generations may not cover drug B unless you try Drug A first. If Drug A does not work for you, Health Choice Generations will then cover Drug B.

**QL = Quantity Limit:** For certain drugs, Health Choice Generations limits the amount of the drug that our plan will cover. Unless otherwise noted, the quantity listed is units (capsules, tablets) per 30 days. For example, Health Choice Generations provides 30 units per 30 day prescription for NAMENDA XR. This may be in addition to a standard one month or three month supply.

**BvD = Part B versus D:** This prescription drug has a Part B versus D administrative prior authorization requirement. This drug may be covered under Medicare Part B or D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.

**\*Alternative Drugs:** 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 here is appropriate for you given the individualized nature of the drug therapy. Please consult your physician as to whether this is an appropriate drug for you.

410 N. 44<sup>th</sup> Street, Suite 510, Phoenix, AZ 85008  
Toll-Free: 800-656-8991 | TTY 711 | [HealthChoiceGenerations.com](http://HealthChoiceGenerations.com)  
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Revised 10/01/2018

Name of Drug	Description of Change	Alternative Drug*	Alternative Drug Tier	Effective Date
7t lido gel 2%	Tier 1	N/A	N/A	1-Oct-18
ABILIFY MAINTENA SRER 400MG	Tier 1	N/A	N/A	1-Jun-18
adriamycin 10mg solr	Tier 1 & BvD	N/A	N/A	1-Oct-18
adriamycin 50mg solr	Tier 1 & BvD	N/A	N/A	1-Oct-18
AGGRASTAT INJ 0.9%; 12.5MG/250ML	Tier 1	N/A	N/A	1-Jul-18
AGGRASTAT INJ 0.9%; 5MG/100ML	Tier 1	N/A	N/A	1-Jul-18
AGGRASTAT INJ 3.75MG/15ML	Tier 1	N/A	N/A	1-Jul-18
AKYNZEO INJ 235MG; 0.25MG	Tier 1	N/A	N/A	1-Jul-18
ALUNBRIG TABS 180MG	Tier 1 & QL 30/30 & PA	N/A	N/A	1-Mar-18
ALUNBRIG TABS 90MG	Tier 1 & QL 30/30 & PA	N/A	N/A	1-Mar-18
ALUNBRIG TBPK	Tier 1 & QL 30/365 & PA	N/A	N/A	1-Mar-18
ALUNBRIG TBPK	Tier 1 & PA & QL 60/365	N/A	N/A	1-Apr-18
amino acid 50mg/ml soln	Tier 1 & BvD	N/A	N/A	1-Oct-18
amiodarone hydrochloride inj 450mg/9ml	Tier 1	N/A	N/A	1-Jun-18
amiodarone hydrochloride inj 900mg/18ml	Tier 1	N/A	N/A	1-Jun-18
ARISTADA INITIO SYRINGE 675MG/2.4ML	Tier 1	N/A	N/A	1-Sep-18
arsenic trioxide 10mg/10ml soln	Tier 1	N/A	N/A	1-Oct-18
ASSURE ID SAFETY PEN NEEDLES 30G X 5/16"	Tier 1 & QL 200/30	N/A	N/A	1-Aug-18
ASSURE ID SAFETY PEN NEEDLES 31G X 3/16"	Tier 1 & QL 200/30	N/A	N/A	1-Aug-18
atropine sulf soln 8mg/20ml	Tier 1 & AL 64Y	N/A	N/A	1-Sep-18
AZOPT % SUSP	Tier 1 & ST	N/A	N/A	1-Oct-18
baclofen tabs 5mg	Tier 1	N/A	N/A	1-Aug-18
BD INSULIN SYRINGE SAFETYGLIDE/U-100/1ML/31G X 15/64"	Tier 1 & QL 200/30	N/A	N/A	1-Jun-18
BD INSULIN SYRINGE U-100/0.3ML/29G X 1/2" MISC	Tier 1 & QL 200/30	N/A	N/A	1-Jul-18
BD VEO INSULIN SYRINGE ULTRAFINE/U-100/0.3ML/31G X 15/64"	Tier 1 & QL 200/30	N/A	N/A	1-Jul-18
BD VEO INSULIN SYRINGE ULTRAFINE/U-100/0.5ML/31G X 15/64"	Tier 1 & QL 200/30	N/A	N/A	1-Jul-18
BD VEO INSULIN SYRINGE ULTRAFINE/U-100/1ML/31G X 15/64"	Tier 1 & QL 200/30	N/A	N/A	1-Jul-18

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bendamustine hydrochloride iv soln 100mg/4ml	Tier 1	N/A	N/A	1-Sep-18
BENZNIDAZOLE 100MG	Tier 1	N/A	N/A	1-Mar-18
BENZNIDAZOLE 12.5MG	Tier 1	N/A	N/A	1-Mar-18
betamethasone combo 3mg/ml ; 3mg/ml susp	Tier 1	N/A	N/A	1-Oct-18
BIKTARVY TABS 50MG; 200MG; 25MG	Tier 1 & QL 30/30	N/A	N/A	1-Apr-18
bimatoprost 0.03% soln	Tier 1 & ST	N/A	N/A	1-Oct-18
bleomycin inj 15unit	Tier 1 & BvD	N/A	N/A	1-Jul-18
BOSULIF TABS 400MG	Tier 1 & PA	N/A	N/A	1-Mar-18
BRAFTOVI CAPS 50MG	Tier 1 & PA	N/A	N/A	1-Aug-18
BRAFTOVI CAPS 75MG	Tier 1 & PA	N/A	N/A	1-Aug-18
BREVIBLOC PREMIXED DOUBLESTRENGTH INJ 2000MG/100ML; 4.1MG/ML	Tier 1	N/A	N/A	1-Jul-18
BREVIBLOC PREMIXED INJ 2500MG/250ML; 5.9MG/ML	Tier 1	N/A	N/A	1-Jul-18
BROMSITE 0.075% SOLN	Tier 1 & ST & QL 20/365	N/A	N/A	1-Oct-18
BROMSITE 0.075% SOLN	Tier 1 & ST & QL 20/365	N/A	N/A	1-Oct-18
budesonide er tab 24hr 9mg	Tier 1	N/A	N/A	1-Sep-18
budesonide ER tabs 9mg	Tier 1	N/A	N/A	1-Aug-18
buprenorphine hydrochloride/naloxone hydrochloride film 8mg; 2mg	Tier 1 & QL 90/30	N/A	N/A	1-Jul-18
BUTALBITAL/ACETAMINOPHEN CAPS 300MG; 50MG	Tier 1 & PA & QL 180/30 & AL 64Y	N/A	N/A	1-Sep-18
carmustine 100mg solr	Tier 1	N/A	N/A	1-Oct-18
CIMDUO 300MG; 300MG TABS	Tier 1 & QL 30/30	N/A	N/A	1-Oct-18
CIMDUO 300MG; 300MG TABS	Tier 1 & QL 30/30	N/A	N/A	1-Oct-18
CIMDUO TABS 300MG; 300MG	Tier 1 & QL 30/30	N/A	N/A	1-Jun-18
CINVANTI EMUL 130MG/18ML	Tier 1	N/A	N/A	1-Mar-18

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CLINIMIX N14G30E 17.6GM/2000ML; 9.78GM/2000ML; 15%; 8.76GM/2000ML; 4.08GM/2000ML; 5.1GM/2000ML; 6.2GM/2000ML; 4.93GM/2000ML; 1.02GM/2000ML; 3.4GM/2000ML; 4.76GM/2000ML; 5.22GM/2000ML; 5.78GM/2000ML; 4.25GM/2000ML; 1.54GM/2000ML; 3.57GM/2000ML; 1.53GM/2000ML; 0.34GM/2000ML; 4.93GM/2000ML	Tier 1 & BvD	N/A	N/A	1-Mar-18
CLINIMIX N9G15E 5MMOL/100ML; 570MG/100ML; 317MG/100ML; 0.23MMOL/100ML; 4MMOL/100ML; 7.5GM/100ML; 284MG/100ML; 132MG/100ML; 165MG/100ML; 201MG/100ML; 200MG/100ML; 0.25MMOL/100ML; 110MG/100ML; 460MG/100ML; 154MG/100ML; 1.5MMOL/100ML; 3MMOL/100ML; 187MG/100ML; 138MG/100ML; 3.5MMOL/100ML; 116MG/100ML; 50MG/100ML; 11MG/100ML; 160MG/100ML	Tier 1 & BvD	N/A	N/A	1-Mar-18
colesevelam hydrochloride pack 3.75gm	Tier 1	N/A	N/A	1-Sep-18
colesevelam hydrochloride tabs 625mg	Tier 1	N/A	N/A	1-Jul-18
COMBIGAN 0.2% ; 0.5% SOLN	Tier 1 & ST	N/A	N/A	1-Oct-18
COTELLIC 20MG TABS	Tier 1 & QL 90/30 & AL 18Y	N/A	N/A	1-Oct-18
crotan lotion 10%	Tier 1	N/A	N/A	1-Sep-18
CRYSVITA INJ 10MG/ML	Tier 1 & PA	N/A	N/A	1-Jun-18
CRYSVITA INJ 20MG/ML	Tier 1 & PA	N/A	N/A	1-Jun-18
CRYSVITA INJ 30MG/ML	Tier 1 & PA	N/A	N/A	1-Jun-18
dactinomycin solr 0.5mg	Tier 1	N/A	N/A	1-Mar-18
DALFAMPRIDINE ER 10MG TAB	Tier 1 & PA & QL 60/30	N/A	N/A	1-Oct-18
DALIRESP TABS 250MCG	Tier 1 & PA	N/A	N/A	1-May-18
daptomycin 350mg solr	Tier 1	N/A	N/A	1-Aug-18
daunorubicin hydrochloride inj 20mg/4ml	Tier 1	N/A	N/A	1-Jul-18
daunorubicin hydrochloride inj 50mg/10ml	Tier 1	N/A	N/A	1-Jul-18
desoximetasone spray 0.25%	Tier 1	N/A	N/A	1-Sep-18
dexamethasone 10 day dose pack 1.5mg	Tier 1	N/A	N/A	1-Sep-18

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dexamethasone 13 day dose pack 1.5mg	Tier 1	N/A	N/A	1-Sep-18
dexamethasone 6 day dose pack 1.5mg	Tier 1	N/A	N/A	1-Sep-18
dextrose 50% soln	Tier 1	N/A	N/A	1-Oct-18
diclofenac sodium 0.1% soln	Tier 1 & ST	N/A	N/A	1-Oct-18
DIVIGEL GEL 0.25MG/0.25GM	Tier 1 & PA	N/A	N/A	1-Jun-18
dorzolamide hydrochloride/timolol maleate pf 20MG/ML; 5MG/ML	Tier 1	N/A	N/A	1-Sep-18
doxycycline hyclate tabs 50mg	Tier 1	N/A	N/A	1-Jun-18
doxycycline tabs 100mg	Tier 1	N/A	N/A	1-Aug-18
doxycycline tabs 150mg	Tier 1	N/A	N/A	1-Aug-18
doxycycline tabs 50mg	Tier 1	N/A	N/A	1-Aug-18
doxycycline tabs 75mg	Tier 1	N/A	N/A	1-Aug-18
DROPSAFE SAFETY PEN NEEDLES/31G X 5/16"	Tier 1 & QL 200/30	N/A	N/A	1-Sep-18
DROPSAFE SAFETY PEN NEEDLES/31G X 1/4"	Tier 1 & QL 200/30	N/A	N/A	1-Sep-18
drosiprenone/ethinyl estradiol/levomefolate calcium tabs 3mg; 0.03mg; 0.451mg	Tier 1	N/A	N/A	1-May-18
EASY GLIDE PEN NEEDLES 33G X 5/32" MISC	Tier 1 & QL 200/30	N/A	N/A	1-Jun-18
efavirenz caps 600mg	Tier 1	N/A	N/A	1-Mar-18
ELIQUIS STARTER PACK TABS 5MG	Tier 1 & QL 148/365	N/A	N/A	1-Mar-18
EPINEPHRINE INJ 0.3MG/0.3ML (Impax generic)	Tier 1	N/A	N/A	1-Jun-18
EPIPEN 2-PAK INJ 0.3MG/0.3ML	Tier 1	N/A	N/A	1-Jun-18
EPIPEN-JR 2-PAK INJ 0.15MG/0.3ML	Tier 1	N/A	N/A	1-Jun-18
ERLEADA TABS 60MG	Tier 1 & PA & QL 120/30	N/A	N/A	1-Apr-18
ertapenem sodium inj 1gm	Tier 1	N/A	N/A	1-Sep-18
ertapenem solr 1gm	Tier 1	N/A	N/A	1-Aug-18
ESMOLOL HYDROCHLORIDE IN WATER DOUBLE STRENGTH SOLN 2000MG/100ML	Tier 1	N/A	N/A	1-Apr-18
ESMOLOL HYDROCHLORIDE IN WATER SOLN 2500MG/250ML	Tier 1	N/A	N/A	1-Apr-18

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esmolol hydrochloride/sodium chloride 2000mg/100ml; 4.1mg/ml soln	Tier 1	N/A	N/A	1-Oct-18
esmolol hydrochloride/sodium chloride 2500mg/250ml; 5.9mg/ml soln	Tier 1	N/A	N/A	1-Oct-18
esomeprazole magnesium dr 20mg cap	Tier 1 & QL 30/30	N/A	N/A	1-Oct-18
esomeprazole magnesium dr 40mg cap	Tier 1 & QL 30/30	N/A	N/A	1-Oct-18
flurbiprofen sodium 0.03% soln	Tier 1 & ST	N/A	N/A	1-Oct-18
FULPHILA INJ 6MG/0.6ML	Tier 1 & PA	N/A	N/A	1-Sep-18
GALAFOLD 123MG CAPS	Tier 1 & PA	N/A	N/A	1-Oct-18
GAMASTAN IM INJ	Tier 1 & PA	N/A	N/A	1-Sep-18
ganciclovir inj 500mg/10ml	Tier 1 & BvD	N/A	N/A	1-Jun-18
GEMCITABINE HYDROCHLORIDE INJ 1.5GM/15ML	Tier 1	N/A	N/A	1-Mar-18
GEMCITABINE HYDROCHLORIDE INJ 1GM/10ML	Tier 1	N/A	N/A	1-Mar-18
GEMCITABINE HYDROCHLORIDE INJ 200MG/2ML	Tier 1	N/A	N/A	1-Mar-18
GEMCITABINE HYDROCHLORIDE INJ 2GM/20ML	Tier 1	N/A	N/A	1-Mar-18
gemcitabine hydrochloride soln 1gm/26.3ml	Tier 1	N/A	N/A	1-Apr-18
gemcitabine hydrochloride soln 200mg/5.26ml	Tier 1	N/A	N/A	1-Apr-18
gemcitabine hydrochloride soln 2gm/52.6ml	Tier 1	N/A	N/A	1-Apr-18
GILENYA CAPS 0.25MG	Tier 1 & PA & QL 30/30	N/A	N/A	1-Jul-18
glatopa sosy 40mg/ml	Tier 1 & PA & QL 12/28	N/A	N/A	1-Apr-18
GLYXAMBI TABS 10MG; 5MG	Tier 1 & QL 30/30 & ST	N/A	N/A	1-Mar-18
GLYXAMBI TABS 25MG; 5MG	Tier 1 & QL 30/30 & ST	N/A	N/A	1-Mar-18
guanfacine hydrochloride 1mg	Tier 1	N/A	N/A	1-Oct-18
guanfacine hydrochloride 2mg	Tier 1	N/A	N/A	1-Oct-18
guanfacine hydrochloride 3mg	Tier 1	N/A	N/A	1-Oct-18
guanfacine hydrochloride 4mg	Tier 1	N/A	N/A	1-Oct-18
heparin sodium/sodium chloride 25000UNIT/500ML; 0.45% soln	Tier 1	N/A	N/A	1-Aug-18
HEPLISAV-B PFS 20MCG/0.5ML	Tier 1 & PA	N/A	N/A	1-Sep-18
HEPLISAV-B SOLN 20MCG/0.5ML	Tier 1 & BvD	N/A	N/A	1-Mar-18

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HUMIRA 40MG/0.4ML PEN PSKT	Tier 1 & PA	N/A	N/A	1-Jun-18
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK 80MG/0.8ML PSKT	Tier 1 & PA	N/A	N/A	1-Jun-18
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT	Tier 1 & PA	N/A	N/A	1-Jun-18
HUMIRA PEN 10MG/0.1ML	Tier 1 & PA	N/A	N/A	1-Jun-18
HUMIRA PEN 20MG/0.2ML	Tier 1 & PA	N/A	N/A	1-Jun-18
HUMIRA PEN 40MG/0.4ML	Tier 1 & PA	N/A	N/A	1-Jun-18
HUMIRA PEN-CD/UC/HS STARTER 80MG/0.8ML	Tier 1 & PA	N/A	N/A	1-Sep-18
HUMIRA PEN-PS/UV STARTER 80MG/0.8ML, 40MG/0.4ML	Tier 1 & PA	N/A	N/A	1-Sep-18
hydrocortisone acetate/pramoxine cream 1%; 1%	Tier 1	N/A	N/A	1-Jun-18
hydrocortisone butyrate lotn 0.1%	Tier 1	N/A	N/A	1-Apr-18
hydromorphone hydrochloride soln 1mg/ml	Tier 1	N/A	N/A	1-Aug-18
hydroxyprogesterone caproate 250mg/ml oil	Tier 1 & PA	N/A	N/A	1-Aug-18
HYPERRAB INJ 1500UNIT/5ML	Tier 1 & BvD	N/A	N/A	1-Jun-18
HYPERRAB INJ 300UNIT/ML	Tier 1 & BvD	N/A	N/A	1-Jun-18
ibu tabs 600mg	Tier 1	N/A	N/A	1-Jun-18
ibu tabs 800mg	Tier 1	N/A	N/A	1-Jun-18
ILEVRO 0.3% SUSP	Tier 1 & ST	N/A	N/A	1-Oct-18
ilumya 100mg/ml	Tier 1 & PA	N/A	N/A	1-Oct-18
IMBRUVICA CAPS 70MG	Tier 1 & PA	N/A	N/A	1-May-18
IMBRUVICA TABS 140MG	Tier 1 & PA	N/A	N/A	1-May-18
IMBRUVICA TABS 280MG	Tier 1 & PA	N/A	N/A	1-May-18
IMBRUVICA TABS 420MG	Tier 1 & PA	N/A	N/A	1-May-18
IMBRUVICA TABS 560MG	Tier 1 & PA	N/A	N/A	1-May-18
imiquiob pump 3.75% cream	Tier 1	N/A	N/A	1-Oct-18
INSULIN SYRINGE/NEEDLE 0.3ML/30G X 5/16"	Tier 1 & QL 200/30	N/A	N/A	1-Jun-18
INSULIN SYRINGE/NEEDLE 0.3ML/31G X 5/16"	Tier 1 & QL 200/30	N/A	N/A	1-Jun-18

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INSULIN SYRINGE/NEEDLE 0.5ML/29G X 1/2"	Tier 1 & QL 200/30	N/A	N/A	1-Jun-18
INSULIN SYRINGE/NEEDLE 0.5ML/30G X 5/16"	Tier 1 & QL 200/30	N/A	N/A	1-Jun-18
INSULIN SYRINGE/NEEDLE 0.5ML/31G X 5/16"	Tier 1 & QL 200/30	N/A	N/A	1-Jun-18
INSULIN SYRINGE/NEEDLE 1ML/29G X 1/2"	Tier 1 & QL 200/30	N/A	N/A	1-Jun-18
INSULIN SYRINGE/NEEDLE 1ML/30G X 5/16"	Tier 1 & QL 200/30	N/A	N/A	1-Jun-18
INSULIN SYRINGE/NEEDLE 1ML/31G X 5/16"	Tier 1 & QL 200/30	N/A	N/A	1-Jun-18
isotretinoin caps 10mg	Tier 1 & PA	N/A	N/A	1-Mar-18
isotretinoin caps 20mg	Tier 1 & PA	N/A	N/A	1-Mar-18
isotretinoin caps 30mg	Tier 1 & PA	N/A	N/A	1-Mar-18
isotretinoin caps 40mg	Tier 1 & PA	N/A	N/A	1-Mar-18
itraconazole 10mg/ml soln	Tier 1 & PA	N/A	N/A	1-Oct-18
JYNARQUE TBPK 45/15	Tier 1 & QL 56/28	N/A	N/A	1-Jun-18
JYNARQUE TBPK 60/30	Tier 1 & QL 56/28	N/A	N/A	1-Jun-18
JYNARQUE TBPK 90/30	Tier 1 & QL 56/28	N/A	N/A	1-Jun-18
kelnor 1/50 tabs 50mcg;1mg	Tier 1	N/A	N/A	1-May-18
ketoprofen caps 25mg	Tier 1	N/A	N/A	1-Sep-18
ketorolac tromethamine 0.4% soln	Tier 1 & ST	N/A	N/A	1-Oct-18
ketorolac tromethamine 0.5% soln	Tier 1 & ST	N/A	N/A	1-Oct-18
KYPROLIS 10MG SOLR	Tier 1 & PA	N/A	N/A	1-Oct-18
lansoprazole tbdp 15mg	Tier 1 & QL 30/30	N/A	N/A	1-May-18
lansoprazole tbdp 30mg	Tier 1 & QL 30/30	N/A	N/A	1-May-18
latanoprost 0.005% soln	Tier 1 & ST	N/A	N/A	1-Oct-18
lenvima 12mg daily dose 4mg pk	Tier 1 & PA	N/A	N/A	1-Oct-18
lenvima 4mg daily dose 4mg pk	Tier 1 & PA	N/A	N/A	1-Oct-18
levetiracetam/sodium chloride inj 1000mg/100ml; 750mg/100ml	Tier 1	N/A	N/A	1-Jul-18
levetiracetam/sodium chloride inj 1500mg/100ml; 540mg/100ml	Tier 1	N/A	N/A	1-Jul-18
levetiracetam/sodium chloride inj 500mg/100ml; 820mg/100ml	Tier 1	N/A	N/A	1-Jul-18

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levoleucovorin calcuim 250mg/5ml soln	Tier 1	N/A	N/A	1-Oct-18
LOKELMA 10MG PK	Tier 1 & PA & QL 90/30	N/A	N/A	1-Oct-18
LOKELMA 5MG PK	Tier 1 & PA & QL 90/30	N/A	N/A	1-Oct-18
LUCEMYRA TAB 0.18MG	Tier 1 & QL 480/30	N/A	N/A	1-Sep-18
LUCEMYRA TABS 0.18MG	Tier 1 & QL 480/30	N/A	N/A	1-Jul-18
MAKENA SOAJ 275MG/1.1ML	Tier 1 & PA	N/A	N/A	1-May-18
MEKTOVI TABS 15MG	Tier 1 & PA	N/A	N/A	1-Aug-18
memantine hydrochloride er cp24 14mg	Tier 1 & QL 30/30	N/A	N/A	1-Apr-18
memantine hydrochloride er cp24 21mg	Tier 1 & QL 30/30	N/A	N/A	1-Apr-18
memantine hydrochloride er cp24 28mg	Tier 1 & QL 30/30	N/A	N/A	1-Apr-18
memantine hydrochloride er cp24 7mg	Tier 1 & QL 30/30	N/A	N/A	1-Apr-18
MESALAMINE DR TBEC 800MG	Tier 1	N/A	N/A	1-May-18
metformin hcl 500mg/5ml	Tier 1 & QL 765ml/30	N/A	N/A	1-Sep-18
methylphenidate hcl er tab 10mg	Tier 1 & PA & QL 30/30 & AL max 18Y	N/A	N/A	1-Sep-18
methylphenidate hcl er tab 20mg	Tier 1 & PA & QL 30/30 & AL max 18Y	N/A	N/A	1-Sep-18
methylphenidate hydrochloride cp24 10mg	Tier & PA & 180/30	N/A	N/A	1-Apr-18
methylphenidate hydrochloride er 10mg tab	Tier 1 & QL 180/30 & AL 18Y	N/A	N/A	1-Oct-18
methylphenidate hydrochloride er 20mg tab	Tier 1 & QL 90/30 & AL 18Y	N/A	N/A	1-Oct-18
methylphenidate hydrochloride er cp24 10mg	Tier 1 & PA & QL 180/30	N/A	N/A	1-May-18
methylphenidate hydrochloride er tbcr 72mg	Tier 1 & QL 30/30 & PA	N/A	N/A	1-Mar-18
methylprednisolone acetate susp 50mg/ml	Tier 1	N/A	N/A	1-Aug-18
midazolam hydrochloride soln 2mg/2ml	Tier 1	N/A	N/A	1-Apr-18
midzaolam hydrochloride 50mg/10ml soln	Tier 1	N/A	N/A	1-Oct-18
miglustat cap 100mg	Tier 1 & PA	N/A	N/A	1-Sep-18
miglustat caps 100mg	Tier 1 & PA	N/A	N/A	1-Jun-18

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mili tabs 35mcg, 0.25mg	Tier 1	N/A	N/A	1-Aug-18
minocycline hydrochloride tb24 115mg	Tier 1	N/A	N/A	1-Apr-18
minocycline hydrochloride tb24 65mg	Tier 1	N/A	N/A	1-Apr-18
MITIGO SOLN 10MG/ML	Tier 1	N/A	N/A	1-Sep-18
MITIGO SOLN 25MG/ML	Tier 1	N/A	N/A	1-Sep-18
moxifloxacin hydrochloride soln 0.5%	Tier 1	N/A	N/A	1-Apr-18
mulpleta 3mg tabs	Tier 1 & PA	N/A	N/A	1-Oct-18
mutamycin solr 20mg	Tier 1	N/A	N/A	1-Apr-18
mutamycin solr 40mg	Tier 1	N/A	N/A	1-Apr-18
mutamycin solr 5mg	Tier 1	N/A	N/A	1-Apr-18
NEVANAC 0.1% SUSP	Tier 1 & ST	N/A	N/A	1-Oct-18
NIVESTYM 300MCG/0.5ML	Tier 1 & ST	N/A	N/A	1-Oct-18
NIVESTYM 480MCG/0.8ML	Tier 1 & ST	N/A	N/A	1-Oct-18
nolix cre 0.05%	Tier 1	N/A	N/A	1-Mar-18
NORVIR PACK 100MG	Tier 1	N/A	N/A	1-Jul-18
NUCALA SOLR 100MG	Tier 1 & PA & QL 3/28	N/A	N/A	1-Apr-18
NUPLAZID CAPS 34MG	Tier 1 & PA & QL 30/30	N/A	N/A	1-Sep-18
NUPLAZID TAB 10MG	Tier 1 & PA & QL 30/30	N/A	N/A	1-Sep-18
nutrilyte conc 2.03meq/ml; 0.25meq/ml; 1.68meq/ml; 0.25meq/ml; 0.4meq/ml; 2.03meq/ml; 1.25meq	Tier 1	N/A	N/A	1-May-18
okebo caps 75mg	Tier 1	N/A	N/A	1-Apr-18
okebo caps 100mg	Tier 1	N/A	N/A	1-Mar-18
OLUMIANT TAB 2MG	Tier 1 & PA	N/A	N/A	1-Sep-18
OLUMIANT TABS 2MG	Tier 1 & PA	N/A	N/A	1-Jul-18
omnipod	Tier 1 & QL 30/30	N/A	N/A	1-Oct-18
omnipod 5 pack	Tier 1 & QL 30/30	N/A	N/A	1-Oct-18
omnipod dash system kit	Tier 1 & QL 1/365	N/A	N/A	1-Oct-18

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omnipod starter kit	Tier 1 & QL 1/365	N/A	N/A	1-Oct-18
ONPATTRO 10MG/5ML SOLN	Tier 1 & PA	N/A	N/A	1-Oct-18
OPDIVO SOLN 240MG/24ML	Tier 1 & PA	N/A	N/A	1-Mar-18
ORKAMBI 125MG; 100MG PK	Tier 1 & PA & QL 56/28	N/A	N/A	1-Oct-18
oxacillin sodium inj 1gm	Tier 1	N/A	N/A	1-Sep-18
oxacillin solr 1gm	Tier 1	N/A	N/A	1-Aug-18
palonosetron hydrochloride 0.25mg/5ml	Tier 1	N/A	N/A	1-Oct-18
PALONOSETRON HYDROCHLORIDE SOLN 0.25MG/2ML	Tier 1	N/A	N/A	1-May-18
palonosetron hydrochloride soln 0.25MG/5ML	Tier 1	N/A	N/A	1-May-18
PERSERIS 120MG	Tier 1	N/A	N/A	1-Oct-18
PERSERIS 90MG	Tier 1	N/A	N/A	1-Oct-18
phenylephrine hydrochloride inj 10mg/ml	Tier 1	N/A	N/A	1-Jul-18
polocaine soln 1%	Tier 1	N/A	N/A	1-May-18
polocaine soln 2%	Tier 1	N/A	N/A	1-May-18
polocaine-mpf soln 1%	Tier 1	N/A	N/A	1-May-18
polocaine-mpf soln 1.5%	Tier 1	N/A	N/A	1-May-18
polocaine-mpf soln 2%	Tier 1	N/A	N/A	1-May-18
potassium chloride proamp 2meq/ml soln	Tier 1	N/A	N/A	1-Oct-18
poteligeo 20mg/5ml soln	Tier 1 & PA	N/A	N/A	1-Oct-18
praziquantel tabs 600mg	Tier 1	N/A	N/A	1-Jun-18
prednisolone acetate p-f susp 1%	Tier 1	N/A	N/A	1-Jul-18
PREVMIS SOLN 240MG/12ML	Tier 1	N/A	N/A	1-Mar-18
PREVMIS SOLN 480MG/24ML	Tier 1	N/A	N/A	1-Mar-18
PREVMIS TABS 240MG	Tier 1	N/A	N/A	1-Mar-18
PREVMIS TABS 480MG	Tier 1	N/A	N/A	1-Mar-18
PRO COMFORT INSULIN SYRINGES/0.5ML/30G X 1/2"	Tier 1 & QL 200/30	N/A	N/A	1-May-18
PRO COMFORT INSULIN SYRINGES/0.5ML/30G X 5/16"	Tier 1 & QL 200/30	N/A	N/A	1-May-18

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PRO COMFORT INSULIN SYRINGES/0.5ML/31G X 5/16"	Tier 1 & QL 200/30	N/A	N/A	1-May-18
PRO COMFORT INSULIN SYRINGES/1ML/30G X 1/2"	Tier 1 & QL 200/30	N/A	N/A	1-May-18
PRO COMFORT INSULIN SYRINGES/1ML/30G X 5/16"	Tier 1 & QL 200/30	N/A	N/A	1-May-18
PRO COMFORT INSULIN SYRINGES/1ML/31G X 5/16"	Tier 1 & QL 200/30	N/A	N/A	1-May-18
PROLASTIN-C SOLN 1000MG/20ML	Tier 1 & PA	N/A	N/A	1-May-18
PROLENSA 0.07% SOLN	Tier 1 & ST	N/A	N/A	1-Oct-18
QVAR REDIHALER AERB 40MCG/ACT	Tier 1 & QL 21.2GM/30	N/A	N/A	1-Mar-18
QVAR REDIHALER AERB 80MCG/ACT	Tier 1 & QL 21.2GM/30	N/A	N/A	1-Mar-18
ranitidine hydrochloride 150mg/6ml soln	Tier 1	N/A	N/A	1-Oct-18
relexxii tab 72mg	Tier 1 & PA & QL 30/30 & AL max 18Y	N/A	N/A	1-Aug-18
RHOPRESSA 0.02% SOLN	Tier 1 & QL 2.5ML/25	N/A	N/A	1-Oct-18
ritonavir tabs 100mg	Tier 1	N/A	N/A	1-May-18
romidepsin inj 10mg	Tier 1 & PA	N/A	N/A	1-Mar-18
roweepra xr tb24 500mg	Tier 1	N/A	N/A	1-Mar-18
roweepra xr tb24 750mg	Tier 1	N/A	N/A	1-Mar-18
ROXYBOND TAB 15MG	Tier 1	N/A	N/A	1-Aug-18
ROXYBOND TAB 30MG	Tier 1	N/A	N/A	1-Aug-18
SIGNIFOR LAR 10MG	Tier 1 & PA & QL 1/28	N/A	N/A	1-Oct-18
SIGNIFOR LAR 30MG	Tier 1 & PA & QL 1/28	N/A	N/A	1-Oct-18
SIMBRINZA 0.2% ; 1% SUSP	Tier 1 & ST	N/A	N/A	1-Oct-18
sodium bicarbonate/dextrose soln 5% 150meq/ml	Tier 1	N/A	N/A	1-Aug-18
sotalol hydrochloride tabs 120mg	Tier 1	N/A	N/A	1-Jun-18
SPIRIVA RESPIMAT 2.5MCG/ACT AERS	Tier 1 & ST & QL 4GM/30	N/A	N/A	1-Oct-18
STIOLTO RESPIMAT 2.5MCG/ACT AERS	Tier 1 & QL 4GM/30	N/A	N/A	1-Oct-18
subvenite starter kit/blue kit	Tier 1	N/A	N/A	1-Jul-18
subvenite starter kit/green kit	Tier 1	N/A	N/A	1-Jul-18

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subvenite starter kit/orange kit	Tier 1	N/A	N/A	1-Jul-18
subvenite tabs 100mg	Tier 1	N/A	N/A	1-Jul-18
subvenite tabs 150mg	Tier 1	N/A	N/A	1-Jul-18
subvenite tabs 200mg	Tier 1	N/A	N/A	1-Jul-18
subvenite tabs 25mg	Tier 1	N/A	N/A	1-Jul-18
succinylcholine chloride soln 20mg/ml	Tier 1	N/A	N/A	1-Sep-18
sumatriptan/naproxen sodium tabs 500mg; 85mg	Tier 1 & QL 9/30	N/A	N/A	1-Apr-18
SYMDEKO TBPK 150MG; 100MG	Tier 1 & PA & QL 56/28	N/A	N/A	1-Apr-18
SYMFI LO TABS 400MG; 300MG; 300MG	Tier 1 & QL 30/30	N/A	N/A	1-May-18
SYMFI TABS 600MG; 300MG; 300MG	Tier 1 & QL 30/30	N/A	N/A	1-Jun-18
SYMTUZA TABS 150MG; 800MG; 200MG; 10MG	Tier 1 & QL 30/30	N/A	N/A	1-Sep-18
tadalafil 20mg tabs	Tier 1 & PA & QL 60/30	N/A	N/A	1-Oct-18
TAKHZYRO 300MG/2ML SOLN	Tier 1 & PA	N/A	N/A	1-Oct-18
TAMIFLU CAPS 30MG	Tier 1 & QL 112/365	N/A	N/A	1-Mar-18
TAMIFLU CAPS 45MG	Tier 1 & QL 60/365	N/A	N/A	1-Mar-18
TAMIFLU CAPS 75MG	Tier 1 & QL 110/365	N/A	N/A	1-Mar-18
TASIGNA CAPS 50MG	Tier 1 & PA	N/A	N/A	1-May-18
TAVALISSE TABS 100MG	Tier 1 & PA & QL 60/30	N/A	N/A	1-Aug-18
TAVALISSE TABS 150MG	Tier 1 & PA & QL 60/30	N/A	N/A	1-Aug-18
temsirolimus 25mg/ml soln	Tier 1	N/A	N/A	1-Oct-18
THYROGEN 1.1MG SOLR	Tier 1 & PA	N/A	N/A	1-Oct-18
tiagabine hydrochloride tabs 12mg	Tier 1	N/A	N/A	1-May-18
tiagabine hydrochloride tabs 16mg	Tier 1	N/A	N/A	1-May-18
TIBSOVO TABS 250MG	Tier 1 & PA & QL 60/30	N/A	N/A	1-Sep-18
timolol maleate soln 0.5%	Tier 1	N/A	N/A	1-Mar-18
TOUJEO MAX SOLOSTAR INJ 300UNIT/ML	Tier 1	N/A	N/A	1-Jul-18
tramadol hcl er tb24 100mg	Tier 1	N/A	N/A	1-Mar-18

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tramadol hcl er tb24 200mg	Tier 1	N/A	N/A	1-Mar-18
tramadol hcl er tb24 300mg	Tier 1	N/A	N/A	1-Mar-18
TRAVATAN Z 0.004% SOLN	Tier 1 & ST & QL 2.5ML/25	N/A	N/A	1-Oct-18
TRELEGY ELLIPTA 100MCG/INH; 62.5MCG/INH; 25MCG/INH	Tier 1 & QL 60/30	N/A	N/A	1-Sep-18
TRESIBA FLEXTOUCH INJ 100UNIT/ML	Tier 1	N/A	N/A	1-Jun-18
TRESIBA FLEXTOUCH INJ 200UNIT/ML	Tier 1	N/A	N/A	1-Jun-18
triamcinolone acetonide inj 40mg/ml	Tier 1	N/A	N/A	1-Mar-18
trientine hydrochloride caps 250mg	Tier 1	N/A	N/A	1-Apr-18
tri-mili tabs	Tier 1	N/A	N/A	1-Aug-18
TRISENOX SOLN 12MG/6ML	Tier 1	N/A	N/A	1-Mar-18
tri-vylibra tabs	Tier 1	N/A	N/A	1-Jul-18
TROGARZO SOLN 200MG/1.33ML	Tier 1	N/A	N/A	1-May-18
tydemy tabs 3mg; 0.03mg; 0.451mg	Tier 1	N/A	N/A	1-May-18
vancomycin hydrochloride 250mg solr	Tier 1	N/A	N/A	1-Oct-18
vancomycin hydrochloride 750mg solr	Tier 1	N/A	N/A	1-Oct-18
VIDEX EC CPDR 125MG	Tier 1	N/A	N/A	1-May-18
vigadrone pack 500mg	Tier 1	N/A	N/A	1-Aug-18
VIRAMUNE SUSP 50MG/5ML	Tier 1	N/A	N/A	1-Jun-18
VIVITROL SUSR 380MG	Tier 1	N/A	N/A	1-Mar-18
vylibra tabs 35mcg; 0.25mg	Tier 1	N/A	N/A	1-Jul-18
XELJANZ 10MG TABS	Tier 1 & PA	N/A	N/A	1-Oct-18
XELJANZ 10MG TABS	Tier 1 & PA	N/A	N/A	1-Oct-18
XELJANZ TABS 10MG	Tier 1 & PA	N/A	N/A	1-Aug-18
XTAMPZA ER C12A 13.5MG	Tier 1	N/A	N/A	1-May-18
XTAMPZA ER C12A 18MG	Tier 1	N/A	N/A	1-May-18
XTAMPZA ER C12A 27MG	Tier 1	N/A	N/A	1-May-18
XTAMPZA ER C12A 36MG	Tier 1	N/A	N/A	1-May-18

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XTAMPZA ER C12A 9MG	Tier 1	N/A	N/A	1-May-18
YONSA TABS 125MG	Tier 1 & PA	N/A	N/A	1-Sep-18
ZENPEP CPEP 105000UNIT; 25000UNIT; 79000UNIT	Tier 1	N/A	N/A	1-Apr-18
ZENPEP CPEP 14000UNIT; 3000UNIT; 10000UNIT	Tier 1	N/A	N/A	1-Oct-18
ZENPEP CPEP 168000UNIT; 40000UNIT; 126000UNIT	Tier 1	N/A	N/A	1-Mar-18
ZENPEP CPEP 24000UNIT; 5000UNIT; 17000UNIT	Tier 1	N/A	N/A	1-Apr-18
ZENPEP CPEP 42000UNIT; 10000UNIT; 32000UNIT	Tier 1	N/A	N/A	1-Jun-18
ZENPEP CPEP 63000UNIT; 15000UNIT; 47000UNIT	Tier 1	N/A	N/A	1-Oct-18

