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

Key
Tier: Tier 1=Preferred Generics, Tier 2=Preferred Brands, Tier 3=Non-Preferred Brands, Tier 4=Specialty, NF=Non-Formulary
Formulary Edits: QL=Quantity Limit, QvT=Quantity Limit over Time, PA=Prior Authorization, ST=Step Therapy, AL=Age Limit,
PV= HDHP Preventive Drugs, ACA= ACA Preventive Drugs, SF= Split Fill Drugs

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

2025 Formulary Changes			
Therapeutic Class	**Medication**	**Formulary Changes**	**Effective Date**
Antipsychotics	FANAPT TITRATION PACK B 1 & 2 & 6 & 8 MG	NF --> Tier 3 (Non-Preferred Brand), QLC (12/180 days)	8/1/2025
Antipsychotics	FANAPT TITRATION PACK C 1 & 2 & 6 MG	NF --> Tier 3 (Non-Preferred Brand), QLC (8/180 days)	8/1/2025
Congenital Adrenal Hyperplasia (CAH) Agents	CRENESSITY 100MG CAPSULE	NF --> Tier 4 (Specialty), PA, QL (60/30 days)	8/1/2025
Congenital Adrenal Hyperplasia (CAH) Agents	CRENESSITY 50 MG CAPSULE	NF --> Tier 4 (Specialty), PA, QL (60/30 days)	8/1/2025
Congenital Adrenal Hyperplasia (CAH) Agents	CRENESSITY 50MG/ ML SOLUTION	NF --> Tier 4 (Specialty), PA, QL (120/30 days)	8/1/2025
Familial Chylomicronemia Syndrome (FCS) Agents	TRYNGOLZA 80MG/0.8 INJECTION	NF --> Tier 4 (Specialty), PA, QL (0.8/28 days)	8/1/2025
Oncology	REVUFORJ 25 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (240/30 days)	8/1/2025

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Therapeutic Class	**Medication**	**Formulary Changes**	**Effective Date**
Antivirals	APRETUDE 600MG ER	Tier X -> Tier 2 (Preferred Brand) Addition to ACA Removal of Specialty Drug	2/1/2025
Gastrointestinal Agents	IQIRVO 80MG	Tier X -> Tier 5 (Specialty) Addition of PA Addition of QL (30 / 30) Addition of Specialty Drug	2/1/2025
Neuromuscular Agents	DUVYZAT 8.86 MG	Tier X -> Tier 5 (Specialty) Addition of PA Addition of QL (420 / 30) Addition of Specialty Drug	2/1/2025
Respiratory Tract/ Pulmonary Agents	AIRSUPRA 90-80 MCG	Tier X -> Tier 2 (Preferred Brand)	2/1/2025
Anti-cytomegalovirus (CMV) Agents	PREVYMIS 120 MG PACKET	NF-> Tier 3 (Non-Preferred Brand) Addition of QvT (800 / 365 days)	3/1/2025
Anti-cytomegalovirus (CMV) Agents	PREVYMIS 20 MG PACKET	NF -> Tier 3 (Non-Preferred Brand) Addition of QvT (800 / 365 days)	3/1/2025
Anticonvulsants	TOPIRAMATE 50 MG SPRINKLE CAPSULE	NF -> Tier 3 (Non-Preferred Brand)	3/1/2025
Antineoplastics	mesna 400 mg tablet	NF -> Tier 1 (Generics)	3/1/2025
Cardiovascular Agents	NIMODIPINE 60 MG/20 ML SOLUTION	NF -> Tier 3 (Non-Preferred Brand)	3/1/2025

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Therapeutic Class	**Medication**	**Formulary Changes**	**Effective Date**
Estrogens	SAFYRAL 3-0.03-0.451 MG TABLET	NF -> Tier 3 (Non-Preferred Brand)	3/1/2025
Gastrointestinal Agents	esomeprazole 2.5 mg packet	NF -> Tier 1 (Generics) Addition of QL (30 / 30 days)	3/1/2025
Gastrointestinal Agents	esomeprazole 5 mg packet	NF -> Tier 1 (Generics) Addition of QL (30 / 30 days)	3/1/2025
Hemostasis Agents	ESPEROCT 4000 UNIT RECON SOLUTION	NF -> Tier 4 (Specialty) Addition of PA	3/1/2025
Hemostasis Agents	JIVI 4000 UNIT RECON SOLUTION	NF -> Tier 4 (Specialty) Addition of PA	3/1/2025
Immunological Agents	SIMLANDI 20 MG/0.2 ML PREFILLED SYRINGE KIT	NF -> Tier 4 (Specialty) Addition of PA Addition of QL (2 / 28 days)	3/1/2025
Immunological Agents	SIMLANDI 80 MG/0.8 ML PREFILLED SYRINGE KIT	NF -> Tier 4 (Specialty) Addition of PA Addition of QL (2 / 28 days)	3/1/2025
Antidepressants	fluoxetine 10 mg tablet	NF --> Tier 1 (Generics) Addition of QL (30/30 days)	4/1/2025
Antidepressants	fluoxetine 20 mg tablet	NF --> Tier 1 (Generics) Addition of QL (120/30 days)	4/1/2025

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Therapeutic Class	**Medication**	**Formulary Changes**	**Effective Date**
Antidiabetic Agents	RYBELSUS 1.5 MG TABLET	NF --> Tier 2 (Preferred Brands) Addition of PA Addition of QvT (30/180 days)	4/1/2025
Antidiabetic Agents	RYBELSUS 4 MG TABLET	NF --> Tier 2 (Preferred Brands) Addition of PA Addition of QL (30/30 days)	4/1/2025
Antidiabetic Agents	RYBELSUS 9 MG TABLET	NF --> Tier 2 (Preferred Brands) Addition of PA Addition of QL (30/30 days)	4/1/2025
Antidiabetic Agents	SOLIQUA 100-33 UNIT-MCG/ML SOLUTION PEN	Removal of ST	4/1/2025
Antidiabetic Agents	XULTOPHY 100-3.6 UNIT-MG/ML SOLUTION PEN	Removal of ST	4/1/2025
Antineoplastics	LAZCLUZE 240 MG TABLET	NF --> Tier 4 (Specialty) Addition of PA Addition of QL (30/30 days)	4/1/2025
Antineoplastics	LAZCLUZE 80 MG TABLET	NF --> Tier 4 (Specialty) Addition of PA Addition of QL (60/30 days)	4/1/2025
Antineoplastics	VORANIGO 10 MG TABLET	NF --> Tier 4 (Specialty) Addition of PA Addition of QL (60/30 days)	4/1/2025

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Antineoplastics	VORANIGO 40 MG TABLET	NF --> Tier 4 (Specialty) Addition of PA Addition of QL (30/30 days)	4/1/2025
Antiparkinson Agents	GOCOVRI 137 MG ER CAPSULE	Removal of PA Removal of QL	4/1/2025
Antiparkinson Agents	GOCOVRI 68.5 MG ER CAPSULE	Removal of PA Removal of QL	4/1/2025
Antiparkinson Agents	OSMOLEX 129 MG & 193 MG TABLET THERAPY PACK	Removal of PA Removal of QL	4/1/2025
Antiparkinson Agents	OSMOLEX 129 MG ER TABLET	Removal of PA Removal of QL	4/1/2025
Antiparkinson Agents	OSMOLEX 193 MG ER TABLET	Removal of PA Removal of QL	4/1/2025
Dermatological Agents	LITFULO 50 MG CAPSULE	NF --> Tier 4 (Specialty) Addition of PA Addition of QL (28/28 days)	4/1/2025
Genetic, Enzyme, or Protein Disorders	LIVMARLI 19MG/ML SOLUTION	NF --> Tier 4 (Specialty) Addition of PA Addition of Specialty Drug	4/1/2025
Immunological Agents	ADALIMUMAB-ADAZ 20 MG/0.2 ML PREFILLED SYRINGE	NF --> Tier 4 (Specialty) Addition of PA Addition of QL (2/28 days)	4/1/2025
Immunological Agents	ADALIMUMAB-ADAZ 80 MG/0.8 ML AUTOINJECTOR PEN	NF --> Tier 4 (Specialty) Addition of PA Addition of QL (2/28 days)	4/1/2025
Immunological Agents	AURANOFIN 3 MG TABLET	NF --> Tier 3 (Non-Preferred Brands)	4/1/2025

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Therapeutic Class	**Medication**	**Formulary Changes**	**Effective Date**
Immunological Agents	OTREXUP AUTOINJECTOR (all strengths)	Removal of ST	4/1/2025
Immunological Agents	PALFORZIA INITIAL DOSE 1-3 YRS 0.5 & 1 & 1.5 & 3 MG CAPSULE SPRINKLE PACK	NF --> Tier 4 (Specialty) Addition of PA Addition of QvT (7/180 days)	4/1/2025
Immunological Agents	RASUVO AUTOINJECTOR (all strengths)	Removal of ST	4/1/2025
Immunological Agents	REDITREX PREFILLED SYRINGE (all strengths)	Removal of ST	4/1/2025
Insulin Pumps	ILET INSULIN INFUSION PUMP	NF --> Tier 2 (Preferred Brands) Addition of PA Addition of QL (1 / 720 days)	4/1/2025
Insulin Pumps	ILET INSULIN PUMP	NF --> Tier 2 (Preferred Brands) Addition of PA Addition of QL (1 / 720 days)	4/1/2025
Insulin Pumps	TWIIST REFILL KIT	NF --> Tier 2 (Preferred Brands) Addition of PA Addition of QL (1 / 720 days)	4/1/2025
Insulin Pumps	TWIIST REFILL KIT/ INFUSION SET	NF --> Tier 2 (Preferred Brands) Addition of PA Addition of QL (1 / 720 days)	4/1/2025

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Therapeutic Class	**Medication**	**Formulary Changes**	**Effective Date**
Insulin Pumps	TWIIST STARTER KIT	NF --> Tier 2 (Preferred Brands) Addition of PA Addition of QL (30/30 days)	4/1/2025
Multiple Sclerosis Agents	AMPYRA 10 MG ER TABLET	Removal of PA Removal of QL	4/1/2025
Multiple Sclerosis Agents	dalfampridine 10 mg ER tablet	Removal of PA Removal of QL	4/1/2025
Nasal Antiepileptics	NAYZILAM 5 MG/0.1 ML NASAL SPRAY	Removal of QL	4/1/2025
Nasal Antiepileptics	VALTOCO NASAL SPRAY (all strengths)	Removal of QL	4/1/2025
Nasal Inhalers	azelastine 0.1% (137 mcg/spray) nasal spray	Removal of QL	4/1/2025
Nasal Inhalers	fluticasone propionate 50 mcg/act nasal suspension	Removal of QL	4/1/2025
Nasal Inhalers	ipratropium 0.03% (21 mcg/spray) nasal solution	Removal of QL	4/1/2025
Nasal Inhalers	ipratropium 0.06% (42 mcg/spray) nasal solution	Removal of QL	4/1/2025
Nasal Inhalers	olopatadine 0.6% solution	Removal of QL	4/1/2025
Oral Immunotherapy Agents	GRASTEK 2800 BAU SUBLINGUAL TABLET	Removal of PA Removal of QL	4/1/2025

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Oral Immunotherapy Agents	ODACTRA 12 SQ-HDM SUBLINGUAL TABLET	Removal of PA Removal of QL	4/1/2025
Oral Immunotherapy Agents	ORALAIR 100 IR SUBLINGUAL TABLET CHILDRENS STARTER PACK	Removal of PA Removal of QL	4/1/2025
Oral Immunotherapy Agents	ORALAIR 300 IR SUBLINGUAL TABLET	Removal of PA Removal of QL	4/1/2025
Oral Immunotherapy Agents	ORALAIR 300 IR SUBLINGUAL TABLET ADULT STARTER PACK	Removal of PA Removal of QL	4/1/2025
Oral Immunotherapy Agents	RAGWITEK 12 AMB A 1-U SUBLINGUAL TABLET	Removal of PA Removal of QL	4/1/2025
Platelet Modifying Agents	OXBRYTA 300 MG TABLET	Removal of PA Removal of QL	4/1/2025
Platelet Modifying Agents	OXBRYTA 300 MG TABLET FOR ORAL SUSPENSION	Removal of PA Removal of QL	4/1/2025
Platelet Modifying Agents	OXBRYTA 500 MG TABLET	Removal of PA Removal of QL	4/1/2025
Spinal Muscular Atrophy Agents	EVRYSDI 5 MG TABLET	NF --> Tier 4 (Specialty) Addition of PA Addition of QL (30/30 days)	4/1/2025
Antivirals	KALETRA 400-100 MG/5 ML SOLUTION	NF --> Tier 2 (Preferred Brands), QL (480/30 days)	5/1/2025

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Blood Products and Modifiers	SEVENFACT 2 MG RECON SOLN	NF --> Tier 4 (Specialty), PA	5/1/2025
Genetic, Enzyme, or Protein Disorders	AQNEURSA 1 GM PACKET	NF --> Tier 4 (Specialty), PA, QL (120/30 days)	5/1/2025
Hormonal Agents, Stimulant/ Replacement/ Modifying (Thyroid)	YORVIPATH 168 MCG/0.56 ML SOLUTION PEN	NF --> Tier 4 (Specialty), PA, QL (1.12/28 days)	5/1/2025
Hormonal Agents, Stimulant/ Replacement/ Modifying (Thyroid)	YORVIPATH 294 MCG/0.98 ML SOLUTION PEN	NF --> Tier 4 (Specialty), PA, QL (1.96/28 days)	5/1/2025
Hormonal Agents, Stimulant/ Replacement/ Modifying (Thyroid)	YORVIPATH 420 MCG/1.4 ML SOLUTION PEN	NF --> Tier 4 (Specialty), PA, QL (2.8/28 days)	5/1/2025
Immunological Agents	ADALIMUMAB-ADAZ 10 MG/0.1 ML PREFILLED SYRINGE	NF --> Tier 4 (Specialty), PA, QL (0.2/28 days)	5/1/2025
Immunological Agents	SIMLANDI (1 PEN) 80 MG/0.8 ML AUTO-INJECTOR KIT	NF --> Tier 4 (Specialty), PA, QL (2/28 days)	5/1/2025
Immunological Agents	TREMFYA CROHNS INDUCTION 200 MG/2 ML AUTO-INJECTOR	NF --> Tier 4 (Specialty), PA, QLC (12/180 days), AL (at least 18 years old)	5/1/2025
Anticonvulsants	eslicarbazepine 200 mg tablet	NF -> Tier 1 (Generics)	6/1/2025
Anticonvulsants	eslicarbazepine 400 mg tablet	NF -> Tier 1 (Generics)	6/1/2025
Anticonvulsants	eslicarbazepine 600 mg tablet	NF -> Tier 1 (Generics)	6/1/2025

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Anticonvulsants	eslicarbazepine 800 mg tablet	NF -> Tier 1 (Generics)	6/1/2025
Antiparkinson Agents	VYALEV 12-240 MG/ ML SOLUTION	NF -> Tier 4 (Specialty)	6/1/2025
Antipruritic	LIVMARLI 10 MG TABLET	NF -> Tier 4 (Specialty), PA	6/1/2025
Antipruritic	LIVMARLI 15 MG TABLET	NF -> Tier 4 (Specialty), PA	6/1/2025
Antipruritic	LIVMARLI 20 MG TABLET	NF -> Tier 4 (Specialty), PA	6/1/2025
Antipruritic	LIVMARLI 30 MG TABLET	NF -> Tier 4 (Specialty), PA	6/1/2025
Antivirals	PAXLOVID 6 x 150 MG & 5 x 100MG TAB THERAPY PACK	NF -> Tier 2 (Preferred Brands), QLC (11/30 days)	6/1/2025
Antivirals	SUNLENCA 300 MG TABLET	NF -> Tier 4 (Specialty), QLC (4/365 days)	6/1/2025
Blood Products and Modifiers	ticagrelor 60 mg tablet	NF -> Tier 1 (Generics)	6/1/2025
Blood Products and Modifiers	ticagrelor 90 mg tablet	NF -> Tier 1 (Generics)	6/1/2025
Diabetic Supplies	EASY COMFORT INSULIN SYRINGE 29G X 5/16" 0.5 ML	NF -> Tier 2 (Preferred Brands)	6/1/2025
Diabetic Supplies	EASY COMFORT INSULIN SYRINGE 29G X 5/16" 1 ML	NF -> Tier 2 (Preferred Brands)	6/1/2025
Diabetic Supplies	EASY COMFORT PEN NEEDLES 29G X 4MM	NF -> Tier 2 (Preferred Brands)	6/1/2025

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Diabetic Supplies	EASY COMFORT PEN NEEDLES 29G X 5MM	NF -> Tier 2 (Preferred Brands)	6/1/2025
Immunological Agents	ADALIMUMAB-AATY CD/UC/HS 80 MG/0.8ML AUTO-INJECTOR STARTER KIT	NF -> Tier 4 (Specialty), PA, QLC (3/180 days)	6/1/2025
Anticonvulsants	perampanel 10 mg tablet	NF --> Tier 1 (Generic)	7/1/2025
Anticonvulsants	perampanel 12 mg tablet	NF --> Tier 1 (Generic)	7/1/2025
Anticonvulsants	perampanel 2 mg tablet	NF --> Tier 1 (Generic)	7/1/2025
Anticonvulsants	perampanel 4 mg tablet	NF --> Tier 1 (Generic)	7/1/2025
Anticonvulsants	perampanel 6 mg tablet	NF --> Tier 1 (Generic)	7/1/2025
Anticonvulsants	perampanel 8 mg tablet	NF --> Tier 1 (Generic)	7/1/2025
Antihypertensive Agents	methyldopa 250 mg tablet	Tier 3 (Non-Preferred Brand) --> Tier 1 (Generic)	7/1/2025
Antinarcoleptic Agents	WAKIX 17.8 MG TABLET	NF --> Tier 4 (Specialty), PA QL (60/30 days)	7/1/2025
Antinarcoleptic Agents	WAKIX 4.45 MG TABLET	NF --> Tier 4 (Specialty), PA QL (60/30 days)	7/1/2025
Antineoplastics	nilotinib 150 mg capsule	NF --> Tier 4 (Specialty), PA QL (120/30 days)	7/1/2025
Antineoplastics	nilotinib 200 mg capsule	NF --> Tier 4 (Specialty), PA QL (120/30 days)	7/1/2025

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Antineoplastics	nilotinib 50 mg capsule	NF --> Tier 4 (Specialty), PA QL (120/30 days)	7/1/2025
Antivirals	EDURANT PED 2.5 MG TABLET FOR SUSPENSION	NF --> Tier 3 (Non-Preferred Brand), QL (180/30 DAYS)	7/1/2025
Antivirals	emtricitab-rilpivir-tenofov df 200-25-300 mg tablet	NF --> Tier 1 (Generic)	7/1/2025
ATTR-CM Agents	ATTRUBY 356 MG TABLET PACK	NF --> Tier 4 (Specialty), PA, QL (112/28 days)	7/1/2025
Blood Products and Modifiers	eltrombopag 12.5 mg powder	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	7/1/2025
Blood Products and Modifiers	eltrombopag 12.5 mg tablet	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	7/1/2025
Blood Products and Modifiers	eltrombopag 25 mg powder	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	7/1/2025
Blood Products and Modifiers	eltrombopag 25 mg tablet	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	7/1/2025
Blood Products and Modifiers	eltrombopag 50 mg tablet	NF --> Tier 4 (Specialty), PA, QL (60/30 days)	7/1/2025
Blood Products and Modifiers	eltrombopag 75 mg tablet	NF --> Tier 4 (Specialty), PA, QL (60/30 days)	7/1/2025
Contraceptives	galbriela 0.8-25 mg-mcg chew tablet	NF --> Tier 1 (Generic)	7/1/2025
Dermatological Agents	EBGLYSS 250 MG/2ML SOLN A-INJ	NF --> Tier 4 (Specialty), PA, QL (2/28 days)	7/1/2025

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Dermatological Agents	EBGLYSS 250 MG/2ML SOLN PRSYR	NF --> Tier 4 (Specialty), PA, QL (2/28 days)	7/1/2025
Dermatological Agents	NEMLUVIO 30 MG A-INJ	NF --> Tier 4 (Specialty), PA QL (2/28 days)	7/1/2025
Hematological Agents	FONDAPARINUX 10 MG/0.8 ML SOLUTION	QLC (72/90 days)	7/1/2025
Hematological Agents	FONDAPARINUX 2.5 MG/0.5 ML SOLUTION	QLC (45/90 days)	7/1/2025
Hematological Agents	FONDAPARINUX 5 MG/0.4 ML SOLUTION	QLC (36/90 days)	7/1/2025
Hematological Agents	FONDAPARINUX 7.5 MG/0.6 ML SOLUTION	QLC (54/90 days)	7/1/2025
Hematological Agents	FRAGMIN 10000 UNIT/4ML SOLUTION	QLC (720/90 days)	7/1/2025
Hematological Agents	FRAGMIN 10000 UNIT/ML SOLN PRSYR	QLC (180/90 days)	7/1/2025
Hematological Agents	FRAGMIN 12500 UNIT/0.5ML SOLN PRSYR	QLC (90/90 days)	7/1/2025
Hematological Agents	FRAGMIN 15000 UNIT/0.6ML SOLN PRSYR	QLC (108/90 days)	7/1/2025
Hematological Agents	FRAGMIN 18000 UNT/0.72ML SOLN PRSYR	QLC (129.6/90 days)	7/1/2025

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Hematological Agents	FRAGMIN 2500 UNIT/0.2ML SOLN PRSYR	QLC (36/90 days)	7/1/2025
Hematological Agents	FRAGMIN 5000 UNIT/0.2ML SOLN PRSYR	QLC (36/90 days)	7/1/2025
Hematological Agents	FRAGMIN 7500 UNIT/0.3ML SOLN PRSYR	QLC (54/90 days)	7/1/2025
Hematological Agents	HYMPAVZI 150 MG/ ML SOLN A-INJ	NF --> Tier 4 (Specialty), PA	7/1/2025
Immunological Agents	SELARSDI 45 MG/0.5ML SOLN PRSYR	NF --> Tier 4 (Specialty), PA, QL (0.5/84 days)	7/1/2025
Immunological Agents	SELARSDI 90 MG/ ML SOLN PRSYR	NF --> Tier 4 (Specialty), PA, QL (1/56 days)	7/1/2025
Immunological Agents	STEQEYMA 45 MG/0.5ML SOLN PRSYR	NF --> Tier 4 (Specialty), PA, QL (0.5/84 days)	7/1/2025
Immunological Agents	STEQEYMA 90 MG/ ML SOLN PRSYR	NF --> Tier 4 (Specialty), PA, QL (1/56 days)	7/1/2025
Immunological Agents	YESINTEK 45 MG/0.5ML SOLN PRSYR	NF --> Tier 4 (Specialty), PA, QL (0.5/84 days)	7/1/2025
Immunological Agents	YESINTEK 45 MG/0.5ML SOLUTION	NF --> Tier 4 (Specialty), PA, QL (0.5/84 days)	7/1/2025
Immunological Agents	YESINTEK 90 MG/ ML SOLN PRSYR	NF --> Tier 4 (Specialty), PA, QL (1/56 days)	7/1/2025
Oncology	ITOVEBI 3 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (56/28 days)	7/1/2025

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Oncology	ITOVEBI 9 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (28/28 days)	7/1/2025
Oncology	REVUFORJ 110 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (120/30 days)	7/1/2025
Oncology	REVUFORJ 160 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (60/30 days)	7/1/2025
Primary Biliary Cholangitis	LIVDELZI 10 MG CAPSULE	NF --> Tier 4 (Specialty), PA QL (30/30 days)	7/1/2025