

Self-insured

Summary of change lists

2021 Standard Opt-Out with
Advanced Control Specialty Formulary Plan

Standard Opt-Out with Advanced Control Specialty Formulary Plan – January 1, 2021 updates

There will be changes to the Standard Opt-Out with Advanced Control Specialty Formulary Plan drug list that applies to your plan starting January 1, 2021. It's important that you review and understand the changes in the chart below. Talk to your health care provider about how these changes might impact you.

What if I need a prescription drug that requires a medical exception?

You or your prescriber can request a medical exception to the changes in this letter. If you would like to ask for a medical exception, speak directly with your prescriber or you can call us at the toll-free number on your member ID card.

We'll contact you and your prescriber with our decision. If your exception is approved, you only need to pay your plan copay or cost-share. This amount is based on your pharmacy plan design.

How to find a preferred medicine that's right for you

You can visit the website that's on your member ID card and sign into your account.

Key	
UPPERCASE	Brand-name medicine
<i>lowercase italics</i>	Generic medicine

Drugs moving to from non-covered to covered

Disease state	Drug name
Analgesics / Viscosupplements	EUFLEXXA, DUROLANE
Cancer	PHESGO
Endocrine/Human Growth Hormone	NORDITROPIN
Hematologic Agents	ZIEXTENZO, DOPTLET

Drugs moving from non-preferred to preferred (Tier 3 to Tier 2) status

Disease state	Drug name
Anti Parkinson's	INBRIJA
Antidiabetic	LYUMJEV
Cancer	NINLARO, VELCADE, ERIVEDGE, ALECENSA, ALUNBRIG, PERJETA
Cardiovascular	NEXLETOL, NEXLIZET
Contraceptive	ANNOVERA
Multiple Sclerosis	OCREVUS
Ophthalmic Agents	ZIOPTAN
Opioid Analgesics	XTAMPZA
Respiratory Agents	BREZTRI

Drugs moving from preferred to non-preferred (Tier 2 to Tier 3) status

Disease state	Drug name	Alternative(s)
Behavioral Health Disorders	RISPERDAL INJ, RISPERDAL VIAL	ABILIFY MAINTENA, ARISTADA, ARISTADA INITIO

Drugs moving from covered to non-covered (exclusions)

Disease state	Drug name	Alternative(s)
Analgesics / Viscosupplements	VISCO-3, GEL-ONE	DUROLANE, EUFLEXXA, GELSYN-3, SUPARTZ FX
Anti Parkinson's	APOKYN	INBRIJA
Cancer	BORTEZOMIB, KYPROLIS	NINLARO, VELCADE
Endocrine and Metabolic / Acromegaly	SIGNIFOR, SOMAVERT	SOMATULINE DEPOT
Endocrine/Human Growth Hormone	HUMATROPE	NORDITROPIN
Hematologic Agents	NEULASTA, UDENYCA	ZIEXTENZO
Multiple Sclerosis	TECFIDERA	<i>dimethyl fumarate delayed-rel, glatiramer</i> , AUBAGIO, BETASERON, COPAXONE, GILENYA, KESIMPTA, MAYZENT, OCREVUS, REBIF, TYSABRI, VUMERITY, ZEPOSIA
PAH	TRACLEER	<i>ambrisentan, bosentan</i> , OPSUMIT
Respiratory Agents	ARALAST, GLASSIA	PROLASTIN-C

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