Formulary Update

The information contained herein is believed to be accurate at the time of posting, but changes may occur at any time without prior notice. Members should refer to their benefit agreement to understand how changes to non-Formulary status may affect them. For additional information regarding their benefits, members should contact Customer Service at the phone number on their ID card.

Q1 2027 Commercial Drug List Changes

Drug Name	National Direct Preferred Drug List 3 Tier	National Direct Preferred Drug List 4 Tier	National Direct Preferred Drug List 5 Tier	Effective Date
EPCLUSA	Tier 3 → NF	Tier 4 → NF	Tier 4 → NF	1/1/2027
HARVONI	Tier 3 → NF	Tier 4 → NF	Tier 4 → NF	1/1/2027
LEDIPASVIR/SOFOSBUVIR	NF → Tier 3	NF → Tier 4	NF → Tier 4	1/1/2027
SOFOSBUVIR/VELPATASVIR	NF → Tier 3	NF → Tier 4	NF → Tier 4	1/1/2027
VOSEVI	Tier 3 → NF	Tier 4 → NF	Tier 4 → NF	1/1/2027

*Members should refer to their member handbook for benefit details regarding applicable copayments or coinsurance

Please note: Drug list/formulary tier status changes impact commercial members using the National Direct Preferred Drug Lists. The drug tier status changes reflected here do not impact drug coverage for members enrolled in a health insurance exchange or members who have prescription drug coverage through the Affordable Care Act.