

## July 2024 Formulary & Utilization Management Changes

Effective July 1, 2024, there will be an enhancement in coverage of certain medications for Commercial and Healthcare Reform members. The medications outlined in the following table are changing tier, and/or may now require Step Therapy, Prior Authorization or Quantity Limit.

Single-source brand deletions and new Utilization Management requirements for fully-insured members in New York will instead occur upon renewal date.

UPPER CASE= brand name drug

lower case= generic drug

Drug Name	Commercial Comprehensive*	Commercial Core	Commercial National Select	HCR Comprehensive*	HCR Essential
ADVAIR DISKUS			Moving to NF		
CONDYLOX	Moving to Tier 3				
COPAXONE			Moving to NF		
ENDOMETRIN			Moving to NF		
KORLYM		Moving to NF			Moving to NF
LIVALO					Moving to NF
LUPRON DEPOT			Moving to Tier 2		
MYDAYIS	Moving to Tier 3				
ORACIT		Moving to NF			Moving to NF
RECTIV					Moving to NF
RESTASIS	Moving to Tier 3 Adding PA and ST	Adding PA and ST	Adding PA and ST	Moving to Tier 3 Adding PA and ST	Adding PA and ST
RESTASIS MULTIDOSE	Moving to Tier 3 Adding PA and ST	Adding PA and ST	Adding PA and ST	Adding PA and ST	Adding PA and ST
RUBRACA			Moving to NF		
VOTRIENT	Moving to Tier 3	Moving to NF		Moving to Tier 3	Moving to NF
ZEJULA			Moving to NF		

\* Tier 3 generic drugs will have no change on Commercial Comprehensive in DE, and HCR Comprehensive in DE & NY. Tier 3 drugs are NF on Closed formulary.