

EFFECTIVE DATE	ACTION	MEDICATION NAME	STRENGTH	TIER	QUANTITY LIMIT	PRIOR AUTHORIZATION	NOTES
1/1/2020	Change	Methylphenidate LA	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Daytrana	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Methylin oral solution	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Methylphenidate oral solution	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Focalin XR	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Dexmethylphenidate ER	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Aptensio XR	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	ADD	Jornay PM	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Sunos	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Methylphenidate ER tablets(Labeler 10147) generic Concerta	ALL	1			changed the preferred generic labeler
1/1/2020	Change	Butrans	ALL	1		Yes	changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Embeda	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	ADD	fentanyl buccal tablet	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Dsuvia	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Dvorah	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Lortab solution	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Nalocet	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Subsys	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Febuxostat	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Aimovig	ALL	1		Yes	changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Emgality	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	ADD	Ergotamine/caffeine	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Migranal	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Dihydroergotamine	ALL	2		Yes	added to DMMA non-preferred drug list

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1/1/2020	ADD	Migranow	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Tosymra	ALL	2		Step Therapy	added to DMMA non-preferred drug list
1/1/2020	ADD	Rinvoq ER	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Skyrizi	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Diclofenac drops, 1% gel	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	ADD	Inflamacin	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Naprelan	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Suboxone	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Buprenorphine/naloxone film(labeler 00781 and 52427)	ALL	1			changed the preferred generic labeler
1/1/2020	ADD	Probuphine	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	AVC	ALL	2		Step Therapy	added to DMMA non-preferred drug list
1/1/2020	ADD	Posaconazole	ALL	2		Step Therapy	added to DMMA non-preferred drug list
1/1/2020	Change	Efavirenz	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Ritonavir	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Norvir tablets	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Sustiva	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Delstrigo	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Lopinavir-ritonavir oral solution	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	ADD	Temixys	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Zepatier	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	ADD	Valganciclovir	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Cipro	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Nuzyra	ALL	2		Step Therapy	added to DMMA non-preferred drug list
1/1/2020	ADD	Inderal XL	ALL	2		Step Therapy	added to DMMA non-preferred drug list

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1/1/2020	ADD	Innopran XL	ALL	2		Step Therapy	added to DMMA non-preferred drug list
1/1/2020	ADD	Cardizem LA	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Keveyis	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Triamterene	ALL	2		Step Therapy	added to DMMA non-preferred drug list
1/1/2020	ADD	Aldactazide	ALL	2		Step Therapy	added to DMMA non-preferred drug list
1/1/2020	ADD	Symjepi	ALL	1			added to DMMA preferred drug list
1/1/2020	Change	Praluent	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	ADD	Colestid	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Ezallor	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Ambrisentan	ALL	1		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Revatio suspension	ALL	1		Yes	changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Sildenafil suspension	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Letairis	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	ADD	Bosentan	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Uptravi	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Ranexa	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Ranolazine	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Nitrostat	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	nitroglycerin tablets	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	ADD	amitriptyline/chlordiazepoxide	ALL	2		Step Therapy	added to DMMA non-preferred drug list
1/1/2020	Change	Latuda	ALL	1		Step Therapy	changed from DMMA non-preferred agent to preferred agent
1/1/2020	ADD	Vraylar	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Ramelton	ALL	2		Step Therapy	added to DMMA non-preferred drug list
1/1/2020	ADD	Evenity	ALL	2		Yes	added to DMMA non-preferred drug list

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1/1/2020	ADD	Natpara	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Simliya	ALL	1			added to DMMA preferred drug list
1/1/2020	Change	Norethindrone-ethinyl estradiol-Fe	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	ADD	Afirmelle	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Aurovela, Aurovela Fe, Aurovela 24 Fe	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Ayuna	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Kalliga	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Lo-Zumandimine	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Previfem	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Hailey, Hailey 24 Fe	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Jasmiel	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Zumandimine	ALL	1			added to DMMA preferred drug list
1/1/2020	Change	Amethia	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Ashlyna	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Daysee	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Introvale	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	ADD	Seasonique	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Simpesse	ALL	1			added to DMMA preferred drug list
1/1/2020	Change	Camrese/Camrese Lo	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Tilia Fe	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	ADD	Tri-Lo-Mili	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Tri-Mili	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Tri-Vylibra Lo	ALL	1			added to DMMA preferred drug list
1/1/2020	Change	Ozempic	ALL	1		Yes	changed from DMMA non-preferred agent to preferred agent

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1/1/2020	ADD	Rybelsus	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	insulin lispro	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Humalog, Humalog Jr	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Humalog Kwik	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Novolin R	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Novolin N	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Novolin 70/30	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Novolin Flexpen	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Humulin R U-100 vials and pens	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Humulin N vials and pens	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Humulin 70/30 vials and pens	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Humulin R U-500	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Orapred ODT	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	ADD	Dxevo	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Lupaneta Pack	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Doxylamine/pyridoxine	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Scopolamine patch	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	ADD	Trimethobenzamide	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Sustol	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Trulance	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Zelnorm	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Mesalamine suppository	ALL	1			added to DMMA preferred drug list
1/1/2020	Change	Canasa suppository	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Solifenacin	ALL	1			changed from DMMA non-preferred agent to preferred agent

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1/1/2020	Change	Toviaz	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Vesicare	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	ADD	Silodosin	ALL	2		Step Therapy	added to DMMA non-preferred drug list
1/1/2020	ADD	Bevyxxa	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Afstyla	ALL	1		Yes	changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Kogenate FS	ALL	1		Yes	changed from DMMA non-preferred agent to preferred agent
1/1/2020	ADD	Hemlibra	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Vonvendi	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Procrit	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	ADD	Icatibant	ALL	1		Yes	added to DMMA preferred drug list
1/1/2020	Change	Cinryze	ALL	1		Yes	changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Ruconest	ALL	1		Yes	changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Takhzyro	ALL	1		Yes	changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Firazyr	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Deletion	Lancets	ALL				removed from DMMA list
1/1/2020	ADD	Freestyle Lancet		3			add to supplemental drug list
1/1/2020	Change	Clobazam	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	ADD	Pregabalin	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Nayzilam	ALL	2		Step Therapy	added to DMMA non-preferred drug list
1/1/2020	ADD	Nourianz	ALL	2		Step Therapy	added to DMMA non-preferred drug list
1/1/2020	ADD	Norgesic Forte	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Ingrezza	ALL	1		Yes	changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Austedo	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Dalfampridine	ALL	1		Yes	changed from DMMA non-preferred agent to preferred agent

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1/1/2020	ADD	Drizalma	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Ztlido	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Proair Digihaler	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Combivent	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	ADD	Duaklir	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Arnuity Ellipta	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Asmanex Twisthaler	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	Change	Flovent Diskus	ALL	1			changed from DMMA non-preferred agent to preferred agent
1/1/2020	ADD	Zyflo	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Aklief	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Luliconazole	ALL	2		Step Therapy	added to DMMA non-preferred drug list
1/1/2020	Change	Sklice	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	ADD	Crotamiton	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Vanalice	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Duobrii	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Pimecrolimus(labeler 68682)		1		Yes	changed from DMMA non-preferred agent to preferred agent
1/1/2020	ADD	Zyclara	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Ketotifen ophthalmics	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Gentak oinment	ALL	1			added to DMMA preferred drug list
1/1/2020	ADD	Loteprednol	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Prednisolone/nepafenac	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Dextenza	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Dexycu	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Inveltys	ALL	2		Yes	added to DMMA non-preferred drug list

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1/1/2020	ADD	Lotemax SM	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Ketorolac 0.4% ophthalmic	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	ADD	Lumify	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Cortisporin-TC	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Halcinonide	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Elzia Pak	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Lexette	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Micort-HC	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	ADD	Tovet	ALL	2		Yes	added to DMMA non-preferred drug list
1/1/2020	Change	Minitran patches	ALL	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	PNV Prenatal Plus		2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Trinatal Rx		2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Thrivite 19		2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Taron-C DHA		2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Triveen-Duo Pak DHA		2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Virt-PN DHA		2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Se-Natal 19 chewable		2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Prenata Chewable		2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Triple Antibiotic Ointment		2		Yes	changed from DMMA preferred agent to non-preferred agent
1/1/2020	Change	Maxidex ophthalmic suspension	0.1%	2		Yes	changed from DMMA preferred agent to non-preferred agent
1/27/2020	Change	Proventil HFA	ALL	1	2 inhalers/30 days for under 18 years old and 1 inhaler/30 days for 18 years old and older		quantity limit changed



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1/27/2020	Change	ProAir HFA	ALL	1	2 inhalers/30 days for under 18 years old and 1 inhaler/30 days for 18 years old and older		quantity limit changed
1/27/2020	Change	ProAir Respiclick	ALL	1	2 inhalers/30 days for under 18 years old and 1 inhaler/30 days for 18 years old and older		quantity limit changed
1/27/2020	Change	Ventolin HFA	ALL	2	2 inhalers/30 days for under 18 years old and 1 inhaler/30 days for 18 years old and older	Yes	quantity limit changed
1/27/2020	Change	Albuterol HFA	ALL	2	2 inhalers/30 days for under 18 years old and 1 inhaler/30 days for 18 years old and older	Yes	quantity limit changed
1/27/2020	Change	Xopenex HFA	ALL	2	2 inhalers/30 days for under 18 years old and 1 inhaler/30 days for 18 years old and older	Yes	added quantity limit
1/27/2020	Change	Levalbuterol HFA	ALL	2	2 inhalers/30 days for under 18 years old and 1 inhaler/30 days for 18 years old and older	Yes	added quantity limit