

2024 3 Tier STATE MANDATE Formulary

Additions

| Drug Name | Tier | Category | Management |
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| FEIRZA 1 MG-20(21) | 1 | MONOPHASIC /BIPHASIC /TRIPHASIC AGENTS | New Generic: Tier 1 |
| METAXALONE 640 MG | 3 | MUSCLE RELAXANTS & ANTISPASMODIC AGENTS | New Brand: Tier 3, Prior Authorization |
| OMVOH Syringe and OMVOH PEN INJECTOR 300 MG/3 ML | 3 | MISCELLANEOUS GASTROINTESTINAL AGENTS | New Brand: Tier 3, Prior Authorization, Quantity Limit Applies |
| ONAPGO 98 MG/20 ML | 3 | ANTIPARKINSONISM AGENTS | New Brand: Tier 3, Prior Authorization, Quantity Limit Applies |
| PYZCHIVA 45 MG/5 ML and 90 MG/ML Syringe | 3 | ANTIPSORIATIC / ANTISEBORRHEIC | New Brand: Tier 3, Prior Authorization, Quantity Limit Applies |
| XARAH FE - 5-7-9-7 | 1 | MONOPHASIC /BIPHASIC /TRIPHASIC AGENTS | New Generic: Tier 1 |
| XROMI 100 MG/ML | 3 | MISCELLANEOUS ANTINEOPLASTIC DRUGS | New Brand: Tier 3, Prior Authorization, Quantity Limit Applies |
| AURANOFIN 3 MG | 3 | MISCELLANEOUS RHEUMATOLOGICAL AGENTS | New Brand: Tier 3, Prior Authorization, Quantity Limit Applies |
| EVRYSDI 5 MG | 3 | MISCELLANEOUS NEUROLOGICAL THERAPY | New Brand: Tier 3, Prior Authorization, Quantity Limit Applies |
| FEIRZA 1.5-30(21) | 1 | MONOPHASIC /BIPHASIC /TRIPHASIC AGENTS | New Generic: Tier 1 |
| GOMEKLI 1 MG capsule/tablet and 2 MG capsule | 3 | MISCELLANEOUS ANTINEOPLASTIC DRUGS | New Brand: Tier 3, Prior Authorization, Quantity Limit Applies |
| PALFORZIA 0.5 to 3 MG and 1 MG | 3 | VACCINES & MISCELLANEOUS IMMUNOLOGICALS | New Brand: Tier 3, Prior Authorization, Quantity Limit Applies |
| RYBELSUS 1.5 MG, 4 MG and 9 MG | 2 | NON-INSULIN HYPOGLYCEMIC AGENTS | New Brand: Tier 2, Prior Authorization, Quantity Limit Applies |
| SELARSDI 45 MG/0.5 ML and 90 MG/ML | 3 | ANTIPSORIATIC / ANTISEBORRHEIC | New Brand: Tier 3, Prior Authorization, Quantity Limit Applies |
| VALTYA 1 MG-50 MCG | 1 | MONOPHASIC /BIPHASIC /TRIPHASIC AGENTS | New Generic: Tier 1 |

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| AUTOLET LITE | 3 | INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU | New Brand: Tier 3 |
| HALCINONIDE 0.1% SOLUTION | 1 | TOPICAL CORTICOSTEROIDS HIGH POTENCY | New Generic: Tier 1, Step Therapy Applies |
| JOURNAVX | 3 | MISCELLANEOUS ANALGESICS | New Brand: Tier 3, Prior Authorization, Quantity Limit Applies |
| LACTULOSE 20 G | 1 | MISCELLANEOUS GASTROINTESTINAL AGENTS | New Generic: Tier 1, Prior Authorization, Quantity Limit Applies |
| VELTASSA 1 G | 2 | MISCELLANEOUS AGENTS | New Brand: Tier 2, Quantity Limit Applies |
| TRAMADOL HCL 100 MG | 1 | MISCELLANEOUS ANALGESICS | New Generic: Tier 1 |
| FULVICIN P-G | 3 | ANTIFUNGAL AGENTS | New Brand: Tier 3, Prior Authorization |
| GRISEOFULVIN ULTRAMICROSIZED | 1 | ANTIFUNGAL AGENTS | New Generic: Tier 1, Prior Authorization |
| YESINTEK | 3 | ANTIPSORIATIC / ANTISEBORRHEIC | New Brand: Tier 3, Prior Authorization, Quantity Limit Applies |
| STEQEYMA | 3 | ANTIPSORIATIC / ANTISEBORRHEIC | New Brand: Tier 3, Prior Authorization, Quantity Limit Applies |
| METFORMIN HCL 750 MG | 1 | NON-INSULIN HYPOGLYCEMIC AGENTS | New Generic: Tier 1, Prior Authorization |
| ALHEMO | 3 | COAGULATION AGENTS | New Brand: Tier 3, Prior Authorization |
| SACUBITRIL-VALSARTAN | 1 | CARDIOVASCULAR AGENTS | New Generic: Tier 1, Quantity Limit Applies |
| SIMLANDI(CF) 20 MG/0.2 ML and 80 MG/0.8 ML | 2 | RHEUMATOLOGICAL AGENTS | New Brand: Tier 2, Prior Authorization, Quantity Limit Applies |
| FREESTYLE LIBRE 2 PLUS SENSOR - | 2 | MISCELLANEOUS THERAPEUTIC AGENTS | New Brand: Tier 2, Prior Authorization, Quantity Limit Applies |
| OBSTETRIX DHA 29-1-50 MG | 1 | ELECTROLYTES/MINERALS/METALS/VITAMINS | New Generic: Tier 1 |