

4/19/2024

Essential Health Benefit (EHB) Formulary Changes

The changes below are reflective of OptumRx P&T Committee decisions.

Drug Name	Formulary Status	Effective Date
No March 2024 Updates		

PRODUCT DISCONTINUATIONS		
<i>NOTE: These medications will or have been discontinued from the market by the manufacturer. Contact your provider for guidance and next steps.</i>		
Drug Name	Current Formulary Tier	Discontinuation Effective Date
Levemir Flexpen	Tier 2	4/1/2024
Levemir 10mL vials	Tier 2	12/31/2024
<p>Novo Nordisk, the manufacturer of Levemir®, announced that LevemirFlexPen® (insulin detemir) and Levemir vials will no longer be available. Novo Nordisk is discontinuing these products because of business reasons and not due to safety or efficacy issues. The supply of Levemir FlexPen is expected to run out by April 2024, but it could run out earlier and supply disruptions could begin as early as January 2024. The vials will be discontinued by December 31, 2024.</p>		
Drug Name	Current Formulary Tier	Discontinuation Effective Date
Flovent HFA <i>*brand product discontinued by manufacturer- authorized generic available</i>	Tier 2 QL	12/31/2023
Flovent Diskus <i>*brand product discontinued by manufacturer</i>	Tier 2 QL	12/31/2023

Key

PA= Prior Authorization AL= Age Limit ST= Step Therapy QL=Quantity Limit NF=Non-formulary CM=Oral Chemo Tier 1=preferred generic; Tier 2=preferred brand; Tier 3= Non-preferred brand/generic; Tier 4= Specialty

When generics become available on the EHB formulary, the brand moves to Excluded status. Drugs may be subject to coverage requirements or limits such as prior authorization. Refer to your formulary or plan documents for additional information.

This list does not guarantee coverage.

On **December 31, 2023**, Flovent branded products were discontinued by the manufacturer, GlaxoSmithKline. However, authorized generic (AG) alternative for Flovent HFA is available. Covered authorized generic (AG) product will require a new prescription at the pharmacy.

Year-to-Date 2023 EHB Formulary Changes

DRUG NAME	FORMULARY STATUS	EFFECTIVE DATE
Adalimumab-adbm SC injection kit & prefilled syringe kit	Tier 4	PA, QL
Amjevita (adalimumab-atto) SC injection & prefilled syringe	Tier 4	PA, QL
Ogsiveo (nirogacestat)	Tier 4	PA
Penbraya	Tier 2	1/19/2024
Veopoz (pozelimab-bbfg)	Tier 4 PA	1/1/2024
Rebyota (fecal microbiota, live-jslm)	Tier 4 PA	1/1/2024
Invega Halfyera	Tier 3	1/1/2024
Mounjaro	Tier 2 PA Added	1/1/2024
Tegsedi injection 284mg/1.5mL	Add QL	1/1/2024
Suprep Bowel Sol Prep Kit	Excluded	1/1/2024
Duramorph inj 0.5mg/mL	Excluded	1/1/2024
Vandazole gel 0.75%	Excluded	1/1/2024

Health Maintenance Organization (HMO) products are offered through Scott and White Health Plan dba Baylor Scott & White Health Plan, and Scott & White Care Plans dba Baylor Scott & White Care Plan. Insured PPO and EPO products are offered through Baylor Scott & White Insurance Company. Scott and White Health Plan dba Baylor Scott & White Health Plan serves as a third-party administrator for self-funded employer-sponsored plans. Baylor Scott & White Care Plan and Baylor Scott & White Insurance Company are wholly owned subsidiaries of Scott and White Health Plan. These companies are referred to collectively in this document as Baylor Scott & White Health Plan.

Year-to-Date 2023 EHB Formulary Changes

DRUG NAME	FORMULARY STATUS	EFFECTIVE DATE
Crotan lot 10%	Excluded	1/1/2024
Xifaxan tab 200mg	Excluded PA	1/1/2024
sodium phenylbutyrate oral powder	Tier 4 PA Added	1/1/2024
sodium phenylbutyrate tablet 500mg	Tier 4 PA Added	1/1/2024

Key

PA= Prior Authorization AL= Age Limit ST= Step Therapy QL=Quantity Limit NF=Non-formulary CM=Oral Chemo Tier 1=preferred generic; Tier 2=preferred brand; Tier 3= Non-preferred brand/generic; Tier 4= Specialty

When generics become available on the EHB formulary, the brand moves to Excluded status. Drugs may be subject to coverage requirements or limits such as prior authorization. Refer to your formulary or plan documents for additional information.

This list does not guarantee coverage.