

Your formulary updates

Tier changes

Effective January 1, 2025

This is a list of biannual tier changes made to your formulary. Each medication is placed in a tier that shows the cost level you may pay for that prescription. Your employer or health plan makes the decision on tier placements. Medications are grouped by the conditions they treat.

Medication tiers

Tier 1 Lower cost medications

Tier 3 Higher cost medications

Tier 2 Mid-range cost medications

EXC Medications may not be covered

In this formulary update, brand-name medications are shown in UPPERCASE (for example, CLOBEX). Generic medications are shown in lowercase (for example, clobetasol).

Medications moving to a lower tier

These medications are moving to a lower tier, making them more affordable.

Medication name	Tier placement
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions	
AURYXIA TAB 210MG	EXC to Tier 3
Immunological Agents - Drugs for Immune System Stimulation or Suppression	
CUTAQUIG SOL 1GM, 1.65GM, 2GM, 3.3GM, 4GM, 8GM	EXC to Tier 3
OMVOH INJ 100MG/ML, 300MG/15ML	Tier 3 to Tier 2
PANZYGA SOL 1GM/10ML, 2.5GM/25ML, 5GM/50ML, 10GM/100ML, 20GM/200ML, 30GM/300ML	EXC to Tier 3
SOTYKTU TAB 6MG	Tier 3 to Tier 2
TALTZ INJ 80MG/ML	Tier 3 to Tier 2

Medications moving to a higher tier

These medications are moving to a higher tier and will cost more because there are other lower-cost options. If your medication is listed below, you may still take it, but you may pay a higher cost. Please talk to your doctor about lower-cost option(s) to see if they will work for you.

Medication name	Tier placement	Lower cost medications
Blood Products / Modifiers / Volume Expanders - Drugs for Bleeding Disorders		
MUPLETA TAB 3MG	Tier 2 to Tier 3	DOPTELET TAB
Hormonal Agents - Pituitary		
NUTROPIN AQ INJ 10MG/2ML, 20MG/2ML, NUSPIN 5	Tier 2 to Tier 3	NORDITROPIN INJ, OMNITROPE INJ
Ophthalmic Agents		
CIMERLI INJ 0.3MG, 0.5MG	Tier 2 to Tier 3	BEVACIZUMAB INJ (Compounded)

Medications moving to exclusion

The following excluded medications may not be covered by your plan.

Medication name	Tier placement	Lower cost medications
Anti-inflammatory Agents		
EMFLAZA TAB 6MG, 18MG, 30MG, 36MG	Tier 3 to EXC	deflazacort tab, prednisone tab
EMFLAZA SUSPENSION 22.75MG/ML	Tier 3 to EXC	deflazacort susp/tab, prednisone sol/tab

Medication name	Tier placement	Lower cost medications
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
CARDIZEM LA TAB 120MG	Tier 3 to EXC	diltiazem 120mg tab extended release
Diabetes - Antidiabetic Agents		
VICTOZA INJ 18MG/3ML	Tier 2 to EXC	BYDUREON BCISE INJ, BYETTA INJ, MOUNJARO INJ, OZEMPIC INJ, RYBELSUS TAB, TRULICITY INJ
Electrolytes / Minerals / Metals / Vitamins		
SYPRINE CAP 250MG	Tier 3 to EXC	penicillamine tab, trientine cap, DEPEN TITRATAB
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
VELPHORO CHEW TAB 500MG	Tier 3 to EXC	calcium carbonate tab, calcium acetate tab, sevelamer carbonate tab, sevelamer HCl tab, AURYXIA TAB
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ADALIMUMAB-ADAZ INJ 40MG/0.4ML	Tier 2 to EXC	AMJEVITA for Amgen
ADALIMUMAB-ADB KIT 10MG/0.2ML, 20MG/0.4ML, 40MG/0.4ML, 40MG/0.8ML	Tier 2 to EXC	AMJEVITA for Amgen
CYLTEZO INJ 10MG/0.2ML, 20MG/0.4ML, 40MG/0.4ML, 40MG/0.8ML	Tier 2 to EXC	AMJEVITA for Amgen
HUMIRA INJ 10MG/0.1ML, 20MG/0.2ML, 40MG/0.4ML, 40MG/0.8ML, 80MG/0.8ML	Tier 2 to EXC	AMJEVITA for Amgen
HUMIRA INJ 80MG/0.8ML&40MG/0.4ML KIT		AMJEVITA for Amgen
HYRIMOZ INJ 10MG/0.1ML, 20MG/0.2ML, 40MG/0.4ML, 80MG/0.8ML	Tier 2 to EXC	AMJEVITA for Amgen
HYRIMOZ INJ 80MG/0.8ML&40MG/0.4ML KIT	Tier 2 to EXC	AMJEVITA for Amgen

Where differences exist between this list and your benefit plan, the benefit plan documents rule. This is not a complete list of your covered medications. Please review your benefit plan documents for full details. Not all formulary alternatives listed in this document may be appropriate for your specific condition. Please talk to your doctor.