



12/1/2024

Medicare Part D Formulary Change

The product changes noted below will be implemented on the Medicare Part D Plan:

New Added Products: **Effective 12/1/2024**

Drug	Reason	Cost sharing**	Restrictions***
dasatinib 100 mg tablet	New Drug	Tier 1	PA
dasatinib 140 mg tablet	New Drug	Tier 1	PA
dasatinib 20 mg tablet	New Drug	Tier 1	PA
dasatinib 50 mg tablet	New Drug	Tier 1	PA
dasatinib 70 mg tablet	New Drug	Tier 1	PA
dasatinib 80 mg tablet	New Drug	Tier 1	PA
LAZCLUZE 240 MG TABLET	New Drug	Tier 2	PA QL LA
LAZCLUZE 80 MG TABLET	New Drug	Tier 2	PA QL LA
RINVOQ LQ 1 MG/ML ORAL SOLUTION	New Drug	Tier 2	PA QL
tazarotene 0.05 % topical cream	New Drug	Tier 1	PA
VORANIGO 10 MG TABLET	New Drug	Tier 2	PA QL
VORANIGO 40 MG TABLET	New Drug	Tier 2	PA QL

Future Removed Products: **Effective 12/1/2024**

Drug	Reason	Alternative*
SPRYCEL 100 MG TABLET	Removed from Plan Formulary	dasatinib 100 mg tablet
SPRYCEL 140 MG TABLET	Removed from Plan Formulary	dasatinib 140 mg tablet
SPRYCEL 20 MG TABLET	Removed from Plan Formulary	dasatinib 20 mg tablet
SPRYCEL 50 MG TABLET	Removed from Plan Formulary	dasatinib 50 mg tablet
SPRYCEL 70 MG TABLET	Removed from Plan Formulary	dasatinib 70 mg tablet
SPRYCEL 80 MG TABLET	Removed from Plan Formulary	dasatinib 80 mg tablet
TAZORAC 0.05 % TOPICAL CREAM	Removed from Plan Formulary	tazarotene 0.05 % topical cream

Cost Sharing Tier Changes: **There were no cost sharing tier changes this month.**

*Consult your Medical provider for changes or recommendations to your medical care and prescription therapy

**Please consult the plan benefit design for copay/coinsurance amounts

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H9712_MI-MMP-M-2566011_V.12

HAP CareSource™ MI Health Link (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and Michigan Medicaid to provide benefits of both programs to enrollees.

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11/1/2024

Medicare Part D Formulary Change

The product changes noted below will be implemented on the Medicare Part D Plan:

New Added Products: **Effective 11/1/2024**

Drug	Reason	Cost sharing**	Restrictions***
azurette (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	New Drug	Tier 1	
gavilyte-n 420 gram oral solution	New Drug	Tier 1	
MRESVIA (PF) 50 MCG/0.5 ML INTRAMUSCULAR SYRINGE	New Drug	Tier 2	
OJEMDA 400 MG/WEEK (100 MG X 4) TABLET	New Drug	Tier 2	PA QL
OJEMDA 600 MG/WEEK (100 MG X 6) TABLET	New Drug	Tier 2	PA QL
OTEZLA 20 MG TABLET	New Drug	Tier 2	PA
OTEZLA STARTER 10 MG (4)-20 MG (51) TABLETS IN A DOSE PACK	New Drug	Tier 2	PA
RETEVMO 120 MG TABLET	New Drug	Tier 2	PA QL LA
RETEVMO 160 MG TABLET	New Drug	Tier 2	PA QL LA
RETEVMO 40 MG TABLET	New Drug	Tier 2	PA QL LA
RETEVMO 80 MG TABLET	New Drug	Tier 2	PA QL LA
VAXCHORA VACCINE 4X10EXP8 TO 2X10EXP9 CF UNIT ORAL SUSPENSION	New Drug	Tier 2	

Future Removed Products: **There were no future removed products this month.**

Cost Sharing Tier Changes: **There were no cost sharing tier changes this month.**

H9712_MI-MMP-M-2566011_V.11

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10/1/2024

Medicare Part D Formulary Change

The product changes noted below will be implemented on the Medicare Part D Plan:

New Added Products: **Effective 10/1/2024**

Drug	Reason	Cost sharing**	Restrictions***
DRIZALMA SPRINKLE 20 MG CAPSULE,DELAYED RELEASE	New Drug	Tier 2	PA QL
DRIZALMA SPRINKLE 30 MG CAPSULE,DELAYED RELEASE	New Drug	Tier 2	PA QL
DRIZALMA SPRINKLE 40 MG CAPSULE,DELAYED RELEASE	New Drug	Tier 2	PA QL
DRIZALMA SPRINKLE 60 MG CAPSULE,DELAYED RELEASE	New Drug	Tier 2	PA QL
DUVYZAT 8.86 MG/ML ORAL SUSPENSION	New Drug	Tier 2	PA
L-glutamine (sickle cell) 5 gram oral powder packet	New Drug	Tier 1	PA
ivabradine 5 mg tablet	New Drug	Tier 1	PA
ivabradine 7.5 mg tablet	New Drug	Tier 1	PA
naloxone 0.4 mg/ml injection syringe (prefilled syringe)	New Drug	Tier 1	
XARELTO 1 MG/ML ORAL SUSPENSION	Formulary Addition	Tier 2	

Future Removed Products: **Effective 10/1/2024**

Drug	Reason	Alternative*
CORLANOR 5 MG TABLET	Removed from Plan Formulary	ivabradine 5 mg tablet
CORLANOR 7.5 MG TABLET	Removed from Plan Formulary	ivabradine 7.5 mg tablet

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Drug	Reason	Alternative*
ENDARI 5 GRAM ORAL POWDER PACKET	Removed from Plan Formulary	L-glutamine (sickle cell) 5 gram oral powder packet

Cost Sharing Tier Changes: **There were no cost sharing tier changes this month.**

H9712_MI-MMP-M-2566011_V.10

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9/1/2024

Medicare Part D Formulary Change

The product changes noted below will be implemented on the Medicare Part D Plan:

New Added Products: **Effective 9/1/2024**

Drug	Reason	Cost sharing**	Restrictions***
OGSIVEO 100 MG TABLET	New Drug	Tier 2	PA QL
OGSIVEO 150 MG TABLET	New Drug	Tier 2	PA QL
OJEMDA 25 MG/ML ORAL SUSPENSION	New Drug	Tier 2	PA QL
OJEMDA 500 MG/WEEK (100 MG X 5) TABLET	New Drug	Tier 2	PA QL
SCEMBLIX 100 MG TABLET	New Drug	Tier 2	PA QL

Future Removed Products: **There were no future removed products this month.**

Cost Sharing Tier Changes: **There were no cost sharing tier changes this month.**

H9712_MI-MMP-M-2566011_V.9

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8/1/2024

Medicare Part D Formulary Change

The product changes noted below will be implemented on the Medicare Part D Plan:

New Added Products: **Effective 8/1/2024**

Drug	Reason	Cost sharing**	Restrictions***
FASENRA 10 MG/0.5 ML SUBCUTANEOUS SYRINGE	New Drug	Tier 2	PA
LIBERVANT 10 MG BUCCAL FILM	New Drug	Tier 2	PA
LIBERVANT 12.5 MG BUCCAL FILM	New Drug	Tier 2	PA
LIBERVANT 15 MG BUCCAL FILM	New Drug	Tier 2	PA
LIBERVANT 5 MG BUCCAL FILM	New Drug	Tier 2	PA
LIBERVANT 7.5 MG BUCCAL FILM	New Drug	Tier 2	PA
varenicline 1 mg tablet (56 pack)	New Drug	Tier 1	
WINREVAIR 45 MG SUBCUTANEOUS KIT	New Drug	Tier 2	PA
WINREVAIR 45 MG SUBCUTANEOUS KIT (2 PACK)	New Drug	Tier 2	PA
WINREVAIR 60 MG SUBCUTANEOUS KIT	New Drug	Tier 2	PA
WINREVAIR 60 MG SUBCUTANEOUS KIT (2 PACK)	New Drug	Tier 2	PA

Future Removed Products: **There were no future removed products this month.**

Cost Sharing Tier Changes: **There were no cost sharing tier changes this month.**

H9712_MI-MMP-M-2566011_V.8

*Consult your Medical provider for changes or recommendations to your medical care and prescription therapy

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7/1/2024

Medicare Part D Formulary Change

The product changes noted below will be implemented on the Medicare Part D Plan:

New Added Products: **Effective 7/1/2024**

Drug	Reason	Cost sharing**	Restrictions***
mirabegron er 25 mg tablet,extended release 24 hr	New Drug	Tier 1	QL
mirabegron er 50 mg tablet,extended release 24 hr	New Drug	Tier 1	QL
XCOPRI 25 MG TABLET	New Drug	Tier 2	PA
ZILBRYSQ 16.6 MG/0.416 ML SUBCUTANEOUS SYRINGE	New Drug	Tier 2	PA LA

Future Removed Products: **Effective 7/1/2024**

Drug	Reason	Alternative*
amabelz 0.5 mg-0.1 mg tablet	Removed from Formulary	Please contact your doctor.
EXTAVIA 0.3 MG SUBCUTANEOUS SOLUTION	Removed from Formulary	Please contact your doctor.
MYRBETRIQ 25 MG TABLET,EXTENDED RELEASE	Removed from Plan Formulary	Please contact your doctor.
MYRBETRIQ 50 MG TABLET,EXTENDED RELEASE	Removed from Plan Formulary	Please contact your doctor.

Cost Sharing Tier Changes: **There were no cost sharing tier changes this month.**

H9712_MI-MMP-M-2566011_V.7

*Consult your Medical provider for changes or recommendations to your medical care and prescription therapy

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6/1/2024

Medicare Part D Formulary Change

The product changes noted below will be implemented on the Medicare Part D Plan:

New Added Products: **Effective 6/1/2024**

Drug	Reason	Cost sharing**	Restrictions***
clindamycin 1 % topical gel	New Drug	Tier 1	QL
FILSUIVEZ 10 % TOPICAL GEL	New Drug	Tier 2	PA
heather 0.35 mg tablet	Formulary Addition	Tier 1	
nitroglycerin 0.4 % (w/w) rectal ointment	New Drug	Tier 1	
theophylline er 100 mg tablet,extended release,12 hr	New Drug	Tier 1	
theophylline er 200 mg tablet,extended release,12 hr	New Drug	Tier 1	

Future Removed Products: **Effective 6/1/2024**

Drug	Reason	Alternative*
RECTIV 0.4 % (W/W) OINTMENT	Removed from Plan Formulary	nitroglycerin 0.4 % (w/w) rectal ointment

Cost Sharing Tier Changes: **There were no cost sharing tier changes this month.**

H9712_MI-MMP-M-2566011_V.6

*Consult your Medical provider for changes or recommendations to your medical care and prescription therapy

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5/1/2024

Medicare Part D Formulary Change

The product changes noted below will be implemented on the Medicare Part D Plan:

New Added Products: **Effective 5/1/2024**

Drug	Reason	Cost sharing**	Restrictions***
IXCHIQ 1,000 TCID50/0.5 ML INTRAMUSCULAR SOLUTION	New Drug	Tier 2	
JOENJA 70 MG TABLET	New Drug	Tier 2	PA LA
loteprednol etabonate 0.2 % eye drops,suspension	New Drug	Tier 1	
mifepristone 300 mg tablet	New Drug	Tier 1	PA
ROZLYTREK 50 MG ORAL PELLETS IN PACKET	New Drug	Tier 2	PA
XOLAIR 150 MG/ML SUBCUTANEOUS AUTO-INJECTOR	New Drug	Tier 2	PA LA
XOLAIR 300 MG/2 ML SUBCUTANEOUS AUTO-INJECTOR	New Drug	Tier 2	PA LA
XOLAIR 300 MG/2 ML SUBCUTANEOUS SYRINGE	New Drug	Tier 2	PA LA
XOLAIR 75 MG/0.5 ML SUBCUTANEOUS AUTO-INJECTOR	New Drug	Tier 2	PA LA

Future Removed Products: **Effective 5/1/2024**

Drug	Reason	Alternative*
ALREX 0.2 % EYE DROPS,SUSPENSION	Removed from Plan Formulary	loteprednol etabonate 0.2 % eye drops,suspension
EMCYT 140 MG CAPSULE	Removed from Formulary	Please contact your doctor.
KORLYM 300 MG TABLET	Removed from Plan Formulary	mifepristone 300 mg tablet
NATPARA 100 MCG/DOSE SUBCUTANEOUS CARTRIDGE	Removed from Formulary	Please contact your doctor.

*Consult your Medical provider for changes or recommendations to your medical care and prescription therapy

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Drug	Reason	Alternative*
NATPARA 25 MCG/DOSE SUBCUTANEOUS CARTRIDGE	Removed from Formulary	Please contact your doctor.
NATPARA 50 MCG/DOSE SUBCUTANEOUS CARTRIDGE	Removed from Formulary	Please contact your doctor.
NATPARA 75 MCG/DOSE SUBCUTANEOUS CARTRIDGE	Removed from Formulary	Please contact your doctor.

Cost Sharing Tier Changes: **There were no cost sharing tier changes this month.**

H9712_MI-MMP-M-2566011_V.5

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4/1/2024

Medicare Part D Formulary Change

The product changes noted below will be implemented on the Medicare Part D Plan:

New Added Products: **Effective 4/1/2024**

Drug	Reason	Cost sharing**	Restrictions***
BOSULIF 100 MG CAPSULE	New Drug	Tier 2	PA QL
BOSULIF 50 MG CAPSULE	New Drug	Tier 2	PA QL
gabapentin er 300 mg tablet,extended release 24 hr	New Drug	Tier 1	PA
gabapentin er 600 mg tablet,extended release 24 hr	New Drug	Tier 1	PA
IWILFIN 192 MG TABLET	New Drug	Tier 2	PA QL LA
PENBRAYA (PF) 5 MCG-120 MCG/0.5 ML INTRAMUSCULAR KIT	New Drug	Tier 2	
risperidone microspheres er 12.5 mg/2 ml intramuscular susp,ext releas	New Drug	Tier 1	
risperidone microspheres er 25 mg/2 ml intramuscular susp,ext release	New Drug	Tier 1	
risperidone microspheres er 37.5 mg/2 ml intramuscular susp,ext releas	New Drug	Tier 1	
risperidone microspheres er 50 mg/2 ml intramuscular susp,ext release	New Drug	Tier 1	
sodium,potassium,mag sulfates 17.5 gram-3.13 gram-1.6 gram oral soln	New Drug	Tier 1	
SYNJARDY XR 10 MG-1,000 MG TABLET, EXTENDED RELEASE	New Drug	Tier 2	
SYNJARDY XR 12.5 MG-1,000 MG TABLET, EXTENDED RELEASE	New Drug	Tier 2	
SYNJARDY XR 25 MG-1,000 MG TABLET, EXTENDED RELEASE	New Drug	Tier 2	
SYNJARDY XR 5 MG-1,000 MG TABLET, EXTENDED RELEASE	New Drug	Tier 2	

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Drug	Reason	Cost sharing**	Restrictions***
vancomycin 50 mg/ml oral solution	Formulary Addition	Tier 1	QL
WAINUA 45 MG/0.8 ML SUBCUTANEOUS AUTO-INJECTOR	New Drug	Tier 2	PA
XALKORI 150 MG ORAL PELLETS	New Drug	Tier 2	PA QL
XALKORI 20 MG ORAL PELLETS	New Drug	Tier 2	PA QL
XALKORI 50 MG ORAL PELLETS	New Drug	Tier 2	PA QL
ZILBRYSQ 23 MG/0.574 ML SUBCUTANEOUS SYRINGE	New Drug	Tier 2	PA
ZILBRYSQ 32.4 MG/0.81 ML SUBCUTANEOUS SYRINGE	New Drug	Tier 2	PA

Future Removed Products: **Effective 4/1/2024**

Drug	Reason	Alternative*
GRALISE 300 MG TABLET,EXTENDED RELEASE	Removed from Plan Formulary	GABAPENTIN ER 300 MG TABLET, EXTENDED RELEASE
GRALISE 600 MG TABLET,EXTENDED RELEASE	Removed from Plan Formulary	GABAPENTIN ER 600 MG TABLET, EXTENDED RELEASE
paromomycin 250 mg capsule	Removed from Formulary	Please contact your doctor.
RISPERDAL CONSTA 12.5 MG/2 ML INTRAMUSCULAR SUSP,EXTENDED RELEASE	Removed from Plan Formulary	RISPERIDONE ER 12.5 MG/2 ML VIAL
RISPERDAL CONSTA 25 MG/2 ML INTRAMUSCULAR SUSP,EXTENDED RELEASE	Removed from Plan Formulary	RISPERIDONE ER 25 MG/2 ML VIAL
RISPERDAL CONSTA 37.5 MG/2 ML INTRAMUSCULAR SUSP,EXTENDED RELEASE	Removed from Plan Formulary	RISPERIDONE ER 37.5 MG/2 ML VIAL
RISPERDAL CONSTA 50 MG/2 ML INTRAMUSCULAR SUSP,EXTENDED RELEASE	Removed from Plan Formulary	RISPERIDONE ER 50 MG/2 ML VIAL

Cost Sharing Tier Changes: **There were no cost sharing tier changes this month.**

H9712_MI-MMP-M-2566011_V.4

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3/1/2024

Medicare Part D Formulary Change

The product changes noted below will be implemented on the Medicare Part D Plan:

New Added Products: **Effective 3/1/2024**

Drug	Reason	Cost sharing**	Restrictions***
AKEEGA 100 MG-500 MG TABLET	New Drug	Tier 2	PA QL LA
AKEEGA 50 MG-500 MG TABLET	New Drug	Tier 2	PA QL LA
AUGTYRO 40 MG CAPSULE	New Drug	Tier 2	PA QL
diltiazem er 420 mg tablet,extended release 24 hr	Formulary Addition	Tier 1	
EPINEPHRINE 0.15 MG/0.15 ML AUTO-INJECTOR (FOR 33 TO 66 LB PATIENTS)	Formulary Addition	Tier 2	
EPINEPHRINE 0.3 MG/0.3 ML INJECTION, INJECTOR-AUTO	Formulary Addition	Tier 2	
fluoxetine (pmdd) 10 mg tablet	Formulary Addition	Tier 1	
fluoxetine (pmdd) 20 mg tablet	Formulary Addition	Tier 1	
fluoxetine 10 mg tablet	Formulary Addition	Tier 1	
fluoxetine 20 mg tablet	Formulary Addition	Tier 1	
KALYDECO 5.8 MG ORAL GRANULES IN PACKET	New Drug	Tier 2	PA QL
kourzeq 0.1 % dental paste	Formulary Addition	Tier 1	
MENEST 2.5 MG TABLET	Formulary Addition	Tier 2	
norelgestromin 150 mcg-e.estradiol 35 mcg/24 hr weekly transderm patch	New Drug	Tier 1	
OGSIVEO 50 MG TABLET	New Drug	Tier 2	PA QL

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Drug	Reason	Cost sharing**	Restrictions***
PHOSPHOLINE IODIDE 0.125 % EYE DROPS	Formulary Addition	Tier 2	
vigpoder 500 mg oral powder packet	New Drug	Tier 1	LA

Future Removed Products: **Effective 3/1/2024**

Drug	Reason	Alternative*
accutane 30 mg capsule	Removed from Formulary	Please contact your doctor.
amabelz 1 mg-0.5 mg tablet	Removed from Formulary	Please contact your doctor.
FLEBOGAMMA DIF 10 % INTRAVENOUS SOLUTION	Removed from Formulary	Please contact your doctor.
sorine 240 mg tablet	Removed from Formulary	Please contact your doctor.
triamcinolone acetonide 0.147 mg/gram topical aerosol	Removed from Formulary	Please contact your doctor.

Cost Sharing Tier Changes: **There were no cost sharing tier changes this month.**

H9712_MI-MMP-M-2566011_V.3

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2/1/2024

Medicare Part D Formulary Change

The product changes noted below will be implemented on the Medicare Part D Plan:

New Added Products: **Effective 2/1/2024**

Drug	Reason	Cost sharing**	Restrictions***
BREO ELLIPTA 50 MCG-25 MCG/DOSE POWDER FOR INHALATION	New Drug	Tier 2	
breyna 160 mcg-4.5 mcg/actuation hfa aerosol inhaler	New Drug	Tier 1	
breyna 80 mcg-4.5 mcg/actuation hfa aerosol inhaler	New Drug	Tier 1	
brimonidine 0.1 % eye drops	New Drug	Tier 1	
budesonide-formoterol hfa 160 mcg-4.5 mcg/actuation aerosol inhaler	Formulary Addition	Tier 1	
budesonide-formoterol hfa 80 mcg-4.5 mcg/actuation aerosol inhaler	Formulary Addition	Tier 1	
COSENTYX UNOREADY PEN 300 MG/2 ML (150 MG/ML) SUBCUTANEOUS	Formulary Addition	Tier 2	PA QL
FLUTICASONE PROPIONATE 100 MCG/ACTUATION BLISTER POWDER FOR INHALATION	New Drug	Tier 1	
FLUTICASONE PROPIONATE 250 MCG/ACTUATION BLISTER POWDER FOR INHALATION	New Drug	Tier 1	
FLUTICASONE PROPIONATE 50 MCG/ACTUATION BLISTER POWDER FOR INHALATION	New Drug	Tier 1	
FRUZAQLA 1 MG CAPSULE	New Drug	Tier 2	PA
FRUZAQLA 5 MG CAPSULE	New Drug	Tier 2	PA
LAGEVRIO 200 MG CAPSULE (EUA)	New Drug	Tier 2	QL
lithium citrate 8 meq/5 ml oral solution	New Drug	Tier 1	

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Drug	Reason	Cost sharing**	Restrictions***
OJJAARA 100 MG TABLET	New Drug	Tier 2	PA
OJJAARA 150 MG TABLET	New Drug	Tier 2	PA
OJJAARA 200 MG TABLET	New Drug	Tier 2	PA
PAXLOVID 150 MG-100 MG TABLETS IN A DOSE PACK (RENAL DOSE)	New Drug	Tier 2	QL
PAXLOVID 300 MG (150 MG X 2)-100 MG TABLETS IN A DOSE PACK	New Drug	Tier 2	QL
pazopanib 200 mg tablet	New Drug	Tier 1	PA QL
tiotropium bromide 18 mcg capsule with inhalation device	Formulary Addition	Tier 1	QL
TRUQAP 160 MG TABLET	New Drug	Tier 2	PA
TRUQAP 200 MG TABLET	New Drug	Tier 2	PA
VANFLYTA 17.7 MG TABLET	New Drug	Tier 2	PA
VANFLYTA 26.5 MG TABLET	New Drug	Tier 2	PA
XDEMVIY 0.25 % EYE DROPS	New Drug	Tier 2	PA QL
ZURZUVAE 20 MG CAPSULE	New Drug	Tier 2	PA
ZURZUVAE 25 MG CAPSULE	New Drug	Tier 2	PA
ZURZUVAE 30 MG CAPSULE	New Drug	Tier 2	PA

Future Removed Products: **Effective 2/1/2024**

Drug	Reason	Alternative*
ALPHAGAN P 0.1 % EYE DROPS	Removed from Plan Formulary	Please contact your doctor.
cefaclor 125 mg/5 ml oral suspension	Removed from Formulary	Please contact your doctor.
cefaclor 375 mg/5 ml oral suspension	Removed from Formulary	Please contact your doctor.
ciprofloxacin 100 mg tablet	Removed from Formulary	Please contact your doctor.
nevirapine er 100 mg tablet,extended release 24 hr	Removed from Formulary	Please contact your doctor.
olopatadine 0.1 % eye drops	Removed from Formulary	Please contact your doctor.
SPIRIVA WITH HANDIHALER 18 MCG AND INHALATION CAPSULES	Removed from Plan Formulary	Please contact your doctor.
SUPRAX 100 MG CHEWABLE TABLET	Removed from Formulary	Please contact your doctor.

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Drug	Reason	Alternative*
SYNJARDY XR 10 MG-1,000 MG TABLET, EXTENDED RELEASE	Removed from Formulary	Please contact your doctor.
SYNJARDY XR 12.5 MG-1,000 MG TABLET, EXTENDED RELEASE	Removed from Formulary	Please contact your doctor.
SYNJARDY XR 25 MG-1,000 MG TABLET, EXTENDED RELEASE	Removed from Formulary	Please contact your doctor.
SYNJARDY XR 5 MG-1,000 MG TABLET, EXTENDED RELEASE	Removed from Formulary	Please contact your doctor.
SYNRIBO 3.5 MG SUBCUTANEOUS SOLUTION	Removed from Formulary	Please contact your doctor.
VIIBRYD 10 MG (7)-20 MG (23) TABLETS IN A DOSE PACK	Removed from Formulary	Please contact your doctor.
VOTRIENT 200 MG TABLET	Removed from Plan Formulary	Please contact your doctor.

Cost Sharing Tier Changes: **There were no cost sharing tier changes this month.**

H9712_MI-MMP-M-2566011_V.2

*Consult your Medical provider for changes or recommendations to your medical care and prescription therapy

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