

Your formulary updates

Tier changes — effective July 1, 2021



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.



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 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.

Therapeutic use	Medication name	Tier placement	Lower-cost medications
Antifungals	ALA-QUIN CR 3-0.5%	Tier 2 to Tier 3	Please talk to your doctor about other option(s)
Antineoplastics - Drugs for Cancer	XALKORI CAP 200MG, 250MG	Tier 2 to Tier 3	Please talk to your doctor about other option(s)
Antiparkinson Agents	APOKYN INJ 10MG/ML	Tier 2 to Tier 3	Please talk to your doctor about other option(s)
Blood Products / Modifiers / Volume Expanders - Drugs for Bleeding Disorders	NPLATE INJ 125MCG, 250MCG, 500MCG	Tier 2 to Tier 3	Please talk to your doctor about other option(s)
Electrolytes / Minerals / Metals / Vitamins	CORVITE TAB	Tier 2 to Tier 3	Any preferred multivitamin with minerals and folic acid
	CORVITA TAB	Tier 2 to Tier 3	Any preferred multivitamin with minerals and folic acid
	INFUVITE INJ	Tier 2 to Tier 3	Please talk to your doctor about other option(s)
	POLY-VITE DROPS	Tier 2 to Tier 3	polyvitamin drops
Electrolyte Modifiers	SAMSCA TAB 15MG	Tier 2 to Tier 3	tolvaptan tab
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold	MUCINEX ALLERGY TAB 180MG	Tier 2 to Tier 3	fexofenadine tab
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm	LIORESAL INTRATHECAL INJ 0.05MG/ML, 10MG/5ML	Tier 2 to Tier 3	baclofen inj
	GABLOFEN INJ 50MCG/ ML, 10000MCG/20ML, 20000MCG/20ML, 40000MCG/20ML	Tier 2 to Tier 3	baclofen inj

Medications moving to exclusion

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

Therapeutic use	Medication name	Tier placement	Lower-cost medications
Analgesics - Drugs for Pain and Inflammation	DICLOFENAC PATCH 1.3%	Tier 3 to EXC	diclofenac gel/solution
Antipsychotics - Drugs for Mood Disorders	SAPHRIS SUB 2.5MG, 5MG, 10MG	Tier 3 to EXC	asenapine
Antivirals	TRUVADA TAB 100-150MG, 133- 200MG, 167-250MG	Tier 3 to EXC	emtricitabine- tenofovir disoproxil fumarate
Central Nervous System Agents - Drugs for Multiple Sclerosis	TECFIDERA CAP 120MG, 240MG, STARTER PACK	Tier 2 to EXC	dimethyl fumarate dr
Dermatological Agents - Drugs for Skin Conditions	FABIOR AER FOAM 0.1%	Tier 3 to EXC	tazarotene
	TAZORAC CR 0.05%	Tier 3 to EXC	tazarotene
	TAZORAC GEL 0.05%, 0.1%	Tier 3 to EXC	tazarotene
Electrolytes / Minerals / Metals / Vitamins	DEXIFOL TAB	Tier 3 to EXC	Any covered multivitamin
	FOLIC-K CAP	Tier 3 to EXC	Any covered multivitamin
	FOLIKA-T TAB	Tier 3 to EXC	Any covered multivitamin
	FOLIKA-V TAB	Tier 3 to EXC	Any covered multivitamin
	GENICIN VITA-Q TAB	Tier 3 to EXC	Any covered multivitamin
	GENICIN VITA-S TAB	Tier 3 to EXC	Any covered multivitamin
	HYLAVITE TAB	Tier 3 to EXC	Any covered multivitamin
	LORID TAB	Tier 3 to EXC	Any covered multivitamin
	MULTIPRO CAP	Tier 3 to EXC	Any covered multivitamin
	NICADAN TAB	Tier 3 to EXC	Any covered multivitamin
	NICAZEL FORTE TAB	Tier 3 to EXC	Any covered multivitamin
	NICAZEL TAB	Tier 3 to EXC	Any covered multivitamin
	NICOMIDE TAB	Tier 3 to EXC	Any covered multivitamin
	PRENATRIX TAB	Tier 3 to EXC	Any covered prenatal vitamin
	QUFLORA FE CHW	Tier 3 to EXC	Any covered multivitamin
	REMEDIENT CAP	Tier 3 to EXC	Any covered multivitamin
	TRONVITE TAB	Tier 3 to EXC	Any covered multivitamin
	VITASURE TAB	Tier 3 to EXC	Any covered multivitamin
	XVITE TAB	Tier 3 to EXC	Any covered multivitamin

Therapeutic use	Medication name	Tier placement	Lower-cost medications
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment	KUVAN POW 100MG, 500MG	Tier 3 to EXC	sapropterin
	KUVAN TAB 100MG	Tier 3 to EXC	sapropterin
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions	ELMIRON CAP 100MG	Tier 2 to EXC	amitriptyline, hydroxyzine
Hormonal Agents - Pituitary	SIGNIFOR INJ 0.3MG/ML, 0.6MG/ ML, 0.9MG/ML	Tier 3 to EXC	octreotide
Immunological Agents - Drugs for Immune System Stimulation or Suppression	RENFLEXIS INJ 100MG	Tier 2 to EXC	AVSOLA, INFLECTRA
Metabolic Bone Disease Agents - Drugs for Osteoporosis	FORTEO SOL 600/2.4	Tier 2 to EXC	TERIPARATIDE INJ, TYMLOS INJ
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation	BEPREVE OPHTH SOL 1.5%	Tier 3 to EXC	azelastine sol, olopatadine sol
	LASTACAFT OPHTH SOL 0.25%	Tier 3 to EXC	azelastine sol, olopatadine sol
Otic Agents - Drugs for Ear Conditions	CIPRODEX SUSP 0.3-0.1%	Tier 2 to EXC	ciprofloxacin-dexamethasone otic susp
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis	BETHKIS NEB 300/4ML	Tier 2 to EXC	tobramycin neb solution, TOBI PODHALER CAP
	CAYSTON INH 75MG	Tier 3 to EXC	tobramycin neb solution, TOBI PODHALER CAP



When differences between this list and your benefit plan exist, the benefit plan documents rule. This is not a complete list of your covered medications. Please review your benefit plan for full details.



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