

2027 Upcoming Changes, 3-Tier Open Formulary - 2950

Medications reclassified, with formulary alternatives available

Medications Reclassified as Tier 3 as of January 1, 2027:	
Medication Reclassified	Covered Alternative
FARXIGA	DAPAGLIFLOZIN
NEULASTA SYRINGE & NEULASTA ONPRO	FULPHILA, UDENYCA
ROSZET	ROSUVASTATIN, EZETIMIBE
SUMATRIPTAN INJECTION	SUMATRIPTAN TABLET
UBRELVY	NURTEC
VENTOLIN	ALBUTEROL HFA, PROAIR
XELJANZ	TOFACITINIB
XIGDUO XR	DAPAGLIFLOZIN ER
Medications moving from Tier 3 to Tier 2 as of January 1, 2027:	
CALQUENCE	NEMLUVIO
FULPHILA	PROAIR RESPICLICK
IMBRUVICA 420 MG TABLET, 140 MG CAPSULE	TAGRISSE
LYNPARZA	TRUQAP
Medications moving from Tier 3 to Tier 1 as of January 1, 2027:	
SITAGLIPTIN PHOSPHATE TABLET	SITAGLIPTIN PHOSPHATE-METFORMIN

Prior Authorization will apply to the following medications

Prior authorization helps ensure that a prescribed drug is safe and appropriate for your medical condition. Our clinical pharmacists and physicians review medication requests to make sure that the choice of drug and the dosage are appropriately prescribed based on Food and Drug Administration and manufacturer guidelines, the medical literature, safety and use guidelines and benefit design.

Medication(s) Requiring Prior Authorization Added or Removed as of January 1, 2027:	
Prior Authorization added to	Covered alternative
ALTOPREV	LOVASTATIN
ATORVALIQ	ATORVASTATIN
FLOLIPID	SIMVASTATIN
PROLIA	ENOBY, BILDYOS
Prior Authorization Removed	
FULPHILA 6	

Step Therapy will be removed for the following medications

Step Therapy

Step therapy means that you must **first** try one or more specific drugs to treat your condition **before** we will cover any othe drug for that condition under your prescription benefit.

Medication is organized in a series of **steps**:

- **Step one** is generally a **generic** medication **or lower-cost** option
- **Step two** is the **non-preferred brand-named** medication

Step Therapy Removed

EDARBI	SITAGLIPTIN PHOSPHATE-METFORMIN
SITAGLIPTIN PHOSPHATE TABLET	THALITONE