

Midsize/Large Group, Upcoming changes, 2026 Preferred Value State Mandate Formulary- 5578

Medications reclassified, with lower costing formulary alternatives available

Medications Moving from Tier 1 to Tier 3 as of January 1, 2026:	
Medication Reclassified	Lower Costing Formulary Alternative
AC CUTANE	TRETINOIN CREAM
ADAPALENE	ADAPALENE 0.3% GEL
ALENDRONATE SODIUM	ALENDRONATE SODIUM 10 MG TAB
ALMOTRIPTAN MALATE	SUMATRIPTAN TABLET
ALPRAZOLAM ER	ALPRAZOLAM TABLET
ALPRAZOLAM XR	ALPRAZOLAM TABLET
AMIODARONE HCL 100 MG TABLET	AMIODARONE HCL 200 MG TABLET
AMIODARONE HCL 400 MG TABLET	AMIODARONE HCL 200 MG TABLET
AMLODIPINE-OLMESARTAN	AMLODIPINE & OLMESARTAN (SEPARATE DRUGS)
AMLODIPINE-VALSARTAN	AMLODIPINE & VALSARTAN (SEPARATE DRUGS)
AMLODIPINE-VALSARTAN-HCTZ	AMLODIPINE & VALSARTAN & HYDROCHLOROTHIAZIDE (SEPARATE DRUGS)
AMNESTEEM	TRETINOIN CREAM
APREPITANT	ONDANSETRON
BACLOFEN 25 MG/5 ML SUSPENSION	BACLOFEN 10 MG TABLET
BESER	FLUTICASONE PROP 0.05% CREAM
BRIMONIDINE 0.33% GEL PUMP	ROSADAN 0.75% CREAM
BRIMONIDINE TARTRATE-TIMOLOL	BRIMONIDINE & TIMOLOL (SEPARATE DRUGS)
BUDESONIDE ER 9 MG TABLET	BUDESONIDE EC 3 MG CAPSULE
BUTALB-ACETAMIN-CAFF 50-325-40	BUTALB-ACETAMIN-CAFF 50-300-40
CARBIDOPA/LEVODOPA ODT	CARBIDOPA-LEVODOPA 10-100 TAB
CARVEDILOL ER	CARVEDILOL TABLET (NON-ER)
CIMETIDINE 400 MG TABLET	CIMETIDINE 200 MG TABLET
CIMETIDINE 800 MG TABLET	CIMETIDINE 200 MG TABLET
CIMETIDINE SOLN	CIMETIDINE 200 MG TABLET
CLARAVIS	TRETINOIN CREAM
CLINDACIN	CLINDAMYCIN PHOSPHATE GEL (TUBE)
CLINDAMYCIN PHOSP 1% LOTION	CLINDAMYCIN PHOSPHATE GEL (TUBE)
CLINDAMYCIN-BNZ PEROX 1-5% PMP	CLINDAMYCIN-BENZOYL PEROXIDE 1.2-5% (TUBE)
CLOMIPRAMINE HCL	AMITRIPTYLINE TAB
CLONAZEPAM ODT	CLONAZEPAM TABLET

Medications Moving from Tier 1 to Tier 3 as of January 1, 2026 (Continued)	
Medication Reclassified	Lower Costing Formulary Alternative
CLORAZEPATE DIPOTASSIUM	DIAZEPAM TABLET
DABIGATRAN ETEXILATE	XARELTO, ELIQUIS, WARFARIN
DANTROLENE SODIUM	ALTERNATIVE IS INDICATION SPECIFIC (IF APPLICABLE)
DARIFENACIN ER	SOLIFENACIN 5 MG TABLET
DEFLAZACORT	PREDNISONE
DESIPRAMINE HCL	AMITRIPTYLINE TAB
DESONIDE	DESONIDE 0.05% CREAM
DEXTROAMPHETAMINE 15 MG TAB	DEXTROAMPHETAMINE 5 MG OR 10 MG TAB
DEXTROAMPHETAMINE 20 MG TAB	DEXTROAMPHETAMINE 5 MG OR 10 MG TAB
DEXTROAMPHETAMINE 30 MG TAB	DEXTROAMPHETAMINE 5 MG OR 10 MG TAB
DEXTROAMPHETAMINE 5 MG/5 ML	DEXTROAMPHETAMINE 5 MG OR 10 MG TAB
DICHLORPHENAMIDE	ACETAZOLAMIDE 125 MG TABLET
DICLOFENAC SODIUM 3% GEL	IMIQUMOD 5% CREAM PACKET
DORZOLAMIDE-TIMOLOL	DORZOLAMIDE-TIMOLOL EYE DROPS
DOXYCYCLINE HYCLATE	DOXYCYCLINE MONO 50 MG CAP
DOXYCYCLINE MONO 75 MG CAPSULE	DOXYCYCLINE MONO 50 MG CAP
DROXIDOPA	MIDODRINE TABLET
EC-NAPROXEN DR TABLET	NAPROXEN 250 MG TABLET
ENALAPRIL 1 MG/ML ORAL SOLN	ENALAPRIL TABLET
ERY-TAB	ERYTHROMYCIN 250 MG TABLET
ESLICARBAZEPINE ACETATE	EPITOL TABLET
EZETIMIBE-SIMVASTATIN	EZETIMIBE & SIMVASTATIN (SEPARATE DRUGS)
FENOFIBRATE	FENOFIBRIC ACID DR CAP
FESOTERODINE FUMARATE ER	OXYBUTYNIN 5 MG TABLET
FLAVOXATE HCL	OXYBUTYNIN 5 MG TABLET
FLUOXETINE DR	FLUOXETINE CAPSULE
FLUOXETINE TABLET	FLUOXETINE CAPSULE
FLURAZEPAM HCL	ESTAZOLAM TABLET
FLURBIPROFEN	IBUPROFEN
FLUTICASONE PROP 0.05% LOTION	FLUTICASONE PROP 0.05% CREAM
FLUVOXAMINE MALEATE ER	FLUVOXAMINE MALEATE 25 MG TAB

Medications Moving from Tier 1 to Tier 3 as of January 1, 2026 (Continued)	
Medication Reclassified	Lower Costing Formulary Alternative
FROVATRIPTAN SUCCINATE	SUMATRIPTAN TABLET
GABAPENTIN ER	GABAPENTIN CAPSULE
GATIFLOXACIN	CIPROFLOXACIN 0.3% EYE DROP
GLYCOPYRROLATE 1.5 MG TABLET	GLYCOPYRROLATE 1 MG TABLET
GLYCOPYRROLATE SOLN	GLYCOPYRROLATE TABLET
HYDROMORPHONE ER	MORPHINE SULFATE ER
ISOTRETINOIN	TRETINOIN CREAM
ISRADIPINE	FELODIPINE ER 2.5 MG TABLET
ITRACONAZOLE	FLUCONAZOLE, BUT MAY DEPENDENT ON COVERAGE NEEDED
LACTULOSE PACKET	LACTULOSE ORAL SOLUTION
LEVALBUTEROL 0.63 MG/3 ML SOL	LEVALBUTEROL 0.31 MG/3 ML SOL
LEVALBUTEROL 1.25 MG/3 ML SOL	LEVALBUTEROL 0.31 MG/3 ML SOL
LEVALBUTEROL CONC 1.25 MG/0.5	LEVALBUTEROL 0.31 MG/3 ML SOL
LOTEPREDNOL ETABONATE 0.5% DRP	LOTEPREDNOL 0.5% OPHTHALMC GEL
LURBIPR	IBUPROFEN
MALATHION	PERMETHRIN 5% CREAM
MESALAMINE 800 MG DR TABLET	MESALAMINE DR 1.2 GM TABLET
METHITEST	TESTOSTERONE 1.62% GEL PUMP
METHYLTESTOSTERONE	TESTOSTERONE 1.62% GEL PUMP
MIGLITOL	ACARBOSE TABLET
MIRTAZAPINE ODT	MIRTAZAPINE TABLET
MONDOXYNE NL	DOXYCYCLINE MONO 50 MG CAP
MOXIFLOXACIN 0.5% EYE DRP-VISC	MOXIFLOXACIN 0.5% EYE DROPS
MYORISAN	TRETINOIN CREAM
NAPROXEN DR TABLET	NAPROXEN 250 MG TABLET
NAPROXEN SODIUM	NAPROXEN 250 MG TABLET
NARATRIPTAN HCL 1 MG TABLET	NARATRIPTAN HCL 2.5 MG TABLET
NEFAZODONE HCL	TRAZODONE 50 MG TABLET
NIACIN ER	ATORVASTATIN
NIMODIPINE 60 MG/20 ML SOLN	NIMODIPINE 30 MG CAPSULE
NIZATIDINE	CIMETIDINE 200 MG TABLET

Medications Moving from Tier 1 to Tier 3 as of January 1, 2026 (Continued)	
Medication Reclassified	Lower Costing Formulary Alternative
OLANZAPINE ODT	OLANZAPINE TABLET
OLMESARTAN-AMLODIPINE-HCTZ	AMLODIPINE & OLMESARTAN & HYDROCHLOROTHIAZIDE (SEPARATE DRUGS)
ORMALVI	ACETAZOLAMIDE 125 MG TABLET
OXAPROZIN	IBUPROFEN
OXAZEPAM	LORAZEPAM TABLET
PACERONE 100 MG TABLET	AMIODARONE HCL 200 MG TABLET
PACERONE 400 MG TABLET	AMIODARONE HCL 200 MG TABLET
PALIPERIDONE ER	RISPERIDONE TABLET
PAROXETINE ER	PAROXETINE TABLET
PHENDIMETRAZINE TARTRATE	PHENTERMINE
PHENDIMETRAZINE TARTRATE ER	PHENTERMINE
PHENTERMINE-TOPIRAMATE ER	PHENTERMINE
PIOGLITAZONE-GLIMEPIRIDE	PIOGLITAZONE-GLIMEPIRIDE 30-4
PIOGLITAZONE-METFORMIN	XIGDUO XR
PROPAFENONE HCL ER	PROPAFENONE TABLET
PROTRIPTYLINE HCL	AMITRIPTYLINE TAB
PYRIMETHAMINE	CHLOROQUINE PH 250 MG TABLET
QUININE SULFATE	CHLOROQUINE PH 250 MG TABLET
RISEDRONATE SODIUM 5 MG TABLET	RISEDRONATE SODIUM 35 MG TAB (GENERIC ACTONEL)
RISEDRONATE SODIUM DR 35MG (GENERIC ATELVA)	RISEDRONATE SODIUM 35 MG TAB (GENERIC ACTONEL)
RUFINAMIDE	VALPROIC ACID
SAJAZIR	ICATIBANT
SAXAGLIPTIN HCL	TRADJENTA
SAXAGLIPTIN-METFORMIN ER	JENTADUETO XR
SILODOSIN	ALFUZOSIN HCL ER 10 MG TABLET
SUMATRIPTAN INJECTION	SUMATRIPTAN TABLET
TASIMELTEON	RAMELTEON 8 MG TABLET
TAZAROTENE	CALCITRIOL 3 MCG/G OINTMENT
TELMISARTAN-HYDROCHLOROTHIAZID	TELMISARTAN & HYDROCHLOROTHIAZIDE (SEPARATE DRUGS)
TEMAZEPAM 22.5 MG CAPSULE	TEMAZEPAM 15 MG CAPSULE
TEMAZEPAM 7.5 MG CAPSULE	TEMAZEPAM 15 MG CAPSULE

Medications Moving from Tier 1 to Tier 3 as of January 1, 2026 (Continued)	
Medication Reclassified	Lower Costing Formulary Alternative
TESTOSTERONE 1% (25MG/2.5G) PK	TESTOSTERONE 1.62% GEL PUMP
TESTOSTERONE 1% (50 MG/5 G) PK	TESTOSTERONE 1.62% GEL PUMP
TESTOSTERONE 1.62% (2.5 G) PKT	TESTOSTERONE 1.62% GEL PUMP
TESTOSTERONE 1.62%(1.25 G) PKT	TESTOSTERONE 1.62% GEL PUMP
TESTOSTERONE 10 MG GEL PUMP	TESTOSTERONE 1.62% GEL PUMP
TESTOSTERONE 12.5 MG/1.25 GRAM	TESTOSTERONE 1.62% GEL PUMP
TESTOSTERONE 30 MG/1.5 ML PUMP	TESTOSTERONE 1.62% GEL PUMP
TESTOSTERONE 50 MG/5 GRAM GEL	TESTOSTERONE 1.62% GEL PUMP
TETRACAINE HCL	PROPARACAINE 0.5% EYE DROPS
TETRACYCLINE HCL	DOXYCYCLINE MONO 50 MG CAP
TIMOLOL MALEATE 0.25% EYE DROPS	TIMOLOL MALEATE 0.5% EYE DROPS (GENERIC TIMOPTIC)
TOLTERODINE TARTRATE	OXYBUTYNIN 5 MG TABLET
TOLTERODINE TARTRATE ER	OXYBUTYNIN 5 MG TABLET
TRAMADOL HCL ER	TRAMADOL HCL 50 MG TABLET
TRANDOLAPRIL	LISINOPRIL TABLET
TRANDOLAPRIL-VERAPAMIL	AMLODIPINE-BENAZEPRIL
TRANLYCYPROMINE SULFATE	PHENELZINE SULFATE 15 MG TAB
TRIMETHOBENZAMIDE HCL	ONDANSETRON
TROSPIUM CHLORIDE	OXYBUTYNIN 5 MG TABLET
URSODIOL 200 MG CAPSULE	URSODIOL 300 MG CAPSULE
URSODIOL 400 MG CAPSULE	URSODIOL 300 MG CAPSULE
VERAPAMIL SR 360 MG CAPSULE	VERAPAMIL ER 180 MG TABLET
VIGABATRIN	CARBAMAZEPINE TABLET
VIGADRONE	CARBAMAZEPINE TABLET
VILAZODONE HCL	ESCITALOPRAM
VORICONAZOLE	FLUCONAZOLE, BUT MAY DEPDENT ON COVERAGE NEEDED
ZEBUTAL	BUTALB-ACETAMIN-CAFF 50-300-40
ZENATANE	TRETINOIN CREAM
ZOLPIDEM TARTRATE SUBLINGUAL TABLET	ZOLPIDEM TARTRATE 5 MG TABLET

Medications reclassified, with lower costing formulary alternatives available

Medications Moving from Tier 2 to Tier 3 as of January 1, 2026 - No lower cost formulary alternative	
Medication Reclassified	Lower Costing Formulary Alternative
ALPHAGAN P	BRIMONIDINE TARTRATE 0.1% DROP
ESTRACE	ESTRADIOL CREAM
VICTOZA	OZEMPIC, TRULICITY, MOUNJARO, RYBELSUS

Medications reclassified, with NO lower costing formulary alternatives available

Medications Moving from Tier 1 to Tier 3 as of January 1, 2026 - No lower cost formulary alternative	
Medication Reclassified	
ALCOHOL PREP	MESNA
BOOST	METAFORM
BRIGHT BEGINNINGS SOY	NOVASOURCE RENAL
CETRORELIX ACETATE	NUTRAFIT
COMPLEAT PEDIATRIC REDUCED CAL	NUTRAFIT PLUS
COMPLETE AMINO ACID MIX	NUTREN
CYTOLLINE	NUTREN JUNIOR
CYTO-Q MAX	NUTREN JUNIOR FIBER
ELTROMBOPAG OLAMINE	NUTRITIONAL DRINK
ENFAMIL A.R.	NUTRITIONAL DRINK MIX
ENSURE	NUTRITIONAL DRINK PLUS
ESSENTIAL AMINO ACID MIX	NUTRITIONAL SHAKE
FYREMADEL	OSMOLITE
GANIRELIX ACETATE GENERIC	PEDIASURE PEPTIDE 1.0 CAL
GLUCERNA	PEDIATRIC DRINK
GLUTOSE	PEDIATRIC PEPTIDE 1.0
GLYTROL	PEDIATRIC PEPTIDE FORMULA 1.5
HCU EXPRESS POWDER	PEDIATRIC STANDARD FORMULA 1.2
HIGH-PROTEIN NUTRITIONAL SHAKE	PEPTAMEN
IMMULIFE	PEPTAMEN 1.5 CAL WITH PREBIO1
IMPACT TUBE FEEDING	PEPTAMEN JUNIOR FIBER
ISOPROPYL ALCOHOL	PEPTAMEN W-PREBIO1
ISOSOURCE 1.5 CAL TUBE FEED	PIVOT 1.5 CAL

Medications Moving from Tier 1 to Tier 3 as of January 1, 2026 - No lower cost formulary alternative	
Medication Reclassified (continued)	
ISOSOURCE HN	PRE PROTEIN
JAVYGTOR	PROBALANCE
LANSOPRAZOL-AMOXICIL-CLARITHRO	PROCEL
L-CITRULLINE	PROSOURCE
L-GLUTAMINE	PROSOURCE NO CARB
LIPISTART	PRO-STAT AWC
MCT PRO-CAL	PROTEIN POWDER
RELION	SIMILAC ALIMENTUM
REPLETE	SIMILAC NEOSURE
REPLETE WITH FIBER	SIMILAC SENSITIVE FUSS & GAS
RESOURCE 2.0	STANDARD 1.4
RESOURCE BENECALORIE	TADALAFIL (GENERIC CIALIS)
RESOURCE BENEPROTEIN	TAVABOROLE
RESOURCE JUST FOR KIDS W-FIBER	TIOPRONIN
RIBAVIRIN	TOLVAPTAN
SACUBITRIL-VALSARTAN	VARDENAFIL HCL
SAPROPTERIN DIHYDROCHLORIDE	VENXXIVA
SCOPOLAMINE	VIVONEX RTF
SILDENAFIL CITRATE (GENERIC VIAGRA)	XMTVI MAXAMAID
SIMILAC ADVANCE ORGANIC	XMTVI MAXAMUM

Medications reclassified, with NO lower costing formulary alternatives available

Medications Moving from Tier 2 to Tier 3 as of January 1, 2026 - No lower cost formulary alternative	
Medication Reclassified	
DIAFOODS THICK-IT	THICK NOW
INSTANT FOOD THICKENER	THICKEN UP
RESOURCE THICKENUP	THICK-IT
SIMPLYTHICK	ZEJULA
SYNDROS	JAKAFI

Medications reclassified, with NO lower costing formulary alternatives available

Medications Moving from Tier 1 to Tier 2 as of January 1, 2026 - No lower cost formulary alternative	
Medication Reclassified	
LENALIDOMIDE	NITISINONE
MIFEPRISTONE 300 MG TABLET	PIRFENIDONE 267 MG CAPSULE
MIGLUSTAT	YARGESA

Medications reclassified, Positive change with NO lower costing formulary alternatives available

Medications Moving from Tier 3 to Tier 1 as of January 1, 2026	
Medication Reclassified	
FLUORIDE TABLET CHEWABLE	TRI-VITE-FLUORIDE 0.25 MG/ML
MULTIVIT-FLUOR 0.5 MG/ML DROP	TRI-VITE-FLUORIDE 0.5 MG/ML
MULTIVIT-FLUORIDE DROP	VIT A,C,D-FLUORIDE 0.25 MG/ML
MULTIVIT-FLUORIDE TABLET CHWABLE	VIT A,C,D-FLUORIDE 0.5 MG/ML
SODIUM FLUORIDE 0.5 MG/ML DROP	

Medications reclassified, Positive change with NO lower costing formulary alternatives available

Medications Moving from Tier 3 to Tier 2 as of January 1, 2026	
Medication Reclassified	
MORPHINE SULFATE IR 15 MG TAB	MORPHINE SULFATE IR 30 MG TAB