

FORMULARY UPDATES

Key			
AL= Age Limit	ST= Step Therapy	OTC= Over the Counter	PA Prior Authorization
PA, QL= Quantity Limit is applied after Prior Authorization approval	QL= Quantity Limit	SP= Specialty Drugs; these drugs must be obtained through a specialty pharmacy	

Date Effective	Product Name	Change	Notes
1/1/2026	Adalimumab-fkjp	Smart PA for SB135	Added new Dx Codes to diagnosis list
1/1/2026	Pyzchiva	Smart PA for SB135	Added new Dx Codes to diagnosis list
1/1/2026	Yesintek	Smart PA for SB135	Added new Dx Codes to diagnosis list
1/1/2026	Gel-One	Add to formulary, PA required	
1/1/2026	Hymovis	Add to formulary, PA required	
1/1/2026	Orthovisc	Add to formulary, PA required	
1/1/2026	Monovisc	Add to formulary, PA required	
1/1/2026	Durolane	Add to formulary, PA required	
1/1/2026	Gelsyn-3	Add to formulary, PA required	
1/1/2026	Euflexxa	Add to formulary, PA required	
1/1/2026	Visco-3	Add to formulary, PA required	
1/1/2026	Norethindrone 5mg	QL Update	QL of 3 tablets daily
1/1/2026	Fluticasone HFA 110Mcg	QL Update	Allow 2 MDI's per 30 days
1/1/2026	Fluticasone HFA 110Mcg	Age Update	Term minimum age of 11
1/1/2026	Fluticasone HFA 44Mcg	Age Update	Term minimum age of 11
1/1/2026	*Anorexiant Non-Amphetamine**	Custom Messaging added	EPDST members 21 years and under, may request for medical necessity.
1/1/2026	*Anti-Obesity Agents**	Custom Messaging added	EPDST members 21 years and under, may request for medical necessity.
1/1/2026	Synagis	Remove from formulary	
1/1/2026	Bausch Products	Custom Messaging added	Products no longer rebate eligible
1/1/2026	Flu Vaccine	Age Update	Update minimum age to Zero
1/1/2026	Fulphila SOSY	Add to formulary, PA required	
4/1/2026	Irbesartan/HCTZ	Add to Formulary, QL	QL up to 1/day
4/1/2026	Olmesartan/HCTZ	Add to Formulary, QL	QL up to 1/day

Date Effective	Product Name	Change	Notes
4/1/2026	Pulmozyme	Remove PA, update QL	QL up to 150mL/30 days
4/1/2026	Sublocade	QVT Update	QL up to 3mL/28 days
4/1/2026	Valtoco	Age	Lower Minimum Age from 6 to 2 years
7/1/2026	Albuterol HFA	Increase QL to #2/inahlers per 34 days	
7/1/2026	Steglatro	Removed Steglatro from 90 day supply list	
7/1/2026	Ramelteon	Added to Formulary	
7/1/2026	Eszopiclone	Added to Formulary	
7/1/2026	Accu-Chek Meter	Added to Formulary	
7/1/2026	Accu-Chek Test Strips	Added to Formulary	