



Molina Healthcare Marketplace

2021 Formulary Changes Effective 7/1/2021

Drug Name	Description of Formulary Change	Notes
ARIPIRAZOLE TAB 10MG	Remove PA requirement	
ARIPIRAZOLE TAB 15MG	Remove PA requirement	
ARIPIRAZOLE TAB 20MG	Remove PA requirement	
ARIPIRAZOLE TAB 2MG	Remove PA requirement	
ARIPIRAZOLE TAB 30MG	Remove PA requirement	
ARIPIRAZOLE TAB 5MG	Remove PA requirement	
ARISTADA INJ INITIO	Add brand to TIER 2 with QL, Age Min	QL = 2.5 mL per 25 days, Age min = 6
ARISTADA PRSY 1064MG/3.9ML	Add brand to TIER 2 with QL, Age Min	QL = 3.9 mL per 51 days, Age min = 6
BEPOTASTINE DRO 1.5%	Add to formulary, TIER 3, PA	
ESTRADIOL DIS 0.025MG	Add to formulary, TIER 3, QL	QL = 10 per 30 days
ESTRADIOL DIS 0.025MG	Add to formulary, TIER 3, QL	QL = 5 per 30 days
ESTRADIOL DIS 0.0375MG	Add to formulary, TIER 3, QL	QL = 10 per 30 days
ESTRADIOL DIS 0.0375MG	Add to formulary, TIER 3, QL	QL = 5 per 30 days
ESTRADIOL DIS 0.05MG	Add to formulary, TIER 3, QL	QL = 10 per 30 days
ESTRADIOL DIS 0.05MG	Add to formulary, TIER 3, QL	QL = 5 per 30 days
ESTRADIOL DIS 0.06MG	Add to formulary, TIER 3, QL	QL = 5 per 30 days
ESTRADIOL DIS 0.075MG	Add to formulary, TIER 3, QL	QL = 10 per 30 days
ESTRADIOL DIS 0.075MG	Add to formulary, TIER 3, QL	QL = 5 per 30 days
ESTRADIOL DIS 0.1MG	Add to formulary, TIER 3, QL	QL = 10 per 30 days
ESTRADIOL DIS 0.1MG	Add to formulary, TIER 3, QL	QL = 5 per 30 days
ESTRADIOL DIS 14MCG	Add to formulary, TIER 3, QL	QL = 5 per 30 days
FARXIGA TAB 10MG	Update ST Requirements	Requires Trial of Metformin
FARXIGA TAB 5MG	Update ST Requirements	Requires Trial of Metformin
GLUCAGON KIT 1MG	Add to formulary, TIER 1, QL	QL = 2 per 30 days
GLYXAMBI TAB 10-5 MG	Update ST Requirements	Requires Trial of Metformin
GLYXAMBI TAB 25-5 MG	Update ST Requirements	Requires Trial of Metformin
JARDIANCE TAB 10MG	Update ST Requirements	Requires Trial of Metformin
JARDIANCE TAB 25MG	Update ST Requirements	Requires Trial of Metformin
OZEMPIC INJ 2/1.5ML	Update ST Requirements	Requires Trial of Metformin
OZEMPIC INJ 2/1.5ML	Update ST Requirements	Requires Trial of Metformin

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OZEMPIC INJ 4MG/3ML	Add brand to TIER 2 with ST	Requires Trial of Metformin
PYRIMETHAMIN TAB 25MG	Add to formulary, T4, PA, QL	QL = 120 per 30 days
RUFINAMIDE TAB 200MG	Add to formulary, TIER 3	
RUFINAMIDE TAB 400MG	Add to formulary, TIER 3	
RYBELSUS TAB 14 MG	Update ST Requirements	Requires Trial of Metformin
RYBELSUS TAB 3 MG	Update ST Requirements	Requires Trial of Metformin
RYBELSUS TAB 7 MG	Update ST Requirements	Requires Trial of Metformin
SANTYL OIN 250U/GM	Update QL Requirements	QL = 60 per 30 days
SULCONAZOLE SOL 1%	Add to formulary, TIER 3, PA	
SYNJARDY TAB	Update ST Requirements	Requires Trial of Metformin
SYNJARDY TAB 12.5-500	Update ST Requirements	Requires Trial of Metformin
SYNJARDY TAB 5-1000MG	Update ST Requirements	Requires Trial of Metformin
SYNJARDY TAB 5-500MG	Update ST Requirements	Requires Trial of Metformin
SYNJARDY XR TAB	Update ST Requirements	Requires Trial of Metformin
SYNJARDY XR TAB 10-1000	Update ST Requirements	Requires Trial of Metformin
SYNJARDY XR TAB 25-1000	Update ST Requirements	Requires Trial of Metformin
SYNJARDY XR TAB 5-1000MG	Update ST Requirements	Requires Trial of Metformin
TRIJARDYXR1G TAB 10-5 MG	Update ST Requirements	Requires Trial of Metformin
TRIJARDYXR1G TAB 12.5-2.5	Update ST Requirements	Requires Trial of Metformin
TRIJARDYXR1G TAB 25-5 MG	Update ST Requirements	Requires Trial of Metformin
TRIJARDYXR1G TAB 5-2.5 MG	Update ST Requirements	Requires Trial of Metformin
TRULICITY INJ 3/0.5	Update ST Requirements	Requires Trial of Metformin
TRULICITY INJ 4.5/0.5	Update ST Requirements	Requires Trial of Metformin
TRULICITY INJ 0.75/0.5	Update ST Requirements	Requires Trial of Metformin
TRULICITY INJ 1.5/0.5	Update ST Requirements	Requires Trial of Metformin



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XIGDUO XR TAB 10-1000	Update ST Requirements	Requires Trial of Metformin
XIGDUO XR TAB 10-500MG	Update ST Requirements	Requires Trial of Metformin
XIGDUO XR TAB 2.5-1000	Update ST Requirements	Requires Trial of Metformin
XIGDUO XR TAB 5-1000MG	Update ST Requirements	Requires Trial of Metformin
XIGDUO XR TAB 5-500MG	Update ST Requirements	Requires Trial of Metformin

PA – Prior Authorization; QL – Quantity Limit; ST – Step Therapy; Age Min – Minimum Age Restriction