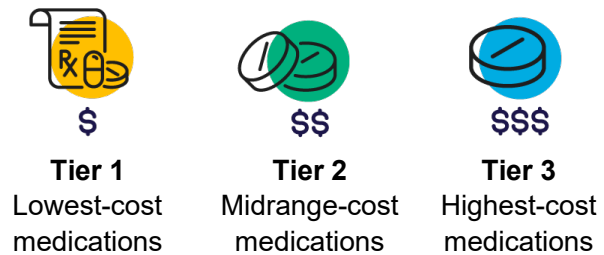


Updates To Your Prescription Benefits

Applies to the Select Formulary Effective January 1, 2024

The Prescription Drug List (PDL) groups medications by the conditions they treat. Each medication is placed in a tier that indicates the amount you pay to fill a prescription as determined by your employer or health plan. Please reference this chart as you review the following PDL updates.



MEDICATIONS BEING EXCLUDED

Medications may be excluded from coverage under your pharmacy benefit when it works the same as or similar to another prescription medication or an over-the-counter (OTC) medication. There may be other medication options available.

THERAPEUTIC USE	MEDICATION NAME	ALTERNATIVES
Antipsychotics	Latuda	lurasidone
Asthma	Advair Diskus	Advair HFA, Breo Ellipta, Symbicort
	Flovent Diskus, Flovent HFA, Pulmicort Flexhaler	Arnuity Ellipta, QVAR RediHaler
Cancer	Imbruvica tablet 140mg, 280mg	Imbruvica capsule 140mg, Calquence
	Xalkori	Consult with physician for clinically appropriate alternatives
Hereditary Angioedema (HAE)	Cinryze	Haegarda, Orladeyo, Takhzyro
Idiopathic Pulmonary Fibrosis (IPF)	Esbriet	pirfenidone
Multiple Sclerosis	Ampyra	dalfampridine
	Aubagio	teriflunomide
	Copaxone 20mg	glatiramer
Narcolepsy	Sodium Oxybate (Amneal manufacturer), Xyrem	Sodium Oxybate (Hikma manufacturer), Sunosi, Wakix, Xywav
Neutropenia	Ziextenzo	Neulasta, Udenyca

THERAPEUTIC USE	MEDICATION NAME	ALTERNATIVES
Pulmonary Arterial Hypertension (PAH)	Revatio	sildenafil citrate
Seizure	Trokendi XR	topiramate IR/ER
Testosterone Replacement Therapy	Xyosted	testosterone cypionate, testosterone enanthate
Ulcerative Colitis	Pentasa CR 250mg	mesalamine, Apriso

MEDICATIONS MOVING TO A HIGHER TIER

If your medication is listed below, you may continue taking it, but you may pay a higher cost. We encourage you to discuss the preferred option(s) below with your doctor to determine if they may be used to treat your condition.

THERAPEUTIC USE	MEDICATION NAME	TIER PLACEMENT	ALTERNATIVES
ADHD	Vyvanse	2→3	lisdexamfetamine dimesylate
Acne	Retin-A Micro 0.06%, 0.08%	2→3	tretinoin gel
Cancer	Folotyn, Mekinist, Tafinlar	2→3	Consult with physician for clinically appropriate alternatives
Contraception	Tyblume	2→3	levonorgestrel & ethinyl estradiol, Afirmelle
Helicobacter Pylori (H.pylori)	Pylera	2→3	bismuth/metronidazole/tetracycline
HIV	Complera, Tivicay, Tivicay PD	2→3	Consult with physician for clinically appropriate alternatives
Hyperkalemia	SPS	2→3	sodium polystyrene sulfonate powder
Migraine	Botox	2→3	Dysport, Myobloc, Xeomin
Nausea/Vomiting	Promethegan	2→3	promethazine suppository 25mg
Uveitis	Homatropaire	2→3	atropine solution

If you have additional questions, please call customer service at 800-759-3203 or visit [ServeYouRx.com](https://www.ServeYouRx.com).