

Optimum HealthCare, Inc.

Formulary Changes- Aug 2018

Drug Name	Dosage Form	Strength	Therapeutic Category	Alternative Medicine	Formulary Status of Alternative Medication	Formulary Change and Reason	Update Tier Status	PA/QL/ST	Date Changed
BASAGLAR	SOLN	100UNIT/ML	Blood Glucose Regulators			ADD	2	QL	8/1/2018
CIPROFLOXACIN	SUSP	2MG/ML	Otic Agents			ADD	2		8/1/2018
HUMIRA 0.2ML	SOLN	100MG/ML	Immunological Agents			ADD	4	PA	8/1/2018
NORVIR	POW	100MG	Antivirals			ADD	3		8/1/2018
SYMFI	TABS	600/300/300MG	Antivirals			ADD	4	QL	8/1/2018
ESTARYLLA 28 DAY	TABS	0.035/0.25/1MG/MG	Hormonal Agents/Stimulant/Replacement/Modifying (Sex Hormones Modifiers)			ADD	1		8/1/2018
LINEZOLID	TABS	600MG	Antibacterials			UPDATE	Moved to Tier 3	PA	8/1/2018

Formulary Changes- July 2018

Drug Name	Dosage Form	Strength	Therapeutic Category	Alternative Medicine	Formular y Status of Alternati ve Medicati on	Formular y Change and Reason	Updat e Tier Statu s	PA/QL /ST	Date Changed
60 ACTUAT FLUTICASONE PROPIONATE 0.055 MG/ACTUAT / SALMETEROL XINAFOATE 0.014 MG	INH		Respiratory Tract Pulmonary Agents			ADD	2	QL	7/1/2018
60 ACTUAT FLUTICASONE PROPIONATE 0.113 MG/ACTUAT / SALMETEROL XINAFOATE 0.014 MG	INH		Respiratory Tract Pulmonary Agents			ADD	2	QL	7/1/2018
60 ACTUAT FLUTICASONE PROPIONATE 0.232 MG/ACTUAT / SALMETEROL XINAFOATE 0.014 MG	INH		Respiratory Tract Pulmonary Agents			ADD	2	QL	7/1/2018
TRELEGY ELLIPTA	INH	0	Respiratory Tract Pulmonary Agents			ADD	2	QL	7/1/2018
TOUJEO	SOLN	300UNIT/ML	Blood Glucose Regulators			ADD	2	QL	7/1/2018
HUMIRA 0.4 AUTO-INJ	SOLN	100MG/0.4ML	Immunological Agents			ADD	4	PA	7/1/2018
HUMIRA 0.4 SYRINGE	SOLN	100MG/0.4ML	Immunological Agents			ADD	4	PA	7/1/2018
HUMIRA 0.1 SYRINGE	SOLN	100MG/0.1ML	Immunological Agents			ADD	4	PA	7/1/2018
HUMIRA PEDIATRIC CROHN'S DISEASE STARTER PACKAGE (2 COUNT)	PACK		Immunological Agents			ADD	4	PA	7/1/2018

HUMIRA PREFILLED SYRINGE 80 MG/0.8 ML STARTER PACK - PEDIATRIC CROHN'S DISEASE	PACK		Immunological Agents			ADD	4	PA	7/1/2018
TASIGNA	CAPS	50MG	Antineoplastics			ADD	4	PA	7/1/2018
ZENPEP 42000/32000/10000	CPEP	0	Genetic or Enzyme Disorder/Replacement/Modifiers Treatment			ADD	2		7/1/2018
IBUPROFEN [IBU]	TABS	600MG	Anti-inflammatory Agents			ADD	1		7/1/2018
IBUPROFEN [IBU]	TABS	800MG	Anti-inflammatory Agents			ADD	1		7/1/2018
INTRON-A	SOLN	10 millionUNIT/ML	Antivirals			UPD	Moved to Tier 3	PA	7/1/2018
LEVOLEUCOVORIN 10 MG/ML	SOLN	10MG/ML	Antineoplastics			UPD	Moved to Tier 2		7/1/2018
LEVOLEUCOVORIN	SOLN	50MG	Antineoplastics			UPD	Moved to Tier 2		7/1/2018

Formulary Changes- June 2018

Drug Name	Dosage Form	Strength	Therapeutic Category	Alternative Medication	Formulary Status of Alternative Medication	Formulary Change and Reason	Update Tier Status	PA/QL/ST	Date Changed
VIRAMUNE	SUSP	50MG/5ML	Antivirals			ADD	3		6/1/2018
ILARIS	SOLN	150MG/ML	Immunological Agents			ADD	4	PA	6/1/2018
IMBRUVICA	TAB	140MG	Antineoplastics			ADD	4	PA	6/1/2018
IMBRUVICA	TAB	280MG	Antineoplastics			ADD	4	PA	6/1/2018
IMBRUVICA	TAB	420MG	Antineoplastics			ADD	4	PA	6/1/2018
IMBRUVICA	TAB	560MG	Antineoplastics			ADD	4	PA	6/1/2018
IMBRUVICA	CAP	70MG	Antineoplastics			ADD	4	PA	6/1/2018
INTRON-A	SOLN	10 millionUNIT/ML	Antivirals			ADD	4	PA	6/1/2018
ISENTRESS	TABS	600MG	Antivirals			ADD	4	QL	6/1/2018
GLATOPA	KIT	40MG/ML	Central Nervous System Agents			ADD	4	PA	6/1/2018
FABRAZYME	SOLN	5MG	Genetic or Enzyme Disorder/Replacement/Modifiers Treatment			ADD	4	PA	6/1/2018
DALIRESP	TABS	250MCG	Respiratory Tract Pulmonary Agents			ADD	2	PA/QL	6/1/2018
ABILIFY	SUSP	400MG/ML	Antipsychotics			ADD	4	PA/QL	6/1/2018
RITONAVIR	TAB	100MG	Antivirals			ADD	3		6/1/2018
LEVOLEUCOVORI	SOLN	50MG	Antineoplastics			ADD	4		6/1/2018

N									18
LANSOPRAZOLE DISINTEGRATING TAB	TBDP	15MG	Gastrointestinal Agents			ADD	2	QL	6/1/20 18
LANSOPRAZOLE DISINTEGRATING TAB	TBDP	30MG	Gastrointestinal Agents			ADD	2	QL	6/1/20 18
SYLVANT	SOLN	100MG/ML	Immunological Agents			ADD	4	PA	6/1/20 18
ALIMTA	SOLN	100MG/ML	Antineoplastics			ADD	4		6/1/20 18
ORFADIN	CAPS	20MG	Genetic or Enzyme Disorder/Replacement/M odifiers Treatment			ADD	4		6/1/20 18
ZYTIGA	TABS	500MG	Antineoplastics			ADD	4	PA	6/1/20 18
RUBRACA	TABS	250MG	Antineoplastics			ADD	4	PA	6/1/20 18
SYMFI LO	TABS	400/300/300M G	Antivirals			ADD	4	QL	6/1/20 18
SYNAGIS	SOLN	100MG/ML	Immunological Agents			ADD	4	PA	6/1/20 18

Formulary Changes- May 2018

Drug Name	Dosage Form	Strength	Therapeutic Category	Alternativ e Medicine	Formulary Status of Alternative Medication	Formulary Change and Reason	Update Tier Status	PA/ QL/ ST	Date Changed
ZENPEP 105000/79000/ 25000	CPEP	0	Genetic or Enzyme Disorder/Replacem ent/Modifiers Treatment			ADD	2		5/1/2018
ZENPEP 24000/17000/5 000	CPEP	0	Genetic or Enzyme Disorder/Replacem ent/Modifiers			ADD	2		5/1/2018

			Treatment						
BIKTARVY	TABS	50/200/25MG	Antivirals			ADD	4	QL	5/1/2018
DIGOX	TABS	0.125MG	Cardiovascular Agents			ADD	1	QL	5/1/2018
DIGOX	TABS	0.25MG	Cardiovascular Agents			ADD	1	PA	5/1/2018
ERLEADA	TABS	240MG	Antineoplastics			ADD	4		5/1/2018
QVAR REDIHALER	AERO	40MCG/ACT	Respiratory Tract Pulmonary Agents			ADD	2	QL	5/1/2018
QVAR REDIHALER	AERO	80MCG/ACT	Respiratory Tract Pulmonary Agents			ADD	2	QL	5/1/2018
EFAVIRENZ	CAPS	200MG	Antivirals			ADD	4		5/1/2018
EFAVIRENZ	TABS	600MG	Antivirals			ADD	4		5/1/2018
ETHINYL ESTRADIOL 0.01 MG/ETHINYL ESTRADIOL 0.02 MG / LEVONORGE STREL 0.1 MG	TABS	0.01/0.02/0.1MG/MG	Hormonal Agents/Stimulant/Replacement/Modifying (Sex Hormones Modifiers)			ADD	1		5/1/2018
HALOPERIDOL PREFILLED SYRINGE	SOLN	5MG/ML	Antipsychotics			ADD	1		5/1/2018
METHOTREXATE	SOLN	25MG/ML	Immunological Agents			ADD	1	PA Bvs D	5/1/2018
NALOXONE HYDROCHLORIDE 1ML	SOLN	0.4MG/ML	Anti-Addiction Substance Abuse Treatment Agents			ADD	1		5/1/2018
TRIENTINE	CAPS	250MG	Electrolytes/Minerals/Metals/Vitamins			ADD	4		5/1/2018
ISOTRETINOIN	CAPS	10MG	Dermatological Agents			ADD	3		5/1/2018
ISOTRETINOIN	CAPS	20MG	Dermatological Agents			ADD	3		5/1/2018
ISOTRETINOIN	CAPS	30MG	Dermatological			ADD	3		5/1/2018

N			Agents						
ISOTRETINOIN	CAPS	40MG	Dermatological Agents			ADD	3		5/1/2018
VIDEX	CPDR	125MG	Antivirals			ADD	3		5/1/2018
ESTRADIOL	Cream	0.1MG/ML	Hormonal Agents/Stimulant/Replacement/Modifying (Sex Hormones Modifiers)			UPDATE	Moved to Tier 2		5/1/2018

Formulary Changes- April 2018

Drug Name	Dosage Form	Strength	Therapeutic Category	Alternative Medication	Formulary Status of Alternative Medication	Formulary Change and Reason	Update Tier Status	PA/QL/ST	Date Changed
ALUNBRIG	TABS	180MG	Antineoplastics			ADD	4		4/1/2018
ALUNBRIG	TABS	90MG	Antineoplastics			ADD	4		4/1/2018
ALUNBRIG INITIATION PACK	TABS	90/180MG	Antineoplastics			ADD	4		4/1/2018
ELIQUIS 30-DAY STARTER PACK	TABS	5MG	Blood Products/Modifiers /Volume Expanders			ADD	2	QL	4/1/2018
HERCEPTIN	SOLN	150MG	Antineoplastics			ADD	4	PA	4/1/2018
SELZENTRY	SOLN	20MG/ML	Antivirals			ADD	3		4/1/2018
SHINGRIX	SOLN	units/ml	Immunological Agents			ADD	3		4/1/2018
ZENPAP 168000/126000/40000	CPEP	0	Genetic or Enzyme Disorder/Replacement/Modifiers Treatment			ADD	2		4/1/2018
ATAZANAVIR	CAPS	150MG	Antivirals			ADD	4	QL	4/1/2018
ATAZANAVIR	CAPS	200MG	Antivirals			ADD	4	QL	4/1/2018

ATAZANAVIR	CAPS	300MG	Antivirals			ADD	4	QL	4/1/2018
DORIPENEM	SOLN	500MG	Antibacterials			ADD	3	BvsD PA	4/1/2018
ESTRADIOL	CREA	0.1MG/ML	Hormonal Agents/Stimulant/Replacement/Modifying (Sex Hormones Modifiers)			ADD	3		4/1/2018
MEDROXYPROGESTERONE ACETATE SYRINGE	SUSP	150MG/ML	Hormonal Agents/Stimulant/Replacement/Modifying (Sex Hormones Modifiers)			ADD	1	QL	4/1/2018
ALTAVERA 28 DAY	TABS	0.03/0.15MG/MG	Hormonal Agents/Stimulant/Replacement/Modifying (Sex Hormones Modifiers)			ADD	1		4/1/2018
ENSKYCE 28 DAY	TABS	0.15/30MG/MCG	Hormonal Agents/Stimulant/Replacement/Modifying (Sex Hormones Modifiers)			ADD	1		4/1/2018
KURVELO	TABS	0.03/0.15MG/MG	Hormonal Agents/Stimulant/Replacement/Modifying (Sex Hormones Modifiers)			ADD	1		4/1/2018
ETHINYL ESTRADIOL / LEVONORGESTREL / 7 (INERT INGREDIENTS 1 MG ORAL TABLET)	TABS	0.03/0.15MG/MG	Hormonal Agents/Stimulant/Replacement/Modifying (Sex Hormones Modifiers)			ADD	1		4/1/2018
LEVOCETIRIZINE	TABS	5MG	Respiratory Tract Pulmonary Agents			UPDATE		Remove ST	4/1/2018

Formulary Changes- March 2018

Drug Name	Dosage Form	Strength	Therapeutic Category	Alternative Medication	Formulary Status of Alternative Medication	Formulary Change and Reason	Update Tier Status	PA/QL/ST	Date Changed
CIMETIDINE	TABS	200MG	Histamine2 (H2) Receptor Antagonists			Added	1		3/1/2018
FUROSEMIDE	SOLN	8MG/ML	Diuretics/Loop			Added	1		3/1/2018
HYDROCORTISONE	TABS	10MG	Hormonal Agents/Stimulant/Replacement/Modifying (Adrenal)			Added	1		3/1/2018
HYDROCORTISONE	TABS	5MG	Hormonal Agents/Stimulant/Replacement/Modifying (Adrenal)			Added	1		3/1/2018
METHYLPREDNISOLONE	TABS	32MG	Hormonal Agents/Stimulant/Replacement/Modifying (Adrenal)			Added	1	PA	3/1/2018
HYDROCHLOROTHIAZIDE/TRIAMTERENE	CAPS	25/50MG	Diuretics/Potassium-sparing			Added	1		3/1/2018
HYDROCORTISONE	OINT	0.01MG/MG	Hormonal Agents/Stimulant/Replacement/Modifying (Adrenal)			Added	1		3/1/2018
POTASSIUM CHLORIDE	SOLN	2MEQ/ML	Electrolyte/Mineral Replacement			Added	1		3/1/2018
TAZICEF	SOLN	200MG/ML	Beta-lactam/Cephalosporins			Added	2		3/1/2018
SSD	CREA	1%	Sulfonamides			Added	1		3/1/2018
AVITA	CREA	0.025%	Retinoids			Added	1	PA	3/1/2018
AVITA	GEL	0.025%	Retinoids			Added	2	PA	3/1/2018
BACI-IM	SOLN	50000UNIT	Antibacterials/Other			Added	2		3/1/2018

LEUCOVORIN	SOLN	350MG	Antineoplastics/Other			Added	2	PA	3/1/2018
DACTINOMYCIN	SOLN	0.5MG	Antineoplastics			Added	4	PA	3/1/2018
PREDNISOLONE	SOLN	5MG/ML	Hormonal Agents/Stimulant/Replacement/Modifying (Adrenal)			Added	1		3/1/2018
BUDESONIDE	SUSP	0.5MG/ML	Anti-inflammatories/Inhaled Corticosteroids			Added	3		3/1/2018
TAMIFLU	CAPS	75MG	Anti-influenza Agents			Added	3	QL	3/1/2018
CEFOXITIN	SOLN	200MG/ML	Beta-lactam/Cephalosporins			Added	1	PA	3/1/2018
CEFUROXIME	SOLN	95MG/ML	Beta-lactam/Cephalosporins			Added	1	PA	3/1/2018
CLINDAMYCIN	CAPS	75MG	Antibacterials/Other			Added	1		3/1/2018
DEXAMETHASONE PHOSPHATE	SOLN	10MG/ML	Hormonal Agents/Stimulant/Replacement/Modifying (Adrenal)			Added	1	PA	3/1/2018
ETOPOSIDE	SOLN	20MG/ML	Enzyme Inhibitors			Added	1	PA	3/1/2018
POTASSIUM CHLORIDE	SOLN	0.1MEQ/ML	Electrolyte/Mineral Replacement			Added	1		3/1/2018
TERCONAZOLE VAGINAL	CREA	4MG/ML	Antifungals			Added	1		3/1/2018
METHYLPREDNISOLONE	SOLN	62.5MG/ML	Hormonal Agents/Stimulant/Replacement/Modifying (Adrenal)			Added	2	PA	3/1/2018
METHYLPREDNISOLONE	TABS	16MG	Hormonal Agents/Stimulant/Replacement/Modifying (Adrenal)			Added	1	PA	3/1/2018
FOSAMPRENAVIR	TABS	700MG	Anti-HIV Agents/Protease Inhibitors			Added	4		3/1/2018

BORTEZOMIB	SOLN	3.5MG	Antineoplastics			Added	4	PA	3/1/2018
MOXIFLOXACIN	SOLN	0.5%	Quinolones			Added	2		3/1/2018
AMNESTEEM	CAPS	10MG	Dermatological Agents			Added	3		3/1/2018
AMNESTEEM	CAPS	20MG	Dermatological Agents			Added	3		3/1/2018
AMNESTEEM	CAPS	40MG	Dermatological Agents			Added	3		3/1/2018
LANTHANUM CARBONATE	CHEW	500MG	Phosphate Binders			Added	3		3/1/2018
LEVOFLOXACIN	SOLN	25MG/ML	Quinolones			Added	1		3/1/2018
TIZANIDINE	CAPS	4MG	Antispasticity Agents			Added	3		3/1/2018
TIZANIDINE	CAPS	2MG	Antispasticity Agents			Added	3		3/1/2018
ARIPIPRAZOLE	SOLN	1MG/ML	2nd Generation/Atypical			Added	3	QL	3/1/2018
FLUOCINONIDE	CREA	1MG/ML	Hormonal Agents/Stimulant/Replacement/Modifying (Adrenal)			Added	2		3/1/2018
RIBASPHERE	CAPS	200MG	Anti-hepatitis C (HCV) Agents/Other			Added	1		3/1/2018
PROCTO-PAK	CREA	10MG/ML	Glucocorticoids			Added	1		3/1/2018
LANTHANUM CARBONATE	CHEW	1000MG	Phosphate Binders			Added	3		3/1/2018
VANDAZOLE	GEL	0.75%	Antibacterials/Other			Added	2		3/1/2018
LANTHANUM CARBONATE	CHEW	750MG	Phosphate Binders			Added	3		3/1/2018
MESALAMINE	ERTB	1200MG	Aminosalicylates			Added	3		3/1/2018
DOXYCYCLINE MONOHYDRATE	CAPS	75MG	Tetracyclines			Added	1		3/1/2018
PREDNISOLONE	SOLN	4MG/ML	Hormonal Agents/Stimulant/Replacement/Modifying (Adrenal)			Added	1		3/1/2018
TAMIFLU	CAPS	30MG	Anti-influenza			Added	3	QL	3/1/2018

			Agents						
TAMIFLU	CAPS	45MG	Anti-influenza Agents			Added	3	QL	3/1/2018
SEVELAMER CARBONATE	TABS	800MG	Phosphate Binders			Added	3		3/1/2018
DESOGESTREL / ETHINYL ESTRADIOL / INERT INGREDIENTS	TABS	0.15/0.03/1MG/MG	Estrogens			Added	2		3/1/2018
ETHINYL ESTRADIOL /NORGESTIMATE/INERT INGREDIENTS	TABS	0.035/0.25/1MG/MG	Estrogens			Added	1		3/1/2018
AMPICILLIN	SOLN	100MG/ML	Beta-lactam/Penicillins			Added	1	PA	3/1/2018
DESVENLAFAXINE	TB24	100MG	Selective Serotonin Reuptake Inhibitors Serotonin and Norepinephrine Reuptake Inhibitors			Added	3	QL	3/1/2018
DESVENLAFAXINE	TB24	50MG	Selective Serotonin Reuptake Inhibitors Serotonin and Norepinephrine Reuptake Inhibitors			Added	3	QL	3/1/2018
PREDNISOLONE	SOLN	2MG/ML	Hormonal Agents/Stimulant/Replacement/Modifying (Adrenal)			Added	1		3/1/2018
HAVRIX PREFILLED SYRINGE	SUSP	1ML	Vaccines			Added	2		3/1/2018
FREAMINE 6.9	SOLN		Electrolytes/Minerals/Metals/Vitamins			Added	3	PA	3/1/2018
COLOCORT	ENEMA	100/60MG/ML	Glucocorticoids			Added	1		3/1/2018

TWINRIX	SOLN	1ML	Vaccines			Added	2	PA	3/1/2018
ENBREL	SOLN	25MG/ML	Immune Suppressants			Added	4	PA	3/1/2018
LOSEASONIQUE	TABS		Estrogens			Added	3		3/1/2018
CASPOFUNGIN ACETATE	SOLN	70MG	Antifungals			Added	4		3/1/2018
CASPOFUNGIN ACETATE	SOLN	50MG	Antifungals			Added	4		3/1/2018
PERIOGARD	SOLN	0.12%	Dental and Oral Agents			Added	1		3/1/2018
CHOLESTYRAMINE	POW	4000MG	Dyslipidemics/Other			Added	2		3/1/2018
DICLOFENAC SODIUM	TBEC	25MG	Nonsteroidal Anti-inflammatory Drugs			Added	1		3/1/2018
PRASUGREL	TABS	10MG	Platelet Modifying Agents			Added	2	QL	3/1/2018
PRASUGREL	TABS	5MG	Platelet Modifying Agents			Added	2	QL	3/1/2018
PROCAINAMIDE HYDROCHLORIDE	SOLN	500MG/ML	Antiarrhythmics			Added	3	PA	3/1/2018
SEVELAMER CARBONATE	POWD	2400MG	Phosphate Binders			Added	4		3/1/2018
SEVELAMER CARBONATE	POWD	800MG	Phosphate Binders			Added	4		3/1/2018
MYCAMINE	SOLN	100MG	Antifungals			Added	3		3/1/2018
CORMAX	SOLN	0.05%	Hormonal Agents/Stimulant/Replacement/Modifying (Adrenal)			Added	2		3/1/2018
E.E.S.	TABS	400MG	Macrolides			Added	3		3/1/2018
METHADONE	SOLN	1MG/ML	Opioid Analgesics/Long-acting			Added	1		3/1/2018
METHADONE	SOLN	2MG/ML	Opioid Analgesics/Long-acting			Added	1		3/1/2018
ESTRADIOL VAGINAL TABLET	TABS	0.01MG	Estrogens			Added	3	PA	3/1/2018
MORPHINE SULFATE	SOLN	2MG/ML	Electrolyte/Mineral Replacement			Added	1		3/1/2018

MORPHINE SULFATE PREFILLED SYRINGE	SOLN	10MG/ML	Opioid Analgesics/Short-acting			Added	1		3/1/2018
MORPHINE SULFATE PREFILLED SYRINGE	SOLN	8MG/ML	Opioid Analgesics/Short-acting			Added	1		3/1/2018
POTASSIUM CITRATE	TBCR	1620mg	Electrolyte/Mineral Replacement			Added	2		3/1/2018
SORINE	TABS	120MG	Antiarrhythmics			Added	1		3/1/2018
SORINE	TABS	160MG	Antiarrhythmics			Added	1		3/1/2018
SORINE	TABS	240MG	Antiarrhythmics			Added	1		3/1/2018
SORINE	TABS	80MG	Antiarrhythmics			Added	1		3/1/2018
POLYETHYLENE GLYCOL 3350	SOLN	0	Laxatives			Added	1		3/1/2018
DICYCLOMINE HYDROCHLORIDE	SOLN	2MG/ML	Antispasmodics/Gastrointestinal			Added	1		3/1/2018
MORPHINE SULFATE PREFILLED SYRINGE	SOLN	2MG/ML	Opioid Analgesics/Short-acting			Added	1		3/1/2018
MORPHINE SULFATE PREFILLED SYRINGE	SOLN	4MG/ML	Opioid Analgesics/Short-acting			Added	1		3/1/2018
ENDOCET	TABS	325/10MG	Opioid Analgesics/Short-acting			Added	2	QL	3/1/2018
ENDOCET	TABS	325/7.5MG	Opioid Analgesics/Short-acting			Added	2	QL	3/1/2018
CLINIMIX E 4.25/10	SOLN		Electrolytes/Minerals/Metals/Vitamins			Added	3	PA	3/1/2018
AMINOSYN-RF 5.2%, SULFITE-FREE	SOLN		Electrolytes/Minerals/Metals/Vitamins			Added	3	PA	3/1/2018
GLATIRAMER ACETATE PREFILLED	SOLN	20MG/ML	Multiple Sclerosis Agents			Added	4	PA	3/1/2018

SYRINGE								
ZENPEP 16000/10000/3000	CPEP	0	Genetic or Enzyme Disorder/Replace ment/Modifiers Treatment			Added	2	3/1/2018
OSELTAMIVIR	SUSP	6MG/ML	Anti-influenza Agents			Added	2	3/1/2018
ZENPEP 136000/85000/25000	CPEP	0	Genetic or Enzyme Disorder/Replace ment/Modifiers Treatment			Added	2	3/1/2018
CHLOROQUINE	TABS	250MG	Antiprotozoals			Added	1	3/1/2018
AMINOSYN 7 % WITH ELECTROLYTES, SULFITE-FREE	SOLN		Electrolytes/Miner als/Metals/Vitamin s			Added	3	PA 3/1/2018
ATROPINE SULFATE 5 ML PREFILLED SYRINGE	SOLN	0.05MG/ ML	Antispasmodics/G astrointestinal			Added	1	3/1/2018
MYORISAN	CAPS	10MG	Dermatological Agents			Added	3	3/1/2018
MYORISAN	CAPS	20MG	Dermatological Agents			Added	3	3/1/2018
MYORISAN	CAPS	30MG	Dermatological Agents			Added	3	3/1/2018
PROMACTA	TABS	12.5MG	Blood Formation Modifiers			Added	4	PA 3/1/2018
BETAXOLOL	TABS	10MG	Beta-adrenergic Blocking Agents			Added	1	3/1/2018
ADACEL	SUSP		Vaccines			Added	2	3/1/2018
ZENATANE	CAPS	10MG	Dermatological Agents			Added	3	3/1/2018
ZENATANE	CAPS	20MG	Dermatological Agents			Added	3	3/1/2018
ZENATANE	CAPS	40MG	Dermatological Agents			Added	3	3/1/2018
QUARTETTE 91 DAY PACK	TABS		Estrogens			Added	3	3/1/2018
MORPHINE	SOLN	5MG/ML	Opioid			Added	1	3/1/2018

SULFATE 1ML			Analgesics/Short-acting						
GLATIRAMER ACETATE PREFILLED SYRINGE	SOLN	40MG/ML	Multiple Sclerosis Agents			Added	4	PA	3/1/2018
COPAXONE	SOLN	40MG/ML	Multiple Sclerosis Agents			Added	4	PA	3/1/2018
QVAR	AERO	80MCG/ACT	Anti-inflammatory/Inhaled Corticosteroids			Added	2	QL	3/1/2018
ZENPEP 84000/63000/20000	CPEP	0	Genetic or Enzyme Disorder/Replacement/Modifiers Treatment			Added	2		3/1/2018
60 ACTUAT TESTOSTERONE	ACT	30MG/ACT	Androgens			Added	3	PA	3/1/2018
ZENATANE	CAPS	30MG	Dermatological Agents			Added	3		3/1/2018
TREXIMET	TABS	60/10MG	Antimigraine Agents			Added	3	QL	3/1/2018
METHOTREXATE 10ML	SOLN	25MG/ML	Immune Suppressants			Added	1	PA	3/1/2018
OPDIVO 10ML	SOLN	10MG/ML	Monoclonal Antibody Antibody-Drug Conjugate			Added	4	PA	3/1/2018
RITUXAN 10ML	SOLN	10MG/ML	Monoclonal Antibody Antibody-Drug Conjugate			Added	4	PA	3/1/2018
HAVRIX INJECTION	SUSP	0.5ML	Vaccines			Added	2		3/1/2018
KADCYLA	SOLN	160MG/ML	Antineoplastics			Added	4	PA	3/1/2018
VAQTA	SOLN	1ML	Vaccines			Added	2		3/1/2018
VAQTA	SOLN	0.5ML	Vaccines			Added	2		3/1/2018
KLOR-CON	CPCR	8MEQ	Electrolyte/Mineral Replacement			Added	1		3/1/2018
KLOR-CON	CPCR	10MEQ	Electrolyte/Mineral Replacement			Added	1		3/1/2018

PIPERACILLIN 2000MG/TAZOBACT AM 250MG	SOLN	MG/ML	Beta- lactam/Penicillins			Added	3	PA	3/1/2018
TAZICEF	SOLN	1000MG	Beta- lactam/Cephalosp orins			Added	2		3/1/2018
TAZICEF	SOLN	2000MG /ML	Beta- lactam/Cephalosp orins			Added	2		3/1/2018
MYORISAN	CAPS	40MG	Dermatological Agents			Added	3		3/1/2018
AZACTAM	SOLN	1000MG	Beta-lactam/Other			Added	2		3/1/2018
CEFOXITIN	SOLN	2000MG	Beta- lactam/Cephalosp orins			Added	1	PA	3/1/2018
CEFUROXIME	SOLN	1500MG	Beta- lactam/Cephalosp orins			Added	1	PA	3/1/2018
KETOROLAC TROMETHAMINE	SOLN	30MG/M L	Nonsteroidal Anti- inflammatory Drugs			Added	2	QL/PA	3/1/2018
HALOPERIDOL DECANOATE	SOLN	100MG/ ML	1st Generation/Typical			Added	1		3/1/2018
AMPICILLIN	SOLN	1000MG	Beta- lactam/Penicillins			Added	1	PA	3/1/2018
MEROPENEM	SOLN	1000MG	Beta-lactam/Other			Added	3	PA	3/1/2018
OXALIPLATIN	SOLN	100MG	Antineoplastics			Added	3	PA	3/1/2018
SOLU-MEDROL	SOLN	500MG	Hormonal Agents/Stimulant/ Replacement/Modi fying (Adrenal)			Added	3	PA	3/1/2018
SOLU-MEDROL	SOLN	1GM	Hormonal Agents/Stimulant/ Replacement/Modi fying (Adrenal)			Added	3	PA	3/1/2018
ADRUCIL	SOLN	50MG/M L	Antineoplastics			Added	1	PA	3/1/2018
ADRIAMYCIN	SOLN	2MG/ML	Antineoplastics			Added	1	PA	3/1/2018
NUTRILIPID	EMULS ION	0.2%	Electrolytes/Miner als/Metals/Vitamin s			Added	2	PA	3/1/2018

POTASSIUM CHLORIDE MICROENCAPSULATED	CPCR	20MEQ	Electrolyte/Mineral Replacement			Added	1		3/1/2018
POTASSIUM CHLORIDE MICROENCAPSULATED	CPCR	10MEQ	Electrolyte/Mineral Replacement			Added	1		3/1/2018
KLOR-CON	TBCR	10MEQ	Electrolyte/Mineral Replacement			Added	1		3/1/2018
TREANDA	SOLN	25MG/ML	Antineoplastics			Added	4	PA	3/1/2018
GAMMAKED 10ML	SOLN	100MG/ML	Immunizing Agents/ Passive			Added	4	PA	3/1/2018
GAMUNEX 10ML	SOLN	100MG/ML	Immunizing Agents/ Passive			Added	4	PA	3/1/2018
POTASSIUM CHLORIDE	SOLN	0.2MEQ/ML	Electrolyte/Mineral Replacement			Added	1		3/1/2018
POTASSIUM CHLORIDE	SOLN	0.4MEQ/ML	Electrolyte/Mineral Replacement			Added	1		3/1/2018
KLOR-CON	TBCR	20MEQ	Electrolyte/Mineral Replacement			Added	1		3/1/2018
LINZESS	CAPS	0.072MG	Irritable Bowel Syndrome Agents			Added	2	QL/PA	3/1/2018
EPINEPHRINE 0.3ML AUTO-INJECTOR	DEVI	1MG/ML	Bronchodilators/Sympathomimetic			Added	2	QL	3/1/2018
LARTRUVO 19ML	SOLN	10MG/ML	Monoclonal Antibody Antibody-Drug Conjugate			Added	4	PA	3/1/2018
XATMEP	SOLN	2.5MG	Immune Suppressants			Added	4	PA	3/1/2018
HUMALOG PEN INJECTOR	SUSP	100UNIT/ML	Insulins			Added	2	QL	3/1/2018
RENFLEXIS	SOLN	100MG	Immune Suppressants			Added	4	PA	3/1/2018
BAXDELA	SOLN	300MG	Quinolones			Added	4	PA	3/1/2018
BAXDELA	TABS	450MG	Quinolones			Added	4	PA	3/1/2018
BENLYSTA AUTO INJECTOR	SOLN	200MG	Immunomodulators			Added	4	PA	3/1/2018
VOSEVI	TABS	MG	Anti-hepatitis C (HCV) Direct			Added	4	QL	3/1/2018

			Acting Agents						
BENLYSTA PREFILLED SYRINGE	SOLN	200MG	Immunomodulators			Added	4	PA	3/1/2018
IDHIFA	TABS	100MG	Antineoplastics			Added	4	QL	3/1/2018
IDHIFA	TABS	50MG	Antineoplastics			Added	4	QL	3/1/2018
NERLYNX	TABS	40MG	Antineoplastics			Added	4		3/1/2018
MAVYRET	TABS		Anti-hepatitis C (HCV) Direct Acting Agents			Added	4	QL	3/1/2018
LYNPARZA	CAPS	100MG	Antineoplastics			Added	4	PA	3/1/2018
LYNPARZA	CAPS	150MG	Antineoplastics			Added	4	PA	3/1/2018
VYXEOS	SUSP	100/44ML	Antineoplastics			Added	4	PA	3/1/2018
MYLOTARG	SOLN	4.5MG	Antineoplastics			Added	4	PA	3/1/2018
ALIQOPA	SOLN	60MG	Antineoplastics			Added	4	PA	3/1/2018
LUPRON 3MONTH	KIT	20MG/ML	Hormonal Agents/Suppressant (Pituitary)			Added	4	QL/PA	3/1/2018
VERZENIO	TABS	50MG	Antineoplastics			Added	4		3/1/2018
VERZENIO	TABS	100MG	Antineoplastics			Added	4		3/1/2018
VERZENIO	TABS	150MG	Antineoplastics			Added	4		3/1/2018
VERZENIO	TABS	200MG	Antineoplastics			Added	4		3/1/2018
CALQUENCE	CAPS	100MG	Antineoplastics			Added	4		3/1/2018
BOSULIF	TABS	400MG	Molecular Target Inhibitors			Added	4		3/1/2018
PREVYMIS 12ML	SOLN	20MG/ML	Anti-cytomegalovirus (CMV) agents			Added	4	PA	3/1/2018
PREVYMIS 24ML	SOLN	20MG/ML	Anti-cytomegalovirus (CMV) agents			Added	4	PA	3/1/2018
PREVYMIS	TABS	240MG	Anti-cytomegalovirus (CMV) agents			Added	4		3/1/2018
PREVYMIS	TABS	480MG	Anti-cytomegalovirus (CMV) agents			Added	4		3/1/2018
TRACLEER	TABS	32MG	Pulmonary Antihypertensives			Added	4	PA	3/1/2018

JULUCA	TABS	50/25M G	Anti-HIV Agents/Other			Added	4	QL	3/1/2018
TIMOLOL 24HR	SOLN	5MG/ML	Ophthalmic Antiglaucoma Agents			Added	2		3/1/2018
TRISENOX 6ML	SOLN	2MG/ML	Antineoplastics			Added	3	PA	3/1/2018
CICLOPIROX NAIL LACQUER	SOLN		Antifungals			Updated	2	Remov ed PA Criteria	3/1/2018
REXULTI	TAB	0.25MG	Antipsychotics			Updated	4	Remov ed PA Criteria	3/1/2018
REXULTI	TAB	0.5MG	Antipsychotics			Updated	4	Remov ed PA Criteria	3/1/2018
REXULTI	TAB	1MG	Antipsychotics			Updated	4	Remov ed PA Criteria	3/1/2018
REXULTI	TAB	2MG	Antipsychotics			Updated	4	Remov ed PA Criteria	3/1/2018
REXULTI	TAB	3MG	Antipsychotics			Updated	4	Remov ed PA Criteria	3/1/2018
REXULTI	TAB	4MG	Antipsychotics			Updated	4	Remov ed PA Criteria	3/1/2018

For information on obtaining an updated coverage determination or an exception to a coverage determination please contact Optimum HealthCare Member Services at 1-866-245-5360 for additional information. TTY users should call 711. Hours are October 1 to February 14 from 8 a.m. to 8 p.m. 7 days a week and February 15 to September 30 from 8 a.m. to 8 p.m. Monday through Friday. Member Services also provides free language interpreter services for non-English speakers or visit www.youoptimumhealthcare.com.