



## Drug Formulary Update, April 2019 Commercial and State Programs

Updates to the HealthPartners Commercial and State Program Drug Formularies are listed below. Updates apply to all Commercial groups (PreferredRx and GenericsAdvantageRx) and to HealthPartners Minnesota Health Care Programs (Medicaid and Minnesota Care “State Programs”) Drug Formulary.

Please see [www.healthpartners.com/formularies](http://www.healthpartners.com/formularies) for details.

Most updates are effective April 1.

Members affected by these changes are asked to update by May 1. These members and their providers receive additional communications.

Drug name	Current Status	New Status	Effective Date	Comments
Abiraterone (Zytiga) 500mg tablet	SP F PA TD Oncology	SP NF PA TD Oncology	5/1/2019	The generic abiraterone 250mg tablet will be preferred.
Albuterol HFA (Ventolin HFA)	F	F*	2/1/2019	* Commercial-only. Ventolin remains preferred, and members will be charged a generic co-pay. The generic is preferred for State Programs.
Alogliptin (Nesina)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit, per FDA-maximum dose.
Alogliptin/ metformin (Kazano)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit.
Alogliptin/ pioglitazone (Oseni)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit.
Amifampridine (Firdapse)		SP F PA QL	5/1/2019	A recent FDA approval.
Amikacin (Arikayce) inhalation		NF SP PA QL	5/1/2019	A recent FDA approval.
Apixaban (Eliquis)	F	F QL	5/1/2019	Adding a quantity limit, per FDA-maximum dose.
Aripiprazole with sensor (Abilify MyCite)		NF PA	4/1/2019	A recent FDA approval.
Baloxavir (Xofluza)		NF	4/1/2019	A recent FDA approval.

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Binimetinib (Mektovi)		SP F PA Oncology	4/1/2019	A recent FDA approval.
Canagliflozin (Invokana)	F	F QL	5/1/2019	Adding a quantity limit, per FDA-maximum dose.
Canagliflozin/ metformin (Invokamet and Invokamet XR)	F	F QL	5/1/2019	Adding a quantity limit.
Cenegermin (Oxervate) ophthalmic		SP F PA QL	5/1/2019	A recent FDA approval.
Clozapine (Clozaril, Brand-only)	NF	NF PA AE	5/1/2019	
Cyclosporine ophthalmic (Cequa)		NF PA	4/1/2019	A recent FDA approval.
Dacomitinib (Vizimpro)	SP F PA Oncology	SP F PA Oncology	4/1/2019	PA Update.
Dapagliflozin (Farxiga)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit, per FDA-maximum dose.
Dapagliflozin/ metformin (Xigduo XR)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit.
Dapagliflozin/ saxagliptin (Qtern)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit.
Desmopressin wafer (Nocdurna)		NF	4/1/2019	A recent FDA approval.
Dihydroergotamine (DHE) ampule	NF PA	NF PA QL	5/1/2019	Adding a quantity limit, per FDA-maximum dose.
Dihydroergotamine nasal spray (Migranal)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit, per FDA-maximum dose.
Dupilumab (Dupixent)	SP F PA	F PA QL SP	5/1/2019	Adding a quantity limit.
Duvelisib (Copiktra)	SP F PA Oncology	SP F PA Oncology	4/1/2019	PA Update.
Eltrombopag (Promacta) 12.5mg powder packet	SP NF PA	SP NF PA	4/1/2019	PA update.
Empagliflozin (Jardiance)	F	F QL	5/1/2019	Adding a quantity limit, per FDA-maximum dose.
Empagliflozin/ linagliptin (Glyxambi)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit.
Empagliflozin/ metformin (Synjardy and Synjardy XR)	F	F QL	5/1/2019	Adding a quantity limit.

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Encorafenib (Braftovi)		SP F PA Oncology	4/1/2019	A recent FDA approval.
Ertugliflozin (Steglatro)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit, per FDA-maximum dose.
Ertugliflozin/ metformin (Segluromet)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit.
Ertugliflozin/ sitagliptin (Steglujan)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit.
Fluoride gel, cream, paste, rinse products	NF PA	NF	4/1/2019	
Gilteritinib (Xospata)		SP F PA Oncology	4/1/2019	A recent FDA approval.
Glasdegib (Daurismo)		SP F PA Oncology	4/1/2019	A recent FDA approval.
Halobetasol foam (Lexette)		NC	4/1/2019	A recent FDA approval.
Immune globulin (Panzyga)		SP F PA	4/1/2019	A recent FDA approval.
Indomethacin (Indocin) suspension	NF QL AE	NF PA QL AE	5/1/2019	
Inotersen (Tegsedi) SQ		SP NF PA	5/1/2019	A recent FDA approval.
Insulin glargine (Basaglar)	F	NF-PA*	4/1/2019	* Commercial-only. Lantus is preferred over Basaglar. Basaglar remains preferred for State Programs.
Insulin glargine (Lantus)	NF-PA	F*	4/1/2019	* Commercial-only. Lantus is preferred over Basaglar. Basaglar remains preferred for State Programs.
Insulin glargine (Toujeo)	NF-PA	F*	4/1/2019	* Commercial-only.
Itraconazole (Tolsura)		NF PA	5/1/2019	A recent FDA approval.
Ivosidenib (Tibsovo)	SP F PA Oncology	SP F PA Oncology	4/1/2019	PA Update.
Larotrectinib (Vitrakvi)	SP NF PA Oncology	SP F PA QL Oncology	5/1/2019	A recent FDA approval.
Lidocaine/ tetracaine 7%-7% cream	NF	Not Covered	5/1/2019	
Linagliptin (Tradjenta)	F	F QL	5/1/2019	Adding a quantity limit, per FDA-maximum dose.
Linagliptin/ metformin (Jentaduetto and Jentaduetto XR)	F	F QL	5/1/2019	Adding a quantity limit.

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Lorlatinib (Lorbrena)		SP F PA Oncology	4/1/2019	A recent FDA approval.
Lovastatin (Altoprev ER)	NF	Not Covered	5/1/2019	
Methylphenidate ER (Concerta)	NF-QL	F-QL*	4/1/2019	* Commercial-only. Concerta Brand is preferred (over the generic), and members will be charged a generic co-pay. The generic remains preferred for State Programs.
Naproxen suspension	F	Not Covered	5/1/2019	
Olaparib (Lynparza)	SP NF PA TD Oncology	SP F PA QL TD Oncology	5/1/2019	
Omadacycline (Nuzyra)		F PA	5/1/2019	A recent FDA approval.
Ozenoxacin (Xepi) cream		NF	4/1/2019	A recent FDA approval.
Revefenacin (Yupelri)		NF PA	5/1/2019	A recent FDA approval.
Rifamycin (Aemcolo)		NF PA	5/1/2019	A recent FDA approval.
Riluzole (Tiglutik) oral suspension		NF PA	4/1/2019	A recent FDA approval.
Rivaroxaban (Xarelto)	F	F QL	5/1/2019	Adding a quantity limit, per FDA-maximum dose.
Sarecycline (Seysara)		Excluded	4/1/2019	A recent FDA approval.
Saxagliptin (Onglyza)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit, per FDA-maximum dose.
Saxagliptin/ metformin (Kombiglyze XR)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit.
Scarcin gel		NC	4/1/2019	A recently-approved medical device.
Sitagliptin (Januvia)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit, per FDA-maximum dose.
Sitagliptin/ metformin (Janumet and Janumet XR)	NF PA	NF PA QL	5/1/2019	Adding a quantity limit.
Tafenoquine (Arakoda)		NF	4/1/2019	A recent FDA approval.
Talazoparib (Talzenna)		SP NF PA QL Oncology	5/1/2019	A recent FDA approval.
Testosterone (Xyosted) SQ		NF PA	4/1/2019	A recent FDA approval.

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Tranexamic acid	F QL	F QL	4/1/2019	The quantity limit has been updated, from #30 tablets per #30 days, to #30 tablets per prescription.
Tretinoin lotion (Altreno)		NC	5/1/2019	A recent FDA approval.
Triamcinolone (Trianex) ointment	F	Not Covered	5/1/2019	
Triamcinolone spray	NF	Not Covered	5/1/2019	
Vancomycin vial	F	F QL	4/1/2019	Adding a quantity limit of 14 days.
Zirconium cyclosilicate (Lokelma)		NF	4/1/2019	A recent FDA approval.

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