



Drug Formulary Update, July 2019 Commercial

Updates to the HealthPartners Commercial Formularies are listed below.

Updates apply to all Commercial groups (PreferredRx and GenericsAdvantageRx) Drug Formularies.

Please see www.healthpartners.com/formularies for details.

Positive changes (additions) are generally effective July 1, and negative changes (deletions) are generally effective August 1. Current members are grandfathered through September 30.

Drug name	Current Status	New Status	Effective Date	Comments
Acyclovir/ hydrocortisone (Xerese) cream	NF PA	NC	8/1/2019	
Aminocaproic acid (Amicar Brand and generic)		NF PA	8/1/2019	
Apomorphine (Apokyn)	NF PA SP	NF PA SP	7/1/2019	Update PA
Beau Rx scar care gel	NF	NC	8/1/2019	
Bionect	NF	NC	8/1/2019	
Bromfenac (Prolensa) eye drops	F*	NF	8/1/2019	* Change applies to PreferredRx only. Prolensa is NF for all Commercial formularies.
Budesonide/ formoterol (Symbicort)	NF*	NF PA	8/1/2019	Previously announced, and applies to all Commercial formularies.
C1 esterase inhibitor (Cinryze)	F PA SP	F PA SP	7/1/2019	Update PA
C1 esterase inhibitor (Ruconest)	F PA SP	F PA SP	7/1/2019	Update PA
Cabozantinib (Cabometyx)	F PA SP Oncology	F PA SP Oncology	7/1/2019	Update PA
Canakinumab (Ilaris)	F PA SP	F PA SP QL	8/1/2019	
Caplacizumab (Cablivi)	NC	F PA SP	7/1/2019	
Carbidopa/ levodopa ER (Rytary ER)	F PA	F ST	7/1/2019	

Formulary Abbreviations: F = Formulary, NF = Non-Formulary, PA = Prior Authorization, ST = Step Therapy, QL = Quantity Limit, AE = Age Edit, NC = Not covered, SP = Specialty Drug, TD = Trial Drug Program

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Crizotinib (Xalkori)	F PA SP Oncology	F PA SP Oncology	7/1/2019	Update PA
Deferasirox (Jadenu)	F PA SP	NF PA SP	8/1/2019	
Dupilimab (Dupixent)	F PA SP	F PA SP	7/1/2019	Update PA
Elapegamase (Revcovi)	NF PA SP	F PA SP	7/1/2019	
Empagliflozin/ metformin XR (Synjardy XR)	F QL	F QL	8/1/2019	Quantity limit update.
Enoxaparin	F QL	F	7/1/2019	
Glycerol phenylbutyrate (Ravicti)	NF PA SP	NF PA SP	7/1/2019	Update PA
Halobetasol (Ultravate) 0.05% lotion	NF	NC	8/1/2019	
Immune globulin	F PA SP	Medical	8/1/2019	Immune globulins must be billed as a medical claim.
Ivabradine (Corlanor)	NF	F PA	8/1/2019	
Kelarx scar care gel	NF	NC	8/1/2019	
Levodopa (Inbrija) inhalation	NF PA SP	F PA SP	7/1/2019	
Lidorex	NF	NC	8/1/2019	
Linezolid susp	F PA	F PA	7/1/2019	Update PA
Lorlatinib (Lorbrena)	F PA SP Oncology	F PA SP Oncology	7/1/2019	Update PA
Mesalamine (Pentasa)	F	NF	8/1/2019	Current members will be grandfathered (allowed to continue), but some may see increased co-pays.
Mitotane (Lysodren)	NF PA SP Oncology*	F PA SP Oncology	8/1/2019	* Change only applies to GenericsAdvantageRx.
Nepafenac (Ilevro) eye drops	F*	NF	8/1/2019	* Change applies to PreferredRx only. Ilevro is NF for all Commercial formularies.
Nepafenac (Nevanac) eye drops	F*	NF	8/1/2019	* Change applies to PreferredRx only. Nevanac is NF for all Commercial formularies.
Phenobarbital/ hyoscyamine/ atropine/ scopolamine (Donnatal)	NF	NC	8/1/2019	
Phlag spray skin emulsion	NF	NC	8/1/2019	

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Prucalopride (Motegrity)	NC	NF PA	7/1/2019	
Salex cream kit	NF	NC	8/1/2019	
Tramadol ER	NF PA AE	NF PA AE	7/1/2019	Update PA
Utopic 41% cream	NF	NC	8/1/2019	
Veregen ointment	NF	NC	8/1/2019	
Xolegel	NF	NC	8/1/2019	