



## Drug Formulary Update, April 2021 Minnesota Health Care Programs

Updates to the HealthPartners Minnesota Health Care Programs are listed below.

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

Updates are effective April 1, 2021.

Drug name	Current Status	New Status	Comments
Acetaminophen-Caffeine-Dihydrocodeine	NF, PA, QL	NF, PA	Removed PA
Acyclovir cream	NP, PA	NP, PA, QL	Added QL
Anafranil	NF, AL	NF	Removed AL
Android	NF, PA, QL	NF, QL	Removed PA
Benznidazole	NF, PA	C, PA	Added to Formulary
Cefpodoxime	NP, PA	NP, PA, QL	Added QL
Chlorzoxazone 500mg	C, AL	C	Removed AL
Clobazam	C	C, QL	Added QL
Clomipramine	C, AL	C	Removed AL
Cyclobenzaprine	C, AL	C	Removed AL
Cystadrops	C, SP, PA	C, SP, PA, QL	Added QL
Cystaran	C, SP, PA	C, SP, PA, QL	Added QL
Dibenzyline	NF, PA	NF	Removed PA
Dvorah	NF, PA, QL, AL	NF, QL	Removed PA and AL
Famotidine suspension	NF	C, AL	Added to formulary, Added AL
Fentora	NF, PA, QL	NF, QL	Removed PA
Fluocinolone Solution	NF	C, QL	Added to formulary, Added QL
Gavreto	NF, SP, PA	C, SP, PA, QL	Added to Formulary, Added QL
Glucagon	NF	C	Added to Formulary
Glyburide-Metformin	NF, AL	C, PA	Removed AL, Added to formulary, Added PA
Hetlioz	C, SP, PA, QL	C, SP, PA, QL	Updated PA

Formulary Abbreviations: C = Covered, NF = Non-Formulary, PA = Prior Authorization, ST = Step Therapy, SP = Specialty Drug, QL = Quantity Limit, Age = Age Edit, PDL = DHS' Preferred Drug List, P = Preferred PDL, NP = Non-Preferred PDL, ONC = Oncology Program, EXCL = Excluded Drug

Drug name	Current Status	New Status	Comments
Hydrocodone ER 20mg	NF, QL	NF, PA, QL	Added PA
Hydrocortisone Butyrate	NF, PA	C	Added to formulary, Removed PA
Kerydin Solution	NF, PA	NF	Removed PA
Ketorolac	P, QL	P, QL	Updated QL
Kuvan	NF, SP, PA	NF, SP	Removed PA
Lampit	NF	C, PA	Added to Formulary, Added PA
Lazanda	NF, QL	NF	Removed QL
Locoid lotion	NF, PA	NF	Removed PA
Methocarbamol 750mg	C, AL	C	Removed AL
Mircera	NF, SP, PA	NF, SP, PA	Updated PA
Mydratic4	NF	EXCL	Non-FDA approved
Oxaydo	NF, PA, QL	NF, QL	Removed PA
Perphenazine- Amitirptyline	NF, AL	NF	Removed AL
Robaxin 750mg	NF, AL	NF	Removed AL
Synalar	NF	NF, QL	Added QL
Tavaborole	NF	C, PA	Added to Formulary, Added PA
Testred	NF, PA, QL	NF, QL	Removed PA
Tramadol ER	NF, QL, AL	NF, PA, QL, AL	Add PA
Tramadol HCL ER	NF, PA, QL, AL	NF, PA, QL, AL	Updated PA Criteria
Tramadol-Acetaminophen	NF, QL, AL	C, QL, AL	Added to Formulary
Tropicamide- Proparacaine-PE- Ketorolac	NF	EXCL	Non-FDA approved
Wakix	NF, SP, PA	C, SP, PA	Added to Formulary
Xyrem	C, SP, PA, QL	C, SP, PA, QL	Updated PA
Xywav	C, SP, QL	C, SP, PA, QL	Added PA