

Formulary Changes effective 1/1/2022:

Tier Changes:

Therapeutic category	Medication	Action
Multiple Sclerosis	Avonex	Down tier from non-preferred specialty to preferred specialty tier
Weight Loss	Saxenda	Down tier from non-preferred to preferred tier

New Benefit Coverage:

Therapeutic category	Medication	Status
Weight Loss	Wegovy	Added to preferred tier with Prior Authorization

Medications removed from formulary:

Therapeutic category	Medication	Status	Preferred Medication
PCSK9 Inhibitor	Repatha	Excluded	Praluent
Asthma/COPD	Asmanex	Excluded	Arnuity, Flovent Diskus, Flovent HFA, Pulmicort, Qvar
	Incruse Ellipta	Excluded	Spiriva, Spiriva Respimat
	Bevespi	Excluded	Anoro Ellipta, Stiolto Respimat
Multiple Sclerosis	Extavia	Excluded	Avonex

*Patients that have an active prior authorization for any of the above excluded medications, that authorization will remain in place through the end of the prior authorization period on the authorization letter. Note that providers may submit a prior authorization coverage request for excluded medications for medical necessity review to the PHP pharmacy department.