

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



The changes below are reflective of Prime Therapeutics P&T Committee decisions.

Key

Tier: Tier 1= Preferred Generics, Tier 2= Non-Preferred Generics, Tier 3=Preferred Brands, Tier 4 = Non-Preferred Brands, Tier 5=Specialty, X=Excluded NF=Non-Formulary

Formulary Edits: QL=Quantity Limit, QLC=Quantity Limit (Custom), PA=Prior Authorization, ST=Step Therapy, AL=Age Limit, GL=Gender Limit, ACA=Affordable Care Act

Drugs may be subject to coverage requirements or limits such as prior authorization. Refer to your formulary or plan documents for additional information.

2026 Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Antibiotics	rifapentine 150 mg tablet	NF --> Tier 1 (Generic)	9/1/2026
Anticonvulsants	VALPROIC ACID 500 MG/10ML SOLUTION	NF --> Tier 2 (Preferred Brand), Preventive	9/1/2026
Antidiabetic Agents	sitagliptin phosphatemetformin hydrochloride extended release 24h 100-1000 mg tablet	NF --> Tier 1 (Generic), QL (30/30 days)	9/1/2026
Antidiabetic Agents	sitagliptin phosphatemetformin hydrochloride extended release 24h 50-1000 mg tablet	NF --> Tier 1 (Generic), QL (60/30 days)	9/1/2026
Antidiabetic Agents	sitagliptin phosphatemetformin hydrochloride extended release 24h 50-500 mg tablet	NF --> Tier 1 (Generic), QL (60/30 days)	9/1/2026
Cardiovascular Agents	MYQORZO 10 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	9/1/2026
Cardiovascular Agents	MYQORZO 15 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	9/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



2026 Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Cardiovascular Agents	MYQORZO 20 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	9/1/2026
Cardiovascular Agents	MYQORZO 5 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	9/1/2026
Cardiovascular Agents	PROPRANOLOL HCL 20 MG/5ML SOLUTION	Tier 3 (Non-Preferred Brand) --> Tier 1 (Generic)	9/1/2026
Cardiovascular Agents	UPTRAVI 100 MCG TABLET	NF --> Tier 4 (Specialty), PA, QLC (420/180 days)	9/1/2026
Cardiovascular Agents	UPTRAVI 150 MCG TABLET	NF --> Tier 4 (Specialty), PA, QLC (840/180 days)	9/1/2026
Central Nervous System Agents	trihexyphenidyl hcl 0.4 mg/ml solution	Tier 3 (Non-Preferred Brand) --> Tier 1 (Generic)	9/1/2026
Contraceptives	daysee 0.15-0.03 & 0.01 mg tab	NF --> Tier 1 (Generic)	9/1/2026
Immunizations	MFLUSIVA 0.38 ML SUSP PRSYR	NF --> Tier 2 (Preferred Brand), ACA, Preventive	9/1/2026
Metabolic Agents	ZYCUBO 2.9 MG RECON SOLUTION	NF --> Tier 4 (Specialty), QL (30/30 days)	9/1/2026
Miscellaneous	FUROSCIX READYFLOW 80 MG/ML SOLN A-INJ	NF --> Tier 4 (Specialty), PA, QLC (8/180 days)	9/1/2026
Oncology	BESREMI PEN 500 MCG/0.5ML SOLUTION	NF --> Tier 4 (Specialty), PA, QL (1/28 days)	9/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



Year-to-Date Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Antipsychotics	VRAYLAR 0.5 MG CAPSULE	NF --> Tier 2 (Preferred Brand) QL (30/30 days)	2/1/2026
Antipsychotics	VRAYLAR 0.75 MG CAPSULE	NF --> Tier 2 (Preferred Brand) QL (30/30 days)	2/1/2026
Central Nervous System Agents	DAYBUE STIX 5000 MG PACKET	NF --> Tier 4 (Specialty), PA QL (120/30 days)	2/1/2026
Central Nervous System Agents	DAYBUE STIX 6000 MG PACKET	NF --> Tier 4 (Specialty), PA QL (120/30 days)	2/1/2026
Central Nervous System Agents	DAYBUE STIX 8000 MG PACKET	NF --> Tier 4 (Specialty), PA QL (60/30 days)	2/1/2026
Dental Agents	PREVIDENT 0.2% SOLUTION	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Dental Agents	PREVIDENT 1.1% GEL	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Dental Agents	PREVIDENT 5000 BOOSTER PLUS 1.1 % PASTE	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Dental Agents	PREVIDENT 5000 DRY MOUTH 1.1 % GEL	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Dental Agents	PREVIDENT 5000 KIDS 1.1 % PASTE	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Dental Agents	PREVIDENT 5000 PLUS 1.1 % CREAM	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
HIV	YEZTUGO 300 MG TABLET	NF --> Tier 2 (Preferred Brand) QLC (4/365 days)	2/1/2026
HIV	YEZTUGO 463.5 MG/1.5ML SOLUTION	NF --> Tier 2 (Preferred Brand)	2/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



Year-to-Date Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Immunological Agents	ANDEMBRY 200 MG/1.2ML AUTO-INJECTOR SOLUTION	NF --> Tier 4 (Specialty), PA QL (1.2/30 days)	2/1/2026
Immunological Agents	DAWNZERA 80 MG/0.8ML AUTO-INJECTOR SOLUTION	NF --> Tier 4 (Specialty), PA QL (0.8/28 days)	2/1/2026
Miscellaneous	HYPERSAL 7 % NEBULIZER SOLUTION	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Miscellaneous	K-PHOS 500 MG TABLET	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Miscellaneous	K-PHOS-NEUTRAL 155-852-130 MG TAB	NF --> Tier 3 (Non-Preferred Brand)	2/1/2026
Oncology	XPOVIO (80 MG ONCE WEEKLY) 80 MG TABLET THERAPY PACK	NF --> Tier 4 (Specialty), PA QL (4/28 days)	2/1/2026
Potassium Binders	sodium polystyrene sulfonate 15 gm/60ml suspension	NF -> Tier 1 (Generics)	2/1/2026
Anticonvulsants	diazepam 2.5 mg gel	Tier 3 (Non-Preferred Brand) --> Tier 1 (Generic)	3/1/2026
Cardiovascular Agents	KERENDIA 40 MG TABLET	NF --> Tier 2 (Preferred Brand), ST QL (30/30 days)	3/1/2026
Contraceptives	plan b one-step 1.5 mg tablet	NF --> Tier 1 (Generic)	3/1/2026
Fluoride Dental Products	gel-kam 0.4 % gel	NF --> Tier 1 (Generic)	3/1/2026
Fluoride Dental Products	omni gel 0.4 % gel	NF --> Tier 1 (Generic)	3/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



Year-to-Date Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Iron Preparations	fer-in-sol 75 (15 Fe) mg/ml solution	NF --> Tier 1 (Generic)	3/1/2026
Iron Preparations	icar 15 mg/1.25ml suspension	NF --> Tier 1 (Generic)	3/1/2026
Metabolic Agents	SEPHIENCE 1000 MG PACKET FOR ORAL SOLUTION	NF --> Tier 4 (Specialty), PA	3/1/2026
Metabolic Agents	SEPHIENCE 250 MG PACKET FOR ORAL SOLUTION	NF --> Tier 4 (Specialty), PA	3/1/2026
Ophthalmic Agents	loteprednol-tobramycin 0.5-0.3% suspension	NF --> Tier 1 (Generic)	3/1/2026
Thyroid Agents	RENTHYROID 45 MG TABLET	NF --> Tier 3 (Non-Preferred Brand)	3/1/2026
Thyroid Agents	RENTHYROID 75 MG TABLET	NF --> Tier 3 (Non-Preferred Brand)	3/1/2026
Tobacco Cessation	nicoderm 14 mg/24hr patch 24hr	NF --> Tier 1 (Generic)	3/1/2026
Tobacco Cessation	nicoderm 21 mg/24hr patch 24hr	NF --> Tier 1 (Generic)	3/1/2026
Tobacco Cessation	nicoderm 7 mg/24hr patch 24hr	NF --> Tier 1 (Generic)	3/1/2026
Tobacco Cessation	nicorette 2 mg gum	NF --> Tier 1 (Generic)	3/1/2026
Tobacco Cessation	nicorette 2 mg lozenge	NF --> Tier 1 (Generic)	3/1/2026
Tobacco Cessation	nicorette 4 mg gum starter kit	NF --> Tier 1 (Generic)	3/1/2026
Tobacco Cessation	nicorette 4 mg lozenge	NF --> Tier 1 (Generic)	3/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



Year-to-Date Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Tobacco Cessation	nicorette mini 2 mg lozenge	NF --> Tier 1 (Generic)	3/1/2026
Anticonvulsants	brivaracetam 10 mg tablet	NF --> Tier 1 (Generic)	4/1/2026
Anticonvulsants	brivaracetam 10 mg/ml oral solution	NF --> Tier 1 (Generic)	4/1/2026
Anticonvulsants	brivaracetam 100 mg tablet	NF --> Tier 1 (Generic)	4/1/2026
Anticonvulsants	brivaracetam 25 mg tablet	NF --> Tier 1 (Generic)	4/1/2026
Anticonvulsants	brivaracetam 50 mg tablet	NF --> Tier 1 (Generic)	4/1/2026
Anticonvulsants	brivaracetam 75 mg tablet	NF --> Tier 1 (Generic)	4/1/2026
Anticonvulsants	oxcarbazepine ER 150 mg 24hr ER tablet	NF --> Tier 1 (Generic)	4/1/2026
Anticonvulsants	oxcarbazepine ER 300 mg 24hr ER tablet	NF --> Tier 1 (Generic)	4/1/2026
Anticonvulsants	oxcarbazepine ER 600 mg tab 24hr ER tablet	NF --> Tier 1 (Generic)	4/1/2026
Blood Products and Modifiers	ORLADEYO 108 MG ORAL PACKET	NF --> Tier 4 (Specialty), PA, QL (28/28 days)	4/1/2026
Blood Products and Modifiers	ORLADEYO 132 MG ORAL PACKET	NF --> Tier 4 (Specialty), PA, QL (28/28 days)	4/1/2026
Blood Products and Modifiers	ORLADEYO 72 MG ORAL PACKET	NF --> Tier 4 (Specialty), PA, QL (28/28 days)	4/1/2026
Blood Products and Modifiers	ORLADEYO 96 MG ORAL PACKET	NF --> Tier 4 (Specialty), PA, QL (28/28 days)	4/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



Year-to-Date Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Central Nervous System Agents	ZURNAI 1.5 MG/0.5ML AUTO-INJECTOR SOLUTION	NF --> Tier 2 (Preferred Brand)	4/1/2026
HIV	rilpivirine hcl 25 mg tablet	NF --> Tier 1 (Generic), QL (30/30 days)	4/1/2026
Immunological Agents	BIMZELX 160 MG/ ML AUTO- INJECTOR SOLUTION	NF --> Tier 4 (Specialty), PA, QL (2/56 days)	4/1/2026
Immunological Agents	BIMZELX 160 MG/ ML PREFILLED SYRINGE SOLUTION	NF --> Tier 4 (Specialty), PA, QL (2/56 days)	4/1/2026
Immunological Agents	BIMZELX 320 MG/2ML AUTO-INJECTOR SOLUTION	NF --> Tier 4 (Specialty), PA, QL (2/56 days)	4/1/2026
Immunological Agents	BIMZELX 320 MG/2ML PREFILLED SYRINGE SOLUTION	NF --> Tier 4 (Specialty), PA, QL (2/56 days)	4/1/2026
Immunological Agents	LEQSELVI 8 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (60/30 days)	4/1/2026
Immunological Agents	RHAPSIDO 25 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (60/30 days)	4/1/2026
Oncology	HERNEXEOS 60 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (180/60 days)	4/1/2026
Oncology	MODEYSO 125 MG CAPSULE	NF --> Tier 4 (Specialty), PA, QL (20/28 days)	4/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



Year-to-Date Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Oncology	pomalidomide 1 mg capsule	NF --> Tier 4 (Specialty), PA, QL (21/28 days)	4/1/2026
Oncology	pomalidomide 2 mg capsule	NF --> Tier 4 (Specialty), PA, QL (21/28 days)	4/1/2026
Oncology	pomalidomide 3 mg capsule	NF --> Tier 4 (Specialty), PA, QL (21/28 days)	4/1/2026
Oncology	pomalidomide 4 mg capsule	NF --> Tier 4 (Specialty), PA, QL (21/28 days)	4/1/2026
Pain	tapentadol hcl 100 mg tablet	NF --> Tier 1 (Generic)	4/1/2026
Pain	tapentadol hcl 50 mg tablet	NF --> Tier 1 (Generic)	4/1/2026
Pain	tapentadol hcl 75 mg tablet	NF --> Tier 1 (Generic)	4/1/2026
Respiratory Agents	BRINSUPRI 10 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	4/1/2026
Respiratory Agents	BRINSUPRI 25 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	4/1/2026
Antidiabetic Agents	dapagliflozin 10 mg tablet	NF --> Tier 1 (Generic), QL (30/30 days)	5/1/2026
Antidiabetic Agents	dapagliflozin 5 mg tablet	NF --> Tier 1 (Generic), QL (30/30 days)	5/1/2026
Cardiovascular Agents	JUXTAPID 2 MG CAPSULE	NF --> Tier 4 (Specialty)	5/1/2026
Central Nervous System Agents	CAFERGOT 1-100 MG TABLET	NF --> Tier 3 (Non-Preferred Brand)	5/1/2026
Diabetic Supplies	MICROLET NEXT LANCETS	NF --> Tier 2 (Preferred Brand)	5/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



Year-to-Date Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Diabetic Supplies	TRUE COMFORT SAFETY LANCETS/30G	NF --> Tier 2 (Preferred Brand)	5/1/2026
Pain	milnacipran hcl 100 mg tablet	NF --> Tier 1 (Generic)	5/1/2026
Pain	milnacipran hcl 12.5 & 25 & 50 mg tablet pack	NF --> Tier 1 (Generic)	5/1/2026
Pain	milnacipran hcl 12.5 mg tablet	NF --> Tier 1 (Generic)	5/1/2026
Pain	milnacipran hcl 25 mg tablet	NF --> Tier 1 (Generic)	5/1/2026
Pain	milnacipran hcl 50 mg tablet	NF --> Tier 1 (Generic)	5/1/2026
Phosphate Binders	ferric citrate 1 gm 210 mg(fe) tablet	NF --> Tier 1 (Generic), ST, QL (360/30 days)	5/1/2026
Respiratory Agents	ipratropium bromide hfa 17 mcg/act aerosol solution	NF --> Tier 1 (Generic)	5/1/2026
Respiratory Agents	nintedanib esylate 100 mg capsule	NF --> Tier 4 (Specialty), PA, QL (60/30 days)	5/1/2026
Respiratory Agents	nintedanib esylate 150 mg capsule	NF --> Tier 4 (Specialty), PA, QL (60/30 days)	5/1/2026
Tobacco Cessation	nicotine transdermal system step 1 patch 24hr 21 mg/24hr	NF --> Tier 1 (Generic)	5/1/2026
Tobacco Cessation	nicotine transdermal system step 2 patch 24hr 14 mg/24hr	NF --> Tier 1 (Generic)	5/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



Year-to-Date Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Tobacco Cessation	nicotine transdermal system step 3 patch 24hr 7 mg/24hr	NF --> Tier 1 (Generic)	5/1/2026
Antidiabetic Agents	dapagliflozin-metformin 5-1000 mg ER tablet	NF --> Tier 1 (Generic), QL (30/30 days)	6/1/2026
Antidiabetic Agents	dapagliflozin-metformin 5-500 mg ER tablet	NF --> Tier 1 (Generic), QL (30/30 days)	6/1/2026
Antidiabetic Agents	dapagliflozin-metformin 10-1000 mg ER tablet	NF --> Tier 1 (Generic), QL (30/30 days)	6/1/2026
Antidiabetic Agents	dapagliflozin-metformin 10-500 mg ER tablet	NF --> Tier 1 (Generic), QL (30/30 days)	6/1/2026
Antidiabetic Agents	OZEMPIC 1.5 MG TABLET	NF --> Tier 2 (Preferred Brand), PA ,QL (30/180 days)	6/1/2026
Antidiabetic Agents	OZEMPIC 4 MG TABLET	NF --> Tier 2 (Preferred Brand), PA ,QL (30/30 days)	6/1/2026
Antidiabetic Agents	OZEMPIC 9 MG TABLET	NF --> Tier 2 (Preferred Brand), PA ,QL (30/30 days)	6/1/2026
Cardiovascular Agents	NITRO-BID 2 % OINTMENT	Tier 3 (Non-Preferred Brand) --> Tier 1 (Generic)	6/1/2026
Cardiovascular Agents	nitroglycerin 2 % ointment	NF --> Tier 1 (Generic)	6/1/2026
Immunological Agents	tacrolimus 0.5 mg ER capsule	NF --> Tier 1 (Generic)	6/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



Year-to-Date Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Immunological Agents	tacrolimus 1 mg ER capsule	NF --> Tier 1 (Generic)	6/1/2026
Immunological Agents	tacrolimus 5 mg ER capsule	NF --> Tier 1 (Generic)	6/1/2026
Miscellaneous	pimozide 1 mg tablet	Tier 3 (Non-Preferred Brand) --> Tier 1 (Generic)	6/1/2026
Miscellaneous	pimozide 2 mg tablet	Tier 3 (Non-Preferred Brand) --> Tier 1 (Generic)	6/1/2026
Oncology	INLURIYO 200 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (56/28 days)	6/1/2026
Pain	relgaabi 300 mg capsule	NF --> Tier 1 (Generic)	6/1/2026
Pain	relgaabi 400 mg capsule	NF --> Tier 1 (Generic)	6/1/2026
Respiratory Agents	JASCAYD 18 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (60/30 days)	6/1/2026
Respiratory Agents	JASCAYD 9 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (60/30 days)	6/1/2026
Antidiabetic Agents	sitagliptin phos-metformin hcl 50-1000 mg tablet	NF --> Tier 1 (Generic), QL (60/30 days)	7/1/2026
Antidiabetic Agents	sitagliptin phos-metformin hcl 50-500 mg tablet	NF --> Tier 1 (Generic), QL (60/30 days)	7/1/2026
Antidiabetic Agents	sitagliptin phosphate 100 mg tablet	NF --> Tier 1 (Generic), QL (30/30 days)	7/1/2026
Antidiabetic Agents	sitagliptin phosphate 25 mg tablet	NF --> Tier 1 (Generic), QL (30/30 days)	7/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



Year-to-Date Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Antidiabetic Agents	sitagliptin phosphate 50 mg tablet	NF --> Tier 1 (Generic), QL (30/30 days)	7/1/2026
Cardiovascular Agents	LASIX ONYU 80 MG/2.67ML CARTRIDGE KIT	NF --> Tier 4 (Specialty), PA, QL (8/180 days)	7/1/2026
Cardiovascular Agents	macitentan 10 mg tablet	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	7/1/2026
Cardiovascular Agents	REDEMPLO 25 MG/0.5ML PREFILLED SYRINGE SOLUTION	NF --> Tier 4 (Specialty), PA, QL (0.5/84 days)	7/1/2026
Immunological Agents	tofacitinib citrate 1 mg/ml solution	NF --> Tier 4 (Specialty), PA, QL (240/30 days)	7/1/2026
Immunological Agents	tofacitinib citrate 10 mg tablet	NF --> Tier 4 (Specialty), PA, QL (240/365 days)	7/1/2026
Immunological Agents	tofacitinib citrate 11 mg 24h extended release tablet	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	7/1/2026
Immunological Agents	tofacitinib citrate 22 mg 24h extended release tablet	NF --> Tier 4 (Specialty), PA, QL (120/365 days)	7/1/2026
Immunological Agents	tofacitinib citrate 5 mg tablet	NF --> Tier 4 (Specialty), PA, QL (60/30 days)	7/1/2026
Oncology	bosutinib 100mg tablet	NF --> Tier 4 (Specialty), PA, QL (90/30 days)	7/1/2026
Oncology	bosutinib 400mg tablet	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	7/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



Year-to-Date Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Oncology	bosutinib 500mg tablet	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	7/1/2026
Oncology	KOMZIFTI 200 MG CAPSULE	NF --> Tier 4 (Specialty), PA, QL (90/30 days)	7/1/2026
Oncology	TRUQAP 200 MG TABLET THERAPY PACK	NF --> Tier 4 (Specialty), PA, QL (64/28 days)	7/1/2026
Oncology	yulithira 10 mg tablet	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	7/1/2026
Oncology	yulithira 2.5 mg tablet	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	7/1/2026
Oncology	yulithira 5 mg tablet	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	7/1/2026
Oncology	yulithira 7.5 mg tablet	NF --> Tier 4 (Specialty), PA, QL (30/30 days)	7/1/2026
Respiratory Agents	TYVASO DPI MAINTENANCE KIT 112 X 48MCG & 112 X80MCG POWDER	NF --> Tier 4 (Specialty), PA, QL (224/28 days)	7/1/2026
Urologic Agents	mirabegron 8mg/ml granules for oral suspension	NF --> Tier 1 (Generic)	7/1/2026
Blood Products and Modifiers	AQVESME 100 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (60/30 days)	8/1/2026
Blood Products and Modifiers	CARDAMYST 2 X 70 MG/DOSE SOLUTION	NF --> Tier 3 (Non-Preferred Brand)	8/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



Year-to-Date Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Blood Products and Modifiers	HYMPAVZI 75 MG/0.5ML AUTO-INJECTOR SOLUTION	NF --> Tier 4 (Specialty), PA, QL (2/28 days)	8/1/2026
Cardiovascular Agents	TRYNGOLZA 50 MG/0.8ML AUTO-INJECTOR SOLUTION	NF --> Tier 4 (Specialty), PA, QL (1/28 days)	8/1/2026
Dental Agents	PREVIDENT 0.2% SOLUTION	Tier 3 (Non-Preferred Brand) --> Tier 2 (Preferred Brand)	8/1/2026
Dental Agents	PREVIDENT 1.1% GEL	Tier 3 (Non-Preferred Brand) --> Tier 2 (Preferred Brand)	8/1/2026
Dental Agents	PREVIDENT 5000 BOOSTER PLUS 1.1 % PASTE	Tier 3 (Non-Preferred Brand) --> Tier 2 (Preferred Brand)	8/1/2026
Dental Agents	PREVIDENT 5000 DRY MOUTH 1.1 % GEL	Tier 3 (Non-Preferred Brand) --> Tier 2 (Preferred Brand)	8/1/2026
Dental Agents	PREVIDENT 5000 KIDS 1.1 % PASTE	Tier 3 (Non-Preferred Brand) --> Tier 2 (Preferred Brand)	8/1/2026
Dental Agents	PREVIDENT 5000 ORTHO DEFENSE 1.1 % PASTE	Tier 3 (Non-Preferred Brand) --> Tier 2 (Preferred Brand)	8/1/2026
Dental Agents	PREVIDENT 5000 PLUS 1.1 % CREAM	Tier 3 (Non-Preferred Brand) --> Tier 2 (Preferred Brand)	8/1/2026
Immunological Agents	AVTOZMA 162 MG/0.9ML AUTO-INJECTOR SOLUTION	NF --> Tier 4 (Specialty), PA, QL (3.6/28 days)	8/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved

Health Insurance Marketplace (HIM)

Formulary Updates
September, 2026



Year-to-Date Formulary Changes			
Therapeutic Class	Medication	Formulary Changes	Effective Date
Immunological Agents	AVTOZMA 162 MG/0.9ML PREFILLED SYRINGE SOLUTION	NF --> Tier 4 (Specialty), PA, QL (3.6/28 days)	8/1/2026
Immunological Agents	SKYRIZI 55 MG/0.37ML PREFILLED SYRINGE SOLUTION	NF --> Tier 4 (Specialty), PA, QL (0.37/84 days)	8/1/2026
Miscellaneous	THE EPINEPHRINE SYRINGE 1 ML	NF --> Tier 2 (Preferred Brand)	8/1/2026
Oncology	HYRNUO 10 MG TABLET	NF --> Tier 4 (Specialty), PA, QL (120/30 days)	8/1/2026
Thyroid Agents	AMERITHROID 120 MG TABLET	NF --> Tier 3 (Non-Preferred Brand)	8/1/2026
Thyroid Agents	AMERITHROID 15 MG TABLET	NF --> Tier 3 (Non-Preferred Brand)	8/1/2026
Thyroid Agents	AMERITHROID 180 MG TABLET	NF --> Tier 3 (Non-Preferred Brand)	8/1/2026
Thyroid Agents	AMERITHROID 240 MG TABLET	NF --> Tier 3 (Non-Preferred Brand)	8/1/2026
Thyroid Agents	AMERITHROID 30 MG TABLET	NF --> Tier 3 (Non-Preferred Brand)	8/1/2026
Thyroid Agents	AMERITHROID 300 MG TABLET	NF --> Tier 3 (Non-Preferred Brand)	8/1/2026
Thyroid Agents	AMERITHROID 60 MG TABLET	NF --> Tier 3 (Non-Preferred Brand)	8/1/2026
Thyroid Agents	AMERITHROID 90 MG TABLET	NF --> Tier 3 (Non-Preferred Brand)	8/1/2026
Topical Agents	trilitas 0.1 % gel	NF --> Tier 1 (Generic), PA	8/1/2026

This list does not guarantee coverage.
© Judi Rx, Inc. All Rights Reserved