

Pharmacy Update

The formulary changes below meet requirements set by the State of Michigan and the Common Formulary Workgroup. Blue Cross Complete is a member of Michigan Managed Care Common Formulary Workgroup.

Please Note: Changes established by the Common Formulary Workgroup may not be posted immediately. Please allow time for documents to be updated and posted. New information will be posted as soon as possible.

Medication Name	Preferred Drug List Update*	Limit*	Effective Date
Levothyroxine, Levoxyl,, etc.	AL removed for consistency		6/17/2016
Oxycodone HCL 5 MG/5 ML SOLN	QL added	20 mL/day	6/17/2016
Glatopa 20 MG/ML Syringe	QL added	1 injection/day	6/17/2016
PEG-3350 solution PEG-3350 with flavor packs SOL PEG-3350 and electrolytes SOLN PEG 3350 electrolyte SOLN	QL removed		6/17/2016
Fluorometholone 0.1% drops	QL increased	15 mL/30 days	6/17/2016
Lice treatment shampoo Lice treatment 1% crème rinse	QL changed, added as Step 1 before authorization of Malathion	59 mL/30 days	6/17/2016
Naproxen SOD CR and ER 500 MG tablet	Removed from formulary		6/17/2016
Dentagel 1.1% gel Prevident 1.1% gel SF 1.1% gel	AL added for consistency	0-16 years old	6/17/2016
Tizanidine HCL 2 MG tablet Tizanidine HCL 4 MG tablet	AL removed		6/17/2016
Ibuprofen 50 MG/1.25 ML SUSP	QL removed		6/17/2016
Tamiflu 45 MG capsule	QL established	20 tablets/6 months	6/17/2016
Isosorbide MN ER 60 MG tablet	QL adjustment	2 tablets/day	6/17/2016
Ciclopirox 8% solution	QL updated	6.6 mL/28 days	6/17/2016
Fluorouracil 0.5% cream Fluorouracil 5% cream	PA added	Oncology drug criteria	6/17/2016
Santyl ointment	QL updated	60 grams/30 days	6/17/2016
Betamethasone DP AUG 0.05% CRM Betamethasone DP AUG 0.05% gel Betamethasone DP AUG 0.05% OINT	QL updated	50 grams/30 days	6/17/2016
Betamethasone DP AUG 0.05% LOT	QL updated	60 mL/30 days	6/17/2016
Clobetasol 0.05% solution	QL updated	50 mL/30 days	6/17/2016
Halobetasol Prop 0.05% cream Halobetasol Prop 0.05% ointment	QL updated	50 grams/30 days	6/17/2016
Tri-Vit-Fluor 0.25 MG/ML drop Tri-Vit-Fluor 0.5 MG/ML drop	QL updated	1.5 mL/day	6/17/2016
Invokamet 50-500 MG tablet	QL updated	2 tablets/day	6/17/2016

*AL=Age Limit, PA=Prior Authorization, ST=Requires Step Therapy, QL=Quantity Limit, CO=Carve Out,

NDC=National Drug Code, CSHCS=Childrens Special Healthcare Services, NSO=New Starts Only

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Invokamet 50-1,000 MG tablet Invokamet 150-500 MG tablet Invokamet 150-1,000 MG tablet			
Renvela 0.8 GM powder packet Renvela 2.4 GM powder packet	Coverage update	Not covered	6/17/2016
Fosrenol 750 MG powder pack Fosrenol 1,000 MG powder pack	Coverage update	Not covered Only exception is CSHCS	6/17/2016
Velphoro 500 MG chewable tab	Coverage update	Not covered Only exception is CSHCS	6/17/2016
Omeprazole MAG DR 20.6 MG CAP	QL updated	2 capsules/day for all GCN	6/17/2016
Nitrofurantoin Mono-MCR 100 MG	QL updated	2 capsules/day	6/17/2016
Colchicine 0.6 MG tablet	QL updated	3 tablets/day	6/17/2016
Clopidogrel 300 MG tablet	QL updated	1 tablet/30 days	6/17/2016
Mycophenolate 250 MG capsule	QL removed		6/17/2016
Baclofen 10mg Baclofen 20mg	AL removed		6/17/2016
FC2 female condom	QL updated	36 condoms/30 days	6/17/2016
Auryxia 210 MG tablet	Coverage update	Not covered Only exception is CSHCS	6/17/2016
Tecfidera starter pack	QL update	2 tablets/day, 1 pack/year	6/17/2016
Fluorometholone 0.1% drops	QL update	15 mL/month	6/17/2016
Estrace 0.01% cream	QL update	42.5 grams/month	6/17/2016
Budesonide 1 MG/2 ML INH SUSP	QL update	4 mL/day	6/17/2016
Ketone Test Strips	Added to formulary for retail pharmacy		11/1/2016
Entresto 24mg-26mg tablets Entresto 49mg-51mg tablets Entresto 97mg-103mg tablets	Added to formulary with PA, AL, QL	AL ≥ 18 years old QL = 2 tablets/day	12/1/2016
Zarxio 480 mcg/0.8 mL Zarxio 300 mcg/0.5 mL	Added to formulary with PA		12/1/2016
Alogliptin 6.25 mg Alogliptin 12.5 mg Alogliptin 25 mg	Added to formulary		12/1/2016
Alogliptin-Metformin 12.5-500mg Alogliptin-Metformin 12.5-1000mg	Added to formulary		12/1/2016
Alogliptin-Pioglitazone 12.5-15mg Alogliptin-Pioglitazone 12.5-30mg Alogliptin-Pioglitazone 12.5-45mg Alogliptin-Pioglitazone 25-15mg Alogliptin-Pioglitazone 25-30mg Alogliptin-Pioglitazone 25-45mg	Added to formulary		12/1/2016
Spiriva Respimat 1.25 mcg Inh	Added to formulary with QL	1 unit/30 days	12/1/2016
Zaditor 0.025% Eye Drops	Added to formulary with QL	5 mL/month	12/1/2016
Lidocaine HCl 2% Jelly	Added to formulary		12/1/2016
Diphenhydramine 12.5 mg/5 mL	QL removed		12/1/2016
Narcan 4mg nasal spray	Added to formulary with QL	2 units/90 days	12/1/2016
Granix 300 mcg/0.5 mL Safe Syringe	Added to formulary with PA		12/1/2016

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Granix 300 mcg/0.5 mL Syringe Granix 480 mcg/0.5 mL Safe Syringe Granix 480 mcg/0.5 mL Syringe			
Isosorbide MN ER 120mg tablets	QL updated	2 tablets/day	12/1/2016
Diltiazem 24hr CD 180mg capsule Diltiazem 24hr ER 180mg capsule	QL updated	2 capsules/day	12/1/2016
Amantadine 100 mg/10 mL solution Amantadine 50 mg/5 mL solution	QL updated	40 mL/day	12/1/2016
Benzoyl Peroxide 10% Gel	QL updated	3.78 grams/day	12/1/2016
Calcipotriene 0.005% ointment	QL updated	4 grams/day	12/1/2016
Betamethasone DP 0.05% cream	QL updated	60 grams/30 days	12/1/2016
Betamethasone Valerate 0.1% cream	QL updated	15.14 grams/day	12/1/2016
Clobetasol 0.05% cream Clobetasol 0.05% ointment	QL updated	2 grams/day	12/1/2016
Mometasone Furoate 0.1% cream	QL updated	1.67 grams/day	12/1/2016
Triamcinolone 0.025% cream Triamcinolone 0.1% cream Triamcinolone 0.5% cream Triamcinolone 0.1% lotion Triamcinolone 0.025% ointment Triamcinolone 0.1% ointment	QL updated	480 grams/30 days	12/1/2016
Omeprazole 40mg capsule	QL updated	2 capsules/day	12/1/2016
Allopurinol 100mg	QL updated	3 tablets/day	12/1/2016
Sodium Fluoride 0.5mg/mL drop	QL updated	4 mL/day	12/1/2016
Ciprofloxacin 0.3% eye drops	QL updated	10 mL/30 days	12/1/2016
Clindamycin 2% vaginal cream	QL removed		12/1/2016
Metronidazole 0.75% vaginal gel	QL removed		12/1/2016
Cephalexin 125 mg/5 mL suspension Cephalexin 250 mg/5 mL suspension	Age limit removed for CSHCS members only		1/1/2017
Nitroglycerin ER 2.5 mg capsules Nitroglycerin ER 6.5 mg capsules	Select NDCs no longer covered		1/1/2017
OTC Omega-3 Fish Oil supplements in Antihyperlipidemic Agents - Dietary Source Combinations	Select products added to formulary		1/1/2017
Valsartan-HCTZ 320-12.5mg tablets Valsartan-HCTZ 320-25mg tablets	Added to formulary		1/1/2017
Estrogen-Methyltestosterone H.S. tabs Estrogen-Methyltestosterone F.S. tabs	Removed from formulary - NSO		1/1/2017
Jantoven tablets	Added to formulary ✓ all strengths		1/1/2017
Aspirin 81mg Chew and EC tablets	AL removed		1/1/2017
Azelastine HCl 0.05% drops	QL added – NSO		1/1/2017
Ciprofloxacin 0.3% eye drop	QL added – NSO		1/1/2017
Pred Mild 0.12% eye drops	QL added – NSO		1/1/2017
Timolol 0.25% gel-solution	QL added – NSO		1/1/2017
Timolol 0.25% GFS gel-solution	QL added – NSO		1/1/2017
Timolol 0.5% gel-solution	QL added – NSO		1/1/2017
Timolol 0.5% GFS gel-solution	QL added – NSO		1/1/2017
Apraclonidine HCl 0.5% drops	QL added – NSO		1/1/2017
Brimonidine Tartrate 0.15% drop	QL added – NSO		1/1/2017

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