

December 2021/January 2022 P & T Updates

* Indicates prior authorization (PA) or step therapy (ST)

Commercial

† Depending on your specific benefits and in which state you reside, some drugs on this list may have no cost sharing.

Brand Name	Status	Triple Tier Formulary	4th Tier Applicable	Traditional Formulary	Prior Auth	Qty Limit	Detailed Limits	Formulary Alternatives
AZSTARYS	Non Formulary	Non Formulary	No	Non Formulary	Yes	Yes	1 capsule per day	dextroamphetamine, dextroamphetamine/amphetamine combination, dextroamphetamine/amphetamine SR combination, methylphenidate, methylphenidate sustained-release, methylphenidate extended-release, Metadate CD
BESREMI	Formulary	3	No	2	Yes	Yes	2 milliliters per 28 days, 28 day supply per fill	hydroxyurea
BREXAFEMME	Non Formulary	Non Formulary	No	Non Formulary	Yes	Yes	4 tablets per day, 1 day supply per fill	fluconazole tablets, terconazole cream, terconazole suppository
BYLVAY	Formulary	3	Yes	2	Yes	Yes	200 mcg pellets: 30 capsules per day 600 mcg pellets: 10 capsules per day 400 mcg capsules: 15 capsules per day 1200 mcg capsules: 5 capsules per day	ursodiol
DEXCOM G6	Formulary	2	No	2	No	Yes	Dexcom G6 Transmitter: 1 transmitter per 90 days Dexcom G6 Sensor: 1 sensor per 10 days Dexcom G6 Receiver: 1 receiver per 730 days	FreeStyle Libre
EPRONTIA	Formulary	3	No	2	Yes	Yes	16 milliliters per day	topiramate tablet, topiramate sprinkle capsules, Trokendi XR*
EXKIVITY†	Formulary	3	No	2	Yes	Yes	4 capsules per day, 30 day supply per fill	none
FREESTYLE LIBRE UPATE	Formulary	2	No	2	No	Yes	FreeStyle Libre 14 Day Reader/FreeStyle Libre 2 Reader/FreeStyle Libre Reader: 1 reader every 2 years FreeStyle Libre 10 day sensors: 3 sensors per 30 days FreeStyle Libre 14 day sensors, FreeStyle Libre 2.0 sensors: 2 sensors per 28 days	Dexcom G6
KLOXXADO	Formulary	2	No	2	No	No	-	Narcan
PREVNAR 20†	Formulary	3	No	2	No	Yes	0.5 milliliters per 999 days	Prevnar 13, Pneumovax 23, Vaxneuvance
PROGRAF GRANULES	Formulary	3	No	2	No	No	-	tacrolimus capsules, Prograf capsules
REZUROCK	Formulary	3	Yes	2	Yes	Yes	200 mg: 1 tablet per day, 30 day supply per fill	prednisone, cyclosporine, tacrolimus, mycophenolate mofetil, sirolimus, Jakafi*, imatinib, Imbruvica*
SCEMBLIX†	Formulary	3	No	2	Yes	Yes	2 tablets per day, 30 day supply per fill	imatinib, Bosulif*, Iclusig*, Sprycel*, Tasigna*
VAXNEUVANCE †	Formulary	3	No	2	No	Yes	0.5 milliliters per 999 days	Prevnar 13, Prevnar 20, Pneumovax 23

CHIP

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Brand Name	Status	Tier	Prior Auth	Qty Limit	Detailed Limits	Formulary Alternatives
AZSTARYS	Non Formulary	Non Formulary	Yes	Yes	1 capsule per day	dextroamphetamine, dextroamphetamine/amphetamine combination, dextroamphetamine/amphetamine SR combination, methylphenidate, methylphenidate sustained-release, methylphenidate extended-release, Metadate CD
BESREMI	Formulary	2	Yes	Yes	2 milliliters per 28 days, 28 day supply per fill	hydroxyurea
BREXAFEMME	Non Formulary	Non Formulary	Yes	Yes	4 tablets per day, 1 day supply per fill	fluconazole tablets, terconazole cream, terconazole suppository
BYLVAY	Formulary	2	Yes	Yes	200 mcg pellets: 30 capsules per day 600 mcg pellets: 10 capsules per day 400 mcg capsules: 15 capsules per day 1200 mcg capsules: 5 capsules per day	ursodiol
DEXCOM G6	Formulary	2	No	Yes	Dexcom G6 Transmitter: 1 transmitter per 90 days Dexcom G6 Sensor: 1 sensor per 10 days Dexcom G6 Receiver: 1 receiver per 730 days	FreeStyle Libre
EPRONTIA	Formulary	2	Yes	Yes	16 milliliters per day	topiramate tablet, topiramate sprinkle capsules, Trokendi XR*
EXKIVITY	Formulary	2	Yes	Yes	4 capsules per day, 30 day supply per fill	none
FREESTYLE LIBRE UPATE	Formulary	2	No	Yes	FreeStyle Libre 14 Day Reader/FreeStyle Libre 2 Reader/FreeStyle Libre Reader: 1 reader every 2 years FreeStyle Libre 10 day sensors: 3 sensors per 30 days FreeStyle Libre 14 day sensors, FreeStyle Libre 2.0 sensors: 2 sensors per 28 days	Dexcom G6
KLOXXADO	Formulary	2	No	No	-	Narcan
PREVNAR 20	Formulary	2	No	Yes	0.5 milliliters per 999 days	Pevnar 13, Pneumovax 23, Vaxneuvance
PROGRAF GRANULES	Formulary	2	No	No	-	tacrolimus capsules, Prograf capsules
REZUROCK	Formulary	2	Yes	Yes	200 mg: 1 tablet per day, 30 day supply per fill	prednisone, cyclosporine, tacrolimus, mycophenolate mofetil, sirolimus, Jakafi*, imatinib, Imbruvica*
SCEMBLIX	Formulary	2	Yes	Yes	2 tablets per day, 30 day supply per fill	imatinib, Bosulif*, Iclusig*, Sprycel*, Tassigna*
VAXNEUVANCE	Formulary	2	No	Yes	0.5 milliliters per 999 days	Pevnar 13, Pevnar 20, Pneumovax 23

GHP Family

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Brand Name	Status	GHP Family Formulary Tier	Prior Auth	Qty Limit	Detailed Limits	Formulary Alternative(s)
DEXCOM G6 RECEIVER DEVICE	Formulary	Brand	No	Yes	1 Receiver per 730 days	not applicable
DEXCOM G6 SENSOR MISCELLANEOUS	Formulary	Brand	No	Yes	3 Sensors per 30 days	not applicable
DEXCOM G6 TRANSMITTER MISCELLANEOUS	Formulary	Brand	No	Yes	1 Transmitter per 90 days	not applicable
FREESTYLE LIBRE 14 DAY READER, FREESTYLE LIBRE 2 READER, FREESTYLE LIBRE READER	Formulary	Brand	No	Yes	1 Reader per 730 days	not applicable
FREESTYLE LIBRE 14 DAY SENSOR, FREESTYLE LIBRE 2 SENSOR	Formulary	Brand	No	Yes	2 Sensors per 28 days	not applicable
FREESTYLE LIBRE SENSOR	Formulary	Brand	No	Yes	3 Sensors per 30 days	not applicable

Geisinger Gold

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Brand Name	Status	\$0 Deductible Formulary	Standard Formulary	Prior Auth	Qty Limit	Detailed Limits	Formulary Alternative(s)
ASCENIV	Formulary	Specialty	25% coinsurance	Yes	No		Gamunex-C, Gammagard, Gamastan S-D, Gammaplex, Privigen, Hizentra, Bivigam, Flebogamma, Hyqvia, Cuvitru, Panzyga, Cutaquig
AZSTARYS	Non Formulary						methylphenidate, methylphenidate ER, methylphenidate CD, dexmethylphenidate, dexmethylphenidate ER, dextroamphetamine, dextroamphetamine ER, amphetamine/dextroamphetamine, amphetamine/dextroamphetamine ER combination
BESREMI	Formulary	Specialty	25% coinsurance	Yes	Yes	2 ml/28 days	hydroxyurea
BREXAFEMME	Non Formulary						Fluconazole oral tablets, miconazole 3 suppository, terconazole cream, terconazole suppository
BYLVAY	Formulary	Specialty	25% coinsurance	Yes	Yes	200 mcg: 30 caps/day; 600 mcg: 10 caps/day, 400 mcg: 15 caps/day, 1200 mcg 5 caps/day	ursodiol
EPRONTIA	Formulary	Brand Non Preferred	25% coinsurance	Yes	Yes	16 ml/day	divalproex, valproic acid, topiramate, topiramate IR sprinkle capsules
EXKIVITY	Formulary	Specialty	25% coinsurance	Yes	Yes	4 capsules/day	Rybrevant*
INVEGA HAFYERA	Formulary	Specialty	25% coinsurance	Yes	Yes	1 syringe every 6 months	Paliperidone, risperidone, Invega Sustenna*, Invega Trinza*
KLOXXADO	Formulary	Brand Preferred	25% coinsurance	No	No		Naran Nasal Liquid, naloxone injection
NEXVIAZYME	Formulary	Specialty	25% coinsurance	Yes	No		none
REZUROCK	Formulary	Specialty	25% coinsurance	Yes	Yes	2 tablets/day	prednisone, methylprednisolone, cyclosporine, tacrolimus, mycophenolate mofetil, sirolimus, Jakafi*, imatinib, Imbruvica*
SAPHNELO	Formulary	Specialty	25% coinsurance	Yes	Yes	2 ml/28 days	methylprednisolone, prednisone, azathioprine, hydroxychloroquine, methotrexate
SCEMBLIX	Formulary	Specialty	25% coinsurance	Yes	Yes	20 mg tablets: 2 tablets/day; 40 mg tablets: 10 tablets/day	imatinib, Sprycel*, Tasigna*
XEMBIFY	Formulary	Specialty	25% coinsurance	Yes	No		Gamunex-C, Gammagard, Gamastan S-D, Gammaplex, Privigen, Hizentra, Bivigam, Flebogamma, Hyqvia, Cuvitru, Panzyga, Cutaquig

Marketplace

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Brand Name	Status	Tier	Prior Auth	Qty Limit	Detailed Limits	Formulary Alternatives
AZSTARYS	Non Formulary	Non Formulary	Yes	Yes	1 capsule per day	dextroamphetamine, dextroamphetamine/amphetamine combination, dextroamphetamine/amphetamine SR combination, methylphenidate, methylphenidate sustained-release, methylphenidate extended-release, Metadate CD
BESREMI	Formulary	4	Yes	Yes	2 milliliters per 28 days, 28 day supply per fill	hydroxyurea
BREXAFEMME	Non Formulary	Non Formulary	Yes	Yes	4 tablets per day, 1 day supply per fill	fluconazole tablets, terconazole cream, terconazole suppository
BYLVAY	Formulary	5	Yes	Yes	200 mcg pellets: 30 capsules per day 600 mcg pellets: 10 capsules per day 400 mcg capsules: 15 capsules per day 1200 mcg capsules: 5 capsules per day	ursodiol
DEXCOM G6	Formulary	3	No	Yes	Dexcom G6 Transmitter: 1 transmitter per 90 days Dexcom G6 Sensor: 1 sensor per 10 days Dexcom G6 Receiver: 1 receiver per 730 days	FreeStyle Libre
EPRONTIA	Formulary	4	Yes	Yes	16 milliliters per day	topiramate tablet, topiramate sprinkle capsules, Trokendi XR*
EXKIVITY	Formulary	4	Yes	Yes	4 capsules per day, 30 day supply per fill	none
FREESTYLE LIBRE UPATE	Formulary	3	No	Yes	FreeStyle Libre 14 Day Reader/FreeStyle Libre 2 Reader/FreeStyle Libre Reader: 1 reader every 2 years FreeStyle Libre 10 day sensors: 3 sensors per 30 days FreeStyle Libre 14 day sensors, FreeStyle Libre 2.0 sensors: 2 sensors per 28 days	Dexcom G6
KLOXXADO	Formulary	3	No	No	-	Narcan
PREVNAR 20	Formulary	4	No	Yes	0.5 milliliters per 999 days	Prevnar 13, Pneumovax 23, Vaxneuvance
PROGRAF GRANULES	Formulary	4	No	No	-	tacrolimus capsules, Prograf capsules
REZUROCK	Formulary	5	Yes	Yes	200 mg: 1 tablet per day, 30 day supply per fill	prednisone, cyclosporine, tacrolimus, mycophenolate mofetil, sirolimus, Jakafi*, imatinib, Imbruvica*
SCSEMBLIX	Formulary	4	Yes	Yes	2 tablets per day, 30 day supply per fill	imatinib, Bosulif*, Iclusig*, Sprycel*, Tasigna*
VAXNEUVANCE	Formulary	4	No	Yes	0.5 milliliters per 999 days	Prevnar 13, Prevnar 20, Pneumovax 23