

June & July 2026 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
BYSANTI	Formulary	3	Yes	2	Yes	Yes	Tablets (1 mg, 2mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg): 2 tablets per day Titration Packs: 1 pack per 180 days	aripiprazole, olanzapine, quetiapine, risperidone, ziprasidone, clozapine
IDVYNZO	Formulary	2	No	2	No	Yes	1 tablet per day, 30 day supply per fill	none
JAKAFI XR†	Formulary	3	No	2	Yes	Yes	1 tablet per day, 30 day supply per fill	none
LIFYORLI†	Formulary	3	No	2	Yes	Yes	125 mg Dose Pack: 18 capsules per 28 days, 28 day supply per fill 150 mg Dose Pack: 27 capsules per 28 days, 28 day supply per fill	none
LIVMARLI	Non Formulary	Non Formulary	No	Non Formulary	Yes	Yes	9.5 mg/mL Solution: 3 mL per day 19 mg/mL Solution: 2 mL per day 10 mg, 15 mg, 20 mg. 30 mg tablet: 1 tablet per day (ALGS) 10 mg, 15, mg, 20 mg tablet: 2 tablets per day (PFIC) 30 day supply per fill	ALGS: ursodiol, cholestyramine, rifampin, naltrexone, sertraline, Bylvay* PFIC: ursodiol
PIVYA	Non Formulary	Non Formulary	No	Non Formulary	Yes	Yes	3 tablets per day	nitrofurantoin, sulfamethoxazole-trimethoprim, fosfomycin
REZENOPY	Non Formulary	Non Formulary	No	Non Formulary	Yes	No	-	Rextovy, naloxone nasal spray, naloxone vials & syringes
YEZTUGO†	Formulary	2	No	2	No	Yes	Tablets: 4 tablets per 28 days, 28 day supply per fill Single Dose Vials: 3 milliliters per 6 months, 6 months per fill	none
YUWIWEL	Formulary	3	Yes	2	Yes	Yes	1.3 mg and 2.8 mg single-dose vials: 4 vials per 28 days 5.5 mg single-dose vial: 8 vials per 28 days 28 day supply per fill	Voxzogo*

CHIP

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Brand Name	Status	Tier	Prior Auth	Qty Limit	Detailed Limits	Formulary Alternatives
BYSANTI	Formulary	2	Yes	Yes	Tablets (1 mg, 2mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg): 2 tablets per day Titration Packs: 1 pack per 180 days	aripiprazole, olanzapine, quetiapine, risperidone, ziprasidone, clozapine
IDVYNZO	Formulary	2	No	Yes	1 tablet per day, 30 day supply per fill	none
JAKAFI XR	Formulary	2	Yes	Yes	1 tablet per day, 30 day supply per fill	none
LIFYORLI	Formulary	2	Yes	Yes	125 mg Dose Pack: 18 capsules per 28 days, 28 day supply per fill 150 mg Dose Pack: 27 capsules per 28 days, 28 day supply per fill	none
LIVMARLI	Non Formulary	Non Formulary	Yes	Yes	9.5 mg/mL Solution: 3 mL per day 19 mg/mL Solution: 2 mL per day 10 mg, 15 mg, 20 mg. 30 mg tablet: 1 tablet per day (ALGS) 10 mg, 15, mg, 20 mg tablet: 2 tablets per day (PFIC) 30 day supply per fill	ALGS: ursodiol, cholestyramine, rifampin, naltrexone, sertraline, Bylvay* PFIC: ursodiol
PIVYA	Non Formulary	Non Formulary	Yes	Yes	3 tablets per day	nitrofurantoin, sulfamethoxazole-trimethoprim, fosfomycin
REZENOPY	Non Formulary	Non Formulary	Yes	No	-	Rextovy, naloxone nasal spray, naloxone vials & syringes
YEZTUGO	Formulary	2	No	Yes	Tablets: 4 tablets per 28 days, 28 day supply per fill Single Dose Vials: 3 milliliters per 6 months, 6 months per fill	none
YUVIWEL	Formulary	2	Yes	Yes	1.3 mg and 2.8 mg single-dose vials: 4 vials per 28 days 5.5 mg single-dose vial: 8 vials per 28 days 28 day supply per fill	Voxzogo*

GHP Family

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Brand Name	Status	GHP Family Formulary Tier	Prior Auth	Qty Limit	Detailed Limits	Formulary Alternative(s)
MYQORZO	Formulary	Brand	Yes	Yes	1 tablet daily, 30-day supply per fill	disopyramide, per Statewide PDL
REZENOPY	Non Formulary	Non Formulary	Yes	No		per Statewide PDL
YUWIWEL	Formulary	Brand	Yes	Yes	1.3 mg and 2.8 mg: 0.15 vials per day, 5.5 mg: 0.29 vials per day. 28-day supply per fill	Voxzogo
ZYCUBO	Formulary	Brand	Yes	No		none

Geisinger Gold

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Brand Name	Status	6-Tier Formulary	Prior Auth	Qty Limit	Detailed Limits	Formulary Alternative(s)
AVOPEF	Non Formulary					etoposide
BYSANTI	Formulary	Specialty	Yes	Yes	2 tablets/day; 1 titration pack per 180 days	aripiprazole**, olanzapine**, quetiapine**, risperidone**, ziprasidone**
FAVLYXA	Non Formulary					fluorouracil
IDVYNZO	Formulary	Specialty	No	Yes	1 tablet/day	
JAKAFI XR	Formulary	Specialty	Yes	Yes	1 tablet/day	Jakafi*/**
LIFYORLI	Formulary	Specialty	Yes	Yes	125 mg Dose Pack: 18 capsules per 28 days, 28 day supply per fill; Lifyorli 150 mg Dose Pack: 27 capsules per 28 days, 28 day supply per fill	none
LOARGYS	Formulary	Specialty	Yes	No		none
MYQORZO	Formulary	Specialty	Yes	Yes	1 tablet/day	atenolol, bisoprolol, carvedilol, labetalol, metoprolol succinate, metoprolol tartrate, diltiazem, verapamil, disopyramide
PIVYA	Non Formulary					nitrofurantoin, sulfamethoxazole-trimethoprim, fosfomycin**
REZENOPY	Non Formulary					naloxone 0.4 mg/ml injection, naloxone 2 mg/2 ml injection, Kloxxado 8 mg/0.1 ml nasal
YARTEMLEA	Non Formulary					none
ZYCUBO	Non Formulary					none

Marketplace

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Brand Name	Status	Tier	Prior Auth	Qty Limit	Detailed Limits	Formulary Alternatives
BYSANTI	Formulary	5	Yes	Yes	Tablets (1 mg, 2mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg): 2 tablets per day Titration Packs: 1 pack per 180 days	aripiprazole, olanzapine, quetiapine, risperidone, ziprasidone, clozapine
IDVYNZO	Formulary	3	No	Yes	1 tablet per day, 30 day supply per fill	none
JAKAFI XR	Formulary	4	Yes	Yes	1 tablet per day, 30 day supply per fill	none
LIFYORLI	Formulary	4	Yes	Yes	125 mg Dose Pack: 18 capsules per 28 days, 28 day supply per fill 150 mg Dose Pack: 27 capsules per 28 days, 28 day supply per fill	none
LIVMARLI	Non Formulary	Non Formulary	Yes	Yes	9.5 mg/mL Solution: 3 mL per day 19 mg/mL Solution: 2 mL per day 10 mg, 15 mg, 20 mg, 30 mg tablet: 1 tablet per day (ALGS) 10 mg, 15 mg, 20 mg tablet: 2 tablets per day (PFIC) 30 day supply per fill	ALGS: ursodiol, cholestyramine, rifampin, naltrexone, sertraline, Bylvay* PFIC: ursodiol
PIVYA	Non Formulary	Non Formulary	Yes	Yes	3 tablets per day	nitrofurantoin, sulfamethoxazole-trimethoprim, fosfomycin
REZENOPY	Non Formulary	Non Formulary	Yes	No	-	Rextovy, naloxone nasal spray, naloxone vials & syringes
YEZTUGO	Formulary	3	No	Yes	Tablets: 4 tablets per 28 days, 28 day supply per fill Single Dose Vials: 3 milliliters per 6 months, 6 months per fill	none
YUWIWEL	Formulary	5	Yes	Yes	1.3 mg and 2.8 mg single-dose vials: 4 vials per 28 days 5.5 mg single-dose vial: 8 vials per 28 days 28 day supply per fill	Voxzogo*