



PO Box 639
Richboro, PA 18954-9998



Prescription drug list changes

Effective January 1, 2027

Dear Valued Plan Participant:

We want to alert you about upcoming changes to the Prescription Drug List (PDL) for your plan.

These changes include copay costs or coverage requirements. Review the list of changes to learn if any of your medications will be impacted.

To help outline changes in cost or coverage, prescription drugs are grouped by tiers. A tier indicates the amount you pay when you fill a prescription. Please reference this chart as you review the changes to the PDL for your plan.



Tier 1

Lowest-cost medications



Tier 2

Mid-range cost



Tier 3

Highest-cost

Prescription drugs subject to exclusion or limited coverage^{1,2}

We evaluate prescription drugs based on their total value, including how a drug works and how much it costs. When several drugs work in the same way, we may choose to exclude or limit coverage of the higher-cost option. Effective **January 1, 2027**, the drugs listed below may be excluded or have limited coverage. You may need to get a prior authorization or try preferred alternative treatment options prior to the approval of coverage.

Sign into your online account to see if there are any actions you need to take.

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Therapeutic use	Medication name	Alternative treatment option(s)
ADHD	Arynta oral solution ³	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR, generic Mydayis), dexamethylphenidate extended-release (generic Focalin XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release (generic Concerta, Metadate CD, Metadate ER, Ritalin LA)
Allergies	Desloratadine oral solution ³	cetirizine chewable tablet, oral solution (generic Zyrtec), fexofenadine oral suspension (generic Allegra), levocetirizine oral solution (generic Xyzal), loratadine chewable tablet, oral syrup (generic Claritin)
Asthma	Beclomethasone HFA ⁵	Arnuity Ellipta, QVAR RediHaler
Asthma	Fluticasone Furoate Ellipta (Arnuity Ellipta authorized generic) ³	Arnuity Ellipta, QVAR RediHaler
Bowel preparations	Clenpiq ⁴	polyethylene glycol powder (OTC Miralax), PEG-3350 (generic Golytely), Moviprep, Suflave, Sutab, Suprep
Bowel preparations	Plenvu	polyethylene glycol powder (OTC Miralax), PEG-3350 (generic Golytely), Moviprep, Suflave, Sutab, Suprep
Cancer	Bosulif tablet (brand only) ⁵	bosutinib (generic Bosulif) ⁶
Cancer	Nilotinib tartrate ³	nilotinib hydrochloride (generic Tasigna)
Cancer	Phyrago ³	dasatinib (generic Sprycel)
Cancer	Pomalyst (brand only)	pomalidomide (generic Pomalyst)
Cancer	Revlimid (brand only)	lenalidomide (generic Revlimid)
Cholesterol/Lipid lowering	LerochoI ^{3,5}	Repatha
Cholesterol/Lipid lowering	Redempro ^{3,5}	Tryngolza ⁶
COPD	Atrovent HFA (brand only)	ipratropium bromide HFA (generic Atrovent HFA)
Diabetes	Kirsty ³	Humalog KwikPen, Insulin Lispro KwikPen/vial (unbranded Humalog), Lyumjev KwikPen
Diabetes	Merilog ³	Humalog KwikPen, Insulin Lispro KwikPen/vial (unbranded Humalog), Lyumjev KwikPen
Diabetes	Merilog Solostar ³	Humalog KwikPen, Insulin Lispro KwikPen/vial (unbranded Humalog), Lyumjev KwikPen
Diabetes	Simplera Sensor ³	Dexcom, Freestyle Libre
Diabetes	Simplera System ³	Dexcom, Freestyle Libre
Diabetes	Zegalogue	glucagon (generic Glucagon Kit), Baqsimi, Gvoke
Endocrine disorders	Demser (brand only)	metyrosine (generic Demser)
Endocrine disorders	Palsonify ³	octreotide (generic Sandostatin), Somavert
Endocrine disorders	Ravicti (brand only)	glycerol phenylbutyrate (generic Ravicti), sodium phenylbutyrate (generic Buphenyl)

Therapeutic use	Medication name	Alternative treatment option(s)
Fibromyalgia	Savella (brand only)	milnacipran (generic Savella)
Glaucoma	Lumigan 0.01% (brand only)	bimatoprost (generic Lumigan), latanoprost (generic Xalatan), travoprost (generic Travatan Z)
Glaucoma	Omlonti ³	bimatoprost (generic Lumigan), latanoprost (generic Xalatan), travoprost (generic Travatan Z)
Heart disorders	Myqorzo ^{3,5}	beta-blocker (e.g., atenolol, bisoprolol, metoprolol, nadolol, propranolol), calcium channel blocker (i.e., diltiazem, verapamil), Camzyos ⁶
Heart failure	Furoscix	Enbumyst, Lasix ONYU
Hemophilia	Jivi	Adynovate, Afstyla, Altuviio, Eloctate
Hepatitis C	Epclusa pellet pack ⁵	Ledipasvir/sofosbuvir (authorized generic for Harvoni) ⁶ , Mavyret ⁶ , Sofosbuvir/velpatasvir (authorized generic for Epclusa) ⁶
Hepatitis C	Epclusa tablet (brand only) ⁵	Ledipasvir/sofosbuvir (authorized generic for Harvoni) ⁶ , Mavyret ⁶ , Sofosbuvir/velpatasvir (authorized generic for Epclusa) ⁶
Hepatitis C	Harvoni pellet pack ⁵	Ledipasvir/sofosbuvir (authorized generic for Harvoni) ⁶ , Mavyret ⁶ , Sofosbuvir/velpatasvir (authorized generic for Epclusa) ⁶
Hepatitis C	Harvoni tablet (brand only) ⁵	Ledipasvir/sofosbuvir (authorized generic for Harvoni) ⁶ , Mavyret ⁶ , Sofosbuvir/velpatasvir (authorized generic for Epclusa) ⁶
Hereditary angioedema	Dawnzera ³	Andembry, Haegarda, Takhzyro
Hereditary angioedema	Ekterly ³	icatibant (generic Firazyf), Berinert, Ruconest
High blood pressure	Epaned (brand only)	enalapril oral solution (generic Epaned)
High blood pressure	Hemiclor ³	chlorthalidone (generic Hygroton)
High blood pressure	Lopressor tablet (brand only)	metoprolol (generic Lopressor)
High blood pressure	Lopressor 12.5 mg ³	one-half tablet of metoprolol 25 mg (generic Lopressor)
High blood pressure	Metoprolol tartrate 12.5 mg (Lopressor authorized generic) ³	one-half tablet of metoprolol 25 mg (generic Lopressor)
High blood pressure	Sdamlo oral solution ^{3,5}	amlodipine (generic Norvasc), Norliqva ⁶
HIV	Edurant (brand only)	rilpivirine (generic Edurant)
Hormone replacement	EstroGel (brand only)	estradiol gel (generic EstroGel)
Infections	Difcid tablet (brand only)	fidaxomicin (generic Difcid) tablets
Inflammatory conditions	Humira ^{5,7}	Adalimumab-aaty (unbranded Yuflyma) ⁶ , Adalimumab-adaz (unbranded Hyrimoz) ⁶ , Amjevita ⁶
Inflammatory conditions	Leqselvi ³	Litfulo, Olumiant

Therapeutic use	Medication name	Alternative treatment option(s)
Inflammatory conditions	Sotyktu ⁵	Adalimumab-aaty (unbranded Yuflyma) ⁶ , Adalimumab-adaz (unbranded Hyrimoz) ⁶ , Amjevita ⁶ , Bimzelx ⁶ , Cimzia ⁶ , Cosentyx ⁶ , Enbrel ⁶ , Icotyde ⁶ , Otezla ⁶ , Rinvoq ⁶ , Skyrizi ⁶ , Simponi ⁶ , Starjemza ⁶ , Steqeyma ⁶ , Tremfya ⁶ , Wezlana ⁶ , Yesintek ⁶
Inflammatory conditions	Tyenne autoinjector & prefilled syringe	Actemra, Avtozma
Inflammatory conditions	Xeljanz (brand only) ⁵	tofacitinib (generic Xeljanz) ⁶
Inflammatory conditions	Xeljanz XR (brand only) ⁵	tofacitinib extended-release (generic Xeljanz XR) ⁶
Irritable bowel disease	dicyclomine hydrochloride 40 mg ³	dicyclomine hydrochloride two of 20 mg (generic Bentyl)
Low potassium	potassium chloride 40 mEq powder packet ³	potassium chloride capsule, packet, or tablet (generic Klor-Con, generic Micro-K)
Mental health	Bucapsol capsule ³	buspirone (generic Buspar)
Mental health	Escitalopram 15 mg capsule ³	citalopram (generic Celexa), escitalopram (generic Lexapro)
Migraines	Brekiya ³	dihydroergotamine (generic D.H.E., generic Migranal)
Migraines	Symbravo ³	meloxicam (generic Mobic) plus rizatriptan (generic Maxalt/Maxalt MLT)
Multiple sclerosis	Mavenclad (brand only) ⁵	cladribine (generic Mavenclad) ⁶
Muscle spasms	Fleqsuvy (brand only)	baclofen oral suspension (generic Fleqsuvy)
Muscle spasms	Ozobax DS (brand only) ⁵	baclofen (generic Ozobax DS) ⁶
Muscle spasms	Zanaflex 2 mg, 4 mg, and 6 mg capsule (brand only)	tizanidine (generic Zanaflex)
Muscle spasms	Zanaflex 4 mg tablet (brand only)	tizanidine (generic Zanaflex)
Muscle spasms	Zanaflex 8 mg capsule ³	cyclobenzaprine tablet (generic Flexeril), chlorzoxazone (generic Parafon Forte DSC), methocarbamol (generic Robaxin), orphenadrine extended-release (generic Norflex), tizanidine tablet (generic Zanaflex)
Neutropenia	Rolvedon ³	Neulasta, Udenyca
Pain	Nucynta (brand only)	tapentadol (generic Nucynta)
Pain	Tapentadol hydrochloride extended-release (Nucynta ER authorized generic) ⁵	morphine sulfate extended-release (generic MS Contin) ⁶
Pain and inflammation	Combogesic tablet ³	OTC ibuprofen (e.g., Advil/Motrin), OTC acetaminophen (e.g., Tylenol)
Pain and inflammation	ibuprofen 300 mg ³	ibuprofen (generic Motrin), naproxen tablets (generic Naprosyn, generic Anaprox DS), OTC ibuprofen (Advil/Motrin), OTC naproxen (Aleve)

Therapeutic use	Medication name	Alternative treatment option(s)
Pain and inflammation	Indocin rectal suppository (brand only)	indomethacin rectal suppository (generic Indocin)
Pain and inflammation	Indocin suspension (brand only)	indomethacin oral suspension (generic Indocin)
Pain and inflammation	Zybic oral suspension ³	meloxicam (generic Mobic)
Prenatal vitamins	Natal PNV	brand and generic prenatal vitamins
Prenatal vitamins	Prenate	brand and generic prenatal vitamins
Prenatal vitamins	Prenate DHA	brand and generic prenatal vitamins
Prenatal vitamins	Prenate Elite	brand and generic prenatal vitamins
Prenatal vitamins	Prenate Essential	brand and generic prenatal vitamins
Prenatal vitamins	Prenate Mini	brand and generic prenatal vitamins
Prenatal vitamins	Prenate Pixie	brand and generic prenatal vitamins
Prenatal vitamins	Prenate Restore	brand and generic prenatal vitamins
Pulmonary arterial hypertension	Opsumit (brand only) ⁵	macitentan (generic Opsumit) ⁶
Pulmonary fibrosis	Ofev (brand only) ⁵	nintedanib (generic Ofev) ⁶
Pulmonary hypertension	Tracleer tablet (brand only)	bosentan (generic Tracleer)
Skin conditions	Ala-Scalp	hydrocortisone 2.5% topical lotion (generic Hytone)
Skin conditions	hydrocortisone 2% lotion	hydrocortisone 2.5% topical lotion (generic Hytone)
Skin conditions	Taclonex (brand only)	calcipotriene/betamethasone (generic Taclonex)
Ulcers, heartburn & reflux	Nexium packet (brand only)	esomeprazole suspension (generic Nexium)
Weight loss	Saxenda (brand only) ^{5,8}	liraglutide (generic Saxenda) ^{5,8}
Weight loss	Wegovy tablet ^{3,5,8}	liraglutide (generic Saxenda) ^{5,8} , Qsymia ^{5,8} , Wegovy injection ^{5,8} , Zepbound ^{5,8}

¹ Medication is typically excluded from coverage.

² Exclusion includes brand, generic and authorized generic products unless otherwise noted.

³ Newly released medication which was excluded from coverage at the time of launch and will continue to be excluded from our pharmacy benefit.

⁴ Covered for members under age 18.

⁵ For plans that do not exclude these medications, step therapy or prior authorization may be required prior to coverage.

⁶ Step therapy or prior authorization may be required prior to coverage.

⁷ On January 1, 2026, Humira was excluded and allowed continuation of therapy. Effective January 1, 2027, Humira continuation of therapy coverage pathway will be removed.

⁸ Weight loss medications are excluded from coverage under most benefit plans.

ATTENTION: Free language assistance services and free communications in other formats, such as large print, are available to you. Call the toll-free number on your member identification card. (TTY 711).

ማሳሰቢያ፡- አማርኛ (Amharic) የሚናገሩ ከሆነ፣ ነፃ የቋንቋ እገዛ አገልግሎቶች እና ነፃ ተግባቦቶች እንደ ትልቅ እትም ባሉ ሌሎች ቅርፀቶች ለእርስዎ ይገኛሉ። በአባልነት መታወቂያ ካርድዎ ላይ ያለውን ነፃ የስልክ ቁጥር ይደውሉ።

في احطه: انلستساعدك بالغة العربية (Arabic)، سوفيلك حدم ابالمداعده اللغوية للمحطه
ولميرتلي ابالمداعده اللغوية لحرى، صيلالطداعه بالحرفلسيرصل الالمداى للمدو ء فى
بطلبعرب فالعصو اصل.

দেখুন: আপক্ষ যক্ষ **বাংলায় (Bengali-Bangala)** কথা বঁে : , তাহঁে ঙ্গা় মূঁে' ভাষা সহায়তা পঙ্কষবা এবং বড় মুদ্রঁে ফ্রমতো অ: '।' ফ্রমঁা 'ে যোগাযোগগুঁফ আপ: ফ্রজ: ঙ্গা় মূঁে' উঁপ ঙ্গা় আপ: ফ্রস: সঁে ফ্রপঙ্কচয়ঁপঁে ফ্রকার্ডেফ্রঁে '। -ঙ্গা়: স্বফ্রেকঁ করু:

ចំណាំ: ប្រសិនបើអ្នកនិយាយ**ភាសាខ្មែរ (Cambodian-Mon-Khmer)**
សេវាជំនួយភាសាភក្តិភក្តិថ្លៃ និងការទំនាក់ទំនងភក្តិភក្តិថ្លៃក្នុងទម្រង់ផ្សេងទៀត
ដូចជាពុម្ពអក្សរធំ មានសម្រាប់អ្នក។
ទូរសព្ទមកលេខភក្តិភក្តិថ្លៃនៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

請注意： 如果您說**中文 (Chinese - Traditional)**，您可以獲得免費語言協助服務和大字體等其他格式的免費通訊。請致電您的會員身份卡上的免付費電話號碼。

ATTENTION : Si vous parlez **français (French)**, des services d'assistance linguistique et des communications dans d'autres formats, notamment en gros caractères, sont mis à votre disposition gratuitement. Appelez le numéro gratuit figurant sur votre carte de membre.

ATANSYON: Si w pale **Kreyòl Ayisyen (Haitian Creole)**, gen sèvis lang gratis ak kominikasyon nan lòt fòm lo disponib, tankou sa ki enprime ak gwo lèt. Rele nimewo gratis ki sou kat idantifikasyon manm ou an.

ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlose Sprachassistentendienste und kostenlose Kommunikation in anderen Formaten, wie zum Beispiel große Schrift, zur Verfügung. Rufen Sie die gebührenfreie Nummer auf Ihrer Mitgliedskarte an.

ΠΡΟΣΟΧΗ: Εάν μιλάτε **ελληνικά (Greek)**, υπάρχουν διαθέσιμες δωρεάν υπηρεσίες γλωσσικής βοήθειας και δωρεάν επικοινωνία σε άλλες μορφοποιήσεις, όπως μεγάλα γράμματα. Καλέστε τον αριθμό χωρίς χρέωση στην κάρτα μέλους σας.

ધ્યાન આપો: જો તમે ગુજરાતી (Gujarati) બોલતા હો તો વિના મૂલ્યે ભાષાકીય મદદરૂપ સેવાઓ અને અન્ય ફોર્મેટમાં વિના મૂલ્યે સંચાર, જેમ કે મોટી વિન્ટ, તમારા માટે ઉપલબ્ધ છે. તમારા સભ્ય ઓળખ કાર્ડ પરના ટોલ-ફ્રી નંબર પર કોલ કરો.

ध्यान दें: यदि आप हिंदी (Hindi) बोलते हैं, तो आपके लिए मुफ्त भाषा सहायता सेवाएँ और अन्य प्रारूपों में मुफ्त संचार, जैसे क्लर्क बॉक्स प्रिंट, उपलब्ध हैं। अपने सदस्य पहचान पत्र पर दिए गए टोल-फ्री नंबर पर कॉल करें।

LUS TSEEM CEEB: Yog tias koj hais lus Hmoob (Hmong), muaj cov kev pab cuam txhais lus thiab muaj kev sib txuas lus pab dawb ua lwm hom ntawv, xws li luam ua ntawv loj rau koj. Thov hu rau tus xov tooj hu dawb ntawm koj daim npav ID.

ATENSION: No agsasaoka iti Ilocano (Ilocano), magun-odmo dagiti libre a serbisio ti tulong iti pagsasao ken libre a komunikasion iti dadduma a pormat, kas iti dadakkel a letra. Tawagan ti awan-bayadna a numero a masarakan iti kard a pakabigbigam kas miembro.

ATTENZIONE: se parla italiano (Italian), può usufruire di servizi di assistenza linguistica gratuiti e comunicazioni gratuite in altri formati, come ad esempio la stampa a caratteri grandi. Chiami il numero verde riportato sul Suo tesserino identificativo.

注意事項：日本語 (Japanese) を話される場合、無料の言語支援サービスや、拡大文字など他の形式での無料のコミュニケーションをご利用いただけます。会員証に記載されているフリーダイヤルにお電話ください。

알림 사항: 한국어(Korean)를 사용하시는 경우 무료 언어 지원 서비스와 대형 활자체 등 다른 형식으로 된 의사 소통 매체를 이용하실 수 있습니다. 회원 ID 카드에 나와 있는 무료 전화번호로 전화해 주십시오.

ໝາຍເຫດ: ຖ້າຫາກທ່ານເວົ້າພາສາລາວ (Lao), ທ່ານສາມາດໃຊ້ບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາຟຣີ ແລະ ການສື່ສານໃນຮູບແບບອື່ນໆຟຣີ, ເຊັ່ນ: ການພິມຕົວອັກສອນຂະໜາດໃຫຍ່. ໂທຫາເບີໂທຟຣີຢູ່ທີ່ບັດປະຈຳຕົວສະມາຊິກຂອງທ່ານ.

ध्यान दिनु ोस्: यदि तपाईंले नेपाली (Nepali) बोल्नुहुन्छ भने, न्मःशुल्क भाषा सहायता सेवाहरू र अन्य ढाँचाहरूमा न्मःशुल्क संचारहरू, जस्तै ठूलो छाप, तपाईंका लागी उपलब्ध छन्। आफ्नो सदस्य पहिचान कार्डमा रहेको टोल फ्री नम्बरमा कल गर्नुहोस्।

توضیح: لکریه زبان **فارسی (Persian-Farsi)** صحبت می‌کنید، خدمات پلیکان کمک بدلی و لپیاطاب
پلیکان در والابه‌ای بکتر، ملیدد حاب برر ک، در سسرسسما هسیدد. دلسماره پلیکان مددرج روی کارب
سسلرلی عصفوبتارنهماس بکبود.

UWAGA: Dla osób mówiących po **polsku (Polish)** dostępne są bezpłatne usługi pomocy językowej i bezpłatne komunikaty w innych formatach, takich jak duży druk. Prosimy zadzwonić pod bezpłatny numer podany na karcie identyfikacyjnej.

ATENÇÃO: se você fala **português (Portuguese)**, tem à sua disposição serviços gratuitos de assistência linguística e comunicações gratuitas em outros formatos, como caracteres grandes. Ligue para o número gratuito que se encontra no seu cartão de identificação de membro.

ਦਿਆਨ ਦਿਓ ਿ ਤੁਸੀਂ **ਪੰਜਾਬੀ (Punjabi)** ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਅਤੇ ਹੋਰ
ਛੋਟੇ ਮੈਟ੍ਰਿਕ, ਜਿਵੇਂ ਕਿ ਵੱਡੇ ਪ੍ਰਿੰਟ, ਵਿੱਚ ਮੁਫਤ ਸੰਚਾਰ ਉਪਲਬਧ ਹਨ। ਆਪਣੇ ਮੈਂਬਰ ਪਛਾਣ ਕਾਰਡ 'ਤੇ ਟੋਲ-ਫ੍ਰੀ ਨੰਬਰ 'ਤੇ
ਕਾਲ ਕਰੋ।

ВНИМАНИЕ! Если вы говорите на **русском языке (Russian)**, вам доступны бесплатные услуги языковой поддержки и бесплатные материалы в других форматах, например напечатанные крупным шрифтом. Звоните по бесплатному номеру телефона, указанному на вашей идентификационной карте участника.

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas y comunicaciones en otros formatos como letra grande, sin cargo, a su disposición. Llame al número gratuito que figura en su tarjeta de identificación de miembro. (TTY 711).

PAUNAWA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika at libreng komunikasyon sa ibang mga format, tulad ng malalaking print. Tawagan ang walang bayad na numero na nasa iyong ID card ng miyembro.

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