

4/1/2024

Medicare Part D Formulary Change

The product changes noted below will be implemented on the Medicare Part D Plan:

New Added Products: **Effective 4/1/2024**

Drug	Reason	Cost sharing**	Restrictions***
BOSULIF 100 MG CAPSULE	New Drug	Tier 5	PA QL
BOSULIF 50 MG CAPSULE	New Drug	Tier 5	PA QL
IWILFIN 192 MG TABLET	New Drug	Tier 5	PA QL LA
lidocan iii 5 % topical patch	Formulary Addition	Tier 3	PA QL
PENBRAYA (PF) 5 MCG-120 MCG/0.5 ML INTRAMUSCULAR KIT	New Drug	Tier 1	
risperidone microspheres er 12.5 mg/2 ml intramuscular susp,ext releas	New Drug	Tier 4	QL
risperidone microspheres er 25 mg/2 ml intramuscular susp,ext release	New Drug	Tier 4	QL
risperidone microspheres er 37.5 mg/2 ml intramuscular susp,ext releas	New Drug	Tier 4	QL
risperidone microspheres er 50 mg/2 ml intramuscular susp,ext release	New Drug	Tier 4	QL
sodium,potassium,mag sulfates 17.5 gram-3.13 gram-1.6 gram oral soln	New Drug	Tier 4	
SYNJARDY XR 10 MG-1,000 MG TABLET, EXTENDED RELEASE	New Drug	Tier 3	QL
SYNJARDY XR 12.5 MG-1,000 MG TABLET, EXTENDED RELEASE	New Drug	Tier 3	QL
SYNJARDY XR 25 MG-1,000 MG TABLET, EXTENDED RELEASE	New Drug	Tier 3	QL
SYNJARDY XR 5 MG-1,000 MG TABLET, EXTENDED RELEASE	New Drug	Tier 3	QL
XALKORI 150 MG ORAL PELLETS	New Drug	Tier 5	PA QL
XALKORI 20 MG ORAL PELLETS	New Drug	Tier 5	PA QL

Mutual of Omaha Rx Premier: 24218

*Consult your Medical provider for changes or recommendations to your medical care and prescription therapy

**Please consult the plan benefit design for copay/coinsurance amounts

***Indicates a restriction of Step Therapy, Prior Authorization or Quantity Limits may exist [LA] = Limited Access, [PA] = Prior Authorization, [QL] = Quantity Limit, [ST] = Step Therapy

Drug	Reason	Cost sharing**	Restrictions***
XALKORI 50 MG ORAL PELLETS	New Drug	Tier 5	PA QL

Future Removed Products: **Effective 4/1/2024**

Drug	Reason	Alternative*
RISPERDAL CONSTA 12.5 MG/2 ML INTRAMUSCULAR SUSP, EXTENDED RELEASE	Removed from Plan Formulary	Please contact your doctor.
RISPERDAL CONSTA 25 MG/2 ML INTRAMUSCULAR SUSP, EXTENDED RELEASE	Removed from Plan Formulary	Please contact your doctor.
RISPERDAL CONSTA 37.5 MG/2 ML INTRAMUSCULAR SUSP, EXTENDED RELEASE	Removed from Plan Formulary	Please contact your doctor.
RISPERDAL CONSTA 50 MG/2 ML INTRAMUSCULAR SUSP, EXTENDED RELEASE	Removed from Plan Formulary	Please contact your doctor.

Cost Sharing Tier Changes: **There were no cost sharing tier changes this month.**

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