

7/1/2024

Medicare Part D Formulary Change

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

New Added Products: **Effective 7/1/2024**

Drug	Reason	Cost sharing**	Restrictions***
INBRIJA 42 MG CAPSULE WITH INHALATION DEVICE	Formulary Addition	Tier 4	PA QL
REZDIFFRA 100 MG TABLET	New Drug	Tier 4	PA QL
REZDIFFRA 60 MG TABLET	New Drug	Tier 4	PA QL
REZDIFFRA 80 MG TABLET	New Drug	Tier 4	PA QL
XCOPRI 25 MG TABLET	New Drug	Tier 4	QL

Future Removed Products: **There were no future removed products this month.**

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

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