

December 2023 / January 2024 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
FRUZAQLA†	Formulary	3	No	2	Yes	Yes	1 mg tablets: 4 tablets per day, 28 days supply per fill 5 mg tablets: 1 tablet per day, 28 day supply per fill	Lonsurf*, Stivarga*
NGENLA	Formulary	3	Yes	2	Yes	No	-	Norditropin*
OJJAARA†	Formulary	3	No	2	Yes	Yes	1 tablet per day, 30 day supply per fill	Jakafi*, Inrebic*, Vonjo*
OPVEE	Formulary	2	No	2	No	No	-	Zimhi, Kloxxado, naloxone nasal spray, naloxone syringe, naloxone vial
SOHONOS	Formulary	3	Yes	2	Yes	Yes	1 mg tablets: 4 tablets per day, 30 days supply per fill 1.5 mg tablets: 2 tablets per day, 30 days supply per fill 2.5 mg tablets: 3 tablets per day, 30 days supply per fill 10 tablets: 2 tablets per day, 30 days supply per fill	none
TRUQAP†	Formulary	3	No	2	Yes	Yes	64 tablets per 28 days	Piqray*
XDEMZY	Formulary	3	Yes	2	Yes	Yes	10 milliliters per 42 days	None
ZURZUVAE	Formulary	3	Yes	2	Yes	Yes	Zurzuvaе 20 and 25 mg tablets: 2 tablets per day Zurzuvaе 30 mg tablets: 1 tablet per day	none

CHIP

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Brand Name	Status	Tier	Prior Auth	Qty Limit	Detailed Limits	Formulary Alternatives
FRUZAQLA	Formulary	2	Yes	Yes	1 mg tablets: 4 tablets per day, 28 days supply per fill 5 mg tablets: 1 tablet per day, 28 day supply per fill	Lonsurf*, Stivarga*
NGENLA	Formulary	2	Yes	No	-	Norditropin*
OJJAARA	Formulary	2	Yes	Yes	1 tablet per day, 30 day supply per fill	Jakafi*, Inrebic*, Vonjo*
OPVEE	Formulary	2	No	No	-	Zimhi, Kloxxado, naloxone nasal spray, naloxone syringe, naloxone vial
SOHONOS	Formulary	2	Yes	Yes	1 mg tablets: 4 tablets per day, 30 days supply per fill 1.5 mg tablets: 2 tablets per day, 30 days supply per fill 2.5 mg tablets: 3 tablets per day, 30 days supply per fill 10 tablets: 2 tablets per day, 30 days supply per fill	none
TRUQAP	Formulary	2	Yes	Yes	64 tablets per 28 days	Piqray*
XDEMZY	Formulary	2	Yes	Yes	10 milliliters per 42 days	None
ZURZUVAE	Formulary	2	Yes	Yes	Zurzuvaе 20 and 25 mg tablets: 2 tablets per day Zurzuvaе 30 mg tablets: 1 tablet per day	none

GHP Family

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Brand Name	Status	GHP Family Formulary Tier	Prior Auth	Qty Limit	Detailed Limits	Formulary Alternative(s)
SOHONOS	Formulary	Brand	Yes	No		Not Applicable
XDEMZY	Formulary	Brand	Yes	No		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)
FRUZAQLA	Formulary	Specialty	25% coinsurance	Yes	Yes	1 mg: 112 capsules per 28 days 5 mg: 28 capsules per 28 days	Not Applicable
NGENLA	Non Formulary	-	-	No	No	-	Norditropin*, Sogroya*
OJJAARA	Formulary	Specialty	25% coinsurance	Yes	Yes	30 tablets per 30 days	Not Applicable
OPVEE	Formulary	Brand Preferred	25% coinsurance	No	No	-	Not Applicable
REZZAYO	Formulary	Specialty	25% coinsurance	Yes	No	-	Not Applicable
SOHONOS	Formulary	Specialty	25% coinsurance	Yes	Yes	1 mg: 120 capsules per 30 days 1.5 mg and 10 mg: 60 capsules per 30 days 2.5 mg: 90 capsules per 30 days 5 mg: 30 capsules per 30 days	Not Applicable
TRUQAP	Formulary	Specialty	25% coinsurance	Yes	Yes	64 tablets per 28 days	Not Applicable
VEOPOZ	Formulary	Specialty	25% coinsurance	Yes	No	-	Not Applicable
XDEMVY	Formulary	Specialty	25% coinsurance	Yes	Yes	10 mL per 42 days	Not Applicable
YCANTH	Non Formulary	-	-	No	No	-	None
ZURZUVAE	Formulary	Specialty	25% coinsurance	Yes	Yes	20 mg: 28 capsules per 14 days 25 mg: 28 capsules per 14 days 30 mg: 14 capsules per 14 days	Not Applicable

Marketplace

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Brand Name	Status	Tier	Prior Auth	Qty Limit	Detailed Limits	Formulary Alternatives
FRUZAQLA	Formulary	4	Yes	Yes	1 mg tablets: 4 tablets per day, 28 days supply per fill 5 mg tablets: 1 tablet per day, 28 day supply per fill	Lonsurf*, Stivarga*
NGENLA	Formulary	5	Yes	No	-	Norditropin*
OJJAARA	Formulary	4	Yes	Yes	1 tablet per day, 30 day supply per fill	Jakafi*, Inrebic*, Vonjo*
OPVEE	Formulary	3	No	No	-	Zimhi, Kloxxado, naloxone nasal spray, naloxone syringe, naloxone vial
SOHONOS	Formulary	5	Yes	Yes	1 mg tablets: 4 tablets per day, 30 days supply per fill 1.5 mg tablets: 2 tablets per day, 30 days supply per fill 2.5 mg tablets: 3 tablets per day, 30 days supply per fill 10 tablets: 2 tablets per day, 30 days supply per fill	none
TRUQAP	Formulary	4	Yes	Yes	64 tablets per 28 days	Piqray*
XDEMYVY	Formulary	5	Yes	Yes	10 milliliters per 42 days	None
ZURZUVAE	Formulary	5	Yes	Yes	Zurzuvae 20 and 25 mg tablets: 2 tablets per day Zurzuvae 30 mg tablets: 1 tablet per day	none