

1TS South Country Notice of Change October 2026

New Additions: **Effective 10/1/2026**

Drug	Reason	Tier	Restrictions
CIMZIA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 200 MG/ML	Formulary Addition	Tier 1	PA QL
dapaglifloz base-metformin er oral tablet extended release 24 hour 10-1000 mg	Formulary Addition	Tier 1	QL
dapaglifloz base-metformin er oral tablet extended release 24 hour 10-500 mg	Formulary Addition	Tier 1	QL
dapaglifloz base-metformin er oral tablet extended release 24 hour 5-1000 mg	Formulary Addition	Tier 1	QL
dapaglifloz base-metformin er oral tablet extended release 24 hour 5-500 mg	Formulary Addition	Tier 1	QL
duloxetine hcl oral capsule delayed release particles 120 mg	Formulary Addition	Tier 1	QL
duloxetine hcl oral capsule delayed release particles 80 mg	Formulary Addition	Tier 1	QL
duloxetine hcl oral capsule delayed release particles 90 mg	Formulary Addition	Tier 1	QL
glipizide oral tablet 15 mg	Formulary Addition	Tier 1	QL
HEPCLUDEX SUBCUTANEOUS SOLUTION RECONSTITUTED 8.5 MG	Formulary Addition	Tier 1	PA QL
KYMBEE ORAL SUSPENSION 22.75 MG/ML	Formulary Addition	Tier 1	PA
macitentan oral tablet 10 mg	Formulary Addition	Tier 1	PA QL
OZEMPIC ORAL TABLET 1.5 MG	Formulary Addition	Tier 1	PA QL
OZEMPIC ORAL TABLET 4 MG	Formulary Addition	Tier 1	PA QL
OZEMPIC ORAL TABLET 9 MG	Formulary Addition	Tier 1	PA QL
REZENOPY NASAL LIQUID 10 MG/0.11ML	Formulary Addition	Tier 1	

Drug	Reason	Tier	Restrictions
YULITHIRA ORAL TABLET 10 MG	Formulary Addition	Tier 1	PA
YULITHIRA ORAL TABLET 2.5 MG	Formulary Addition	Tier 1	PA
YULITHIRA ORAL TABLET 5 MG	Formulary Addition	Tier 1	PA
YULITHIRA ORAL TABLET 7.5 MG	Formulary Addition	Tier 1	PA