1TS South Country Notice of Change March 2024

New Additions: Effective 3/1/2024

Drug	Reason	Tier	Restrictions
AKEEGA ORAL TABLET 100-500 MG	Formulary Addition	Tier 1	PA
AKEEGA ORAL TABLET 50-500 MG	Formulary Addition	Tier 1	PA
AUGTYRO ORAL CAPSULE 40 MG	Formulary Addition	Tier 1	PA
ENTYVIO SUBCUTANEOUS SOLUTION PEN-INJECTOR 108 MG/0.68ML	Formulary Addition	Tier 1	PA
KALYDECO ORAL PACKET 5.8 MG	Formulary Addition	Tier 1	PA
norelgestromin-eth estradiol transdermal patch weekly 150-35 mcg/24hr	Formulary Addition	Tier 1	
OGSIVEO ORAL TABLET 50 MG	Formulary Addition	Tier 1	PA
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 60000-189600 UNIT	Formulary Addition	Tier 1	
ZURZUVAE ORAL CAPSULE 20 MG	Formulary Addition	Tier 1	PA
ZURZUVAE ORAL CAPSULE 25 MG	Formulary Addition	Tier 1	PA
ZURZUVAE ORAL CAPSULE 30 MG	Formulary Addition	Tier 1	PA

Deletions: Effective 3/1/2024

Drug	Reason	Alternative
amabelz oral tablet 1-0.5 mg	Removed from Plan Formulary	Please contact your doctor
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 5 GM/50ML	Removed from Plan Formulary	Please contact your doctor