

***My Choice Wisconsin***  
**2022**  
***Formulary Addendum***

BD - Part B vs. Part D, LA - This prescription may be available only at certain pharmacies, NF - Non-Formulary, PA - Prior Authorization, QL – Quantity Limit per 30 days, ST - Step Therapy

<b>2022 FORMULARY CHANGES</b>				
<b>Drug Name</b>	<b>Current Drug Tier</b>	<b>New Drug Tier</b>	<b>Reason For Change</b>	<b>Alternative Drug, Alternative Drug Tier</b>
<b>EFFECTIVE 01/01/2022</b>				
Ayvakit Tablet 25 MG Oral	NF	1 + QL 30 + PA2	Formulary Enhancement	N/A
Ayvakit Tablet 50 MG Oral	NF	1 + QL 30 + PA2	Formulary Enhancement	N/A
chlorproMAZINE HCl Concentrate 100 MG/ML Oral	NF	1	Formulary Enhancement	N/A
chlorproMAZINE HCl Concentrate 30 MG/ML Oral	NF	1	Formulary Enhancement	N/A
Clovique Capsule 250 MG Oral	1 + PA1	NF	CMS Required Deletion	N/A
Dupixent Solution Pen-Injector 200 MG/1.14ML Subcutaneous	NF	1 + PA1	Formulary Enhancement	N/A
Etravirine Tablet 100 MG Oral	NF	1 + QL 120	Formulary Enhancement	N/A
Etravirine Tablet 200 MG Oral	NF	1 + QL 60	Formulary Enhancement	N/A
Intelence Tablet 100 MG Oral	1 + QL 120	NF	Formulary Update	etravirine tablet 100 mg oral, 1 + QL 120
Intelence Tablet 200 MG Oral	1 + QL 60	NF	Formulary Update	etravirine tablet 200 mg oral, 1 + QL 60
Kaletra Tablet 100-25 MG Oral	1 + QL 300	NF	Formulary Update	lopinavir-ritonavir tablet 100-25 mg oral, 1 + QL 300
Kaletra Tablet 200-50 MG Oral	1 + QL 120	NF	Formulary Update	lopinavir-ritonavir tablet 200-50 mg oral, 1 + QL 120
Kloxxado Liquid 8 MG/0.1ML Nasal	NF	1 + QL 2	Formulary Enhancement	N/A

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Lopinavir-Ritonavir Tablet 100-25 MG Oral	NF	1 + QL 300	Formulary Enhancement	N/A
Lopinavir-Ritonavir Tablet 200-50 MG Oral	NF	1 + QL 120	Formulary Enhancement	N/A
Lumakras Tablet 120 MG Oral	NF	1 + QL 240 + PA2 + LA	Formulary Enhancement	N/A
Potassium Chloride Crys ER Tablet Extended Release 15 MEQ Oral	NF	1	Formulary Enhancement	N/A
Rezurock Tablet 200 MG Oral	NF	1 + PA1 + LA	Formulary Enhancement	N/A
SUNItinib Malate Capsule 12.5 MG Oral	NF	1 + QL 28/28 + PA2	Formulary Enhancement	N/A
SUNItinib Malate Capsule 25 MG Oral	NF	1 + QL 28/28 + PA2	Formulary Enhancement	N/A
SUNItinib Malate Capsule 37.5 MG Oral	NF	1 + QL 28/28 + PA2	Formulary Enhancement	N/A
SUNItinib Malate Capsule 50 MG Oral	NF	1 + QL 28/28+ PA2	Formulary Enhancement	N/A
Sutent Capsule 12.5 MG Oral	1 + QL 28/28 + PA2	NF	Formulary Update	sunitinib malate capsule 12.5 mg oral, 1 + QL 28/28 + PA2
Sutent Capsule 25 MG Oral	1 + QL 28/28 + PA2	NF	Formulary Update	sunitinib malate capsule 25 mg oral, 1 + QL 28/28 + PA2

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Sutent Capsule 37.5 MG Oral	1 + QL 28/28 + PA2	NF	Formulary Update	sunitinib malate capsule 37.5 mg oral, 1 + QL 28/28 + PA2
Sutent Capsule 50 MG Oral	1 + QL 28/28 + PA2	NF	Formulary Update	sunitinib malate capsule 50 mg oral, 1 + QL 28 + PA2
Theophylline ER Tablet Extended Release 12 Hour 450 MG Oral	NF	1	Formulary Enhancement	N/A
Trikafta Tablet Therapy Pack 50-25-37.5 & 75 MG Oral	NF	1 + PA1	Formulary Enhancement	N/A
TriLyte Solution Reconstituted 420 GM Oral	1	NF	CMS Required Deletion	N/A
Xcopri (250 MG Daily Dose) Tablet Therapy Pack 50 & 200 MG Oral	1	NF	CMS Required Deletion	N/A
Xofluza (40 MG Dose) Tablet Therapy Pack 1 x 40 MG Oral	NF	1	Formulary Enhancement	N/A
Xofluza (40 MG Dose) Tablet Therapy Pack 2 x 20 MG Oral	1	NF	CMS Required Deletion	N/A
Xofluza (80 MG Dose) Tablet Therapy Pack 2 x 40 MG Oral	1	NF	CMS Required Deletion	N/A

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