

University of Maryland Health Partners may add or remove drugs from its formulary at any time as part of its Drug Use Management Program. We will immediately remove any drug from our formulary that is deemed by the Food and Drug Administration to be unsafe or, the drug's manufacturer removes the drug from the market.

The following formulary changes were reviewed and approved by the Pharmacy & Therapeutic Committee or added/removed from the formulary based on pharmacy policy. Changes will take effect on **October 1, 2020**.

Drug Name	Therapeutic Class	Add/Remove	Edit Description	Formulary Status
VISCO-3 INJ 25/2.5ML	Analgesics	Add	PA	F
VOLTAREN GEL 1% OTC	Analgesics	Add		F
DICLOFENAC SODIUM GEL 1%	Analgesics	Remove (Discontinued)		NF
TIVICAY PD TAB 5MG	Anti-Infectives	Add	QL	F
RESCRIPTOR TAB 100 MG	Anti-Infectives	Remove (Discontinued)		NF
RESCRIPTOR TAB 200 MG	Anti-Infectives	Remove (Discontinued)		NF
VIDEX EC CAP 125MG	Anti-Infectives	Remove (Discontinued)		NF
VIDEX SOL 2GM	Anti-Infectives	Remove (Discontinued)		NF
VIDEX SOL 4GM	Anti-Infectives	Remove (Discontinued)		NF
DOVATO TAB 50-300MG	Anti-Infectives	Add	QL	F
IBRANCE TAB 100MG	Antineoplastic Agents	Add	PA, SP, QL	F
IBRANCE TAB 125MG	Antineoplastic Agents	Add	PA, SP, QL	F
IBRANCE TAB 75MG	Antineoplastic Agents	Add	PA, SP, QL	F

TUKYSA TAB 150MG	Antineoplastic Agents	Add	PA, SP, QL	F
TUKYSA TAB 50MG	Antineoplastic Agents	Add	PA, SP, QL	F
ISTODAX OVR INJ 10MG	Antineoplastic Agents	Remove		NF
ERGOTAMINE W/ CAFFEINE TAB 1-100 MG	Central Nervous System	Remove		NF
ORPHENADRINE W/ ASPIRIN & CAFFEINE TAB 50-770-60 MG	Central Nervous System	Remove		NF
HUMALOG MIX INJ 75/25KWP	Endocrine and Metabolic	Remove		NF
INSULIN LISPRO PROT & LISPRO SUS PEN-INJ 100 UNIT/ML (75-25)	Endocrine and Metabolic	Add		F
SAMSCA TAB 30MG	Endocrine and Metabolic	Remove		NF
TOLVAPTAN TAB 30MG	Endocrine and Metabolic	Add	PA, SP	F
SSKI SOL 1GM/ML	Endocrine and Metabolic	Remove		NF
XIIDRA DRO 5%	Topical	Add QL	PA, QL	F

NOTE: This table outlines upcoming changes to our formulary that may impact your patients.

Legend: PA = Prior Authorization, SP = Specialty, QL = Quantity limit, OTC = Over-the-Counter, F = Formulary, AL = Age Limit

What if my patient will be adversely affected by the formulary change? We recognize the unique aspects of patients' cases. If for medical reasons your University of Maryland Health Partners patient cannot be converted to a formulary alternative, you can download a **Non-Formulary/Brand Medically Necessary Drug Exception Form** from our website at www.umhealthpartners.com and fax the completed form to our Pharmacy Department for review.

What if I need further assistance? Call the Provider Line at 1-800-730-8543 and follow the voice prompts for the option that will address your service needs.