

## Upcoming Changes to GlobalHealth's Formulary

GlobalHealth may add or remove drugs from our formulary during the year. If we remove drugs from our formulary, or add prior authorization, quantity limits and/or step therapy restrictions on a drug and/or move a drug to a higher cost-sharing tier, we will notify you of the change at least 60 days before the date the change becomes effective. However, if the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug's manufacturer removes the drug from the market, we may immediately remove the drug from our formulary and notify you as soon as possible.

The table below outlines upcoming changes to our formulary that may impact you.

Name of Affected Drug	Description for Change	Reason for Change	Alternative Drug	Alternative Drug Copay*	Effective Date
AMINOSYN II INJ 7%	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	AMINOSYN-HBC INJ 7%	Tier 4	3/1/2018
BROMFENAC OPHTH SOLN 0.09%	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	BROMFENAC SODIUM OPHTH SOLN 0.09% (ONCE-DAILY)	Tier 2	3/1/2018
BUDESONIDE SUSP 32MCG	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	FLUTICASONE PROPIONATE NASAL SUSP 50 MCG/ACT	Tier 2	3/1/2018
BUPHENYL TAB 500MG	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	SODIUM PHENYLBUTYRATE TAB 500 MG	Tier 5	6/1/2018
CEFTIBUTEN CAP 400MG	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	CEFDINIR CAP 300MG	Tier 2	3/1/2018
CEFTIBUTEN SUSP 180/5ML	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	CEFDINIR SUS 250/5ML	Tier 2	3/1/2018
CLINDAMAX GEL 1%	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	CLINDAMYCIN PHOSPHATE GEL 1%	Tier 2	3/1/2018
COPAXONE INJ 40MG/ML	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	GLATIRAMER INJ 40MG/ML	Tier 5	6/1/2018
COREG CR CAP	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	CARVEDILOL PHOSPHATE ER 24HR CAP	Tier 2	6/1/2018
DOCFREZ INJ 20MG	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	DOCETAXEL INJ 80MG/4ML	Tier 5	3/1/2018
EFFIENT TAB	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	PRASUGREL TAB	Tier 2	6/1/2018
ESTRACE VAGINAL CREAM 0.01%	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	ESTRADIOL VAGINAL CREAM 0.01%	Tier 2	6/1/2018
FORTAZ IN D5W INJ 1GM/50ML, 2GM/50ML	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	CEFTAZIDIME INJ	Tier 2	3/1/2018
FORTAZ INJ 500MG	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	CEFTAZIDIME INJ	Tier 2	3/1/2018
GAVILYTE-H KIT	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	GAVILYTE-G SOL	Tier 2	3/1/2018
GRASTEK	DELETION OF DRUG FROM FORMULARY	MEDICARE WILL NO LONGER COVER	CONSULT YOUR HEALTH CARE PROFESSIONAL		4/1/2018
ISTALOL OPHTH SOLN 0.5%	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	TIMOLOL MALEATE OPHTH SOLN 0.5% (ONCE-DAILY)	Tier 2	6/1/2018
KETODAN AEROSOL 2%	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	KETOCONAZOLE FOAM 2%	Tier 2	3/1/2018

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LAMOTRIGINE ODT KIT 25/50/100MG	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	LAMOTRIGINE TAB	Tier 1	3/1/2018
LAMOTRIGINE ODT KIT 25/50MG	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	LAMOTRIGINE TAB	Tier 1	3/1/2018
LAMOTRIGINE ODT KIT 50/100MG	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	LAMOTRIGINE TAB	Tier 1	3/1/2018
LIALDA TAB 1.2GM	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	MESALAMINE TAB 1.2GM	Tier 2	6/1/2018
LOKARA LOTION 0.05%	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	DESONIDE LOTION 0.05%	Tier 2	3/1/2018
LORTAB TAB 10-325MG	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	HYDROCODONE-ACETAMINOPHEN TAB 10-325 MG	Tier 2	3/1/2018
LORTAB TAB 5-325MG	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	HYDROCODONE-ACETAMINOPHEN TAB 5-325 MG	Tier 2	3/1/2018
LORTAB TAB 7.5-325	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	HYDROCODONE-ACETAMINOPHEN TAB 7.5-325 MG	Tier 2	3/1/2018
MENOMUNE INJ A/C/Y/W	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	MENACTRA INJ	Tier 3	3/1/2018
MORPHINE SULATE INJ 15MG/ML	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	MORPHINE SULFATE IV SOLN PF 10 MG/ML	Tier 4	3/1/2018
NECON TAB 10/11-28	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	NECON TAB 7/7/7	Tier 2	3/1/2018
NUVESSA GEL 1.3%	DELETION OF DRUG FROM FORMULARY	MEDICARE WILL NO LONGER COVER	METRONIDAZOLE VAGINAL GEL 0.75%	Tier 2	3/1/2018
NYATA	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	NYSTATIN POW 100000	Tier 2	4/1/2018
PRIMSOL SOLN 50MG/5ML	DELETION OF DRUG FROM FORMULARY	MEDICARE WILL NO LONGER COVER	TRIMETHOPRIM TAB 100MG	Tier 1	3/1/2018
RAGWITEK	DELETION OF DRUG FROM FORMULARY	MEDICARE WILL NO LONGER COVER	CONSULT YOUR HEALTH CARE PROFESSIONAL		4/1/2018
RELPAK TAB	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	ELETRIPTAN TAB	Tier 2	6/1/2018
RENVELA PAK	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	SEVELAMER CARBONATE PACKET	Tier 2	6/1/2018
RENVELA TAB 800MG	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	SEVELAMER CARBONATE TAB 800 MG	Tier 2	6/1/2018
REYATAZ CAP	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	ATAZANAVIR CAP	Tier 5	6/1/2018
SABRIL PACK 500MG	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	VIGABATRIN POWDER PACK 500MG	Tier 5	6/1/2018
SUSTIVA CAP 200MG	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	EFAVIRENZ CAP 200 MG	Tier 5	6/1/2018
SUSTIVA CAP 50MG	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	EFAVIRENZ CAP 50 MG	Tier 2	6/1/2018
TAMIFLU SUSP 6MG/ML	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	OSELTAMIVIR PHOSPHATE SUSP 6 MG/ML	Tier 2	6/1/2018
TRANSDERM-SC PATCH 1.5MG	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	SCOPOLAMINE PATCH	Tier 4	6/1/2018
TRETIN-X CRE 0.075%	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	TRETINOIN CREAM 0.05%	Tier 2	3/1/2018
TRIKLO CAP 1GM	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	OMEGA-3-ACID ETHYL ESTERS CAP 1 GM	Tier 2	3/1/2018

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VIGAMOX DROPS 0.5%	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	MOXIFLOXACIN HCL OPHTH SOLN 0.5%	Tier 2	6/1/2018
XYLON TAB 10-200MG	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	HYDROCODONE-IBUPROFEN TAB 10-200 MG	Tier 2	3/1/2018
ZAMICET SOLN 10-325MG	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	HYDROCODONE-ACETAMINOPHEN SOLN 7.5-325 MG/15ML	Tier 2	3/1/2018
ZAZOLE CREAM 0.8%	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	TERCONAZOLE VAGINAL CREAM 0.8%	Tier 2	3/1/2018
ZIAGEN SOLN 20MG/ML	DELETION OF DRUG FROM FORMULARY	GENERIC AVAILABLE	ABACAVIR SOLN 20MG/ML	Tier 2	6/1/2018
ZINACEF INJ 750MG	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	CEFUROXIME INJ 750MG	Tier 2	3/1/2018
ZOLEDRONIC INJ 4MG	DELETION OF DRUG FROM FORMULARY	MANUFACTURER DISCONTINUATION	ZOLEDRONIC INJ 4MG/5ML	Tier 2	3/1/2018