

1TS South Country Notice of Change November 2025

New Additions: **Effective 11/1/2025**

Drug	Reason	Tier	Restrictions
fluorouracil external cream 0.5 %	Formulary Addition	Tier 1	PA
HERNEXEOS ORAL TABLET 60 MG	Formulary Addition	Tier 1	PA QL
KERENDIA ORAL TABLET 40 MG	Formulary Addition	Tier 1	PA QL
LEQSELVI ORAL TABLET 8 MG	Formulary Addition	Tier 1	PA QL
MODEYSO ORAL CAPSULE 125 MG	Formulary Addition	Tier 1	PA QL
pilocarpine hcl ophthalmic solution 1.25 %	Formulary Addition	Tier 1	
topiramate oral solution 25 mg/ml	Formulary Addition	Tier 1	PA

Deletions: **Effective 11/1/2025**

Drug	Reason	Alternative
ABELCET INTRAVENOUS SUSPENSION 5 MG/ML	Removed from Plan Formulary	Please contact your doctor.
EPRONTIA ORAL SOLUTION 25 MG/ML	Removed from Plan Formulary	topiramate oral solution 25 mg/ml
ethynodiol diac-eth estradiol oral tablet 1-50 mg-mcg	Removed from Plan Formulary	Please contact your doctor.
LAGEVRIO ORAL CAPSULE 200 MG	Removed from Plan Formulary	Please contact your doctor.
OCALIVA ORAL TABLET 10 MG	Removed from Plan Formulary	Please contact your doctor.
OCALIVA ORAL TABLET 5 MG	Removed from Plan Formulary	Please contact your doctor.
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML	Removed from Plan Formulary	Please contact your doctor.