1TS South Country Notice of Change November 2026

New Additions: **Effective 11/1/2026**

Drug	Reason	Tier	Restrictions
BESREMI PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 MCG/0.5ML	Formulary Addition	Tier 1	PA
dextromethorphan-quinidine oral capsule 20-10 mg	Formulary Addition	Tier 1	PA
ELIQUIS (1.5 MG PACK) ORAL TABLET SOLUBLE 3 X 0.5 MG	Formulary Addition	Tier 1	
ELIQUIS (2 MG PACK) ORAL TABLET SOLUBLE 4 X 0.5 MG	Formulary Addition	Tier 1	
ELIQUIS ORAL CAPSULE SPRINKLE 0.15 MG	Formulary Addition	Tier 1	QL
ELIQUIS ORAL TABLET SOLUBLE 0.5 MG	Formulary Addition	Tier 1	
EPOGEN INJECTION SOLUTION 10000 UNIT/ML (1 ML)	Formulary Addition	Tier 1	PA
gabapentin oral capsule 200 mg	Formulary Addition	Tier 1	QL
JIDEYTRO ORAL TABLET 100 MG	Formulary Addition	Tier 1	PA
JIDEYTRO ORAL TABLET 25 MG	Formulary Addition	Tier 1	PA
LEQEMBI IQLIK (500 MG DOSE) SUBCUTANEOUS SOLUTION AUTO-INJECTOR 2 X 250 MG/1.25ML	Formulary Addition	Tier 1	PA
rifapentine oral tablet 150 mg	Formulary Addition	Tier 1	
ZENBEXUS ORAL CAPSULE 0.75 MG	Formulary Addition	Tier 1	PA
ZENBEXUS ORAL CAPSULE 1 MG	Formulary Addition	Tier 1	PA

Deletions: **Effective 11/1/2026**

Drug	Reason	Alternative
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION 500 UNIT/ML	Removed from Plan Formulary	Please contact your doctor.
ofloxacin oral tablet 300 mg	Removed from Plan Formulary	Please contact your doctor.