



# Formulary Updates to Select

Effective January 1, 2026

## Changes to your formulary (drug list) effective January 1, 2026.

Your plan and MedImpact work diligently to provide appropriate, affordable prescription coverage while managing prescription drug costs. As a result, changes are being made to your prescription drug formulary (drug list) effective January 1, 2026. Some of these changes are positive tier changes that provide cost savings by adding drugs onto your formulary that were excluded (not covered) or moved to a lower tier.

### What can the type of formulary change mean?

- You will generally **pay less** for drugs on or moved to a **Preferred** formulary tier.
- Drugs that move from **Preferred to Non-Preferred** will generally **cost more**. **Look for a preferred alternative.**
- Drugs that move from **Non-Preferred to Preferred** will generally **cost less**.
- Drugs that are **excluded** are **not covered** by your plan. **Look for a preferred alternative.**

### Excluded to Non-Preferred

Drug was previously not covered but is now covered at a lower tier

Drug Class	Excluded to Non-Preferred
Cardiovascular Disease - CCB	Norliqva
Diabetic Supplies - CGM	Simplera Sensor/Simplera Sync Sensor
Insulins	Afrezza
Narcotic Antagonists	Opvee
Migraine - CRGP	Zavzpret
Narcolepsy	Wakix
Sedative-Hypnotics	Quviviq
Anti-narcolepsy & Anti-cataplexy	Lumryz

### Excluded to Preferred

Drug was previously not covered but is now covered at a preferred or lower tier

Drug Class	Excluded to Preferred
ADHD/Anti-Narcolepsy/Anti-Obesity/Anorexiant	Amphetamine sulfate Methylphenidate HCl
Atypical Antipsychotic	Caplyta
Bone Resorption Inhibitors	Stoboclo Osenvelt
Sedative-Hypnotics	Dayvigo
Movement Disorders	Ingrezza
Potassium Sparing Diuretics	Spirolactone suspension

### Non-Preferred to Preferred

Drug was previously covered at a low tier but is now covered at a preferred tier

Drug Class	Non-Preferred to Preferred
Atypical Antipsychotic	Vraylar



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BRAF and MEK Inhibitors

Braftovi  
Mektovi