



True Health New Mexico

Large Group Formulary Changes from April 1, 2022 to July 1, 2022

Affected Product	Formulary Change	Alternative Drug(s) or Product(s)
Colchicine with probenecid tablet	Add to tier 2	N/A
Cyclosporine 0.05% ophthalmic	Add to tier 2 with QL of 60 mL per 30 days	N/A
Formoterol nebulizer	Add tier 2	N/A
Icosapent Ethyl 1gm capsule	Add to tier 2 with PA	Statins, Omega-3-acid ethyl esters
Lacosamide tablet	Add to tier 4 with PA	Generic anti-epileptic drugs (e.g., lamotrigine, levetiracetam, etc.)
Probenecid tablet	Add to tier 2	N/A
Tinidazole tablet	Add to tier 2	N/A
Tremfya 100 mg/mL	Add to tier 5 with PA and QL of 1 mL per 56 days	N/A
Vonjo capsule	Add to tier 5 with PA and QL of 120 capsules per 30 days	N/A
Xiidra 5% solution	Add to tier 3 with QL of 60 mL per 30 days	N/A

PA = Prior Authorization; QL = Quantity Limit