

Senior Care Plus
FUTURE FORMULARY CHANGE FILE



A Medicare Advantage Plan from Hometown Health.

Deletion of Drug From Formulary	Drug Name	Alternate Drug(s)	Tier
REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW GENERIC EQUIVALENT	PENNSAID 20MG/G(2%) TOPICAL SOL MD PMP	DICLOFENAC SODIUM 20MG/G(2%) TOPICAL SOL MD PMP	5
	TARGRETIN 1 % TOPICAL GEL (GRAM)	BEXAROTENE 1 % TOPICAL GEL (GRAM)	5
	VIMPAT 10 MG/ML ORAL SOLUTION	LACOSAMIDE 10 MG/ML ORAL SOLUTION	2
	BIDIL 20-37.5MG ORAL TABLET	ISOSORBIDE DINIT-HYDRALAZINE 20-37.5MG ORAL TABLET	2
	VIIBRYD 10 MG ORAL TABLET	VILAZODONE HCL 10 MG ORAL TABLET	2
	VIIBRYD 40 MG ORAL TABLET	VILAZODONE HCL 40 MG ORAL TABLET	2
	VIIBRYD 20 MG ORAL TABLET	VILAZODONE HCL 20 MG ORAL TABLET	2
	NEXAVAR 200 MG ORAL TABLET	SORAFENIB 200 MG ORAL TABLET	5
	TOVIAZ 8 MG ORAL TAB ER 24H	FESOTERODINE FUMARATE ER 8 MG ORAL TAB ER 24H	2
	TOVIAZ 4 MG ORAL TAB ER 24H	FESOTERODINE FUMARATE ER 4 MG ORAL TAB ER 24H	2
	ESBRIET 801 MG ORAL TABLET	PIRFENIDONE 801 MG ORAL TABLET	5
	ESBRIET 267 MG ORAL TABLET	PIRFENIDONE 267 MG ORAL TABLET	5