

**To: AmeriHealth Caritas Next and First Choice Next Providers**

**Date: December 6, 2023**

**Subject: JANUARY 1, 2024 FORMULARY UPDATES**

**A. The following products will be added to the formulary:**

1. Addition to Tier 4 with QL:
  - a. Rykindo
2. Additions to Tier 1:
  - a. WesTab Plus 27-1 mg tablet
  - b. Prenatabs Rx 29-1 mg tablet

**B. The following products have changed formulary status:**

1. Removal of step therapy and moved from Tier 3 to Tier 2:
  - a. Lantus 100 unit/mL vial
  - b. Lantus Solostar 100 unit/mL pen

**C. The following products will have quantity limit updates:**

1. Imiquimod cream 5% packets.
2. Prevnar 20
3. Pneumovax 23
4. Vaxneuvance
5. Paxlovid 150/100 mg and 300/100 mg tablet
6. Lagevrio 200 mg capsule

**D. The following products will be removed from the formulary:**

1. PrePlus 27-1 mg tablet
2. Prenatal Vitamin Plus Low Iron 27-1 mg tablet
3. PNV 29-1 mg tablet
4. Prevnar 13

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