

CMS Formulary ID	Effective Date	Drug Name	Change Description	Reason Description	Alternate Drugs and Tier
24099	6/1/2024	RECTIV 0.4% (W/W) RECTAL OINT. (G)	BRAND DELETION, ADD FRF GENERIC	REMOVAL OF BRAND NAME DRUG FROM FORMULARY DUE TO ADDITION OF NEW GENERIC EQUIVALENT	NITROGLYCERIN 0.4% (W/W) RECTAL OINT. (G)-2
24099	7/1/2024	MITIGARE 0.6 MG ORAL CAPSULE	FORMULARY DELETION	FORMULARY DELETION	
24099	7/1/2024	AZOPT 1 % OPHTHALMIC DROPS SUSP	FORMULARY DELETION	FORMULARY DELETION	