

# Changes to your plan's pharmacy drug list

In our ongoing effort to assist you in maximizing your health care investment while offering your plan members clinically appropriate prescription therapy, we are announcing changes to the **Standard Opt-Out + Advanced Control Specialty Formulary** effective **October 1, 2025**. A copy of the Performance Drug List is attached for your reference.

The formulary review process focused on many factors, including:

**Removing products that may have less convenient dosage forms, may have more side effects, or may cost more when compared to available options on the CVS Caremark® Drug List.**

## Tier 2 to Tier 3

Drug Class	Drug Name(s)	Formulary Alternative(s)
Topical / Dermatology, Antifungals	NAFTIN GEL**	ciclopirox, clotrimazole, econazole, ketoconazole cream, luliconazole, naftifine

### Key for table

**UPPER CASE** = brand-name medication

**lower case** = generic medication

\*Class has existing formulary exclusions

\*\*Multi-source Brand Product

^Previously New to Market Block

*Please note: The specialty copay may not be affected by the proposed changes if the plan has a fixed copay for all specialty drugs.*

### Mailing Process:

As always, notifications will be sent to members who are negatively affected by tier changes\* or drug exclusions. Please encourage your members to use the CVS Caremark website, Caremark.com, to view the most current version of the drug list, as well as to review their prescription drug benefit information, request mail service orders and research drug information.

We appreciate the opportunity to serve you and your members' prescription benefit needs. If you have any questions regarding these changes, please do not hesitate to contact me.



*\*Except in the case of products that have generic equivalents available or are acute therapies.*