



## CareOregon (OHP) Formulary Changes-New Generics

Abbreviations: PA = Prior Authorization Required; QL = Quantity Limit; ST = Step Therapy Required; AR = Age Restriction

EFFECTIVE DATE	FORMULARY CHANGE	DRUG NAME	STRENGTH	DOSAGE FORM	DESCRIPTION
9/17/21	Removed	Chantix	0.5mg, 1mg	Tab	Brand Removed. Generic available.
10/4/21	Removed	Afinitor, Afinitor Dis	10mg, 2mg, 3mg, 5mg	Tab	Brand Removed. Generic available.