



**Florida
Health Care
Plans®**



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Date: February 3, 2026

To: FHCP Contracted Primary Care Physicians and Specialists

From: FHCP Pharmacy Department

Re: February 2026 Formulary Updates

Attached please find the monthly formulary changes for February 2026.

For additional information regarding Florida Health Care Plans' formularies please visit fhcp.com or FHCPMedicare.com.

If there are any questions regarding this announcement, please contact the Florida Health Care Plans Pharmacy Help Desk at 888.676.7173.

Medicare Plans

Added Products:

Drug	Tier	Restrictions
Brukina Oral Tablet 160 MG	Tier 5	PA
Cefadroxil Oral Capsule 500 MG	Tier 2	
Cefadroxil Oral Tablet 1 GM	Tier 2	
Escitalopram Oxalate Oral Capsule 15 MG	Tier 4	
Exxua Oral Tablet Extended Release 24 Hour 18.2 MG	Tier 5	PA
Exxua Oral Tablet Extended Release 24 Hour 36.3 MG	Tier 5	PA
Exxua Oral Tablet Extended Release 24 Hour 54.5 MG	Tier 5	PA
Exxua Oral Tablet Extended Release 24 Hour 72.6 MG	Tier 5	PA
Fidaxomicin Oral Tablet 200 MG	Tier 5	PA QL
Glycerol Phenylbutyrate Oral Liquid 1.1 GM/ML	Tier 5	PA
Inluriyo Oral Tablet 200 MG	Tier 5	PA
Lomustine Oral Capsule 10 MG	Tier 4	PA
Lomustine Oral Capsule 100 MG	Tier 5	PA
Lomustine Oral Capsule 40 MG	Tier 5	PA
Rextovy Nasal Liquid 4 MG/0.25ML	Tier 3	
Tresiba FlexTouch Subcutaneous Solution Pen-Injector 100 UNIT/ML	Tier 3	
Tresiba FlexTouch Subcutaneous Solution Pen-Injector 200 UNIT/ML	Tier 3	
Tresiba Subcutaneous Solution 100 UNIT/ML	Tier 3	
Zurnai Injection Solution Auto-Injector 1.5 MG/0.5ML	Tier 3	

Removed Products:

- **Brukina Oral Capsule 80 MG**
- **Dificid Oral Tablet 200 MG**
- **Gleostine Oral Capsule 10 MG**
- **Gleostine Oral Capsule 100 MG**
- **Gleostine Oral Capsule 40 MG**
- **Ogsiveo Oral Tablet 50 MG**
- **Ravicti Oral Liquid 1.1 GM/ML**
- **SUMATriptan Succinate Subcutaneous Solution Auto-Injector 4 MG/0.5ML**
- **SymlinPen 120 Subcutaneous Solution Pen-Injector 2700 MCG/2.7ML**
- **SymlinPen 60 Subcutaneous Solution Pen-Injector 1500 MCG/1.5ML**
- **Vigpoder Oral Packet 500 MG**

Tier/Other Changes:

Drug	New Tier	Old Tier	Restrictions
Hadlima PushTouch Subcutaneous Solution Auto-Injector 40 MG/0.4ML	3	5	PA
Hadlima PushTouch Subcutaneous Solution Auto-Injector 40 MG/0.8ML	3	5	PA
Hadlima Subcutaneous Solution Prefilled Syringe 40 MG/0.4ML	3	5	PA
Hadlima Subcutaneous Solution Prefilled Syringe 40 MG/0.8ML	3	5	PA

The most current FHCP formularies, step therapy, and prior authorization criteria are available online. Any questions or concerns regarding FHCP Formularies should be addressed to FHCP Pharmacy Services at 386-615-5008.

To view comprehensive formularies, ST, and PA criteria, go to <https://www.fhcpmedicare.com/medicare/resources-and-tools/part-d-formulary-information-documents/> or click the links below.

2026 Medicare Plans Formulary (PDF)

2026 Medicare Plans Searchable Formulary

2026 Medicare Plans Prior Authorization Criteria

2026 Medicare Step Therapy Criteria

https://fm.formularynavigator.com/FBO/126/2026_Medicare_Formulary.pdf

<https://client.formularynavigator.com/Search.aspx?siteCode=6715250421>

https://fm.formularynavigator.com/FBO/126/2026_Medicare_PA.pdf

https://fm.formularynavigator.com/FBO/126/2026_Medicare_ST.pdf

Federal Exchange Non-Standard 1340 Plans

Added Products:

Drug	Tier	Restrictions
Brukisa Oral Tablet 160 MG	Tier 6	PA
Comirnaty 5-11 Years Intramuscular Suspension 10 MCG/0.3ML	Tier 4	
Complera Oral Tablet 200-25-300 MG	Tier 4	
Emtricitab-Rilpivir-Tenofovir DF Oral Tablet 200-25-300 MG	Tier 4	
Ferric Citrate Oral Tablet 1 GM 210 MG(Fe)	Tier 3	
Lisdexamfetamine Dimesylate Oral Tablet Chewable 10 MG	Tier 3	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 20 MG	Tier 3	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 30 MG	Tier 3	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 40 MG	Tier 3	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 50 MG	Tier 3	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 60 MG	Tier 3	QL
mNexspike Intramuscular Suspension Prefilled Syringe 10 MCG/0.2ML	Tier 4	
Nilotinib HCl Oral Capsule 150 MG	Tier 7	PA
Nilotinib HCl Oral Capsule 200 MG	Tier 7	PA
Nilotinib HCl Oral Capsule 50 MG	Tier 7	PA
Prucalopride Succinate Oral Tablet 1 MG	Tier 3	
Prucalopride Succinate Oral Tablet 2 MG	Tier 3	

Removed Products: There were no removed products this month

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Tier/Other Changes:

Drug	New Tier	Old Tier	Restrictions
Lanthanum Carbonate Oral Tablet Chewable 1000 MG	3	6	PA
Lanthanum Carbonate Oral Tablet Chewable 500 MG	3	6	PA
Lanthanum Carbonate Oral Tablet Chewable 750 MG	3	6	PA

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Federal Exchange Non-Standard Plans

Added Products:

Drug	Tier	Restrictions
Brukisa Oral Tablet 160 MG	Tier 6	PA
Comirnaty 5-11 Years Intramuscular Suspension 10 MCG/0.3ML	Tier 4	
Complera Oral Tablet 200-25-300 MG	Tier 4	
Emtricitab-Rilpivir-Tenofovir DF Oral Tablet 200-25-300 MG	Tier 4	
Ferric Citrate Oral Tablet 1 GM 210 MG(Fe)	Tier 3	
Lisdexamfetamine Dimesylate Oral Tablet Chewable 10 MG	Tier 3	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 20 MG	Tier 3	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 30 MG	Tier 3	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 40 MG	Tier 3	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 50 MG	Tier 3	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 60 MG	Tier 3	QL
mNexspike Intramuscular Suspension Prefilled Syringe 10 MCG/0.2ML	Tier 4	
Nilotinib HCl Oral Capsule 150 MG	Tier 7	PA
Nilotinib HCl Oral Capsule 200 MG	Tier 7	PA
Nilotinib HCl Oral Capsule 50 MG	Tier 7	PA
Prucalopride Succinate Oral Tablet 1 MG	Tier 3	
Prucalopride Succinate Oral Tablet 2 MG	Tier 3	

Removed Products: There were no removed products this month

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Tier/Other Changes:

Drug	New Tier	Old Tier	Restrictions
Lanthanum Carbonate Oral Tablet Chewable 1000 MG	3	6	PA
Lanthanum Carbonate Oral Tablet Chewable 500 MG	3	6	PA
Lanthanum Carbonate Oral Tablet Chewable 750 MG	3	6	PA

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Federal Exchange Standard Plans

Added Products:

Drug	Tier	Restrictions
Brukina Oral Tablet 160 MG	Tier 5	PA
Comirnaty 5-11 Years Intramuscular Suspension 10 MCG/0.3ML	Tier 3	
Complera Oral Tablet 200-25-300 MG	Tier 3	
Emtricitab-Rilpivir-Tenofovir DF Oral Tablet 200-25-300 MG	Tier 3	
Ferric Citrate Oral Tablet 1 GM 210 MG(Fe)	Tier 2	
Lisdexamfetamine Dimesylate Oral Tablet Chewable 10 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 20 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 30 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 40 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 50 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 60 MG	Tier 2	QL
mNexspike Intramuscular Suspension Prefilled Syringe 10 MCG/0.2ML	Tier 3	
Nilotinib HCl Oral Capsule 150 MG	Tier 5	PA
Nilotinib HCl Oral Capsule 200 MG	Tier 5	PA
Nilotinib HCl Oral Capsule 50 MG	Tier 5	PA
Prucalopride Succinate Oral Tablet 1 MG	Tier 2	
Prucalopride Succinate Oral Tablet 2 MG	Tier 2	

Removed Products: There were no removed products this month

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Tier/Other Changes:

Drug	New Tier	Old Tier	Restrictions
Lanthanum Carbonate Oral Tablet Chewable 1000 MG	2	5	PA
Lanthanum Carbonate Oral Tablet Chewable 500 MG	2	5	PA
Lanthanum Carbonate Oral Tablet Chewable 750 MG	2	5	PA

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Grandfathered Plans

Added Products:

Drug	Tier	Restrictions
Brukina Oral Tablet 160 MG	Tier 5	PA
Comirnaty 5-11 Years Intramuscular Suspension 10 MCG/0.3ML	Tier 3	
Emtricitab-Rilpivir-Tenofovir DF Oral Tablet 200-25-300 MG	Tier 4	
Ferric Citrate Oral Tablet 1 GM 210 MG(Fe)	Tier 2	
Lisdexamfetamine Dimesylate Oral Tablet Chewable 10 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 20 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 30 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 40 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 50 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 60 MG	Tier 2	QL
mNexspike Intramuscular Suspension Prefilled Syringe 10 MCG/0.2ML	Tier 3	
Nilotinib HCl Oral Capsule 150 MG	Tier 6	PA
Nilotinib HCl Oral Capsule 200 MG	Tier 6	PA
Nilotinib HCl Oral Capsule 50 MG	Tier 6	PA
Prucalopride Succinate Oral Tablet 1 MG	Tier 2	
Prucalopride Succinate Oral Tablet 2 MG	Tier 2	

Removed Products: There were no removed products this month

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Tier/Other Changes:

Drug	New Tier	Old Tier	Restrictions
Lanthanum Carbonate Oral Tablet Chewable 1000 MG	2	5	PA
Lanthanum Carbonate Oral Tablet Chewable 500 MG	2	5	PA
Lanthanum Carbonate Oral Tablet Chewable 750 MG	2	5	PA

The most current FHCP formularies and prior authorization criteria are available online. Any questions or concerns regarding FHCP Formularies should be addressed to FHCP Pharmacy Services at 386-615-5008.

To view comprehensive formularies and PA criteria, go to <https://www.fhcp.com/providers/medication-formularies/> and select the formulary appropriate for your patient's FHCP product line or click the links below.

Non-Grandfathered Plans

Added Products:

Drug	Tier	Restrictions
Brukina Oral Tablet 160 MG	Tier 5	PA
Comirnaty 5-11 Years Intramuscular Suspension 10 MCG/0.3ML	Tier 3	
Emtricitab-Rilpivir-Tenofovir DF Oral Tablet 200-25-300 MG	Tier 4	
Ferric Citrate Oral Tablet 1 GM 210 MG(Fe)	Tier 2	
Lisdexamfetamine Dimesylate Oral Tablet Chewable 10 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 20 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 30 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 40 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 50 MG	Tier 2	QL
Lisdexamfetamine Dimesylate Oral Tablet Chewable 60 MG	Tier 2	QL
mNexspike Intramuscular Suspension Prefilled Syringe 10 MCG/0.2ML	Tier 3	
Nilotinib HCl Oral Capsule 150 MG	Tier 6	PA
Nilotinib HCl Oral Capsule 200 MG	Tier 6	PA
Nilotinib HCl Oral Capsule 50 MG	Tier 6	PA
Prucalopride Succinate Oral Tablet 1 MG	Tier 2	
Prucalopride Succinate Oral Tablet 2 MG	Tier 2	

Removed Products: There were no removed products this month

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Tier/Other Changes:

Drug	New Tier	Old Tier	Restrictions
Lanthanum Carbonate Oral Tablet Chewable 1000 MG	2	5	PA
Lanthanum Carbonate Oral Tablet Chewable 500 MG	2	5	PA
Lanthanum Carbonate Oral Tablet Chewable 750 MG	2	5	PA

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2026 Non-Grandfathered Plans Formulary (PDF)

https://fm.formularynavigator.com/FBO/126/2026_NGF_Formulary.pdf

2026 Non-Grandfathered Plans Searchable Formulary

<https://client.formularynavigator.com/Search.aspx?siteCode=5892345805>

2026 Non-Grandfathered Plans Prior Authorization Criteria

https://fm.formularynavigator.com/FBO/126/2026_NGF_PA.pdf