EXHIBIT B1

Employee Benefits Division

FORMULARY RECOMMENDATIONS

March 2026 EBD Pharmacy Formulary Recommendations									
No.	**Drug Name**	**Date Drug Cosidered by EBD**	**Use**	**Current Setup**	**EBD Recommendation (based on input from EBRx and Navitus)**	**Impacted Members**	**Cost Details**	**ASE / PSE Commissions**	**Board of Finance**
1	ZYLET OPHTH SUSP 0.5-0.3%	5/5/26	Ocular conditions	Tier 2, QL	**NC**	4 Only for acute use. No grandfathering	O WAC: $67.21 per mL Y WAC: $53.77 - $60.42 per mL	*Approve Recommendation*	
	Oral Solution Maintenance								
2	BACLOFEN ORAL SOLN 5 MG/5ML	5/5/26	Muscle spasms	Tier 3, PA (ages 9+ only)	**NC**	0	~$600 per month	*Approve Recommendation*	
3	EPRONTIA SOLN	5/5/26	Seizures	Tier 3, PA (ages 9+ only)	**NC**	0	~$400 per month	*Approve Recommendation*	
4	topiramate oral soln	5/5/26	Seizures	Tier 3, PA (ages 9+ only)	**NC**	0	~$300 per month	*Approve Recommendation*	
5	clobazam susp	5/5/26	Seizures	Tier 3, PA (ages 7+ only)	**Tier 1, PA (ages 7+)**	12	~$80 per month	*Approve Recommendation*	
6	enalapril maleate oral soln	5/5/26	Hypertension	Tier 3, PA (ages 9+ only)	**Tier 2, PA (ages 9+)**	6	~$250 per month	*Approve Recommendation*	

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	Triptan Maintenance								
7	naratriptan tab	5/5/26	Migraines	Tier 2, QL= 9 tabs/fill, 2 fills/30 days	**Tier 1, QL= 9 tabs/fill, 2 fills/30 days**	51	~$3 per tablet ~$54 maximum per month	*Approve Recommendation*	
8	zolmitriptan tab	5/5/26	Migraines	Tier 2, QL= 9 tabs/fill, 2 fills/30 days	**Tier 1, QL= 9 tabs/fill, 2 fills/30 days**	47	~$2 per tablet ~$36 maximum per month	*Approve Recommendation*	
9	zolmitriptan ODT	5/5/26	Migraines	Tier 2, QL= 9 tabs/fill, 2 fills/30 days	**Tier 1, QL= 9 tabs/fill, 2 fills/30 days**	21	~$6 per tablet ~$108 maximum per month	*Approve Recommendation*	
10	frovatriptan tab	5/5/26	Migraines	NC	**Tier 2, QL= 9 tabs/fill, 2 fills/30 days**	0	~$10 per tablet ~$180 maximum per month	*Approve Recommendation*	
11	sumatriptan nasal spray	5/5/26	Migraines	Tier 2, QL= 6 sprays/fill, 2 fills/30 days	**Tier 2, QL= 6 sprays/fill, 3 fills/30 days**	40	~$35 per spray	*Approve Recommendation*	

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12	sumatriptan vial inj	5/5/26	Migraines	Tier 2, QL= 5 inj/fill, 2 fills/30 days	**Tier 1, QL= 10 vials/fill, 2 fills/30 days**	5	~$10 per injection	*Approve Recommendation*	
13	IMITREX INJ 4MG/0.5ML	5/5/26	Migraines	Tier 3, QL= 4 inj/fill, 2 fills/30 days	**NC**	1 (90 day grandfather)	~$500 per injection	*Approve Recommendation*	
14	sumatriptan inj	5/5/26	Migraines	Tier 2, QL= 4 inj/fill, 2 fills/30 days	**Tier 2, QL= 6 inj/fill, 3 fills/30 days**	42	~$70 per injection	*Approve Recommendation*	
15	IMITREX INJ	5/5/26	Migraines	Tier 3, QL= 4 inj/fill, 2 fills/30 days	**NC**	0	~$450 per injection	*Approve Recommendation*	
16	SUMATRIPTAN INJ	5/5/26	Migraines	Tier 2, QL= 4 inj/fill, 2 fills/30 days	**NC**	0	~$150 per injection	*Approve Recommendation*	
	New Medications								
17	BRINSUPRI TAB	5/5/26	NON cystic fibrosis bronchiectasis (NCFB)	NTM	**NC**	0	WAC: $244.43 per tab. **$89,221/year per patient**	*Approve Recommendation*	
18	EKTERLY TAB	5/5/26	Hereditary Angioedema (HAE)	NTM	**NC**	0	WAC: $8,360 per 300 mg tab	*Approve Recommendation*	
19	ANZUPGO	5/5/26	Chronic Hand Eczema	NTM	**NC**	0	WAC: 30g tube $1,986	*Approve Recommendation*	
20	ENSACOVE CAP	5/5/26	Lung Cancer	NTM	**NC**	0	25 mg WAC: $77.6 per cap 100 mg WAC: $310.51 per cap	*Approve Recommendation*	

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21	HERNEXEOS TAB	5/5/26	Lung Cancer	NTM	**NC**	0	WAC: $361.11 per tab	*Approve Recommendation*	
22	MODEYSO CAP	5/5/26	Brain Cancer	NTM	**NC**	0	WAC: $3,200 per cap	*Approve Recommendation*	
	Alopecia Areata								
23	LEQSELVI TAB	5/5/26	Alopecia Areata	NC	**Tier 4, SP, PA, QL= 2 tabs/day**	0	WAC: $76.06 per tab $4,563.60 per 30 days	*Approve Recommendation*	
24	LITFULO CAP	5/5/26	Alopecia Areata	Tier 4, SP, PA, QL=1 cap/day	**NC** **Letter to move patients to Leqselvi or Olumiant**	4	WAC: $156.58 per cap $4,697.40 per 30 days	*Approve Recommendation*	

April 2026 EBD Pharmacy Formulary Recommendations									
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1	ORLADEYO PACK	*5/5/26*	Hereditary Angioedema (HAE)	NTM	**NC**	0	WAC: $1,731.71 per packet	*Approve Recommendation*	
2	ARMOUR THYROID TAB, NATURE THROID TAB	*5/5/26*	Low Thyroid	Tier 1	**NC**	1,199 Access through 2026	WAC: $0.49-2.97 per tab	*Approve Recommendation*	
3	MOTEGRITY TAB	*5/5/26*	Constipation	Tier 3, PA, QL	**NC** **Letter to have patients transition to generic**	2	WAC: $18.57	*Approve Recommendation*	
4	prucalopride succinate tab	*5/5/26*	Constipation	Tier 3, PA, QL	**Tier 1, ~~PA~~, QL= 1 tab/day**	7	MAC: < $2	*Approve Recommendation*	
5	GILENYA CAP 0.25MG	*5/5/26*	Multiple Sclerosis	Tier 4, SP	**Tier 4, SP, QL= 1 cap/day**	0	WAC: $428.02	*Approve Recommendation*	
6	fingolimod hcl cap 0.5mg	*5/5/26*	Multiple Sclerosis	Tier 4, SP	**Tier 1, SP, QL= 1 cap/day**	2	WAC: ~$12	*Approve Recommendation*	
7	SYMJEPI	*5/5/26*	Anaphylaxis	Tier 1, QL	**NC**	0	AWP: $156.25 per inj	*Approve Recommendation*	
8	TAZVERIK TAB	*5/5/26*	*Cancer*	Tier 4, SP, PA, QL	**NC**	0	WAC: $89.17 per tab	*Approve Recommendation*	
9	ARYNTA SOLN	*5/5/26*	*ADHD*	NTM	**NC**	0	WAC: $2.75 - $11 per mL	*Approve Recommendation*	

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	SGLT2 Maintenance								
10	JARDIANCE TAB	*5/5/26*	Type II Diabetes	Tier 2, QL	**NC, Effective 9/1/26**	1906 proactive notification, no grandfathering	WAC: $11.67	*Approve Recommendation*	
11	GLYXAMBI TAB	*5/5/26*	Type II Diabetes	Tier 2, QL	**NC, Effective 9/1/26**	7 proactive notification, no grandfathering	WAC: $11.67	*Approve Recommendation*	
12	SYNJARDY TAB	*5/5/26*	Type II Diabetes	Tier 2, QL	**NC, Effective 9/1/26**	38 proactive notification, no grandfathering	WAC: $5.83	*Approve Recommendation*	
13	SYNJARDY XR TAB 10-1000MG, 25-1000MG	*5/5/26*	Type II Diabetes	Tier 2, QL	**NC, Effective 9/1/26**	49 proactive notification, no grandfathering	WAC: $11.67	*Approve Recommendation*	
14	SYNJARDY XR TAB 5-1000MG, 12.5-1000MG	*5/5/26*	Type II Diabetes	Tier 2, QL	**NC, Effective 9/1/26**	9 proactive notification, no grandfathering	WAC: $5.83 - $11.67	*Approve Recommendation*	
15	TRIJARDY XR TAB	*5/5/26*	Type II Diabetes	Tier 2, QL	**NC, Effective 9/1/26**	7 proactive notification, no grandfathering	WAC: $5.83 - $11.67	*Approve Recommendation*	

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16	TRIJARDY XR TAB 5-25-1000MG, 12.5-2.5-1000MG TRIJARDY XR TAB 10-5-1000MG, 25-5-1000MG	*5/5/26*	Type II Diabetes	Tier 2, QL	**NC, Effective 9/1/26**	0	WAC: $5.83 - $11.67	*Approve Recommendation*	
17	FARXIGA TAB	*5/5/26*	*Type 2 diabetes*	*Tier 2, QL*	**NC**	*792*	*WAC: $10.40 - $11.43 per tab*	*Approve Recommendation*	
18	dapagliflozin tab	*5/5/26*	*Type 2 diabetes*	*NTM*	**Tier 1, QL = 1 tab/day**	*0*	*WAC: $6.88 - $6.90*	*Approve Recommendation*	
19	XIGDUO XR TAB	*5/5/26*	*Type 2 diabetes*	Tier 2, QL	**NC**	31	WAC: $9.99 - $19.99 per tab	*Approve Recommendation*	
20	dapagliflozin/metformin XR tab	*5/5/26*	*Type 2 diabetes*	NTM	**Tier 1, QL = 1 tab/day**	0	WAC: $2.46 - $5.16 per tab	*Approve Recommendation*	